Birmingham Health Overview and Scrutiny Committee- March 2019

Developing the STP and Place Outcomes Framework

Introduction

This paper proposes an approach for development of a Birmingham and Solihull STP Outcomes Framework. Built up from 2 underpinning place based Outcome Frameworks one for Solihull and one for Birmingham.

The development of an Outcomes Framework would enable the monitoring and drive our ambition to deliver a reduction in inequalities and variation in outcomes this has been strongly supported by the STP Board, Health Overview and Scrutiny Committee and Health and Wellbeing boards.

It would be a framework that can best measure the improvements we make in our system that can realise our STP and place based strategies. This could evolve to a future framework by which we can commission for outcomes as strategic commissioners.

Principles of Approach

In line with the approach we have taken to the development of our STP strategy and our delivery, it is proposed that at the heart of the development of our Outcome Framework are the following principles;

- Joint Strategic Needs Assessments are at the heart of informing our strategy priorities and desire to improve outcomes collectively.
- We recognise the need to align and create synergies between the governance and accountability of the NHS system and that of local government and other key partners, and we recognise the statutory responsibilities and accountability of the Health and Wellbeing Boards.
- Our approaches focus on the wider determinants of health and wellbeing and our public service offer to citizens.
- We will tackle inequality, ensuring that every citizen gets the same quality of service and care regardless of where they live, and we recognise that we must work with communities to ensure services meet local need and reflect the local cultural context. This will also support delivery of our duties under the Equality Act 2010.
- We will think people and place first not organisations and base our approach in a principle of co-production with citizens and recognise that different solutions will be needed in different places.
- We will measure our success on outcomes for citizens, rather than measures of activity, and benchmark ourselves nationally and against other comparable places to ensure we are learning from others and demonstrating evidence based practice in the activities we take.
- We want Birmingham and Solihull to be a great place for our staff to work and for our citizens to live

• Our STP priorities are focussed on the areas were are best placed to effect change directly and to support change through our collective system approach, as opposed to business as usual or individual sector or organisation priorities.

• Our strategy takes a life course approach i.e. born well, grow well, live well, age well & die well

- Our core aspirations are (1) Independence & resilience (2) equity, equality & inclusion (3) integration & simplification (4) promoting prosperity (5) creating social value
- Our strategy aims to close the significant inequalities that citizens experience in health, social care, physical, mental and social health and wellbeing and address the inequalities within Birmingham and Solihull as well as the gap between our geography and the wider West Midlands and England.

Aims of the STP Outcomes Framework

The opportunity to develop a system and place based outcomes framework will enable us to selfdevelop a more transformational set of outcomes framework's that adhere to the principles in section 2 and are locally derived and meaningful to local citizens as opposed to the top down and nationally set. The more traditional outcomes measures have been viewed as not transformational enough, often are process measures and align to what we can measure and monitor rather than what we should be monitoring and measuring to ensure our commissioning and provision is reducing inequalities and reducing variation in citizen outcomes.

It also recognised that contributing to improving outcomes in inequality are multifactorial and cross organisational and sector boundaries. The transformational outcomes, would be a more sophisticated approach of the laying of a number of input measures that contribute to a wellbeing and person centred outcome.

<u>An example</u>

Currently we measure the number of patients surviving major trauma A more transformational measure would be measuring the number of patients that return to work within 12 months following a major trauma recognising that within that there would be a number of multi-agency outcomes that contribute together for example - Ambulance response time, time to CT scan, time to surgery, rehabilitation goals, employment support etc

This will require us to work constructively with partners in both local authorities as well as other system partners to share learning on commissioning for outcomes and measuring success. This provides an exciting opportunity to materialise the founding principles of the NHS to deliver a service that improves health in a sustainable way, as well as addressing disease and supporting individuals in crisis.

It is accepted that we will need to have some dual running as the current national standard and key performance indicators remain a statutory responsibility to deliver. However, in developing as a system our own outcomes framework, it does allow for us to demonstrate our progress as a system to self-regulate and is a key element of strategic commissioning by which we would hope to commission from in the future.

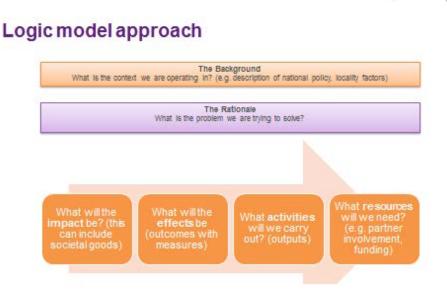
The purpose of a framework for STP and Place

The purpose of outcome framework development is to;

- Maximise the opportunities of a well-established partnership. Solihull Together and Birmingham Partnership forums as the delivery engine for local Health and Wellbeing Boards, utilising the expertise and influence of those involved.
- Recognise and measure impact at local level so that the impact of what we do is clear in our local places
- Be clear where the STP is taking the lead responsibility and where it is explicit in its supporting role to other partners and its unique contribution, especially in the context of complex system challenges such as childhood obesity.
- Respond to the request for greater clarity on aims and aspirations
- Demonstrate the clear, logically and evidence base connection between our planned actions and the expected impact on citizens' lives.
- Shape the programme based on evidence and data, and where these are absent commit to evaluation and learning to ensure that we are working on the right things?
- Simplify any aspirations so all members can easily articulate them and are clear about their own contribution towards achievement
- Ensure we know whether what we are doing is working effectively and be able to demonstrate constructive conversations about decommissioning as well as commissioning services based on evidence of impact and outcomes.
- Support coherent and coordinated conversations across the NHS system.
- Support consistent conversations with external stakeholders such as the Councils, Police and Voluntary and Community Sector.
- Provide a clear framework to monitor progress and demonstrate impact for citizens.
- Move away from collating the elements we routinely measure, to transformational measures that really matter to the people of Birmingham and Solihull

Methodology of Approach

In approaching the development, we will adopt a logic model approach



Governance

We will commence our collaborative work initially through Health and Wellbeing Boards to support at place this collaborative coproduction. Ensuring vertical integration between the STP outcomes and Place based outcomes framework. This will recognise that at place there will be specific and different outcomes that are pertinent at the place of Birmingham and Solihull, and at a granular level as Primary Care Networks evolve mirror this relationship with Ward place based leadership and community engagement. Equally this also allows for us to recognise and set trajectories for improvement tailored to the level of place recognising at a place level we may have inequalities within the macro-level picture of inequality.

We have established a Prevention Board on behalf of the STP to lead on the development and implementation of our prevention plan and implementation. The Prevention Forum will report through the Directors of Public Health and the STP representation into the respective Health and Wellbeing Boards.

To ensure we have a consistent single place based Outcome Framework for Birmingham, Sandwell and West Birmingham Clinical Commissioning Group are a key partner in the co-production and we are keen to find ways to work effectively with them, especially in relation to West Birmingham, to avoid citizens experiencing significant variation in quality and impact.

We will learn from best practice and build on any good examples locally and nationally that align to our strategic priorities, areas of inequality and the variance in outcomes that we are seeking in a system approach to address.

We are aiming for a draft outcomes framework to be ready for approval through committees in June and we would seek approval of the final outcome framework from the respective Health and Wellbeing Boards. This would sit alongside the final strategy for approval through the STP Board and follows on from our engagement events in May.

Next Steps

Ensure we maintain a focus on delivery of the work already agreed, whilst we carry out the following:

- Health and Wellbeing Co-production session workshop
- A series of community engagement and co-production events in both geographies to ensure robust involvement of citizen voice.
- An equality impact assessment of the outcomes framework
- Pull together all the relevant information from the reviews about aims, aspirations, outcomes
- Work with partners to map shared logic models to develop place based partnership outcomes.

 Work with partners and communities to translate these logic models into initial opportunities for action long list to work through with NHS system partners. These need to drive more transformational measures and get more upstream of the challenges facing issues, while recognising the need to maximise the potential of secondary and tertiary prevention through healthcare settings and healthcare professionals.

Discussion

We would welcome the views of Health Overview and Scrutiny of this approach prior to commencement of the co-production session workshop.

We would also welcome the views of Health Overview and Scrutiny regarding how they would like to be involved and or informed as this work progresses.