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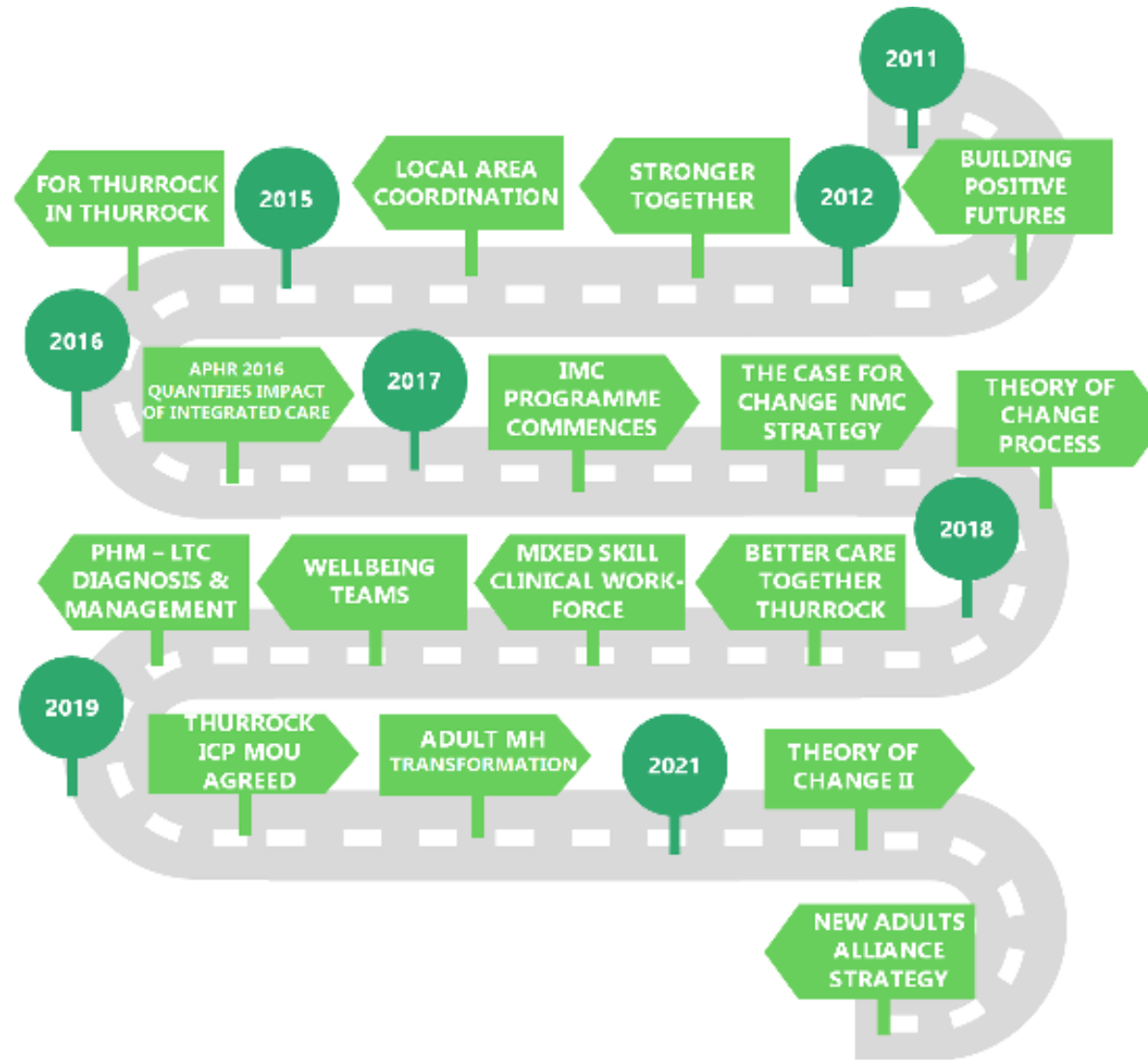
Building Positive Futures 2024

**Gavin Beard
Sarah McCarry
Bilikis Hassan**

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The start of the journey.



The start of the journey.

- Thurrock has been developing and refining its vision for the local health and care system since 2011
- This introduced a focus on what the community itself had to offer and started the move away from a 'service knows best' approach
- Arrival of the first health and care transformation programme – Building Positive Futures (BPF), provided the first step towards changing the construct of the local health and care model
- Stronger Together Thurrock emerged...partnership focused on a collaboration of people who wanted to do things differently and recognised the value of the community and its assets

The start of the journey.

- The case for change, where system partners came together to agree new transformation priorities and led to the creation of an agreed programme of adult health and care transformation
- Key initiatives were introduced to test a completely new way of delivering social care...
- One of several - Community Led Support (CLS)...
- Today...Better Care Together Thurrock - provides the basis from which an integrated health and care system could be developed further

The start of the CLS journey.

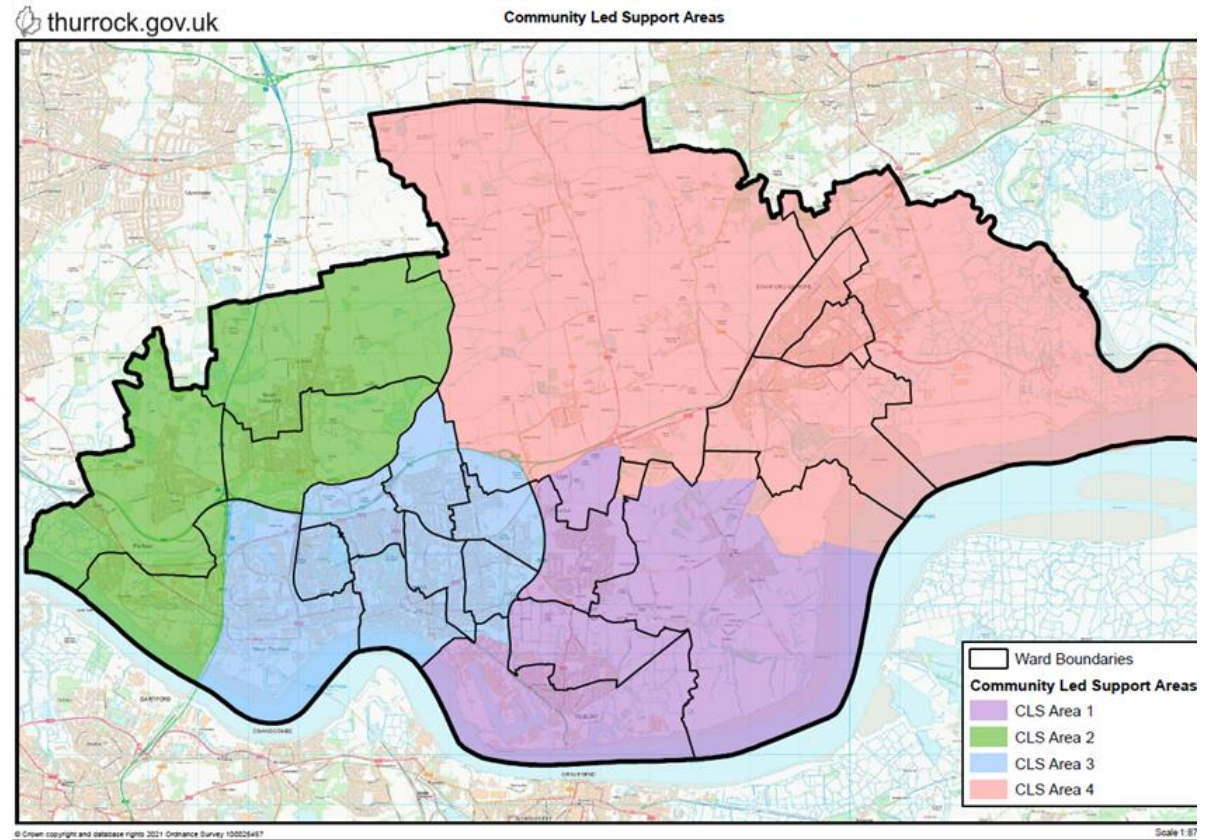
- In 2018 with support from the NDTI we launched our first CLS team in one specific area in Thurrock. The area was based around one of our primary care networks (PCN) to maximise collaborative working opportunities.
- We we're told to explore how we could work differently within Thurrock using the CLS principles as our guide.
- The only rules we we're given were.
 - “Do not break the law”
 - “Do not break the bank”
 - “Do no harm”

And so, the journey began.....

Very quickly we saw the benefits of working in this way which led to our Early Intervention and Prevention teams being relaunched as four community-based teams in 2020, each team was built around the existing PCN area.



A world pandemic didn't stop us, it just made us stronger as we learned to work through extremely difficult times together as one.



We asked our community to design our logo.

We then had shirts made with our new logo on for all our staff.



Talking shops

Our CLS teams explored areas across the borough when our communities were already meeting and built our Talking shops around existing community resources and spaces.

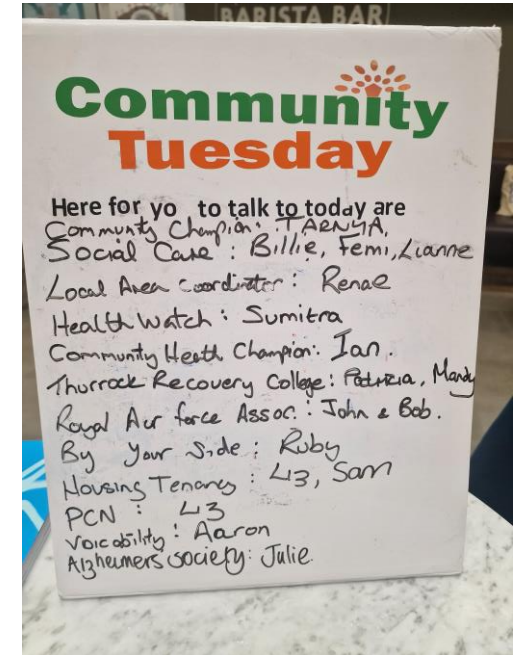
We now hold a numbers of successful Talking shops across Thurrock, in our libraries, community hubs, GP surgeries, foodbanks, Church halls, garden centers and Supermarkets.

We invite colleagues from a range of services to attend so we are on hand to provide information and guidance to all our residents.



Community Tuesday

One of the most impactful initiatives under CLS is the Morrisons Talking Shop, launched in July 2021. This initiative has made a significant difference in many lives. Building on its success, the Community Tuesday Lunch was introduced, allowing older adults to socialise and receive support in a relaxed and safe environment. Held at Morrisons café on the first Tuesday of every month, this event offers a two-course meal, assistance with various inquiries from attending service providers, help with grocery shopping, engaging activities like bingo, and organised transportation for residents of the Grays Riverside area. This initiative enhances social interaction and ensures that older adults receive the support they need in a convenient and enjoyable setting.



Community Tuesday - here



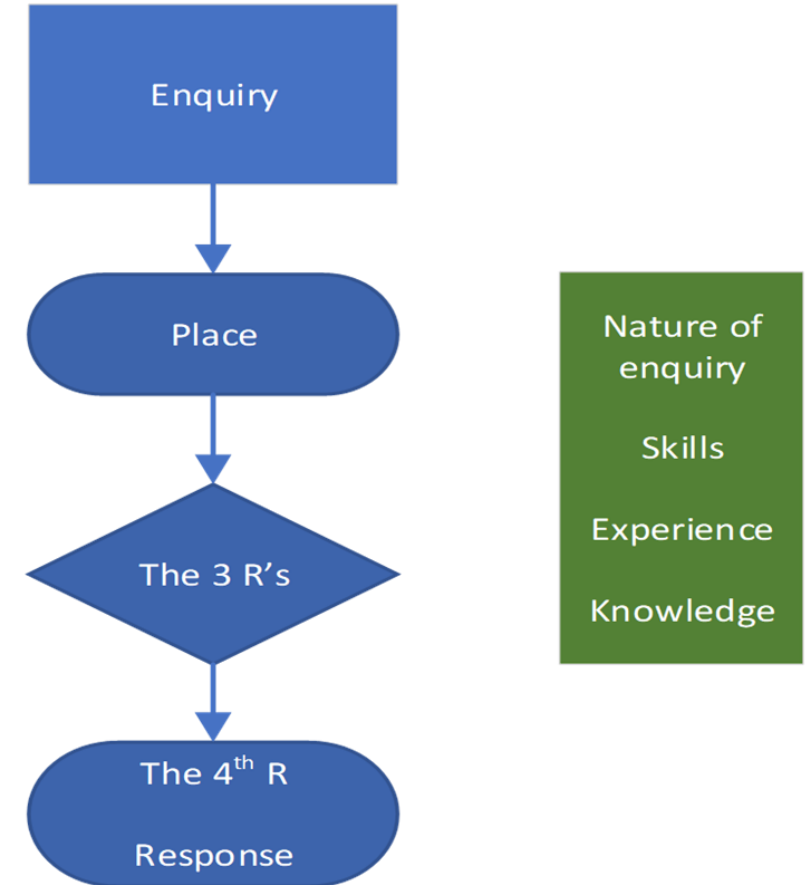
Growing our CLS teams

We didn't want to stop there, we wanted to bring our more specialised social care teams into the mix to form a real placed based integrated social care team.

In June 2022 we started to embed staff from our complex care team, our reviews team and our adult's mental health team into our CLS teams to create a real integrated team of multiple skills at place.

The goals

- ▶ Enable CLS to respond and utilise practitioner skills and knowledge more effectively.
- ▶ Widen learning and understanding of all areas of practice.
- ▶ Improves access to specialist support.
- ▶ Facilitates fluid transition within the team.
- ▶ Improved conversations.
- ▶ Right support, right time, right person.
- ▶ Greater understanding of individual roles and support options.
- ▶ Improved engagement with Housing and other services.
- ▶ Improved practitioners' knowledge of community resources.
- ▶ Reduced “hand offs”



Integrating hospital Social Care team functions into CLS teams

At a time when other local authorities decided to remove Social Care teams from the acute and hospital discharges became health-led. Thurrock did not take this approach.

However, we still wanted to explore how we could deliver a place-based approach, using the CLS principles



So, we transformed our model

- ✓ We moved the majority of staff from the Hospital Social Care Team and realigned our resource within our 4 CLS teams.
- ✓ We created a Social Care HUB within the acute with our remaining resources.
- ✓ We created a light touch assessment that focused solely on safe discharge back to community.
- ✓ All discharges are now picked up within the community within 6 weeks following discharge where a full holistic Care and Support assessment takes place.

Let's take 5



Better Care Together Thurrock: the Case for Further Change, 2022-2026

'Case for Further Change' was developed by Thurrock Integrated Care Alliance (TICA) together with its partner organisations.

In developing the document, TICA brought together service commissioners, providers and colleagues from Thurrock Council, the NHS, the third sector and HealthWatch. Residents were also involved in process.

The 'Case for Further Change' is a collective plan for transforming, improving and integrating local services to improve the wellbeing of the borough's adults and older people. This includes services provided by:

- ❑ health workers
- ❑ care workers
- ❑ voluntary, community and faith groups

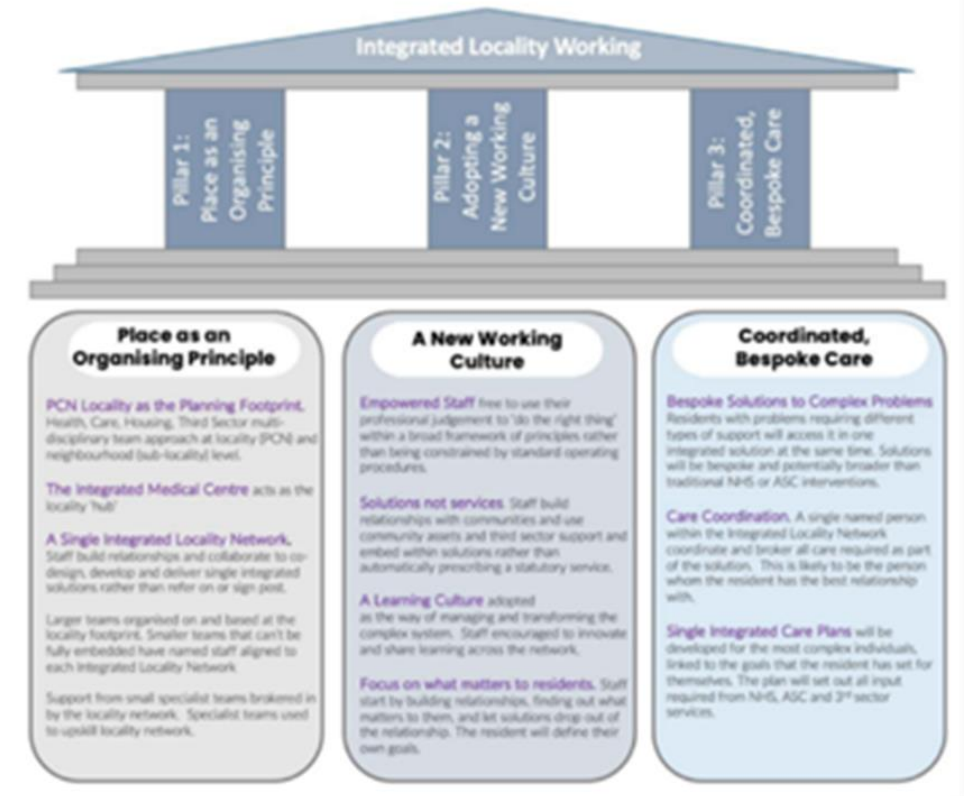


Thurrock's Locality based working model

“One place, One team”

Our plan was to focus on expanding and joining up the work we had achieved, applying our learning to developing an integrated and coordinated health and care model that wraps around each Primary Care Network and core services delivered by GP practices.

The model would operate in line with the BCTT integrated locality working principles and meet the 3 pillars of place as an organising principle, creating a new working culture and providing a coordinated bespoke model of care for the individual.



In November 2022 with support from the NDTI team we held 4 workshops, one in each CLS area.

We invited colleagues from housing and primary health to come together to discuss how we could work more collaboratively. We explored some of the barriers to working closely together and discussed solutions.

In March 2023 we held an all-staff conference over a 5-day period. We invited all frontline staff and managers across services, community and voluntary sector to attend to help shape the future vision for place-based working and understand what staff needed to support them on this journey.

Following this conference we created a monthly Frontline improvement meetings (FIT). Invites went out to all colleagues across Social care, Health, Housing and voluntary sector, attendees would openly discuss how we could improve services and explore system changes for better outcomes from the grass roots up.

We then started to hold “How, What & Why”- all staff sessions, where a specific team or service would showcase their service to help us all understand how our roles interconnected with one and another.

Building the model Grass roots up



Integrated locality teams – (ILTs)

We understood that building relationships was core to collaborative working, so we started to hold Networking sessions, we gave staff the **time** to connect with one another.



Integrated locality teams (ILTs)

As teams came on board across Thurrock, we either aligned staff directly to place or aligned to each CLS area via a named Link worker.

We held launch events in each CLS area and invited every service and team we could reach out to, we had over 100 attendees at each launch event with over 40 different teams/services with a shared vision of building integrated teams in Thurrock.



Integrated locality teams
(ILTs)

One team even
had a cake made
to celebrate their
launch.



It's still very early days, with our first ILT launching in May 2023 and our final ILT team launching in June 2024.

But we are already seeing results



They are looking at individuals as a whole and moving away from 'my role/your role', this is reducing onward referrals and multiple teams having contact with the same individual.

They have each created an MS teams channel where they regularly communicate, share information and leaflets at a local level

They are focusing on population health management data and creating workstreams, as a group they are starting to look at certain cohorts of patients within each area and with a multi skilled approach can see the individual from all angles, This allow bespoke solutions.

They are undergoing appreciative enquiry training to ensure good conversations are at the core of any engagement



Each ILT meet monthly, they are discussing systemic changes that can support more effective bespoke solutions to delivering Health and Care.



They hold MDT meetings very quickly and effectively to find co-produced solutions.



They continue to network and build strong relationships.



They are focusing on localised issue, empowering the community and building on existing strengths.

What else have we been up to?

Reducing bureaucracy and ensuring right person right time

We have trained up staff across our CLS teams and Housing to become trusted OT assessors- this enabled frontline staff to assess and request basic OT equipment, allowing faster access to preventative and enabling equipment, service user not having to repeat story over and over again, reduced the need for an onward referral to our OT department.

As part of our transformation journey it was understood that our adult's mental health team had a duty function built within its team, as part of our transition into CLS we was able to create anew role

We have trained our Carers service to undertake carers care and support assessments on behalf of the local authority. Preventing the need for an onward referral.

Reducing bureaucracy and ensuring right person right time- current projects

We are undertaking a project to create blended roles by training up our Care providers to undertake some of the community nursing tasks, such as urinary catheter care including urinary tract infections (UTIs), stoma care, simple wound dressings, management of skin tears, pressure area care, respiratory infections and sepsis awareness to reduce the need for multiple services going in.

We are exploring how we can upskill our care providers to undertake social care reviews themselves and become our trusted assessors, to reduce the need for individuals to repeat their story and ensure the right person with the best relationship is supporting.

We are working closely with our care providers to explore how we can pull people from hospital directly into reablement.



thanks