

Report

Date: 13th January 2020

To: Coventry Health and Wellbeing Board

From: Rachael Danter, System Transformation Director, Coventry and Warwickshire Health and Care Partnership

Title: Coventry and Warwickshire Health & Care Partnership Update

1 Purpose

1.1 The purpose of this report is to provide Coventry Health and Wellbeing Board with an update on progress to date on the work of the Coventry and Warwickshire Health & Care Partnership, highlighting any key points as necessary

2 Recommendations

2.1 The Health & Wellbeing Board is asked to note this report and its contents.

3 Five Year Plan

- 3.1 The Health & Care Partnership's Strategic Five Year Plan remains a work in progress and the latest draft will be submitted to NHSE/I for final sign-off in early January. A detailed narrative is preceded by a public-facing, plain English 'easy read' preface, plus an introductory foreword by Chairman Professor Sir Chris Ham.
- 3.2 A tentative date for launch to internal stakeholders and the workforce has been set for February 10, followed by a full public launch a week later (dates subject to change). The launch of the Plan will coincide with a major refresh of the Partnership's website and social media profiles designed to effectively amplify the Plan's contents and aspirations.

4 Cancer

- 4.1 A 'Protected Learning Time' event took place at the end of November. Protected Learning Time (PLT) is an opportunity for practice staff to address their own learning and professional development needs. Practices closed for an afternoon to allow for important Continuing Professional Development learning activities.
- 4.2 The event focussed on upper GI cancer and was great a success, attracting around 500 GPs and Practice Nurses from across Coventry & Warwickshire. A highlight was a patient story: inspirational, thought-provoking and which also promoted the importance of mental health and well-being. The event also provided local healthcare professionals with a valuable networking opportunity with both their peers and local services. Representatives from local cancer support services, including third sector organisations, were also present.
- 4.3 Members of the Primary Care Cancer Network Group have now started to draft a primary care cancer education programme likely to feature a variety of learning tools all designed to improve patient outcomes and experiences.

- 4.4 The Health and Care Partnership has received approximately £3.5 million of cancer transformation funding through the West Midland Cancer Alliance. The funding will support a number of key deliverables associated with the milestones set out in the NHS Long Term Plan including:
 - The development of a Vague Symptoms pathway.
 - A lung screening pilot scheme in Coventry.
 - Supporting earlier diagnosis with dedicated project management support, targeting seldom heard groups and focussed on improving screening uptake and improved education for primary care staff.
 - Funding dedicated posts to support the 'Living with and Beyond Cancer' agenda.
 - The development of Rapid Access Diagnostic pathways.
- 4.5 In addition, the Health & Care Partnership has secured a further £65k to fund:
 - A dedicated cancer communications and engagement role.
 - A dedicated Project Officer to support cancer transformation projects.

5 Digital

- 5.1 A major Partnership-wide digital strategy event was staged in November, bringing together more than 50 internal stakeholders and external experts to share best practice and begin effective pan-organisation alignment.
- 5.2 Work aligned to the Long Term Plan commitment to digitise GP records continues. Bids for a related share of £5.2m NHSx funding are under construction. There are 10 digital projects underway that are benefitting from Health System Led Investment. These include Remote Consultations (UHCW), Single Sign-On (SWFT) and Automated E-Obs (GEH). The Partnership has also received £388k capital funding for cyber security provision.

6 Medicine Optimisation

- 6.1 A major system-wide 'Transfer of Care Around Medicines' launch event was staged in November, attended by more than 70 people comprising GPs, commissioners, provider practitioners and pharmacists. The event focussed on issues around 'hospital to home' medicines and the potential patient outcome/efficiencies that better practice presents.
- 6.2 Delegates discussed how:
 - Ten days after starting a medicine, almost a third of patients are already non-adherent.
 - 55% do not realise they are not taking their medicines correctly.
 - 5-10% of hospital admissions are medicines related, of which 2/3rd are preventable.
 - 30-70% of patients experience unintentional changes to their treatment due to miscommunication.
 - 20% of patients experience adverse events within 3 weeks of discharge, 60% of which were avoidable.

7 Operating Plans

- 7.1 The Health & Care Partnership is in the process of producing its 2020/21 annual Operating Plan, aligned to its 2019-2024 Five Year Plan and co-ordinated for the first time jointly by NHS England & NHS Improvement.
- 7.2 The Operating Plan must show the Partnership's commitment to working as a system partner and demonstrate an obvious 'system first' approach. It should also show that the Partnership works together to check alignment at all levels and challenge organisations/Places where alignment is not delivered.

- 7.3 It is anticipated that the Partnership's Operating Plan will be submitted in early February and that it is likely to need to contain:
 - An organisational narrative describing what each organisation is looking to achieve.
 - Activity return/reconciliation at Place between providers and commissioners, as well as alignment with the Five Year Plan activity return.
 - Workforce planning template showing a greater than previously required degree of alignment with Five Year Plan activity and financial return.
 - Finance template reconciling to the Five Year Plan 'Long Term Financial Model' (LTFM).

8 Urgent & Emergency Care

- 8.1 Winter funding of £738k has been received to support two UHCW schemes:
 - increased senior 'front door' support during peak times; and
 - additional nursing support to avoid corridor care.
- 8.2 A further £265k of winter funding has been received for 'step down' beds at GEH, and £150k to enable the GEH ambulatory care unit to open 7 days a week.

9 Frailty

- 9.1 A frail and elderly rapid response service pilot scheme continues to run in Warwickshire and the Health & Care Partnership will be addressing any resulting issues in the new year.
- 9.2 A 'Frailty at the Front Door' pilot scheme also continues and is due to run until then end of March. Initial findings suggest that the scheme is having a positive impact on flow through emergency departments.

10 Planned Care

- 10.1 Work is continuing on a Health & Care Partnership project to improve ophthalmology services in Warwickshire North. This is expected to provide financial efficiencies from March 2020 onwards.
- 10.2 MSK First Contact Practitioner is now live in two practices in Warwickshire North, covering a population of 35,000. Initial referral data has been received and will be evaluated in January to determine the outcome of this project.
- 10.3 Coventry & Rugby and Warwickshire North CCGs are currently working with local Primary Care Networks to develop employment models that support closer working between the network, acute hospitals and community services.
- 10.4 Work continues on the development of Medicor a system-wide demand and capacity tool. Data has been fully implemented at each provider and analysis is now available at provider level. Work continues on the provision of system-wide analytics.

11 Service Improvement Schemes

- 11.1 The Health & Care Partnership is to establish a dedicated Clinical Diagnostics workstream early in the new year. The workstream will benefit from a single clinical SRO as well as a full time project manager. The workstream will aim to streamline and quicken diagnostic services for patients, making them more efficient wherever possible.
- 11.2 Addressing workforce challenges as well as reducing duplication; variation; and cost reduction will be three of the key outputs of its work, with an initial focus on the following themes:
 - Unwarranted variation

- Digitalisation
- Community Diagnostics
- Preventative Screening
- Earlier Diagnostics

12 Population Health

- 12.1 The Health & Care Partnership's Population Health and Prevention Group has established itself as a key enabling body, critical to the delivery and measurement of the Partnership's aims and priorities. Work continues on formalising both its structure of governance and its mandate in order for it to further influence the efficacy of the Partnership's work.
- 12.2 It recently agreed to undertake a significant piece of engagement work designed to complement existing 'Strategic Needs Assessment' data and inform the Partnership's ongoing and future emphasis on improving population health across the patch.

13 Voluntary Sector Engagement

- 13.1 The Health & Care Partnership has secured dedicated resource to support its work in engaging and mobilising the voluntary and community sector in the pursuit of its aspirations. Recognising the significant part the VCS has to play in transforming health and care across the patch, the Partnership has embarked upon a project of work designed to answer the following questions:
 - Do we have the right engagement from VCS?
 - Do we know how we want to engage with VCS?
 - What is our appetite for shifting the balance of power to truly mobilise community assets?
 - How do we create the right relationships to make it happen?
- 13.2 A plan exists to act upon the data received in order to harness the potential of the VCS to compliment the Partnership's work. Regular updates on the project's progress will be provided going forward.

14 Primary Care Networks

- 14.1 The Health & Care Partnership's primary care strategy has recently been approved by all CCGs following an extensive engagement process. It will be published on CCG web sites in January. The Partnership's primary care program board continues to monitor achievement against long term plan trajectories and NHSE/I assurance statements.
- 14.2 Some recent highlights include:
 - On target to meet national on-line consultation delivery dates across all CCGs.
 - First five on-line programmes now live very positive take-up and response.
 - All PCNs offering extended hours across the patch, increasing patient access to GPs.
 - All PCN Clinical Directors have accessed leadership training or have secured places on leadership training.
 - PCN leads identified for all places and linking in with local place forums.
 - All PCNs working on development of long term place plan planning.

Report Author(s):

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Enquiries should be directed to the above person.

Appendices

None