



# **Bexley Wellbeing** Partnership

Local Care Network  
Clinical & Care  
Professional Lead:

Role Description  
April 2023

## Bexley Wellbeing Partnership

In 2016 statutory bodies, GPs, community health care providers, hospital trusts, charities and voluntary organisations came together in Bexley to form the Local Care Network Programme Board, to provide leadership to the development of Bexley Local Care Networks.

Since the inception of this group, progress has been made to build relationships and capacity within our shared transformation programme, significant steps have been made toward greater integration of commissioners and services in Bexley.

The Bexley Local Care Partnership signed a memorandum of understanding, which included 17 members representing organisations and groups from across the health and care system.

The Bexley Wellbeing Partnership (formerly the Bexley Local Care Partnership) members including the most recent members Bromley Healthcare – are all represented on the current and future committee, which provides assurances to the NHS South East London Integrated Care Board (NHS SEL ICB).

The Bexley Wellbeing Partnership's vision is that Bexley will have a **'place-based' system of care**, in which a range of partners work together to provide **person-centred care** in a **proactive** and **integrated** way. This means organisations working in close partnership, sharing information to fully understand the **needs of the population**, and collaborating to manage the **common resources** available.

## Local Care Networks

Bexley has 3 established Local Care Networks, Clocktower, Frognaal and North Bexley. Our aim is for each Local Care Network to develop its own vision including streamlining access, providing personalised care and helping local people to stay well for longer. The relationship, alignment and integration of the Primary Care Networks and the Local Care Networks will be a key part of this development process.

Aligning registered GP practice boundaries, Primary Care Networks and Local Care Network footprints will optimise integrated working and the health and care services residents receive. Whilst out of hospital services have already been delegated from the NHS SEL ICB to local care partnerships, successful transformation will require working across the whole system which will feed into Local Care Network Operations. Local Care Networks will seek to fulfil the objectives of Bexley Wellbeing Partnership and NHS SEL ICB as well as meeting the recommendations set out in the Fuller Stocktake.

## 1. Role Overview

As part of the NHS South East London Integrated Care Clinical and Care Professional Leadership programme for Bexley – we are looking for three Local Care Network (LCN) Clinical Leads who can co-lead the development of integrated neighbourhood teams for North Bexley, Clocktower and Frognaal. These roles will be instrumental in better joining up primary care with the wider health and social care integration that is already well established through Bexley Care. These leaders will be responsible for; driving forward the Fuller Stocktake recommendations for these geographies in Bexley, leading system wide change, on the ground that seeks to address service gaps, better align collective resources to need and can deliver a model where professionals identify with the Local Care Network geography and not an organisation.

We are therefore seeking expressions of interests from clinical professionals working in primary care in Bexley who are interested in taking on a leadership role for 1 session per week until 31<sup>st</sup> March 2024. These individuals need to be passionate about improving patient care through working collaboratively with other service provider partners, stakeholders and local residents to make the strategic ambitions of more integrated care, an operational reality in Bexley.

These roles will need to drive forward change across each Local Care Network to achieve the following:

- Make “Place-based” priorities and core offers a reality on the ground through strengthened multi-disciplinary integrated care teams and links with community-based organisations
- Accelerate the development of Primary Care Networks to work beyond general practice and enhance the use of Alternative Roles Reimbursement Scheme (ARRS) resource for at scale delivery models
- Provide capacity to develop relationships with voluntary, community and acute professionals for the benefit of patient care
- Development of new ways of working via integrated neighbourhood teams at a Local Care Network level to address identified priorities

## 2. Primary Care, community care and neighbourhood team development

- Keep up to date with best practice examples on the role that primary care has in the development of Local Integrated Care Neighbourhood Teams and Systems and how this can translate to practical delivery in Bexley.
- Align the priorities of the Bexley Wellbeing Partnership Three Year Improvement Plan, Fuller Recommendations and the Joint Local Health & Wellbeing Strategy priorities and the requirements of the Primary Care Network Direct Enhanced Service – as a key basis for driving forward areas of work that require primary and community services to collaboratively develop improved care for the population at a Local Care Network level.
- Translate this into a Local Care Network workplan.
- Work as a Local Care Network to identify how resource decisions and management models (e.g., ARRS, Bexley Care resource) can best support (whether through embedded roles, shared roles, secondments, joint teams) to complement, link, integrate service pathways to maximise impact on developing preventative measures to improve population health and reduced inequalities.

### 3. Develop close, trusted and productive operational relationships with health and care providers at a Local Care Network and place level

- Relationship development with the member practices
- Look for opportunities to co-locate/integrate and deliver in partnership, Primary Care Network services that require collaborative working with community and voluntary sector services (e.g. social prescribing)
- Regular meetings and liaison with Bexley Care senior management/NHS SEL Integrated Care Board Bexley.
- Keep informed of service development areas where there are mutual gains from working together

### 4. Re-establish and ensure Integrated Case Management meetings continually improve effectiveness

- Provide the Leadership required to ensure that Integrated Case Management meetings work effectively for all stakeholders, recognising these serve an established function for Bexley Care in bringing their teams together.
- Reviewing effectiveness of meetings to ensure they are patient-centric and productive in terms of preventing crisis, avoiding admission and improving care for patients.
- Using meetings to inform service gaps, barriers and service development opportunities and priorities.
- Ensure that health and care professionals find them productive and that workload is collectively shared across providers to maximise patient outcomes.
- Use as the basis to further develop the work of Local Care Networks taking consideration of the anticipatory care, personalised care and tackling neighbourhood inequalities service specifications that form part of the Primary Care Network DES.

### 5. Succession & Sustainability planning

- Ensure any operational service changes facilitated through this leadership role, are sustainable in the long-term.
- Ensure primary care understands these roles are time limited.

### 6. Person characteristics

Individuals with the following characteristics and skills are needed for these roles:

- System leadership skills, appreciating the role that every bit of the system plays and how relationships and collaboration are the best way to bring about change and improvement which delivers safe, cost effective and responsive service.
- Partnership working, recognising the importance of trust, collaboration and the value that every part of the system has.
- An understanding and appreciation of the value that voluntary, community and third sector organisations have in improving population healthcare and quality of life.
- Recognition of the wider determinants of health and a commitment to take a broader preventative and proactive approach to improving health outcome, reducing health inequalities.

- Passionate about providing patient centred holistic, personalised care.
- Solution focused who can work within available resources.
- Strong operational delivery skills so that concepts and models are translated into frontline services at pace.

## 7. The Nolan Principles – The Seven Principles of Public Life

The postholders will be expected to adhere to the Nolan Principles, which are as follows:

- Selflessness:** Holders of public office should take decisions solely in terms of the public interest. They should not do so to gain financial or other material benefits for themselves, their family, or their friends.
- Integrity:** Holders of public office should not place themselves under any financial or other obligation to outside individuals or organisations that might influence them in the performance of their official duties.
- Objectivity:** In carrying out public business, including making public appointments, awarding contracts, or recommending individuals for rewards and benefits, holders of public office should make choices on merit.
- Accountability:** Holders of public office are accountable for their decisions and actions to the public and must submit themselves to whatever scrutiny is appropriate to their office.
- Openness:** Holders of public office should be as open as possible about all the decisions and actions that they take. They should give reasons for their decisions and restrict information only when the wider public interest clearly demands.
- Honesty:** Holders of public office have a duty to declare any private interests relating to their public duties and to take steps to resolve any conflicts arising in a way that protects the public interest.
- Leadership:** Holders of public office should promote and support these principles by leadership and example.

## 8. Diversity and Monitoring

NHS SEL ICS is committed to preventing discrimination, valuing diversity and achieving equality of opportunity and will not discriminate against anyone because of their race, ethnic origin, gender or gender reassignment, disability, age, nationality, sexual orientation, marital status, colour, religion, belief or non-belief.

The information on the monitoring sheet is not used in the selection process. It will be removed on receipt and is not seen by those assessing your application. However, this information may be used by NHS SEL ICS when looking at diversity strategy and the basic information about the successful appointee may need to be made public.

All appointments are based on merit and the principles of independent assessment, openness, and transparency of process.

## 9. Appointment, Remuneration and Tenure

The terms and conditions of the Independent Member will be in line with the SEL Integrated Care Board and Partnership, which is 1.0 Session per week with a remuneration of £16,416 per annum.

## 10. Recruitment Process & Timetable

The role will be advertised to the 4 Primary Care Networks, through the NHS South East London Integrated Care Board via NHS Jobs. The schedule and dates below are indicative and subject to change:

<b>Date</b>	<b>Process</b>	<b>Primary Care Network</b>
20.04.2023	Launch Date	North Bexley
12.05.2023	Closing Date	
tbc	Interviews	
20.04.2023	Launch Date	Clocktower
12.05.2023	Closing Date	
tbc	Interviews	
20.04.2023	Launch Date	Frognal
12.05.2023	Closing Date	
tbc	Interviews	