Livewell Southwest

We wouldn't go back to the NHS ... (or would we?)

Dr Adam Morris, Chief Executive
Livewell Southwest CIC, Plymouth, UK

We support people to lead independent, healthy lives

COMING UP …

Livewell Southwest

- Overview
- Challenges
- Effectiveness
- Learning
- Reflections

ABOUT US

Livewell Southwest

We are a social enterprise, formed in 2011 as a Community Interest Company, registered at Companies House as limited by guarantee

WE'RE A SOCIAL ENTERPRISE
BUSINESS WHERE SOCIETY PROFITS

How are we regulated?

CIC regulator
Care Quality Commission
Licence to operate from Monitor

Good

CareQuality Commission

We support people to lead independent, healthy lives

Multi-speciality community provider in health and social care with more than 3,000 staff

£124 million turnover

Strong focus on getting the basics right and improving the quality and safety and experience of people receiving and delivering services

CQC rated **'Good'** with 'Outstanding' for inpatient mental health (Glenbourne unit) and community learning disability services

ENGAGING WITH OUR PEOPLE

Our executive team get out and about across the organisation to meet as many colleagues as possible, hearing first-hand about their successes, issues and improvement plans. Here's Dawn Slater, Director of People and Professionalism, talking about Livewell's new retention initiative …

OVERVIEW

Livewell Southwest

CIC - a flexible delivery vehicle	"A big small organisation"
Flexible model limited by shares or guarantee	Neighbourhood, place and regional service provider
Asset locked	Integrated Community Services
Community Interest statement	Urgent Care Services
Consider CIC as a model for delivery of H+C-Irish SEN-asset lock and social value statement	Children, young people and family services
40% of community NHS services	Rural services
Wide array of forms and scope	
Activity overseen by DCMS in UK	

CONTRACTS

NEW Devon CCG
Contract 3
Children's Health Services
1 April 2016 - 31 March 2018
No option to extend and not integrated

NEW Devon CCG
Contract 1
Integrated MH, LD and OPMH
1 April 2016 - 31 March 2018
No option to extend

Social Care AMP

Social Care % of Contract 2

NEW Devon CCG
Contract 2
Integrated Health and Social Care for Complex Adults
1 April 2016 - 31 March 2019
2 year extension option

Social Care (not in Contract 1)

TCS specialalty inc Tissue Viability, Weight Management, Bladder and Bowel and Adult SALT

Plymouth City Council
Public Health Services
Annual contracts
CCASH/Substance Misuse/School Nursing/ Health Improvement
1 October 2015 - 30 September 2017
Health Visitors

Hosting Agreement 1
MIUs
1 April 2016 - 30 September 2017
Cumberland/Tavistock/Kingsbridge

Hosting Agreement 2
TCS Podiatry
1 April 2016 - 30 September 2017

NHS England
Specialist Commissioning
Annual contracts
Plym Neuro Rehab
Prosthetics and Orthotics
Lee Mill low secure
Plymbridge House tier 4
Immunisations

NHS England
Primary Care Commissioning
1 October 2013 - 30 September 2017
Primary Dental Services

Other Commissioners
Non PCC/NDCCG/NHSE
Health Education England
Plymouth Hospitals NHS Trust
Devon Partnership NHS Trust
Kernow CCG
Torbay and South Devon CCG

A NORTHERN CITY IN THE SOUTH IN AN AGEING COUNTY

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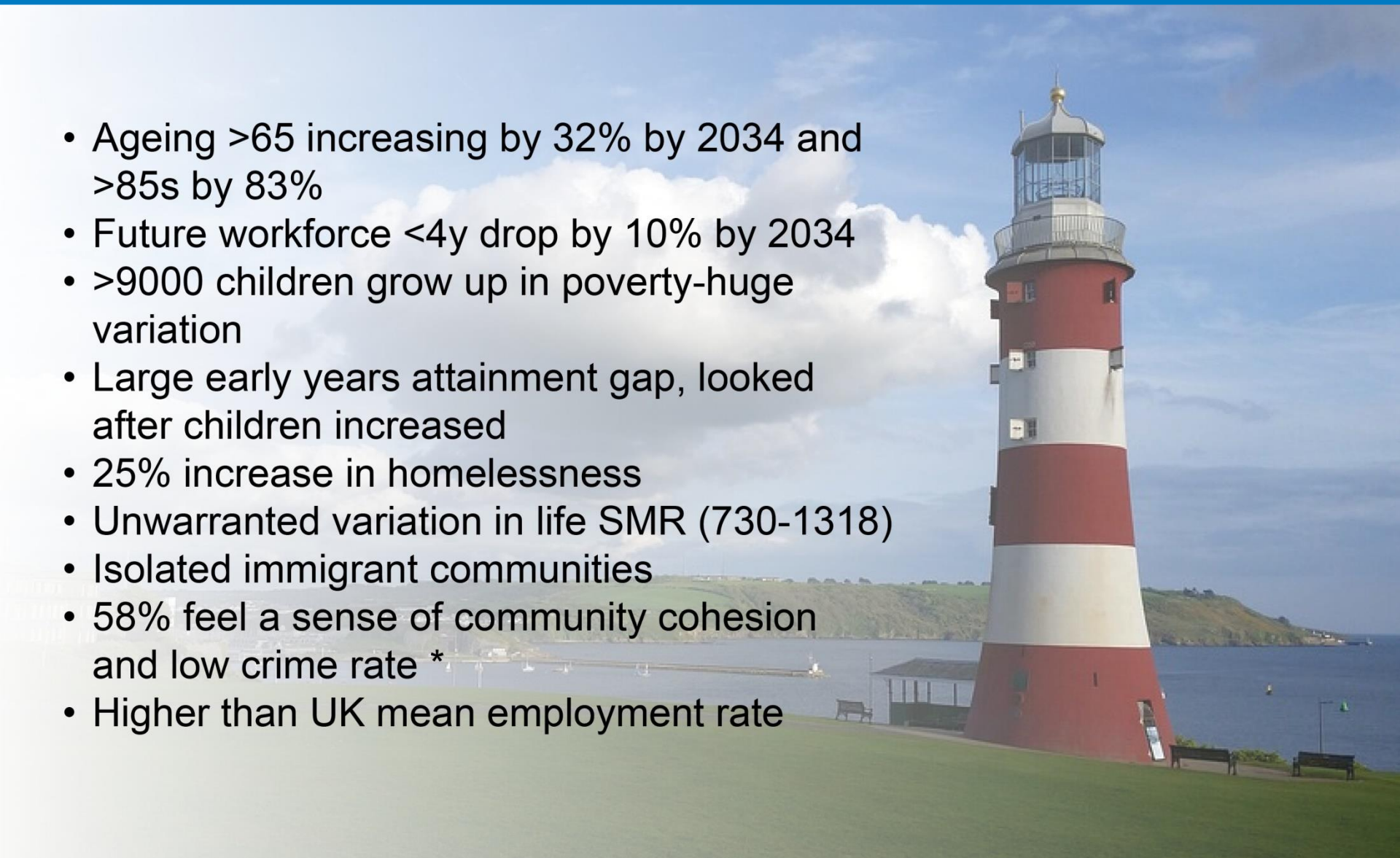


- Ageing >65 increasing by 32% by 2034 and >85s by 83%
- Future workforce <4y drop by 10% by 2034
- >9000 children grow up in poverty-huge variation
- Large early years attainment gap, looked after children increased
- 25% increase in homelessness
- Unwarranted variation in life SMR (730-1318)
- Isolated immigrant communities
- 58% feel a sense of community cohesion and low crime rate *
- Higher than UK mean employment rate

HOW DO WE COMPARE?

- Contract performance
- National audit
- National awards
- Feedback

Inspected and rated

Good

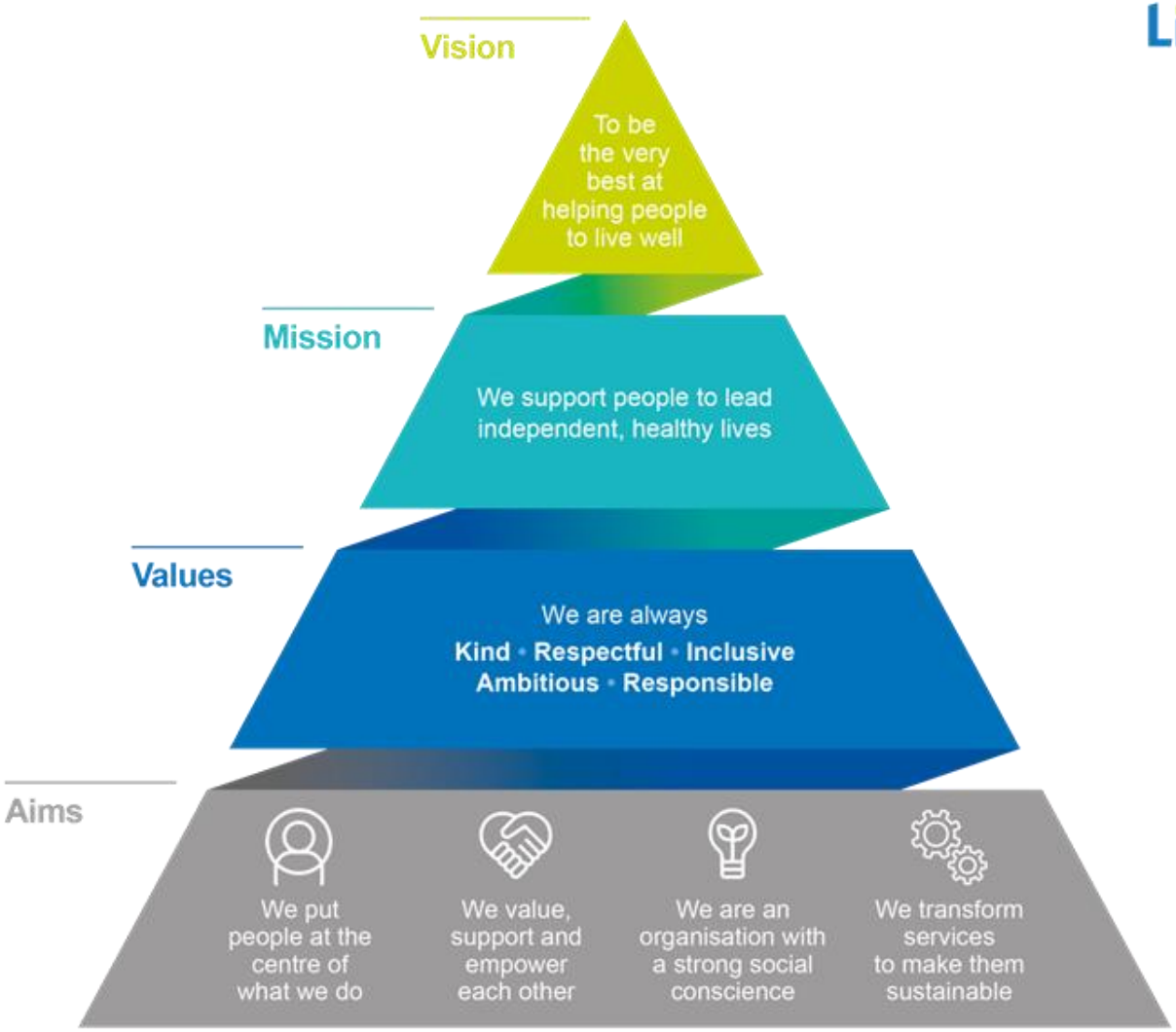
Care Quality Commission

"There appears a positive cultural change within the organisation, staff seem to have taken on ownership and it feels that decisions are being passed down the structure and being made at the right level, a feeling of empowerment."

Steve Statham
CEO St Luke's Hospice

Teresa Barrett named adult social worker of the year at national awards

WHY DOES IT WORK-PURPOSE



WHY DOES IT WORK-FOCUS

Aims

We put people at the centre of what we do

We **respect** the goals each person sets for their health and lifestyle, working with them and for them to help them to succeed.

We are **ambitious** in our aspirations for their health and wellbeing, and we encourage them to be ambitious too.

We will treat people with **kindness** and **include** them in their care, using their experiences to make our services continually better.

We value, support and empower each other

We **respect** the professionalism and dedication of our colleagues by sharing the **responsibility** to make decisions where and when it matters, trusting everyone to do the right thing.

We treat each other with **kindness** and encourage the **ambition** to excel every day.

We value learning from experience and use it to make our services and ourselves better.

We are an organisation with a strong social conscience

We seek out opportunities to deliver social, economic and environmental benefits in the communities we serve.

We are **ambitious** in the way we design and deliver services, using innovation to enable us to go above and beyond.

We partner with like-minded employers, suppliers and fellow social enterprises to support the economy and be a **responsible** force for good.

We transform services to make them sustainable

We work within communities and with community partners, investing **responsibly** to help people to look after themselves and live well.

We make it easy to access extra support if and when it is needed.

We recognise the changing needs of people and communities, by **including** them in shaping our services to be the best.

BUT IT REMAINS HARD WORK

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Easier because

- Regulator environment
- Simple contract funding model
- Embedded in and drawn from our community
- In common with VCSE-a useful 'bridge' to NHS/LA
- Trusted by VCSE and Local Authority 'by experience'
- The palatable face of the market
- Earned staff loyalty
- Stretching NEDs role include partnership building and team visits

Easier if

- Internal-Fear of contract loss drives 'non CIC' behaviours
- Internal-difficult to demonstrate social value, do commissioners care?
- External-we will never be equals to the NHS
- External-Poor access to improvement tools
- External-Regulator interface
- External-Emotive Politics and politics
- External-research indemnity
- External-pay awards and pensions

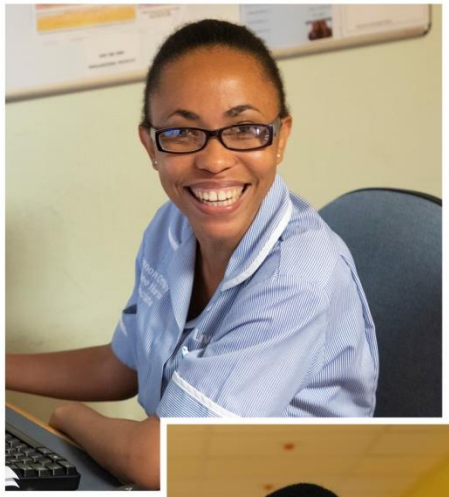
LIVEWELL FOUNDATION

The Foundation has been set up to invest in projects or initiatives that will make a real difference to people and communities within Devon and Cornwall.

Livewell
FOUNDATION

BACK TO OUR ROOTS-NEXT STEPS

- Strategy-Move to ‘NHS+’ through strategic partnerships with statutory services
- Strategy-cede control to gain influence and reduce financial risk, ‘place>organisation’
- Delivery-Lean healthcare driven by clear goals based on social impact and delivering VFM for citizens
- People-employee ownership
- People-compassionate leadership
- Social value-environmental sustainability and volunteering
- Quality-carer value stream and user informed service change
- Quality-needs driven developments eg place of safety



IS THIS FORM OR FUNCTION? IS IT ABOUT THE WHY?

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Social Impact Statement is grounding

Regulator environment is permissive

Form resonates with caring professions

Humility is endemic

Partnerships are trusting

CONCLUSION …

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So would I go back to the NHS?

… possibly not

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www.livewellsouthwest.co.uk

We support people to lead independent, healthy lives