

## Health and Wellbeing Board

**Meeting Date: 14<sup>th</sup> January 2021**

**Paper title: Sustainability and Transformation Partnership (STP) update**

**Responsible Officer:**

**Email:** [nicky.oconnor@nhs.net](mailto:nicky.oconnor@nhs.net)

---

### 1. Summary

This paper provides a regular update from the Sustainability and Transformation Partnership. It covers ICS development; Winter Planning, including Covid 19, NHS 111 First and Flu and Workforce response to Covid 19.

### 2. Recommendations

The Health and Wellbeing Board is asked to receive the update which will be accompanied by a brief presentation at the HWBB meeting to provide up to date information on each of the five sections and provide an opportunity for questions and discussion.

## REPORT

### ICS Development

In 2016, NHS organisations and local councils joined forces in every part of England to form Sustainability and Transformations Partnerships (STPs) to adopt a system approach and produce a five-year plan to the planning and delivery of health and care. Subsequently, NHS England and Improvement (NHSEI) provided a timeline for all STPs to progress towards becoming Integrated Care Systems (ICS) in a phased approach. The aim is that people can live healthier lives and get the care and treatment they need, in the right place, at the right time.

To feed into the process, in 2020, NHSEI launched a consultation into the future form of Integrated Care Systems. The consultation closed on 8<sup>th</sup> January 2021 and we await the outcome of the conscientious consideration of the feedback provided with regard to the two options that have been under consideration:

#### **Option 1: a statutory ICS board/joint committee with an Accountable Officer (AO).**

This would establish a mandatory, rather than voluntary, statutory ICS board through the mechanism of a joint committee and enable NHS commissioners, providers and local authorities to take decisions collectively. An AO would not replace individual organisation AOs/chief executives but would be recognised in legislation and would have duties in relation to delivery of the board's functions. One aligned CCG per ICS footprint and new powers would allow that CCGs are able to delegate many of their population health functions to providers.

#### **Option 2: a statutory ICS body.**

ICSs established as NHS bodies partly by "re- purposing" CCGs, taking on the commissioning functions of CCGs. CCG governing body and GP membership model would be replaced by a board consisting of representatives from system partners. As a minimum, this would include representatives of NHS providers, primary care and local government alongside a chair, a chief

executive and a chief financial officer. The power of individual organisational veto would be removed, and the ICS chief executive would be a full- time AO role.

Shropshire, Telford & Wrekin STP is currently undergoing NHSEI assurance and is on track to become an ICS in shadow form in April 2021 as planned. The process requires a further submission to NHSEI 11<sup>th</sup> January 2021. This submission is a point in time and should be seen as a development plan for the next year. It will be subject to change over the next few months and while we have continued to engage throughout the process of developing the plan, we will seek to engage more fully throughout 2021/22.

In developing the submission, we have recognised how we remain a challenged system. Our focus has too often been on tackling crises which means we have missed opportunities and we now face a number of specific performance and finance issues that have proven difficult to manage. In order to achieve ICS approval, the submission will need to demonstrate our achievements to date and ability to further achieve against four key domains:

- System leadership, partnerships and change capability -
- System Architecture and Strong Financial Management & Planning
- Integrated Care Models
- Track Record of Delivery

In order to do this, our submission will commit to delivering a number of key pledges which have been co-produced by system partners. These are drawn from our Long-Term Plan 2019 – 2024 - Improving Health And Care Outcomes For The Population of Shropshire, Telford & Wrekin, CQC observations and seminal reports such as Emerging Findings and Recommendations from the Independent Review of maternity services at the Shrewsbury And Telford Hospital NHS Trust.

The key pledges to be focused on within the submission are divided into two sections:

### **Service transformation**

- Improving safety and quality
- Integrating services at Place and Neighbourhood level to reduce hospital admissions
- Tackling the problems of ill health, health inequalities and access to health care
- Delivering the Hospital Transformation Programme
- Delivering improvements in Mental Health and Learning Disability/Autism provision

### **Change enablers**

- Economic regeneration
- Climate change
- Creating system sustainability
- Governance
- Enhanced engagement and accountability

Being an ICS will allow us to draw together the strengths of all of our ICS partners across the NHS and local authorities into a combined force that will deliver our transformation ambitions, our pledges, and creates a financially balanced and clinically sustainable system. The integrated care model will drive a change in the way that care is delivered, making a change to more integrated and personalised care, which can deliver better outcomes for individual citizens.

### **Winter planning**

The winter plan and winter communications and engagement plans are being enacted alongside the extensive Covid 19 programme of activity. Campaign sequencing for the planned activity has been influenced by the need to respond to the pandemic. Engagement with stakeholders, the Voluntary, Community and Social Enterprise Sector and the public continues. The main areas of activity are:

- Covid 19
- NHS 111
- Flu

## Covid 19

The Shropshire, Telford & Wrekin system continues to meet under the critical incident management of workstreams feeding into Silver Command, which currently meets three times per week, which in turn feeds into Gold Command, which meets three times per week. Operational representatives from all STP system partners attend Silver, chaired by the Emergency Planning lead and CEOs attend Gold, which is chaired by the CCGs' Accountable Officer.

The vaccination programme across the country began rolling out in December 2020 with the availability of the first vaccine. With the support of the seven Primary Care Networks, groups of GP practices, vaccinations commenced in Shropshire, Telford & Wrekin on 8th December and as of the 12th January the following vaccination centres are in operation:

- Hospital Hub at the Royal Shrewsbury Hospital run in partnership with Shrewsbury Primary Care Network
- Local Vaccination Centre at Bridgnorth Medical Centre being delivered by GPs from the South East Shropshire Primary Care Network
- Local Vaccination Centre at Malinslee Healthcare Centre being delivered by GPs from the Teldoc Primary Care Network
- Hospital Hub at The Robert Jones and Agnes Hunt Orthopaedic Hospital run in partnership with North Shropshire Primary Care Network

The programme is staffed by current and retired healthcare professionals, but also for non-clinical staff in a range of administrative, reception and other front-of-house roles as well as for volunteers. An extensive recruitment programme continues with local people being urged to 'be a part of history' by applying for roles in order to ensure we have the full complement of staff to deliver a quality and safe programme of vaccination at pace and deliver vaccines closer to where people live.

With the commencement of a third lockdown in England, communications activity continues to be informed by the national NHSEI team. Key messages continue to reinforce the national guidance, provide information on the vaccination process and the available vaccines and reassure individuals.

Verbal updates on the latest position will be provided at the January HWWB meeting through several of the agenda items.

## Covid workforce recruitment

A Covid vaccination service recruitment campaign has been implemented to support the response to ensure viable and safe vaccination centres can be rolled out across the county. There are two distinct strands to the campaign, both being promoted under the heading: **Be A Part Of History**. The two strands are:

- Paid roles – clinical and non-clinical
- Volunteer roles

**Paid roles** are being managed by The Robert Jones and Agnes Hunt Orthopaedic Hospital (RJA), in its capacity as the lead employer for the vaccination service within Shropshire, Telford & Wrekin. Recruitment is via the NHS Jobs portal, with applicants being signposted to vacancies from a dedicated page on the RJA website at [www.rjah.nhs.uk/vaccine](http://www.rjah.nhs.uk/vaccine).

A recruitment campaign to promote these vacancies went live just before Christmas. This encompassed a large social media campaign, as well as coverage in the local print media and on BBC Radio Shropshire. As of the end of last week, more than 700 people had submitted applications for the various clinical and non-clinical roles.

We are grateful to all STP partners for supporting the campaign via their own channels. This includes councillors from within both Local Authorities, who have offered to highlight the recruitment effort in their communities and signpost people to the webpage. Letters are also being provided to be issued where possible to all residents and video messaging and social media are supporting the campaign.

Internal communications within the STP partners has also been a vital element of the campaign in the early period, in order to identify staff willing to work extra hours or be redeployed. This has been essential to get the vaccination service up and running while a substantive workforce is recruited.

Work continues to refine the process based on feedback from potential ex-employees and a clearer, single route of contact approach is being adopted. Word of mouth is a powerful tool within the public sector and across the county and further internal communications is being prepared.

**Recruitment of volunteers** is being managed by the Shropshire Rural Communities Council (RCC). Shropshire RCC has worked with the STP to develop a campaign within the #BeAPartOfHistory heading. Volunteers are being sought to carry out two specific marshal roles within vaccination sites. People interested in offering their services are being asked to register at [www.shropshire-rcc.org.uk/covid19volunteers](http://www.shropshire-rcc.org.uk/covid19volunteers).

### **Pressures - Think NHS 111 First**

This is a national initiative which has been implemented across all STPs and ICSs in England. As has been the case for many years, it allows patients to call 111 to discuss their condition and be signposted to the correct services, such as self-care, pharmacy, GP or for hospital treatment. As part of the revised service, if a patient requires to self-attend an A&E department a time slot will be provided. This will provide a better patient experience as it reduces waiting times in the department and reduces the risk in this Covid 19 era.

Patients will still be seen based on clinical need but by calling 111 their waiting times will be reduced. In future, those attending without calling ahead to 111 will be treated but provided with information on the new approach for future reference and to share with family and friends. A phased approach was implemented across England. Following the NHSEI assurance process, Shropshire, Telford and Wrekin went live on 16 November and the remaining schemes across England were up and running from 1 December 2020. The phased approach allowed the local system to learn from best practice elsewhere. Key stakeholder engagement took place and further engagement and planning is underway.

The implementation of the programme has been monitored at a weekly steering group and the system has been delighted to report that the process is working well here in Shropshire, Telford & Wrekin. From our performance monitoring, we are seeing lower rates of attendance of patients who do not require the services of an Emergency Department team, and higher rates of appropriate referral into our urgent care treatment centres (UTC) at the Royal Shrewsbury Hospital and Bridgnorth and into our extended slots in general practice. It's certainly been busy for all partners over the Christmas and New Year period, but our clinicians are pleased that patients are being directed to the right care first time.

We have been commended regionally and nationally for our data collection and case review, which allows us to monitor all the referral trends, and also highlights if there may have been opportunities for referral into alternative services. In order to constantly improve the service, these are discussed in detail by our clinical group, and if we have missed opportunities to refer into existing pathways, we have reviewed the instructions of our existing directory of services to ensure that this is clear. We have also looked at the development of new services and pathways as a direct consequence and are currently improving our respiratory and cardiac pathways.

The main communications and engagement elements of the plan commenced at the beginning of December in tandem with the national roll-out. A communication toolkit was developed and shared with all partners across the STP footprint to cascade key messaging and communication through their channels and through partners including the Healthwatch, VCSE organisations and patient groups.

Monitoring and evaluation methodologies are in development and include surveys of randomly selected attendees at A&E, additional questions to be asked in the telephone follow-up to patients completing the Friends and Family Test, additional surveys on the websites of system partners and Healthwatch and through the provider membership schemes and patient groups.

As the service develops, monitoring and specific communications and engagement activity will be undertaken with seldom heard groups within the nine protected characteristics and those living in more rural areas and with people with mental health conditions and learning disabilities wherever possible

## Flu

This year, we are asking for a concerted effort to significantly increase flu vaccination coverage and achieve a minimum 75% uptake across all eligible groups. This update outlines the uptake rates across the main eligible groups and the approach that we are adopting across STW, including how system partners are contributing towards the achievement of the considerable flu targets.

The flu vaccine is given to people who:

- are 50 and over (including those who'll be 50 by 31 March 2021)
- have certain health conditions
- are pregnant
- are in long-stay residential care
- live with someone who's at high risk from coronavirus (on the nhs shielded patient list)
- children 6 months to Year 7 (11 years of age)
- frontline health or social care workers

Influenza is causing many deaths, hospital admissions and severe illness every year, especially among elderly and groups at higher risk, as outlined above. It therefore vital to protect those at highest risk through providing free flu jabs. This year the flu vaccination is particularly important because:

- if you are at higher risk from coronavirus, you are also more at risk of problems from flu
- if you get flu and coronavirus at the same time, research shows you are more likely to be seriously ill
- it will help to reduce pressure on the NHS and social care staff who may be dealing with coronavirus

## Uptake of the flu vaccination

	England	STW	England	STW
Risk Group	2019/21	2019/2020	2020 to Jan	2020 to Jan
65+	70.5	71.0	80.4	81.5
50-64	-	-	28.1 (midlands)	29.0
6 months to under 65 at risk	40.6	44.3	51.6	56.2
Pregnant women	41.2	49.4	43.1	49.6
All 2 year olds	36.5	44.2	54.1	58.8

Generally, this year flu update has been good in STW with flu uptake being higher compared with last year and England's average across all cohorts.

In STW, roughly over 4/5th's or 80% of the 65+ population has had the flu vaccine. This is a 14% increase compared to last year by week 53 (January).

All GP practices have achieved the 75% target in Shropshire, Telford and Wrekin.

Community Pharmacists have seen an increase in flu vaccination by 66%.

### **Flu – Communications and Engagement**

The annual flu campaign remains pivotal to winter planning and encompasses:

- Comprehensive communications and engagement plan working with local authority partners and providers to deliver through shared channels supporting the Help Us Help You campaign
- Series of press releases issued by target audience promoting vaccine to target groups
- Social media campaign – sharing digital assets across organisations
- Council and education magazine articles issued
- Communications sent to faith forums to get messages out to their communities
- GP pack provided with campaign assets shared
- Promoting uptake with staff across all partner organisations

<b>List of Background Papers (This MUST be completed for all reports, but does not include items containing exempt or confidential information)</b>
<b>Cabinet Member (Portfolio Holder)</b>
<b>Local Member</b>
<b>Appendices</b>