

# System Board Update

## ***System Board, Wednesday 16<sup>th</sup> September 2020***

***Sent on behalf of: Tim Oliver, Surrey Heartlands Chair and Leader of Surrey County Council***



Welcome to my now regular update following this month's Surrey Heartlands System Board meeting on 16<sup>th</sup> September. This is part of our plan to provide more public transparency across our health and care system and to make sure you are kept up to date with our discussions at Board level. As I referenced previously, System Board will be held in public on a quarterly basis, starting with our meeting on 21<sup>st</sup> October. The meeting agenda, papers and details on how to join will be published [here](#).

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### ***Appointment of Rachael Wardell as Executive Director of Children, Families and Lifelong Learning***

We began with the announcement that Rachael Wardell has been appointed as the new Executive Director of Children, Families and Lifelong Learning at Surrey County Council. Rachael will be joining us from her current role as Director of Children, Schools and Families in the London Borough of Merton and is a very experienced Director of Children's Services. We look forward to welcoming Rachael to Surrey.

### ***Covid-19 update in Surrey***

Ruth Hutchinson, Director of Public Health, brought colleagues up to date with the current Covid-19 situation in Surrey. The latest data for Surrey is published every Monday [here](#).

### ***System finance update***

Highlights from the recent Surrey Heartlands Strategic Finance Board meeting (28<sup>th</sup> August) were reported where partners discussed issues including the process for reimbursement of Covid costs, hospital discharge costs and heard a system update on financial governance from partners. 2020/21 is the final year we will receive transformation funding and we are still working through exact details of how this has been allocated within existing national schemes to understand how much we can allocate to local projects.

The temporary (Covid) financial regime will continue until the end of month 6 during which time providers and commissioners are expected to breakeven. A new regime will operate from month 7. Phase 3 financial allocations were announced immediately prior to this meeting, and are currently being worked through with more detail expected from the region shortly.

## *Health and wellbeing update*

Director of Public Health, Ruth Hutchinson, gave the Board an overview of the *Community Impact Assessment* which takes a rapid and detailed look at the impact of Covid-19 on different people and communities across the county and the support they might need in the event of another outbreak. The outputs will be incorporated into the Health and Wellbeing Strategy as part of our work to reduce some of the increasing health inequalities caused by Covid-19. A number of different methodologies have been used, including geographical impact assessments, a temperature check survey of around 1,600 households and a recovery progress index; the results will be made available on Surrey-I towards the end of October and presented to various stakeholder and reference groups.

One of the key elements, the *community rapid needs assessment*, comprises of ten in-depth assessments of how vulnerable communities have been affected using interviews with individuals and those working in local services and existing data. These ten areas include: BAME communities; care home residents; people with mental health and those with long-term physical conditions; the Gypsy, Roma Traveller community; people experiencing domestic abuse; the homeless; children/adults with special educational needs; people with drug or alcohol problems; and young people out of work – all of which reflect some of the highest levels of differential impact, whilst recognising there are other areas to consider.

Results will be built into the Joint Strategic Needs Assessment (the JSNA) as well as making up part of our evidence base for Phase 3 planning, particularly around health inequalities.

Ruth then gave a brief update on priority areas from the Health and Wellbeing strategy, highlighting work done by the multi-agency group around housing (looking at homelessness and drug use), the launch of the Virtual Mental Health Wellbeing Hub (more [here](#)) and work being undertaken in the Surrey Downs area to prevent isolation and loneliness. A detailed report can be found [here](#) as part of the Health and Wellbeing Board papers.

## *Update on the Guildford and Waverley Integrated Care Partnership (ICP)*

Sue Tresman, Independent Chair of the Guildford and Waverley ICP and Nick Sands, Transformation Director at Royal Surrey NHS Foundation Trust gave an overview of the partnership's aims and work to date. Based on collaboration, not only between partners but also with citizens, patients and staff, the ICP is seeking to make a real difference for residents and has set up a Citizen's Advisory Group to make sure local people are at the centre of its work.

With a collaborative approach to planning, transformation and service delivery, Covid-19 has underlined the importance of local relationships and how the system has needed to come together. From November staff from across the ICP will be joining the new cohort of the Surrey 500 leadership programme, alongside alumni from the previous programme. Examples of recent achievements include:

- The Guildford East primary care network has been piloting video group consultations on dietary change for patients recently diagnosed with Type2 diabetes, led by Merrow Park Surgery.
- 'Whose shoes' event in February – planned and hosted by a Darzi fellow, hearing directly from patients to understand more about their experiences; the joint transformation team is now reviewing a number of pledges made at the event so their lived experience can be incorporated into the ICP's priorities.
- The ICP has done a lot of work supporting social prescribing – as part of the presentation Sue described the case study of 'Margaret', a 78 year old lady caring for her husband with Alzheimer's whose referral suggested she would benefit from some support while she went shopping; after several conversations with the link worker, to really understand more about her situation and concerns, Margaret benefited from two days' respite while her husband spent time in a local care

home which significantly improved her overall wellbeing and demonstrating the value this kind of non-clinical intervention can bring.

- Mobilising the *Reconnections* service to address social isolation and loneliness in the over 65s – service manager now in post and team appointed. The service is due to go live in November.

Nick Sands described how the single transformation team is working, helping to build trust between partners and reduce duplication of effort. Clinical teams are starting to work with colleagues in primary care and the CCG in the course of their work to deliver transformation together, which is helping to cement the feeling of shared purpose.

#### *Recovery and Restoration update*

Overall the system is making good progress with restoration planning, albeit with recognised areas of challenge. We have now completed our *Phase 3 submission* to NHS England/Improvement setting out how we plan to get services back up and running, and our activity projections. Full recovery will be partly dependent on any future impact from surges in Covid-19. Other recovery workstream updates included:

- *Interdependencies of health and care* – initially aimed at delivering support for care homes, this work is also exploring how we can develop new pathways of care that go beyond hospital discharge, working together across health and social care to target specific population cohorts which will also support decisions around continuing healthcare needs.
- *Surge planning* – looking specifically at winter capacity, including the flu vaccination programme, and how we plan effectively for surges in demand due to winter pressures and/or increases in Covid-19. This includes the development of a system-wide early-warning system, and incorporating learning from the initial wave of Covid-19. Critical to this workstream is how we can increase critical care capacity across Surrey Heartlands to meet any further Covid-19 surges.
- *Estates* – this workstream is looking at how we maximise the use and efficiency of our health and care estate across Surrey Heartlands; a baseline assessment has been completed, with a number of opportunities emerging. An integrated estates workplan is in development which will be presented at October's system board. As part of this wider work, we will also be considering the impact of housing growth and the 'greener futures' agenda.
- *NHS People Plan* - following publication of the NHS People Plan at the end of July, all health and care systems have been asked to develop their own local plan. The Surrey Heartlands plan was presented to the Board; it mirrors what's in the national plan, setting out our ambitions for our workforce along with an achievable action plan. Initial feedback from NHS England/Improvement has been positive and the Board endorsed the plan.

#### *Epsom and St Helier Hospitals – new five year strategy*

Daniel Elkeles, Chief Executive at Epsom and St Helier Hospitals introduced the Trust's new five year strategy, which is summarised in a short video you can watch [here](#).

**Our next System Board meeting is being held on Wednesday 21<sup>st</sup> October and will be held in public, details [here](#).**