

## Board of Directors' - Open

Date: 13<sup>th</sup> May 2020

Item Ref: 05c

<b>TITLE OF PAPER</b>	Draft Physical Health Strategy and Strategic Priorities 2020-21
<b>TO BE PRESENTED BY</b>	Dr Mike Hunter, Executive Medical Director
<b>ACTION REQUIRED</b>	The Board of Directors is asked to: <ul style="list-style-type: none"> <li>• Consider the draft Physical Health Strategy and its alignment with the Trust's overall Strategy</li> <li>• Contribute to the development of the draft Strategy</li> <li>• Support continued socialisation of the draft Strategy</li> </ul>
<b>OUTCOME</b>	For the Trust to have an agreed approach to a physical health strategy.
<b>TIMETABLE FOR DECISION</b>	For discussion at the Board of Directors Meeting in May 2020.
<b>LINKS TO OTHER KEY REPORTS/DECISIONS</b>	SHSC Physical Health Policy SHSC Medicines Optimisation Strategy SHSC Nutrition and Hydration Strategy SHSC Falls Policy
<b>STRATEGIC AIM STRATEGIC OBJECTIVE</b>  <b>BAF RISK NUMBER &amp; DESCRIPTION</b>	Aim: Delivering outstanding care Objectives: Covid – Getting Through Safely CQC – Getting Back To Good Our Transformation Priorities.
<b>LINKS TO NHS CONSTITUTION/OTHER RELEVANT FRAMEWORKS, RISK, OUTCOMES ETC</b>	CQC Fundamental Standards: Regulation 12 – Safe Care and Treatment
<b>IMPLICATIONS FOR SERVICE DELIVERY &amp; FINANCIAL IMPACT</b>	To be determined.
<b>CONSIDERATION OF LEGAL ISSUES</b>	None identified.

<b>Author of Report</b>	Mike Hunter
<b>Designation</b>	Executive Medical Director
<b>Date of Report</b>	April 2020

# Summary Report

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## 1 Purpose

<i>For Approval</i>	<i>For a collective decision</i>	<i>To report progress</i>	<i>To seek input from</i>	<i>For information</i>	<i>Other (please state below)</i>
	✓		✓		
To agree an approach to a Physical Health Strategy for the Trust and to approve the next steps in its development.					

## 2 Summary

The overarching aim of this draft strategy is to improve the physical health of people living with mental health problems, learning disability and autism in Sheffield. People with severe mental health problems such as schizophrenia, people diagnosed with personality disorder and people with learning disabilities have a significantly reduced life expectancy compared with the general population, typically dying 20 years prematurely.

The underlying causes of premature mortality are complex but can be summarised as significantly increased cardio-metabolic risk. In this sense, cardio-metabolic risk means the inter-relationships between diet and exercise, smoking, alcohol consumption and substance misuse, weight gain, type 2 diabetes, high blood pressure, heart disease and stroke. Furthermore, these problems can be caused or accentuated by medical drugs used in the treatment of psychiatric conditions. More generally, these are the conditions of social exclusion, related to poverty, unemployment, poor housing, discrimination and other wider determinants of health.

The specific aims of the draft Physical Health Strategy are:

1. The best possible physical health for people with mental health problems
2. Continuous improvement of physical health on key indicators
3. Healthy lifestyles and reduced health risk behaviours
4. Staff who are knowledgeable and confident about physical health
5. Partnership working across the city to deliver improved physical health

The strategic priorities are:

1. To implement appropriate and effective physical health interventions
2. To improve how clinical information is recorded and used
3. To develop digital systems to improve information sharing
4. To support staff to develop their awareness and skills about physical health
5. To collaborate and co-ordinate across organisations in primary and secondary care, physical and mental health, health and social care, service user and carer groups and the voluntary sector

The draft Strategy On A Page is attached as Appendix 1. There is strong read-across to the wider organisational strategic priorities for 2020-21, which are:

1. Covid – Getting Through Safely, e.g., optimising physical health to mitigate Covid
2. CQC – Getting Back To Good, e.g., Section 29a Warning Notice re physical health monitoring
3. Our Transformation Priorities, e.g., primary care mental health programme

The draft Physical Health Strategy is being socialised with clinical leaders, clinicians and partners prior to seeking approval from the Trust Board and establishing leadership, governance (including links to the BAF and CRR) and plans for delivery. Once in place, implementation plans will ensure that the Trust understands the impact and benefits of the Physical Health Strategy, and ensure that the work is supported in line with the Trust's Financial Plan and the continued investment available through the NHS Long Term Plan.

### **3 Next Steps**

- 1) To continue the socialisation and development of the draft Physical Health Strategy.
- 2) To seek input and preliminary support for the direction of the draft Physical Health Strategy from the Board.

### **4 Required Actions**

The Board of Directors is asked to:

- 1) Consider the draft Physical Health Strategy and its alignment with the Trust's overall Strategy;
- 2) Contribute to the development of the draft Strategy;
- 3) Support continued socialisation of the draft Strategy.

### **5 Monitoring Arrangements**

The Executive Medical Director will monitor the progression of the strategy through the organisation.

### **6 Contact Details**

For further information, please contact:

Mike Hunter

Executive Medical Director

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**Our Vision “To improve the mental, physical and social wellbeing of the people in our communities.”**

We will deliver outstanding care and experiences for our service users and carers. We will create a great place to work where colleagues can deliver high quality care. We will improve our use of resources.

Care will be Safe. Access to services will be timely. Our approach will be Person centred and coproduced with the individual. We will make a positive difference, delivering the right outcomes for the individual and their carers.



**Sheffield Health and Social Care**  
NHS Foundation Trust

**Trust Strategic Aims**

1. Deliver outstanding care
2. Create a great place to work
3. Improve our use of resources

**2020-21 Strategic Priorities**

1. **Covid:** Getting through safely
2. **CQC:** Getting back to good
3. **Transformation:** Changing things that will make a difference

**Physical Health Strategy**

**Aims**

**Priorities**

1. **Best Possible Physical Health**
2. **Continuous Improvement On Key Indicators**
3. **Healthy Lifestyles & Reduced Risk Behaviours**
4. **Knowledgeable & Confident Staff**
5. **Working In Partnership**

- Implement Appropriate And Effective Interventions
- Improve Recording And Use Of Clinical Information
- Develop Digital Systems To Improve Information Sharing
- Support Staff To Develop Their Awareness And Skills
- Collaborate And Coordinate Across Organisations

- Screen and intervene for cardiometabolic risks
- Optimise medication and monitor for side effects
- Promote healthy lifestyles, including exercise, healthy food and access to healthy environments, and reduce risk behaviours such as smoking
- Create and use an End of Life Strategy
- Collate baseline information and monitor for progress and trends to improve care
- Use learning from deaths to focus prevention
- Update Insight to achieve better accessibility of physical health information
- Ensure that improved accessibility of physical health information is maintained during transition between systems
- Provide training on physical health
- Plan and recruit the workforce aligned with physical health priorities
- Work in collaboration with other organisations to develop skills and improve care
- Ensure staff have access to the right equipment and are trained in its safe use
- Offer staff opportunities to improve their own physical health
- Co-produce whole system pathways
- Redesign primary care mental health provision to deliver integrated physical/mental health care
- Share information with partner organisations and GPs