

Calderdale Vanguard – a brief overview

What is Calderdale Vanguard?

Calderdale has been chosen (by NHS England) as one of the areas across the country to receive Vanguard status. This means that Calderdale will be able to develop local health care services to help keep people well, and join up services such as home-care, mental health, community nursing, GP services and the hospital.

Who is involved in Calderdale Vanguard?

There are seven partners; who are made up of nurses, doctors, other health and social care staff including those in the voluntary and community sector (VCS) from across Calderdale.

Calderdale Clinical Commissioning Group (CCG) – is the responsible body, reporting directly to NHS England and are responsible for the spending of any Vanguard funds allocated to Calderdale

Pennine GP Alliance (PGPA) – a newly formed organisation, of 35 GP Practices covering 100% of the population of Calderdale. PGPA's core remit is working together to ensure general practice can retain, sustain, expand and develop Calderdale General Practices.

Calderdale and Huddersfield Foundation Trust (CHT) – the hospital Trust that runs the hospital services and community health services

South West Yorkshire Partnership NHS Foundation Trust (SWYPFT) - a specialist NHS Foundation Trust that provides community, mental health and learning disability services to the people of Barnsley, Calderdale, Kirklees and Wakefield.

Calderdale Council (CMBC) – Adults Health and Social Care and the Children Directorates are involved as the work of the Vanguard affects these two directorates
Locala – a social enterprise providing primary healthcare services in Calderdale and community healthcare services in Kirklees.

Third Sector - the collective name for voluntary and community groups, social enterprises and faith organisations. Many Third Sector organisations deliver local health and social care services in the heart of communities, complementing clinical treatments.

What is the Calderdale Vanguard doing?

The aims of the Vanguard partnership are to:

- Develop a new care model care model that is; person-centred, personalised, coordinated, empowering - created in partnership with carers, citizens and communities and supported by volunteering and social action.
- Ensure that we can replicate our work, so other areas of the country can benefit from our work.
- Transform the way our system currently works so there is a greater focus on the prevention of ill health (physical and mental health), resulting in reductions in premature death and dependency, and improvement in health, health inequalities and wellbeing.
- Shift services from avoidable hospital admissions to integrated health, social care and third sector models delivered locally in community and primary care settings.

- Ensure the work is in line with the four national core values of the New Care Models (NCM) Programme; clinical engagement, patient involvement, local ownership, and national support and delivers a high degree of replicability for other areas.
- Maximise learning from other Vanguard sites and other countries; both about the way in which we can transform care, but also by developing new approaches to provision, commissioning and payment

What this means in practice

NHS Calderdale CCG and their partners are developing a new way of delivering healthcare services out of the hospital and closer to where you live. This is called 'Care Closer to Home (CC2H)'. Calderdale Vanguard will test those new ways of delivering healthcare services to make sure that they work. We will also be working with other Vanguard sites across the country to learn from their good practice and to see if anything that they are doing can also be used for Calderdale.

Calderdale provides health services to over 200,000 people and it is important that everyone's healthcare is delivered safely, effectively and provides a good experience. The Vanguard partners have agreed that to set about major change right across the district without first testing new services, could lead to massive changes that in the longer term are not right for our local population.

Therefore, as part of the Vanguard work to test these new ways of delivering healthcare services, the Upper Calder Valley has been chosen as the first local area of Calderdale to help develop this way of working. This area has been chosen because it has some buildings that are currently underused and also the rural parts of this area help us test how to reach out to remote communities.

It has been agreed that as well as concentrating on a specific area of the district we will also work with three types of patients:

- Frailty
- Long term conditions
- Children with complex needs

These three groups were chosen as they are the most costly within our health and social care system at present and if we can make savings here, they will offer the greatest benefit to our system overall.

How this will be managed

There is a lot of work to be done in order to review existing services, design new services (where appropriate) and support change within Calderdale. Therefore the work has been divided into four work streams that will concentrate on new ways of working and then link up with other work streams to avoid duplication and to maximise the work of community teams.

Our four work streams are:

Prevention and healthy lifestyles: working with our local communities to prevent ill health through improving general living standards (eg warm homes) and supporting better lifestyle choices (stopping smoking, exercise and reducing drinking).

Supported Self Care: working out how to support people to manage new or existing long term conditions in order to enable them to remain at home and be supported locally; to also help people manage their health and wellbeing (including minor ailments) in order to help minimise the occurrence and impact some of long term conditions.

First point of contact: feedback from communities is that they are fed-up with telling their health story again and again. They are also fed-up with being sent to different places before arriving at the right service. We are working together to design a first point of contact so you only tell that story once and your journey through the health and social care system is smoother, more effective and efficient.

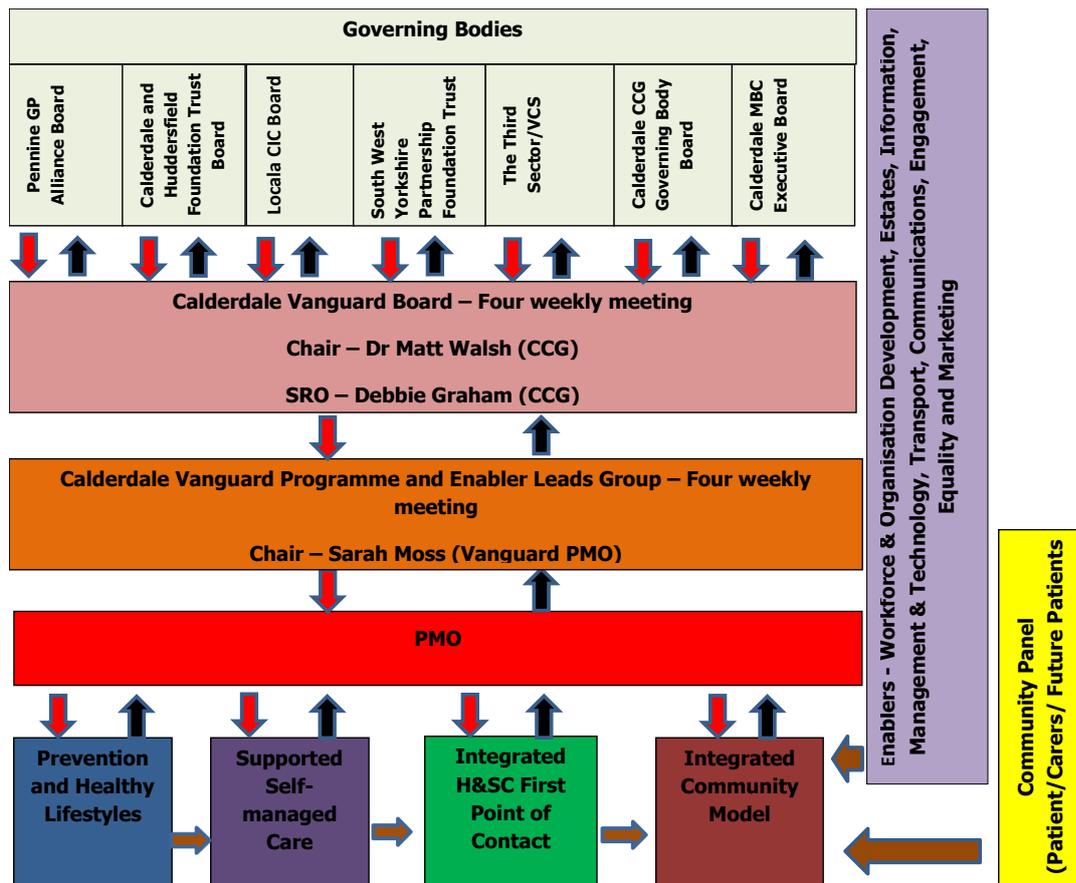
Integrated community model: Care Closer to Home will only succeed if existing services work more closely together in the future. This part of our work is about joining up our partners to provide better services for our patients whilst improving their experience of health and social care. It's about finding new places to deliver services as well as developing new partnerships to ensure an all round package of care is delivered to patients in their local community.

We have also recognised that there are a number of issues that are common in the all work streams and these will be addressed together and solutions presented for the whole health and social care system rather than in just one area. These are:

- Transport
- Workforce development
- Information management and technology
- Estates (buildings)
- Communications, marketing, engagement and equality

There is a diagram on the next page that shows how these will work together. This diagram also shows how the whole programme will be managed and governed.

As well as the workstreams and supporting groups we will be working with a Community Panel to ensure that citizens, patients and carers are involved in helping shape our new health and social care system. Information about the panel is supplied on a separate sheet.



For more information on the national Vanguard programme please go to <https://www.england.nhs.uk/ourwork/futurenhs/new-care-models/>

You can view a video about our aspirations for the local area here: <http://www.calderdaleccg.nhs.uk/your-health/care-closer-to-home/>

If you would like more detail about the local plan please contact Soo Nevison in the first instance.