

# System Board Update

## **System Board, Wednesday 17<sup>th</sup> February 2021**

**Sent on behalf of: Tim Oliver, Surrey Heartlands Chair**



Welcome to my regular update following our System Board meeting on 17<sup>th</sup> February. Along with these regular updates, this is part of our plan to provide more public transparency and make sure you are kept up to date with our discussions. Our System Board meetings are held in public once a quarter; the next public meeting will be on 21<sup>st</sup> April. Further information on future meetings and how to join is published [here](#).

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### *White Paper on NHS Reform*

The meeting began with a brief reflection on the recent publication of the Government's [White Paper](#) on NHS reform (11<sup>th</sup> February 2021), setting out legislative proposals for a Health and Care Bill later this year (likely to be passed into law prior to the summer parliamentary recess). The White Paper sets out proposals for a statutory NHS/ICS Board (including the local authority) – putting the ICS onto a statutory footing for the first time - with a separate health and care partnership board, which may or may not be a form of our current Health and Wellbeing Board. A good summary of the proposals can be found [here](#).

As an ICS, we are setting up a working group to ensure we are ready for implementation (April 2022) once the Bill has been passed. As a system we are well prepared for these proposed changes which provide a real opportunity to continue our excellent partnership working already in place, including our work with the voluntary, community and faith sector. All in all the Paper is focused on improving outcomes for residents and patients, with a big focus on patient safety, integration – including further devolution of functions such as dental services and immunisations from NHS England to local systems – and the tackling of health inequalities (described in the Paper as *unequal outcomes and access*).

### *Covid-19 data*

A reminder that a high level daily update on Covid data for Surrey is published [here](#). A more comprehensive bi-weekly coronavirus summary is also available [here](#).



### *Covid-19 vaccination programme*

Vaccination Programme Director, Jane Chalmers, gave a brief update on how the vaccination programme is developing; at the time of writing the programme had successfully passed the 250,000 vaccinations mark and achieved the Government's target of offering the vaccine to everyone in the first four priority groups (by 15<sup>th</sup> February). Vaccination data is published [here](#), with more information available on the Surrey Heartlands CCG website [here](#).

### *System finance update*

Highlights from the recent Strategic Finance Board were reported where partners discussed risks and challenges (including Covid-19 expenditure) and the latest system position. Further work is being undertaken on our forecast outturn which will be reported shortly to the NHS England regional team. Month 9 reporting is on plan, with a number of risks and mitigations identified for month 10. We have now started our high level planning cycle for 2021/22 and recently participated in a national webinar which included reflection on future pressures that are now starting to materialise. Matthew Knight has been appointed as our new ICS Chief Finance Officer and will join in April 2021.



### *Update on Mental Health Partnership Board*

An update following the first meeting of the Mental Health Partnership board on 5<sup>th</sup> February was given by newly appointed Independent Chair, Alan Downey. [Alan was until recently the Chair at South Tees Hospitals NHS Foundation Trust.] The new partnership board was set up to drive system-wide improvements and developments in mental health across Surrey Heartlands with a strong focus on prevention and community resilience, working closely with schools, families and the workplace, and strong engagement with service users, their families and carers. The Board comprises representatives from a wide range of organisations with a shared commitment to making system-wide improvements. Next steps will be a diagnostic review, findings and recommendations to inform a robust improvement programme and subsequent delivery phase. Further updates will be provided to System Board as the work progresses.

### *Children & Young People's Emotional Wellbeing & Mental Health Services (EWMH) contract update*

Trudy Mills, ICS Director for Women and Children's services, gave an update on the current status of the new children & young people's EWMH contract for Surrey. Following an open procurement process which started last year, the contract was awarded to Alliance Partners who were the sole bidder. Currently in its mobilisation phase, the new contract – which aims to make a significant difference in outcomes for children and families - is expected to go live on 1<sup>st</sup> April. It includes additional investment of £6 million in recognition of early intervention, and is part of a wider strategy around health and wellbeing including mental health. The new contract is for 7 years with an option to extend by a further 3, providing continuity and increased opportunities for wider transformation. The programme is currently recruiting to increase capacity in early intervention, with some new pathways already being brought forward, and will be supported by a new communications and engagement strategy across schools, families and other partner agencies to promote the step-change in outcomes the new contract is expected to bring.

### *Recovery Update*

Helen Coe, ICS Recovery Director gave a brief update to the Board. Given the current second wave of the pandemic and pressure on all operational services, the Recovery Board has been reviewing its priorities and taking time to review the future direction and prioritisation of our recovery work including how we ensure our plans are both ambitious in terms of transformation but also realistic.

Professor Helen Rostill, ICS Director for Mental Health, reinforced the importance of ensuring staff are fully supported; the exhaustion, stress and emotional toll has been significant and we need to ensure we provide a compassionate environment with enough time built in for recovery. This includes meeting people's basic needs – places to rest, rehydrate and so on – the provision of specialist psychological support for those that need it as well as developing creative solutions such as rest 'igloos'. As we have redeployed staff to manage operational pressures, we have also displaced teams which also impacts on people's resilience so providing space for teams to rebuild, talk and decompress, is also important. Funding for our Resilience Hub, which provides mental wellbeing support to staff has also been extended.



### *Cancer and end of life strategy*

Vicky Stobbart, Director of Integrated Partnerships at Guildford & Waverley ICP, presented a draft Palliative and End of Life Care Strategy for Surrey Heartlands.

Across Surrey, up to 10,000 deaths occur each year; every person counts and should expect care at the end of their life that is coordinated, caring and compassionate. If we don't get that right, the experience could have a profound effect on those who

are bereaved and their future trust of the health and care system. The new strategy articulates the collective ambition for local partners to plan, design and deliver services that take into account the importance of personalised care and that after death, families are supported and not forgotten. The strategy was informed by strong engagement, with staff and families, including 25 interviews with people at the end of their lives and their families. System Board supported the new strategy which will now go to the Health & Wellbeing Board on 4<sup>th</sup> March for final endorsement after which it will be formally launched and published.

### *Updates from our Integrated Care Partnerships – focus on North West Surrey ICP*

Jack Wagstaff, ICP Director for North West Surrey gave a detailed update as part of our rotation round the four local systems. In North West Surrey partners have now signed their Alliance agreement making them one of the largest Alliances in the country, and are being invited to advise at national level on this.

Local response to the Covid-19 second wave has been phenomenal and has included a number of highlights; joint teams supporting hospital discharge; technical innovations; the quadrupling of intensive care capacity; shifting large numbers of hospital outpatient activity to digital and virtual consultations; providing an additional 30,000 primary care contacts in just a few months; mobilising a local Covid-at-home service using technology for remote monitoring; hugely successful vaccination programme, one of the biggest programmes ever delivered locally and a real partnership effort.

In terms of recovery, Jack reflected on the need to provide staff with an effective buffer to sustain their wellbeing – a top priority – and then working to restore critical services at the same time as embedding innovation. A number of persistent challenges remain including surges in demand locally, and the continued disruption to routine services which need to be restored.

*CRESH (Crawley, East Surrey & Horsham) system* – highlights include the vaccination programme which has really accelerated local partnership working, including a roving bus to reach more deprived areas; further work to progress LEDER reviews and share learning points to tackled unequal outcomes; and the progression of the Covid-at-home monitoring service.

*Guildford & Waverley ICP* – highlights include the local vaccination service, including reaching local care homes during the recent snowy weather; progression of the ICP's Alliance contract, expected to be signed in March once it's gone through individual organisations' governance arrangements; progression of the local prospectus and how to address health inequalities across the local area.

*Surrey Downs ICP* – highlights include the phenomenal response to the recent fire at Emberbrook Health Centre (local vaccination service); building work which has started on moving the New Epsom & Ewell hospital (NEECH) to Epsom hospital; progression of local governance arrangements for the ICP; and consideration of how to use the independent sector as part of local recovery efforts.

**Our next System Board is being held on Wednesday 17<sup>th</sup> March; the next public meeting will be held on Wednesday 21<sup>st</sup> April.**