

Report

Date: 8 October 2018

To: Coventry Health and Wellbeing Board

From: Rachael Danter, Programme Director, Better Care Better Health Better Value

Title: Better Health, Better Care, Better Value programme update

1 Purpose

The purpose of this report is to provide Coventry Health and Wellbeing Board with an update on progress to date on the Better Health, Better Care, Better Value programme, highlighting any key points as necessary.

2 Recommendations

The Board is asked to note this report and its contents.

3 Information/Background

3.1 Integrated Care System update

As previously mentioned, the 12-week development programme offered to all localities across the West Midlands has recently concluded. This is aimed at supporting the senior leaders and their teams to further develop capability in the following areas:

- Building a whole system strategy and plan
- System level financial planning
- Integrated governance
- Execution and implementation

A draft plan that starts to identify what actions will be required to allow the Coventry and Warwickshire STP to reach Shadow ICS status was presented to NHS England on 24 August. Formal feedback is awaited. This plan will continue to be developed and once it has been signed off by all the respective organisations it will be circulated.

3.2 Transformational Programmes of Work

Proactive and Preventative

Preparations for the Year of Wellbeing are making good progress. Work is focusing on three 'early examples': Daily Mile, Workplace Wellbeing, and Start a Conversation. A communications and engagement strategy has been prepared, together with campaign

material, including branding. Pledges of support have been collated from Place Forum partners.

Suicide prevention work has included promoting Suicide Prevention Day in September, procuring safe haven pilots, and 'It Takes Balls to Talk' activities.

A number of Better Care Fund prevention projects are moving forward in Coventry. These include the Affordable Warmth projects (funded by Public Health), which aims to support vulnerable householders with long-term conditions to keep their homes warm, and the Moathouse place-based community navigator model, which is supporting prevention and self-care for older people.

Maternity and Paediatrics

Plans have been agreed to deliver continuity of carer for 20 per cent of women by March 2019. Engagement sessions have previously been held with midwives at University Hospitals Coventry and Warwickshire NHS Trust and South Warwickshire NHS Foundation Trust about new ways of working, to enable this to happen. Further sessions are planned at George Eliot Hospital NHS Trust.

The Provider Alliance is now established, with confirmation that Maternity and Paediatrics is a priority work programme.

Work is taking place to consider the Paediatrics element of the workstream.

The West Midlands Neonatal Review is being implemented. This is overseen by the Choice and Personalisation sub-group, which was relaunched in early June.

Mental Health and Emotional Wellbeing

An engagement event is being held at Coventry Rugby Club on World Mental Health Day, 10 October. This will update on the programme plans and progress to date and is aimed at service users, partners and other stakeholders. It will feature a market place and there will be breakout sessions to discuss specific elements, such as crisis cafes and the Psychiatric Decision Unit. An easy-read document is being produced.

Work is progressing to deliver the work programme for physical health checks for people with serious mental illness. A stakeholder workshop was held to map the pilot pathway for the NHS England-funded project place-based model.

A suicide prevention stakeholder workshop was held in July and attended by a wide range of organisations, including West Midlands Police, West Midlands Fire Service, and suicide bereavement services. This has helped to develop the ideas for projects for delivery of the NHS England/Public Heath England funding received for the programme.

A primary care offer workshop was also held in July, to link the primary care work with the Out of Hospital programme. Next steps will include alignment of the Out of Hospital work with primary care clusters to deliver the outcomes and address the priorities.

Planned Care

The STP Planned Care delivery plan, which focuses on high-quality, sustainable care for residents of Coventry and Warwickshire, has been submitted to NHS England. It includes a transformation plan and narrative, which incorporate national priorities.

The main areas of focus are:

- Managing demand including implementing referral triage and treatment services in specialties including ophthalmology and dermatology
- Reviewing system wide specialty capacity and workforce requirements to consider potential specialty consolidation across Coventry and Warwickshire
- Implementing outcomes-based lead provider contracts for planned care.

Productivity and Efficiency

Work is continuing to identify and explore opportunities where collaboration and/or consolidation of back office functions and clinical support functions could deliver better productivity and efficiencies across the system.

This includes exploring a shared finance system across the four NHS Trusts in Coventry and Warwickshire. A solutions workshop will be held to identify what services will be required. A proposal on options and pricing will follow.

Urgent and Emergency Care

University Hospitals Coventry and Warwickshire NHS Trust has undertaken a community hub review and action plans are being developed to drive improvements in discharges and delayed transfers of care.

George Eliot Hospital NHS Trust has reported good performance in reducing delayed transfers of care and has been consistently under target since February.

Work is on track to ensure that all handovers between ambulance and Emergency Departments take place within 15 minutes, with none waiting more than 30 minutes, by the end of September.

Work is continuing across the system to scope future provision of Urgent Treatment Centres.

The Better Health, Better Care, Better Value programme has instigated several peer reviews across the system to identify and implement best practice in the following areas:

- Outpatient Parenteral Antimicrobial Therapy (delivery of intravenous antibiotics in out-of-hospital settings)
- Discharge to Assess
- Frailty
- Arden Mental Health Acute Team (AMHAT)
- Ambulance arrivals from care homes

A single, comprehensive plan for the STP was presented at Coventry and Warwickshire A&E Delivery Board in July. The objectives include developing an integrated Urgent and Emergency Care provision, which is aligned to the standards outlined in the Urgent and Emergency Care national delivery plan.

All the Better Health, Better Care, Better Value partner organisations have worked together to prepare a system-wide communications and engagement campaign to help alleviate winter pressures. This includes raising public awareness of the importance of choosing the right health service, helping to increase flu vaccinations and advising people on how to stay well during the cold weather. It complements an existing all-year communications and engagement campaign to help reduce demand on A&E by focusing on prevention and staying well.

3.3 Enabling Programmes of Work

Estates

A draft estates strategy has been submitted to NHS England/Improvement, together with five capital funding bids.

The work programme is being refreshed to create a new estates strategy that reflects the clinical strategy, is aligned to the transformation workstreams and follows the financial principles.

There are opportunities to identify estates needs within other STP programmes. The timing of activity is to be aligned.

Digital Transformation

The programme team is preparing a bid for £6.7m from the Health System Led Investment Fund to improve the digital maturity of provider organisations and deliver technology solutions that will improve patient care over the next three financial years.

A programme plan is being drafted in conjunction with key stakeholders from partner organisations.

An initial refreshed Local Digital Roadmap has also been drafted.

Workforce

A local audit of programmes to identify workforce needs has begun.

A new workforce lead started in September, to support the programme's long-term workforce aspirations.

The Local Workforce Action Board in Coventry and Warwickshire is being reconfigured to support the delivery of the workforce priorities.

3.4 Related Programmes of Work

Cancer

A separate work programme has been set up for cancer. It will include the following:

- Primary care and prevention
- Rapid access/diagnostic pathways
- Living with and beyond cancer
- Waiting time standards
- Radiotherapy

Stroke configuration

Programme leads participated in a next stage NHS England Assurance Panel on 25 May. The Panel was impressed by the progress that the programme had made since the strategic sense check in May 2017. They assessed that the programme had partially met the requirements, but further work and evidence was required prior to being ready for consultation.

The key factors they require further evidence of are:

- Workforce planning: the Panel asked for greater detail, to include plans for sustainability of the workforce proposals and more details on the overall impact on providers.
- Further evidence of "stress-testing" the proposals for times of peak demand on hospitals. We provided evidence in the usual sensitivity analysis, but they asked for further evidence.
- Confirmation that the West Midlands Clinical Senate are satisfied that we have met the recommendations from their comprehensive review in 2016.

A meeting was held with the West Midlands Clinical Senate in July to present progress against the recommendations. The Senate have been assured that the recommendations have been actioned, and that the programme has already made improvements in our *Sentinel Stroke National Audit (SSNAP) data and Speech and Language therapy.

The next NHSE Assurance Panel is expected to take place in November.

A preferred option to develop a centralised centre of excellence at University Hospital, Coventry, for the immediate stages after having a stroke, the hyper acute and acute stages, has been proposed. Initial feedback has been obtained from patients and the public on this proposal.

The three CCGs held four public engagement events during September to gather views on stroke rehabilitation services. They are now bringing together a group of experts and interested individuals/organisations, including patients, carers, councillors, Healthwatch and the Stroke Association, to listen to the feedback and help to assess the proposals for stroke rehabilitation services.

*Note: The Sentinel Stroke National Audit Programme (SSNAP) is the single source of stroke data in England, Wales and Northern Ireland. There are three main components of SSNAP: clinical audit, acute organisational audit and post-acute organisational audit.

Report Author(s):

Name and Job Title: Rachael Danter, Programme Director

On behalf of: Better Health, Better Care, Better Value Board

Telephone and E-mail Contact: rachael.danter@nhs.net

Enquiries should be directed to the above person.