

MK Deal Update

The first three months

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Executive Summary

To provide an update on progress within the first three months of the MK Deal and to seek support from the Partnership to move to the 'go live' stage for the children and young people's mental health priority from 1 April 2023.

Recommendations:

1. That the progress updates for the two MK Deal priorities that commenced on 1 December 2022 (Priority 1 Improving System Flow and Priority 2 Tackling Obesity) are noted.
2. That the proposal for the third priority, Children & Young People's Mental Health, is considered and a decision made on whether to 'go live' on 1 April 2023.
3. That the fourth priority, Complex Care, remains in the development phase with a proposal to be brought to the Partnership at its next meeting.
4. To note that further potential MK Deal priorities will be brought to the Partnership for consideration as they are developed by the Joint Leadership Team.

The MK Deal

The MK Deal is an agreement between the Milton Keynes Health and Care Partnership and the Bedfordshire, Luton and Milton Keynes Integrated Care Board which formalises the commitment of the main local NHS partners in MK and the City Council to work more closely together.

The objective of the 'deal' is to drive improvements in population health and improvements in the quality and efficiency of the health and care services provided to local people through the development of stronger local partnerships. The MK Deal aims to provide the foundation for both the local delivery of the strategic objectives of the BLMK integrated population health strategy and the opportunity for BLMK Integrated Care System to become a national leader in the establishment of inclusive and impactful place-based working.

The content of the MK 'deal' will iterate over time as the partnership matures, but initially focuses on the four priorities agreed by MKHCP at its meeting on 1 June 2022.

Following the last Health and Care Partnership meeting on 12 October 2022 where the MK Deal was agreed a letter was sent by the Leader of the Council to the Chair of the ICB confirming this. In her response the Chair of the ICB, Dr Rima Makarem expressed her gratitude to all of the partners in Milton Keynes "for engaging so constructively with our new ways of working as part of the BLMK Integrated Care System and in particular for the positive way in which you have progressed this work for the benefit of the residents of your City." The full letter is attached as Appendix 1.

On 1 December the MK Deal went live with its first two priorities of Tackling Obesity and Improving System Flow (hospital discharge). In addition, the further two priorities of Complex Care and Children & Young People's Mental Health moved into the pre-start phase to further develop a detailed proposal and start date.

Priority 1 - Improving System Flow

The focus of Improving System Flow is 'urgent and emergency care services for older and/or frail and/or complex service users'.

Lead by the Medical Director of Milton Keynes University Hospital, Dr Ian Reckless, the ISF Steering Group was established in December and meets on a three weekly basis to provide strategic oversight. The Steering Group is multi-organisational with senior clinical and managerial members from across health and social care providing their time. All parties recognise that large scale transformation of Urgent and Emergency Care services, if it is to be successful and sustained, must take place at a local level with providers working together to reshape demand, and the delivery of care.

The Steering Group has started its development of a long term improvement plan to deliver integrated services between MKUH, CNWL and Milton Keynes City Council and our primary care partners focusing on:

1. Simplification of existing pathways for care
2. Greater workforce integration to drive efficiencies to address significant workforce shortages
3. Renewed focus on getting people home - Planning and delivery of the 'virtual ward' model in MK
4. Agreement of shared risk management and other clinical policies
5. Harnessing the full potential in primary care
6. Investment in facilities and equipment

A core project team made up of staff seconded from MKCC, MKUH, CNWL and the ICB is in place to ensure there is sufficient dedicated staff capacity to deliver the aims of Improving System Flow priority at pace. For all of the ISF themes this team is leading the assessment, planning, securing services and review process.

Supporting the ISF Steering Group with the ongoing operational management of urgent and emergency care services is an operational focus group which has a particularly key role during the busy winter period.

Challenges in urgent and emergency care were marked across England during December and January. National media covered extreme delays in ambulance handover, emergency department overcrowding and long waits for a bed following a decision to admit. In Milton Keynes, we have seen increased activity over the height of winter: December was impacted by a sharp peak in influenza cases leading to hospital admission and in some cases, death. January saw surges in admissions following the cold weather. However, we did manage to avoid extreme ambulance delays through focus on handover (we were celebrated as one of two 'how to do it' case studies by the Association of Ambulance Chief Executives) and at the height of our pressures, the number of patients who did not meet criteria to reside (i.e., could theoretically have had their needs met elsewhere) was stable and at times lower than the trend line. In other words, the hospital was under pressure with many additional patients but most of them did need to be there.

This relatively positive position, compared to the national picture, is due to a number of factors including good collaborative working between partners in MK, and our good fortune in having the physical facility of the Maple Centre open in time for winter.

Going forward, patient numbers remain high, and this reduces our ability to undertake planned procedures (surgical care). The lack of capacity (beds) in MK care homes is now very evident and is a concern going forward.

Recommendation – That progress is noted.

Priority 2 - Tackling Obesity

The second of the initial four agreed MK Deal priorities. Tackling Obesity is focused on helping people lose weight and maintain a healthy weight through easily accessible weight management programmes, use of technology, pharmacological therapies and education/prevention work.

Within the MK Deal this priority is jointly led on behalf of the Joint Leadership Team by the Primary Care Networks - GP leads Dr Salman Razi and Dr Tayo Kufeji – and the Director of Public Health Vicky Head.

The Tackling Obesity Steering Group has been established and its first meeting brought together a range of experts who were able to share, synthesise insights and discuss opportunities to support residents to lose weight. Clinical leaders across the MK System in attendance including Dr James Bursell (Consultant Paediatrician), Dr Ian Reckless (Medical Director), Dr Fatima Alkali (GP), Beverly Shaw (Children Services Manager), Lea Fowler (Advanced Clinical Practitioner), Wendy Bryant (Healthy Lifestyle Midwife), Oliver Mytton and Laura Waller (Public Health Consultants) with support from the MK Action Improvement Team (Rebecca Green and Sandra Vanreyk).

The Steering Group discussion was productive with contributions from all system partners on the growing prevalence of overweight in both children and adults and short, medium, and long-term opportunities/proposals that could reduce and prevent more people from reaching an unhealthy weight.

Three themes to be taken forward by working groups on behalf of the steering group were agreed;

Theme 1: Increasing referrals into weight management services

Theme 2: Innovation & upscaling

Theme 3: Shaping the environment

Early successes have included the establishment of a research trial to promote and incentivise physical activity amongst residents with Type 2 diabetes, which affects more than 17,000 people across Milton Keynes. The scheme will test out how wearable devices can record participant movement, and how potentially, a mobile app could offer tailored prompts and hints to be physically active. Further incentives are being considered such as vouchers for meeting physical activity goals.

Type 2 diabetes can cause significant health problems and has a huge resource impact on the NHS and social care system. Regular physical activity is proven to be an important part of managing diabetes to help reduce complications and treatment costs. The Milton Keynes trial will help health and council partners around the UK determine whether adopting their own version of the scheme will help patients and reduce long term costs.

Recommendation – That progress is noted.

Priority 3 - Children & Young People's Mental Health

Background and progress to date:

Good mental health in children and young people helps build resilience, develop healthy relationships and lays the foundation for better mental and physical health

and wellbeing throughout their whole lives. Early intervention is key for lifelong wellbeing: 75% of adult mental health issues are present by the age of 24.

We are aware that there is significant pressure on resources in this area and, as stated in the MK Deal paper agreed by the Partnership in October 2022, the ICB will remain responsible for the overall performance of the system. We are however committing to work together to ensure more effective use of resources.

A Steering Group reporting into JLT has been established to lead the CYPMH priority and has now met twice. The group includes members from CNWL, MKCC Children's Services and Public Health. Interviews have been carried out with a wider range of system partners.

This is a large area of need, and, through our preparatory work, we have developed four themes: closer working, getting help and advice, neurodevelopmental pathways and crisis response.

1. Closer working between system partners

This includes sharing data, prioritisation and exploring co-location of teams. By ensuring our teams understand each other's pathways we can also improve communication with children and their families. As we progress this work it will also help us to develop a more coherent system offer. We will also need to improve our collective understanding of thresholds for services and the advice and other support available for those who do not meet thresholds for services.

2. Getting advice and getting help

This involves building a more consistent, clear, and understandable MK-wide offer, with appropriate interventions for advice and early help that are accessible for groups at higher risk of poor mental health. We will improve our understanding of what provision is needed, and review how we can best meet this need with our collective resources.

We will develop the local 'getting help' offer in MK, to provide appropriate community-based support, including more face-to-face options. This will be supported by £125k of additional funding from the ICB. We will consider ways to maximise the reach of Mental Health Support Teams in schools across MK.

3. Joining up training on Neurodevelopmental Pathways

The ICB are leading a BLMK wide review of multi-agency neurodevelopmental pathways. In MK as a first step we will join up multi-professional training for Autism Spectrum Conditions (ASC) and will work together to reduce the number of children waiting for an ASC diagnosis as well as reducing the number of referrals for assessment in the longer-term.

4. A smoother crisis offer

This includes setting up a time limited task and finish group across partners to improve our joint crisis response to children and young people. Making full use of the new mental health inpatient unit 'Evergreen' for children and young people. This centre will provide specialist, short-term care for children and young people with severe or complex mental health difficulties across BLMK ICS.

Proposal

It is proposed that the MKHCP takes on the following responsibilities in relation to children and young people's mental health take forward the themes identified above:

- Leading Health & Care Partnership-based work plans to improve outcomes for children and young people's mental health.
- Interfacing with the ICB Mental Health Transformation Programme to ensure join up for key deliverables and recovery plans.
- Ensuring that plans will address inequalities across MK.
- Providing assurance as required to NHSE
- Providing information and training across system partners
- identifying and deciding the services necessary to meet the needs of the population including design of new pathways, services, working with finance, contracting, primary care and quality colleagues to ensure this is done to provide high quality care at best value.

Additional Considerations:

The majority of children and young people will not require specialist secondary services. We will be measuring timely access for those who need it.

Next steps

By the end of April 2023 we will;

- Establish governance structures for each of the four CYP MH priority areas including leads and working groups for each
- Agree key deliverables and metrics for measuring progress
- Further define implementation methodologies and action plans for each priority area that will enable us to determine whether we are on track.

Recommendation - That the proposal for the third priority, Children & Young People's Mental Health, is considered and a decision made on whether to 'go live' on 1st April 2023.

Priority 4 - Complex Care

The fourth priority Complex Care is focused on the improving the planning, assessment, commissioning, and case management for people who have the most complex needs. This priority is led by the Director of Adult Services Victoria Collins

Local discussions have taken place and we have agreed that our initial focus will be people with a learning disability and /or autism and/or physical complexities between the ages of fourteen and twenty-five years. The benefit of this focus is that we know that the management of learning disabilities is an existing priority for the ICB, and we also have evidence that a pro-active model of assessment, planning and case management for people between 14 and 25 years is likely to reap benefits in terms of reducing emergency placements that are often outside of Milton Keynes at a high cost.

A workshop bringing system partners together to develop this proposal in more detail to identify areas where outcomes and effectiveness can be improved for children and young people and get best use of system resources is being organised for April.

Recommendation : That the fourth priority, Complex Care, remains in the development phase with a proposal to be brought to the Partnership at its next meeting.

Appendix 1; Letter from Dr Rima Makarem to Cllr Pete Marland



24th November 2022

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Sent Via Email: peter.marland@milton-keynes.gov.uk

Dear Pete

Thank you for your letter of 9 November, confirming the MK Health and Care Partnership's agreement to the MK Deal on 12 October 2022.

Thank you also for confirming the details of the two priority areas on avoiding unnecessary hospital stays/system flow and tackling obesity which both 'go live' on 1st December 2022. I note that the other two priority workstreams, children and young people's mental health and managing complex needs, are in the 'pre-start' development phase and will be discussed at the MK Health and Care Partnership meeting on 23 February 2023.

I would like to express my gratitude to you, Michael and all of the partners in MK for engaging so constructively with our new ways of working as part of the BLMK Integrated Care System and in particular for the positive way in which you have progressed this work for the benefit of the residents of your City. Your strong, collaborative and resident-focused leadership of this agenda has established a really positive sense of momentum for joining-up health and care services. I look forward to hearing about the positive impact of the 'MK Deal' at our future Board and Health and Care Partnership meetings.

Felicity, Maria and the team will continue to work with Michael and the other MK partners to agree a longer-term resource plan that will further support the achievement of your ambition for Milton Keynes and your residents.

I am greatly encouraged by your progress in Milton Keynes and am committed to supporting this work as our partnership strengthens.

Your sincerely

A handwritten signature in black ink, appearing to read "Rima Makarem".

Dr Rima Makarem
Chair, Bedfordshire, Luton and Milton Keynes Integrated Care Board

Cc: Felicity Cox; Michael Bracey, Maria Wogan

End of report

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