

**ACP Director Report- May 2019**

**For Partner Boards**

**Sheffield Accountable Care Partnership (ACP)**

**For Sheffield Health & Social Care NHSFT Board- June 2019**

<b>Author(s)</b>	<b>Kathryn Robertshaw</b>
<b>Sponsor</b>	<b>Kevan Taylor (Chief Executive, Sheffield Health &amp; Social Care NHSFT)</b>
<b>1. Purpose</b>	
<ul style="list-style-type: none"> <li>To provide headlines from the progress of the Accountable Care Programme.</li> <li>To provide an overview of ACP Programme Activities.</li> </ul>	
<b>2. Introduction / Background</b>	
A short written overview of the Programme activities is provided by the ACP Director for the purpose of the May 2019 ACP Executive Delivery Group.	
<b>3. Is your report for Approval / Consideration / Noting</b>	
For noting	
<b>4. Recommendations / Action Required by Accountable Care Partnership</b>	
N/A	
<b>5. Other Headings</b>	
N/A	
<b>Are there any Resource Implications (including Financial, Staffing etc.)?</b>	
N/A	

**Summary ACP Director Report**  
**For SHSC NHSFT Board- June 2019**

**1. Strategic Update**

The **ICS quarterly place review** took place on 24th April. It was an opportunity for the ACP to share key place work with ICS team. There was a commitment from the ICS to increasingly involve Place Directors in system level working to enable greater understanding of the benefits of transformation happening at a local level. Key points of discussion included:

- The In year reduction in the level of Delayed Transfers of Care
- Development of an all age mental health offer and the success of the “Healthy Minds” work
- Key challenges in the system were identified as workforce and digital. Noted developments to address both of these areas
- Work already taking place in the city in relation to employment and health and the potential to share this good practice across the wider ICS
- The development of the new model of care for frailty
- Development of community based assets and primary carer networks.
- Developments related to joint commissioning

A refreshed draft of ‘**Shaping Sheffield: The Plan**’ document has been produced following considerable feedback from colleagues. A refreshed workstream and priority structure is proposed in the document to show clearer alignment to the Health and Wellbeing Board Strategy and ACP priorities. A review of chief executive sponsorship of the workstreams is being progressed to ensure effective ownership and drive of the work

Work continues to develop closer alignment of **Joint Commissioning** and ACP and bring strategic and clinical leaders from the provider organisations into the work.

Planning for increased **strategic input from VCS** has developed and a proposal for investment to support this work is to go to EDG in May.

The advert for recruitment to the **Programme Director Role** is currently out, with a closing date of 7th June. Interviews are planned for 12<sup>th</sup> July. A business case to develop longer term funding arrangements for the wider ACP team is under development.

**2. Delivery**

**2.1 Elective Care**

A revised Business Case for teledermatology is being developed, expanding the initial scope to beyond cancer 2 week referrals. It aims to develop a new pathway which will reduce face to face contacts at STH and improve patient experience.

Elective Board due to consider cardiology plans at May meeting - currently developing a business case with ACP partners, looking at potential new contracting models.

## **2.2 Urgent and Emergency Care**

- Key themes from the Urgent Care Review have been identified. These themes and the subsequent approach will be tested at public and partner workshops on 6th June. Expect to share across ACP in July.
- Established Board rounds on the 16 highest Delayed Transfers of Care board rounds and standardised the approach across geriatric and stroke medicine.
- Workshops ongoing with Single Point of Access (SPA) and the Yorkshire Ambulance Service to review pathways and referral processes as part of integrated urgent care

## **2.3 Long Term Conditions and New Model of Care**

- The LTC Board has agreed a more focused approach and agreed to eight workstreams/ task and finish groups which will report into the delivery group.
  1. Diabetes
  2. End of Life Care
  3. Care Homes
  4. Early help
  5. Wound care
  6. Care Planning
  7. Community IVs
  8. Person Centred Care
- Each work stream has established leadership and nominated a delivery group representative. Nat Jones and Sharon Marriott are reviewing all eight work streams to provide an update report to the LTC Board on the 24th of June 2019.

## **2.4 Mental Health and Learning Disabilities**

- Work underway to ensure appropriate governance processes are put in place to support the life span (all age) approach to mental health going forwards.
- Outline brief agreed for delivery of service user led workshops to design the transitions project (developing pathways that involve transition from children and young people to adult services)
- A number of issues relating to Trauma PTSD project have been identified related to capacity and resources. Further discussions are planned to determine viability of the project.

## **2.5 Primary Care and Population Health Management**

- ICS had requested a refreshed CCG Primary Care Strategy. A review of the strategy will ensure reflection of ACP priorities. Further work to develop a system wide primary care strategy are being considered.
- A Neighbourhood Learning Network event was held on 16<sup>th</sup> May focussed on development of social prescribing in networks
- Ongoing programme of support to general practices in relation to New GP Contract
- Ongoing Support to launch of services funded through Transformation Bid Monies
- Ongoing development of refreshed data sharing agreements to support population health management with increased linkage to digital workstream

## **2.6 Children's and Maternity**

- Priorities drafted for 19/20 for the Children's Health and Wellbeing Transformation Board (CHWTB) and Children and Maternity ACP work stream. These are reflected in the Shaping Sheffield plan and will be formally discussed at the CHWTB meeting in June.

- Future in Mind NHSE assurance: confirmation of fully assured local transformation plan from NHSE
- SCH Clinical Summit on Partnership working held on 30 April.
- Draft performance measures provided to ACP linked to 19/20 priorities for CHWT Board.
- Group of key staff identified to attend the ACP Transformation Change and System Leadership two day workshop on 10/11 June. Focus will be on the SEND action plan.

## **2.7 Digital**

- Digital workstream and Digital Delivery Board established
- Strategic Outline Case development commenced and on track for a draft document to be circulated for assurance in June-19
- User research and engagement ongoing across Sheffield including initial market testing of technical solutions.
- Engagement ongoing with Yorkshire and Humber Care Record to better understand potential for use of this solution
- Engagement ongoing with Barnsley place regarding their approach and to identify potential linkages.
- GovRoam project being progressed through SY&B ICS, plan to establish reciprocal connectivity across all partner sites by end Sept 19. Issues anticipated where sites currently supported by outsourced IT contracts.
- Sheffield Digital leads to attend Yorkshire and Humber Care Record planning event on 22 May.

## **2.8 Workforce/Organisational Development**

Joint Director leads for workforce have been appointed (Paula Ward and Dean Wilson)

A draft Ageing Well People's Workforce Strategy is now developed following considerable public and staff engagement. This will be considered by EDG in May 2019. This will be developed into an All Age Workforce Strategy by September 2019 and a specific plan for engaging with families, carers and staff across Children and Young People's services is underway.

The Shadow System board commenced on 21.5.2019 with participants from all partners. The Leading Sheffield Cohort 2 programme continues with high levels of interest in future cohorts.

## **2.9 Pharmacy Transformation**

- Engagement with emerging Primary Care Networks to support needs assessment and delivery of medicines expertise that is fit for purpose.
- Developing a system-wide approach to supporting stable recruitment to PCNs of pharmacy professionals
- Planning for implementation and training required for community pharmacy led hypertension service
- Engage with the Improving Accountable Care Forum (May)
- Identified staff to participating in non-medical independent prescriber training

## **2.10 Communications and Engagement**

Healthwatch are working with engagement teams across ACP partners to identify system wide areas for improvement, the group has started to consider how a more coordinated approach might work in practice. The ACP Patient and Public Involvement Workshop is being planned for 11<sup>th</sup> July 2019 to further develop the engagement approach.

Ongoing engagement projects with less well heard groups, including interviews with STH inpatients, people using 'Ben's Centre' (a place for vulnerable people experiencing difficulties with substance misuse) and residents at Broomsgrove Nursing home as well as visits to City of Sanctuary and Social Cafes in the north of Sheffield

Workstream leads are liaising with service users through the Improving Accountable Care Forum. Workstream Leads are presenting to the forum about their work plans and developing engagement plans with the members.

### 2.11 Prevention

- Dir of Public health to meet with ACP organisational leads (28th May) to discuss embedding prevention approach into each organisation. A framework for these discussions is being developed based on work ongoing within Sheffield City Council.
- Promoting Prevention Board agreed need to increase linkage to Employment health and the Employment and Support Service Group. ACP representative to attend July Meeting of that group to explore potential linkage.
- ACEs conference planned for 11<sup>th</sup> July 2019, led by South Yorkshire Police.

### 2.12 Payment Reform

- The Payment Reform Workstream made the decision to stand down meetings to focus upon the financial yearend, 19-20 plan setting and the calculation of efficiency requirements during March and April.
- Initial work has been undertaken to look at the different contracting and funding options which could used to facilitate system changes. From this point the workload of the Payment Reform Workstream is closely linked to the service changes identified by the other work streams and the individual programmes within their plans. The group anticipate that the request for involvement will be received as detail is added to change propositions.
- The Payment Reform Workstream will be reissuing their previous offer to work with Delivery Groups and Boards early in the process to ensure full understanding of the desired outcomes, to allow financial and contracting issues to be resolved at the same pace as the programmes develop and provide support from their wider system knowledge in the context of the Better Care Fund and Joint Commissioning.

## 3. Risks

Key risks for each can be found in the attached highlight reports. Below is an extract of the high level risks (scored 10 or more on risk matrix)

Risk	Score	Mitigation
Revenue Affordability for Shared Care Record Project	20	<ol style="list-style-type: none"> <li>1. ACP Finance Lead has been identified to support activity across the ACP on this.</li> <li>2. Strategic Outline Case will include costs-benefits estimates and must gain</li> </ol>

		<p>endorsement from ACP partners if project is to be viable.</p> <p>3. By Outline Business Case a more robust cost estimates and a detailed benefits realisation plan will be completed for assurance.</p>
<p>Shared Care Record Project Capacity of Clinical and IT/Digital Leaders @ ACP Partners</p> <p>Due to the operational pressures on Sheffield ACP Partners and their Clinical and IT/Digital leadership, there is a risk that insufficient capacity exists to drive this programme at requisite pace to secure funding and then deliver against it.</p>	20	<p>1. ACP Digital Delivery Board established and all Partner leads are to be confirmed by end May '19.</p> <p>2. Programme lead resource is currently funded through SYB ICS and also other ACP Digital leads are working with Sheffield to input and ensure shared learning.</p> <p>3. Resource requirements to build OBC will need to be stated in the SOC and consideration then given to fund through monies already drawn down from NHS England.</p>
<p>Active CCG Leadership Capacity for Shared Care Record Project.</p> <p>Successful care record schemes across the country have typically been driven through CCG and primary care leadership, and central funding is typically sourced from national primary care allocations.</p>	16	<p>1. Sheffield CCG to review capacity and inputs to the programme, including GP leads also.</p>
<p>Lack of funding for pharmacist prescriber training, places on courses, mentor capacity</p>	16	<p>Pursue national support through Pharmacy Integration Fund; lobby HEE for increased course capacity; promote benefits to local GPs to encourage mentor sign up</p>
<p>System pressures may delay or halt urgent care transformational changes throughout the winter period</p>	12	<p>Plans agreed with providers to minimise service disruptions where possible at times of system pressure.</p>
<p>Elective programme of work does not deliver against plan due to inadequate resource or lack/lack of capacity</p>	12	<p>New resource identified to support elective Care workstream, expected to commence in May 2019, hosted by SCCG</p>