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Town Hall Trinity Road Bootle L20 7AE

Date: 8 January 2020 Our Ref: Your Ref:

Please contact:Debbie Campbell,Contact Number:0151 934 2254Fax No:0151 934 2034e-mail:debbie.campbell@sefton.gov.uk

Dear Councillor,

OVERVIEW AND SCRUTINY COMMITTEE (ADULT SOCIAL CARE AND HEALTH) -TUESDAY 7TH JANUARY, 2020

I refer to the agenda for the above meeting and now enclose the following presentations which were unavailable when the agenda was published.

Agenda No.

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5. Climate Emergency (Pages 3 - 18)

Report of the Head of Corporate Resources/Executive Director.

6. Primary Care Networks in Sefton (Pages 19 - 38)

Joint presentation by NHS South Sefton Clinical Commissioning Group and NHS Southport and Formby Clinical Commissioning Group.

Yours sincerely,

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Climate Emergency Overview and Scrutiny

Steph Jukes

Sefton Council 불

Purpose : Show progress to date and where decisions will need to be made.

Provide a background to Climate Change and the Council's Climate Emergency Declaration.



Sefton Target

- net zero carbon by 2030.
- Options to avoid, reduce, offset
- Since the declaration, a working group has been formed and work has begun on a strategy, action plan and partnership working.
- In order to begin this work, we need to know where we are starting from...



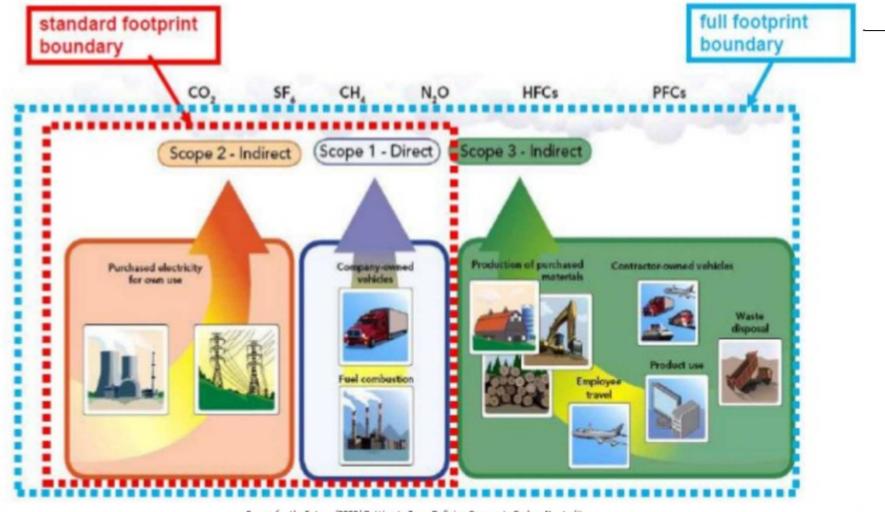


How we quantify our emissions

- Scope defined using 'Greenhouse Gas Protocol'
- Only Sefton Council operations
- Can approximate wider Sefton emissions using 'Scatter'



How we quantify our emissions



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Next Steps

- Most Departments have now
 - Received information on the issues
 - tasked with completing the initial scoping exercise
 - Asked to consider other actions

Officers to suggest options for scope Decision on scope is required





Contact details

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The following slides contain additional information on the Climate change emergency not included in the O&S presentation.





Climate Change

<u>Climate Time Machine</u>





Climate Change

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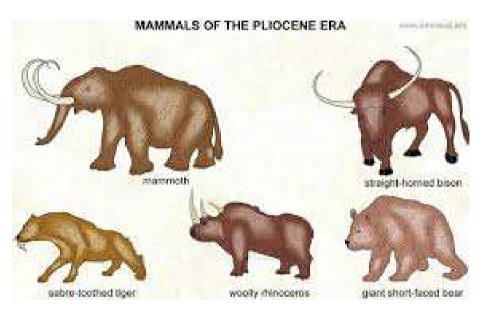


of earth's CO2



Climate Change

 The last time we had CO2 levels (above 400ppm) this high we had trees at the South pole – The Pliocene era (from about 5.3 million to 2.6 million years ago)







Why **CO**₂ is key

"If we keep carbon emissions going at the current rate, by the end of the century we will have 1,000ppm," The low 280ppm level of CO₂ in the run-up to the industrial revolution was rooted in carbon being removed from the air by plants and animals and then buried. "It formed coal seams, gas and oil fields. And what we have been doing for the last 150 years is digging it all up and putting it back into the atmosphere, it's crazy."

Martin Siegert, a geophysicist and climate-change scientist at Imperial College London (Guardian Interview 2019)





International Context

- Climate change is a global issue
- The United Nations Intergovernmental Panel on Climate Change (IPCC) have outlined the serious harm that a 2°C or above rise in global temperature would cause.
- The international target set was to limit temperature rise to 1.5°C at the 2015 Paris Climate Change COP conference.
- An IPCC Report in 2018 stated that humans had 12 years in which to make significant changes to the way we live in order to achieve the 1.5°C target
- Business as usual is not an option.



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National Context

- The U.K. Committee on Climate Change states that a rapid increase in UK climate action is necessary to reach the UK target of net carbon zero by 2050.
- The government has begun progress in this area with the DEFRA 25 Year Plan
- Draft proposals such as the Environment Bill have been put on hold for the election.
- Both main parties seem committed to some action in this area.





Local Context

Impacts

• More extreme weather events (flood, heat wave), Coastal erosion, impact on supply chain.

Sefton Council

 Benefits of action; improved air quality, more green spaces, local jobs, local industry, resilient population (improved housing)





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Primary Care Networks in Sefton

Tracy Jeffes & Jan Leonard

Director of Place

December 2019

Staying local & together together with you

NHS

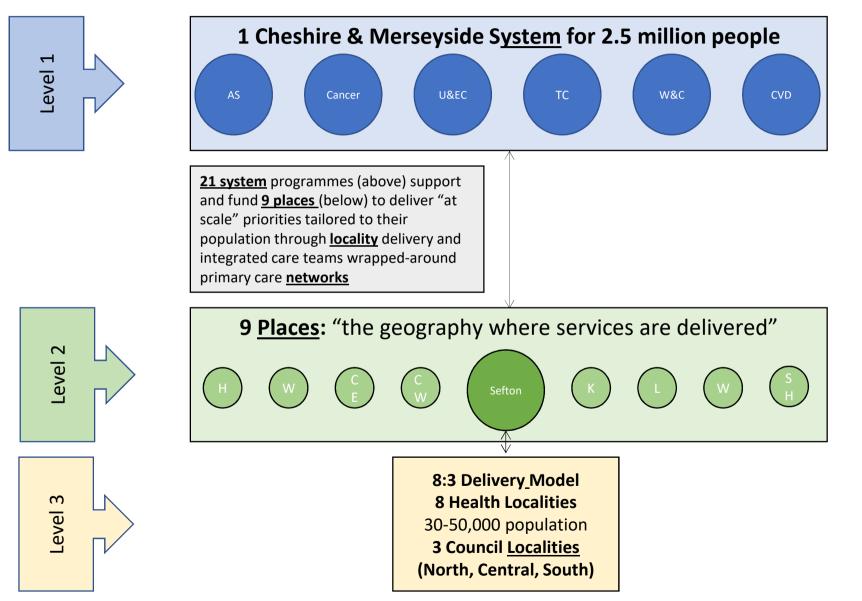
South Sefton Clinical Commissioning Group Southport and Formby Clinical Commissioning Group

This update will cover

- The context of PCNs in the system
- What are Primary Care Networks? (PCNs)
- National Policy for PCNs
- PCN relevance to local plans & priorities
- PCNs in Sefton
- Initial Priority Areas



Policy and delivery remain focused on three levels: (1) C&M "System" (2) Sefton (3) Networks



A possible future landscape for Sefton

Commissioning: Leaner and more strategic; a key enabler for integration is pooled budgets. Strategic commissioning occurs at two levels:

(1). Aligned and/or integrated at place-level with the Council

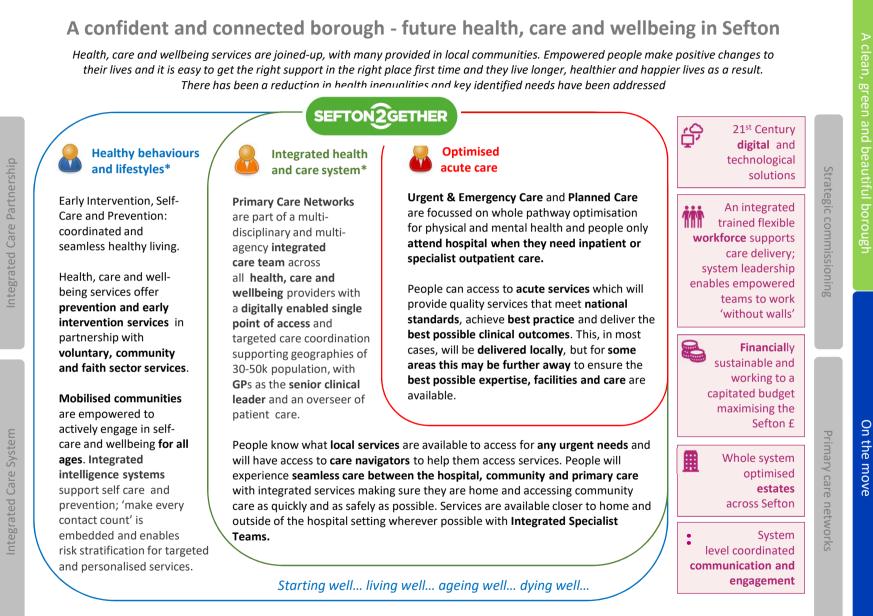
(2). Integrated at scale (a merged CCG footprint) for acute services Neighbourhood / Locality (x 8 with 7 PCNs) 30-50,000 **Community First Locality** (x 3) 55,000 - 120,000 Sefton "Place" 274,000 North Mersey CCG c1 million Integrated Care System 2.5 million

Service Provision:

Based on "... footprints that respect patient flows". Given that population health is maximised at place level provision is led by multi-disciplinary Integrated Care Teams that are wrapped around PCNs and cover health (specialist), (social) care and wellbeing (VCF sector) services

Provision "at scale" focuses on acute care collaboration, supported by single service models that operate across multiple places and the formation of new acute provider group models as per Salford and Warks

A borough for everyone



Integrated

Visit, explore and enjoy

Ready for the future

Open for business

Mel Wright | Programme Manager | Sefton Health and Care Transformation Programme | Version 6.0

*Four pillars of population health (King's Fund, Nov 2018)

NHS

What are PCNs?

- PCNs are groups of GP practices who have agreed to work together, though a formal agreement to:
 - to support the development and sustainability of general practice services
 - work with other partners in their community to improve the health and wellbeing of local people.
- Whilst focusing on the needs of their local populations, PCNs have also agreed to deliver the requirements of a national PCN contract.



National Policy on PCNs

Purpose of PCNs

- Stability: support for and sustainability of GP services
- Better health and care: "dock" for other NHS community services in the "place" to meet health and wellbeing needs
- Integration: an essential building block for integrated working, based on populations of around 30-50k
- Investment: joint investment and delivery vehicle
- Additional specified roles to be developed over 5 years
- Community leadership: Clinical Director role strategic and clinical leadership

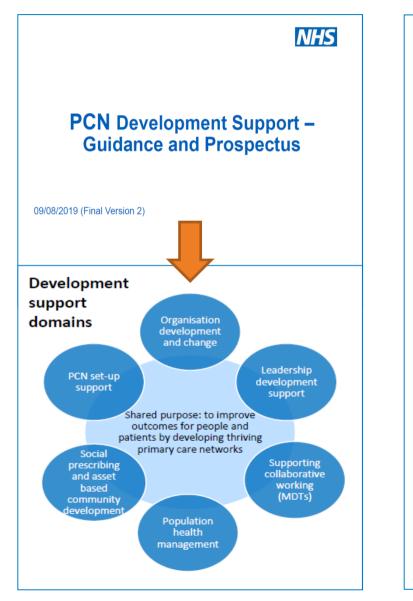


National Policy on PCNs

- Key components of the PCN contract:
 - Workforce: five additional roles clinical pharmacists, social prescribers, physician associates, physiotherapists, first contact community paramedics
 - Improved Quality Outcomes Framework for general practice
 - PCN establishment, registration and governance
 - Urgent care : Extended hours
 - Digital innovation
 - Seven national service specifications : medication reviews, care homes, anticipatory care, personalised care, cancer diagnosis, CVD and tackling health inequalities.



Recent announcements have focused on <u>level</u> <u>three</u>: Primary Care Network (PCN) Development



Re-cap: PCNs are seen as the foundation for <u>delivering</u> integrated care

- Prospectus published in August 2019, together with a self-assessment maturity matrix
- "In 2019/20 we expect PCNs will prioritise specific service improvements ... focused around the needs of local people and communities"
- The HCP has written to Clinical Directors requesting two outputs by the end of November:
- 1. An annual plan for 2019/20; and
- 2. A **self-assessment** covering five areas: leadership, planning and partnerships, integrating care, manging resources, population health mag't and working with people and communities
- PCN RightCare opportunity packs have also been published.

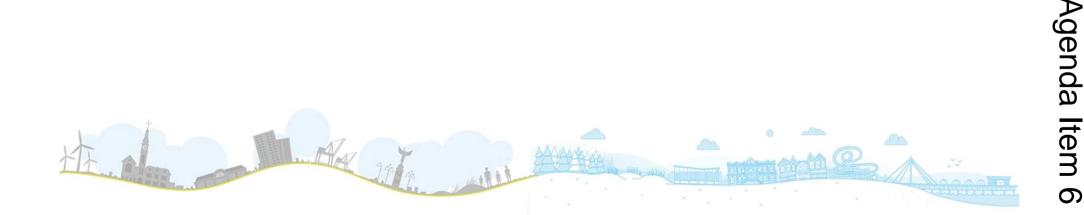
Local relevance of PCNs

- PCNs are a core component of our Sefton Health and Care Transformation Programme model
- They are central to Sefton2gether our refreshed five year plan and Health and Wellbeing Strategy
- They enable stronger collective voice and engagement of general practice with other partners to improve health and wellbeing



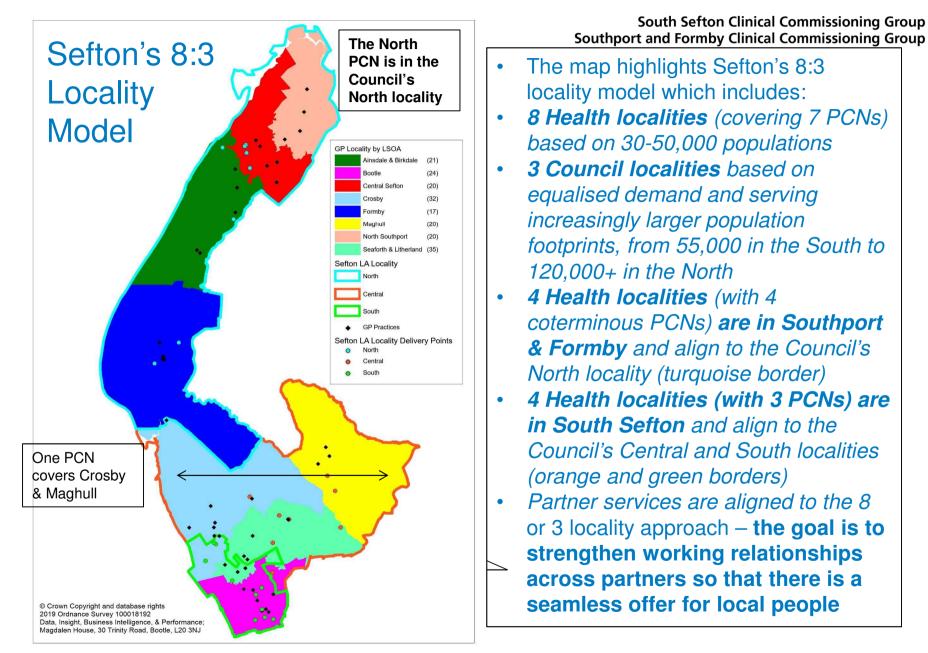
Our Sefton PCNs

- There are seven PCNs established across our eight "health" localities in Sefton. One PCN covers two of our localities – Crosby and Maghull
- Initially established in April 2019 through a local NHSE scheme which was then adapted to meet the requirements of the national scheme which commenced on July 1st 2019



Agenda Item

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Sefton PCNs PCN Clinical Directors

South Sefton PCNs	Clinical Director
Team Bootle PCN	Dr Catherine Aspden
Crosby and Maghull PCN	Dr Craig Gillespie (Deputy Director Dr Pete Chamberlainlink for Maghull)
Seaforth and Litherland PCN	Dr Sandra Oelbaum
Southport & Formby PCNs	Clinical Director
Birkdale & Ainsdale PCN	Dr Simon Foster
Formby PCN	Dr Doug Callow
North Southport PCN	Dr David Smith
Central Southport PCN	Dr Tim Irvine



Progress so far – getting established

- Governance arrangements established and Clinical Directors appointed
- Managerial support in place and CCG/PCN support team identified
- Initial PCN plans in place and accessing NHSE support
- PCN involvement in Sefton Transformation Programme and Provider Alliance
- Clinical Directors meeting established to develop collaborative working across PCNs
- Data and budget packs in development to enable focus on population health management





Progress so far: Team and service development across Sefton PCNs

- Innovative medicines hub model established across all PCNs
- Social Prescribing Link Worker service commissioned from Voluntary Community and Faith sector commencing Jan 2020
- Extended Hours service in place
- Development of integrated care teams including piloting of social care link workers in three PCNs
- Practice Participation Group (PPG) development in conjunction with Healthwatch Sefton



Individual PCN priorities

South Sefton PCNs	Initial areas of focus
Team Bootle PCN	Bootle No Wrong Door - integrated care team pilot, access to mental health services, GP recruitment and retention, collaborative flu vaccination, families in crisis or complex needs, social prescribing, medicines hub, PPG development and community engagement.
Crosby and Maghull PCN	Focus on dementia, older people's care, end of life care, digital innovation, integrated care team pilot, GP recruitment & retention. PPG development and community engagement. Non-fatty liver disease project, medicine's hub, social prescribing.
Seaforth and Litherland PCN	Future employment models, additional roles such as physician associate and physio, safeguarding, mental health, social prescribing, medicines hub, early cancer diagnosis, housebound service, development of patient engagement activities.



Individual PCN priorities

Southport & Formby PCNs	Initial areas of focus
Ainsdale &Birkdale PCN	Different models of collaborative working for GP resilience, skill mix, acute visiting scheme, medicines hub, social prescribing, integrated care team pilot
Formby PCN	GP sustainability & workforce, patient engagement, social prescribing, medicines hub, partnership working, digital innovation.
North Southport PCN	Medicines hub, social prescribing, exercise and dietary advice, care homes, older people, future models of PCN working, integrated care team working
Central Southport PCN	Sustainable working within the PCN, flu vaccination nursing home project, care homes, homelessness project, social prescribing, medicines hub



Summary

PCNs are new and need time to develop, however they present a significant opportunity to strengthen our collective ambition to support the sustainability of general practice, integrate care and improve the health and wellbeing of local people.

PCNs are keen to work alongside local communities and partners to make this a reality.





Contacts

Any questions or queries, please contact

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or

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