



Herefordshire and Worcestershire Sustainability and Transformation Partnership (STP)

Stakeholder Briefing – December 2018

Foreword



It is a year since I became Chair of the Herefordshire and Worcestershire STP. It seems therefore a good time to reflect on the past 12 months and to look forward to 2019 and our hopes and aspirations for the health and care system.

Over the last year we have established neighbourhood teams in both Herefordshire and Worcestershire based around GP practices and serving populations of between 30,000 to 50,000 people.

Thanks to the collaboration between the NHS Providers, the four Clinical Commissioning Groups and the two county councils we have been able to keep delayed discharges in the two acute hospitals very low which means people are getting home quickly when they are fit. Clinicians in both Herefordshire and Worcestershire are working on a better model of care for people who have had a major stroke and we are starting to plan what our new maternity service arrangements might look like. We will be consulting widely on both these service changes in the near future.

Less positively, we continue to struggle to see people quickly enough who go to the A&E units in Worcester, Redditch and Hereford. We need to get better at seeing patients with symptoms that might indicate cancer within the national guidelines and we could be quicker in giving people their test results. And of course the NHS and the county councils are still very short of money, although the NHS settlement for the next 5 years will help in terms of our ability to plan to tackle that.

We have therefore decided to focus on a few important areas in an effort to improve the experience of people dependent on the health and care system. Our number one priority will be making sure we are able to cope with winter. Both county councils have been given some additional money to boost their ability to support people out of hospital. This will help ease the pressure on hospital beds and in turn should help with our A&E performance. Senior leaders in the STP are meeting to pool ideas and suggestions to try and make what we do more efficient and effective. Our goal is to see only those people in the A&E units who need the emergency services. For everyone else we want them to think about managing their illness with the support of a pharmacist or by going to their local GP.

Our ambition for 2019 is to have a health and social care system which helps those who need it the most and which cuts down on patients waiting for test results or to see a clinician. We also want to recruit and retain health and social care staff. These are important objectives which will take energy and perseverance. I am however confident that everyone who works in the health and social care services in the STP wants to achieve them.

Charles Waddicor,
Independent Chair,
H&W STP





What are we trying to achieve:

'Local people will live well in a supportive community with joined up care underpinned by specialist expertise and delivered in the best place by the most appropriate people.'

We want to provide safe and effective health and care services across all our communities.

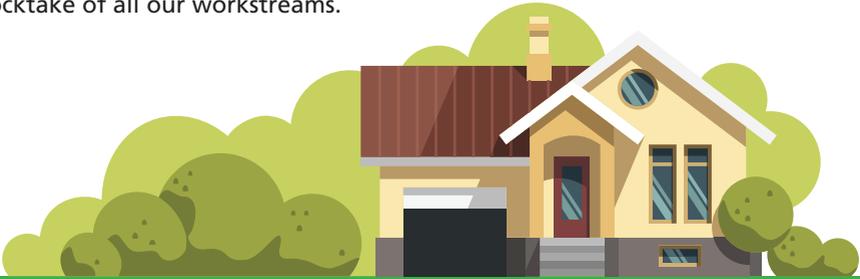
What have we been up to?

The STP has agreed some priority headlines under which there are lots of different work-streams at different stages of development. Some are actively out engaging on proposals or seeking early views. We have listed our priorities and workstreams on pages 6 to 10. If you would like to be involved with the work of our priorities and workstream, please see information details at the last page.



19/20 Planning

Planning for the next financial year has begun, we are working on developing and refining our priorities, key deliverables and expected outcomes. We are committed to developing a high quality and financially sustainable health and care system across Herefordshire and Worcestershire and we will use the 19/20 planning process to progress this further. We have started the process by doing a stocktake of all our workstreams.



Bit of a recap:

The Sustainability and Transformation Partnership (STP) brings together local health and care organisations across Herefordshire and Worcestershire, supported by patient/carer representatives and voluntary and community groups.

It is a long-term plan to address some of the local health and care inequalities we have, to improve health outcomes for people across the area, and to ensure we can continue to provide safe and sustainable care into the future.

This means maximising efficiency and effectiveness, putting prevention, self-care and promoting independence at the heart of what we do, developing out of hospital care, and providing clinically and financially sustainable services. We are also working on projects to support the changes we need to make, for example around workforce and organisational development, digital, finance, communications and engagement.



Herefordshire and Worcestershire STP Structure

STP Independent Chair Charles Waddicor	STP CEO Sarah Dugan	Deputy STP Lead Simon Trickett
STP Finance Lead Mark Dutton	STP Lead Nurse Lisa Levy	STP Programme Directors Ruth Lemiech / Allison Talbot Smith

Senior Responsible Officers for Programmes

Back Office, Estates & Infrastructure Jill Robinson	Digital Robert Mackie	Diagnostics and Clinical Support Sarah Smith	Medicines Optimisation Simon Trickett
Prevention, Promoting Independence & Self Care Frances Howie	Sustainable Primary Care Simon Trickett / Mike Hearn	Integrated Primary and Community Care Sarah Dugan	Mental Health Jo-Anne Alner
Learning Disabilities Avril Wilson	Urgent Care Michelle McKay & Jane Ives	Stroke Mari Gay / Allison Talbot Smith	Local Maternity Systems Frances Howie
Elective Care Carl Ellson	Cancer Carl Ellson	Clinical Sustainability Strategy Michelle McKay	Workforce and OD Sarah Dugan

Overview of Programme Management Office (PMO)

As the Herefordshire and Worcestershire STP is now into its 3rd year and working towards an Integrated Care System (ICS), an opportunity arose to review the Programme Management Office (PMO) functions currently delivered by the STP, Herefordshire CCG and the Worcestershire CCGs.

ICS are when NHS organisations, in partnership with local councils and others take collective responsibility for managing resources, delivering NHS standards, and improving the health of the population they serve. Further integration and alignment of activity, resource and functions is key to our ICS journey so following system agreement to integrate the Herefordshire CCG, Worcestershire CCG and STP PMOs, the Herefordshire & Worcestershire (H&W) PMO has been formed. The PMO main functions will be to;

- Provide support functions to those delivering the programmes of work
- Support core STP governance forums/ meetings, and county-based Financial Recovery and cost improvement programmes.
- Be the first point of contact for returns and information.
- Ongoing partnership working with PMO teams based in providers and County Councils



1. Maximise efficiency and effectiveness

To maximise **efficiency and effectiveness** across clinical, service and support functions to improve experience and reduce cost, through minimising unnecessary avoidable contacts, reducing variation and improving outcomes.



Workstream updates:

Back Office, Infrastructure and Estates:

Following the completion of a successful Total Transport pilot scheme, a review is underway on how this can be developed in future. Total Transport is a government-funded initiative to encourage integration of transport planning and delivery. Local authorities were awarded funds by the Department for Transport (DfT) to establish suitable pilot projects in their areas. Worcestershire County Council and its partners in community transport engaged with representatives from Health and two pilot initiatives were started in September 2017.

The available funding enabled the pilots to be delivered until the end of June 2018. The outcome of the Total Transport Pilot scheme was that the 'Connections to Health' Pilot provided 214 return journeys to local hospitals and 'Transport to Health' Pilot provided 170 trips to local hospitals as well as GP surgeries. The feedback received from service users is that there is a lack of information about the different modes of transport patients can use to travel for their hospital and GP surgery appointment. This workstream is currently producing a leaflet for service users highlighting the different modes of transport that can be used.

Medicines Optimisation:

Herefordshire and Worcestershire Clinical Commissioning Group (CCG) was successful in a bid for national funding for Medicines Optimisation in Care Homes (MOCH). This allows investment in a new service across all 4 CCGs with pharmacists and technicians working directly with care homes to improve the use of medicines. Patients will have their medicines reviewed to improve outcomes and reduce avoidable harm; and staff will be supported in managing medicines safely, reducing wasted medicines and supporting robust procedures for handling medicines.

Digital and Innovation:

Conversations with all workstream representatives within the STP have been completed to gather information on workstream digital requirements; this will help develop the Digital Workstream Delivery Plan. In addition to this, a focus has been on developing a bid to access national capital for provider's digital plans which will support us in improving patient care through a more effective electronic patient records system.



2. Prevention, Self-Care and Promoting Independence:

We are reshaping our **approach to prevention** to create an environment where people stay healthy for longer, supports resilient communities, where self-care is the norm, digitally enabled where possible, and staff include prevention in all that they do.

Workstream updates:

Prevention, Self Care and Promoting Independence:

Social Prescribing Schemes are now developing in both counties. Worcestershire is covering the majority of practices in the County through six pilot programmes. To date over 200 referrals have been made across the six sites. Herefordshire social prescribers have completed their induction and are working to develop the local offer working closely with Primary Care Home, Healthy Living Trainers and Community Brokers.

Lifestyle Behaviour Change Programmes

The Healthy Lifestyle Trainer Service remains in place in Herefordshire and is delivering support, focused on priority neighborhoods. In Worcestershire the Living Well Service continues to deliver support.

Making Every Contact Count (MECC)

MECC is an initiative that encourages and helps people to make healthier choices to achieve positive long-term behaviour change. To achieve this, organisations need to build a culture that supports and encourages continuous health improvement through the contacts made with individuals it comes across.

In Worcestershire, MECC has been promoted as part of the Health Living Network development, which has signed up 70 members in the first quarter. Both the online e-learning and face and face training packages have been developed and are being delivered, but delays have been caused due to viability of e-learning platforms for delivery across the County. This delivery also includes the roll out of train the trainer focusing on priority groups and deliver of the MECC offer with partner organisations and services.

Digital Inclusion and Information (Herefordshire)

Wellbeing Information and Signposting for Herefordshire (WISH) has been significantly improved and the Fastershire programme (Fastershire is a partnership between Gloucestershire County Council and Herefordshire Council to bring faster broadband to the two counties) is continuing to offer training in a range of settings and has been awarded a national award for increasing the access of high-speed broadband.

Digital Inclusion and Information (Worcestershire)

Worcestershire County Council in partnership with 29 other organisations formed Go On Worcestershire in November 2014 to ensure as many people as possible have the opportunity and support to confidently go online. In Worcestershire, the Chair and Vice Chair of the Go On Worcestershire met the Department of Public Health and Public Health Consultant for Worcestershire, a three year plan is being developed.



3. Integrated Primary and Community Care

We are developing an improved **out of hospital care** model by investing in sustainable primary care which integrates with community based physical and mental health teams, working alongside social care to reduce reliance on hospital and social care beds through emphasising “own bed instead”.

Workstream updates:

Developing Sustainable Primary Care

For Worcestershire’s Internal Resilience Peer Support Team – Lessons learnt from the first 12 months are being collated in conjunction with the Local Medical Council (LMC), 7 practices have received support to date.

For Herefordshire - A number of training opportunities have been identified to develop practice managers across the STP.

Integrated Primary and Community Services – Worcestershire

ICOPE (Integrated Care for Older People previously titled Frailty) - Initial work has focussed on the following key areas: establish integrated governance, system wide population planning, establish frailty prevalence, map local care services, develop and embed a proactive approach to assessment and intervention, develop and embed a proactive approach to acute deterioration, recovery and future planning and identify key enablers.

Neighbourhood Teams (NTs) are integrated multidisciplinary teams of physical and mental care professionals for adults including over 65s, requiring community services. They work closely with GPs, primary care, social care and the third and independent sector to provide joined-up responsive, expert care and treatment.

All 14 Neighbourhood Teams (NT) are live with the Triumvirate primary care leadership and change agent programme; this is designed to enable a team of three multi-professional practitioners from a primary care practice to become a collaborative team of change agents.

Integrated Primary and Community Services – Herefordshire

There has been multi stakeholder awareness/development session for the implementation of ReSPECT care plan tool. ReSPECT stands for Recommended Summary Plan for Emergency Care and Treatment. ReSPECT is a process that creates personalised recommendations for a person’s clinical care in a future emergency in which they are unable to make or express their choices.

Opportunities for shared learning have also been established between Herefordshire Primary Care teams and Worcestershire Neighbourhood Teams.



4. Establishing clinically and financially sustainable services:

We will establish **sustainable services** through development of the right networks and collaborations across and beyond the STP footprint to improve urgent care, cancer care, elective care, maternity services, and specialist mental health and learning disability services. We are establishing the right networks and collaborating with various partners to establish clinical and sustainable services.

Workstream updates:

Improving Mental Health:

A summary document has been produced bringing together detailed county based suicide prevention policies and actions plans, demonstrating the alignment of our two county-based approaches. A single STP Suicide Prevention Strategy will be produced to replace the two locality based policies. In addition to this, there will be a campaign in Worcestershire to promote Improving Access to Psychological Therapies (IAPT) which will facilitate access to mental health services. This campaign may also be widened to include Herefordshire at a later date.

The work to develop a single STP Dementia Strategy across the two counties has commenced, a stakeholder event took place in November to launch the strategy.

Improving Learning Disability Care

The Learning Disabilities STP group is working with self-advocacy organisations to audit primary health care (GP surgeries in Worcestershire have already participated) this will be extended to Herefordshire and results will be shared. The Transforming Care Programme (TCP) across the STP is progressing, there are no NHS Assessment / Treatment beds, there are less than fifteen people with LD placed in hospitals and both counties have established risk registers.

The Learning Disabilities workstream held a cross system event in March 2018. The outcomes of the event include; networking, looking at joint supervision and service improvements and the start of real discussion around forensic services, transition and psychological therapies.

Improving Urgent Care – Worcestershire

From the beginning of October 2018 the Frailty Assessment Unit (FAU) in Redditch has been fully operational for 12 hours a day and 7 days a week.

The Worcestershire system winter plan has been finalised. The main changes in this years planning is the addition of the demand and capacity tool and also a robust workforce plan to include quarterly and weekly reports on staffing to enable more effective planning.



Improving Urgent Care – Herefordshire

An agreement across primary/secondary care to adopt ReSPECT (Recommended Summary Plan for Emergency Care and Treatment) has been established.

The system continues to face a significant challenge for Delayed Transfers of Care over and above the 3.5% national standard. There is close working between Health and Social Care locally to minimise delays.

Stroke:

In June and July 2018, a series of conversations with the public, patients and carers to gather feedback about stroke services across Herefordshire and Worcestershire was conducted. The purpose was to explore the current experiences of stroke services and what 'good should look like' across the two counties. A report has been produced following this feedback and will inform stroke services in the future.

Maternity Care:

Two key enabling work streams are being developed to support the achievement of the ambition to reduce still birth, neonatal death, maternal death and brain injury by 50% by 2025.

The Local Maternity Systems (LMS) has identified a group of women who will benefit most from continuity of carer (consistency of the midwife and/or obstetrician who cares for a woman throughout out maternity). Staff volunteers (paid staff) will work in small teams of 4-8 or carry a caseload of 36 to meet the national booking target of 20% by March 2019.

A team of clinicians is being appointed to concentrate on smoking cessation, carbon monoxide testing all women at the start and middle of pregnancy, initiation of breast feeding, cardiotocography training, implementing serial scanning for women over 40yrs, women who smoke and women who have a BMI over 30.

The Maternity Voices Partnership continues to work with the clinicians to ensure that the LMS is relevant to women and families and is making a difference.

Elective Care

The aligned STP Elective Care Transformation Group has been established as a dedicated clinically-led work programme within the STP, bringing together a range of partners to deliver this aim with a number of objectives including the delivery of the NHS constitutional 18-week referral to treatment standard.

This workstream plans to explore how existing enhanced services can be maximised to meet some of the activity demands for instance diabetes and to further explore how other opportunities such as procedures undertaken as a day case, could potentially be delivered in outpatients.



Cancer:

The Cancer workstream has had a series of engagement events with service users on previous occasions and will hold a further engagement event early next year to share the finalised cancer plan.

There is a current review of 'Two Week Wait' referral leaflet; a 'Two Week Wait' referral is a request from your GP to ask the hospital for an urgent appointment for you.

How can you get involved/meetings/events?

We hold several meetings and events in the community. If you would like to be involved, please contact Linda Onerhime, STP Community Engagement Officer via email: l.onerhime@nhs.net

