

System Board Update

System Board, Wednesday 27th January 2021

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



Welcome to my regular update following our latest System Board meeting on 27th January, our first meeting of the year. This was our second meeting in public and I was pleased to see a good number of people from across the system listening in. 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. Further information on future meetings is published

[here](#).

General update

Dr Claire Fuller, Surrey Heartlands Integrated Care System Senior Responsible Officer, gave a brief overview of the current context relating to the ongoing pandemic. A recent letter to NHS and system Chief Executives/leaders from Amanda Pritchard, Chief Executive of NHS Improvement, sets out operational priorities for this winter and 2021/22 in light of the current second wave and more transmissible variant. These focus on responding to Covid-19 demand; pulling out all the stops to implement the vaccination programme; maximising capacity as far as possible to treat non-Covid patients (including extension of the national agreement with the independent sector until the end of March); responding to other emergency demand and managing winter pressures; and supporting the health and wellbeing of our workforce.

At the same time, recognising that severe pressures on the local health and care system has meant that we have had to prioritise care for those who are most unwell, with some routine and non-urgent services postponed or paused. (More information on how we are prioritising care can be found [here](#).) The system has worked collaboratively to offer mutual aid where appropriate, and continues to recognise the huge pressure faced by frontline staff.

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](#).

System finance update

Highlights from the recent Strategic Finance Board were reported where partners discussed system risks and challenges, the upcoming planning cycle and the latest system position. Planning for the next financial year is underway, with guidance expected later this month, whilst recognising that the planning cycle will continue into the first quarter of 2021/22. Further work is underway looking at delegated budgets (from April in part) for our local place-based systems, with further work to do.



Update from Healthwatch Surrey

Kate Scribbins, Chief Executive at Healthwatch Surrey gave an update on their continued work during the pandemic. Over the last nine months, Healthwatch Surrey has focused on continuing to

provide information, signposting and advice to members of the public, promoting NHS and public health messaging, listening to people's concerns and helping partners reach out to local communities.

This has included supporting c. 160 individuals through the independent NHS advocacy service particularly while complaints services were paused (during the first wave). There has been a dramatic drop in new referrals to the advocacy service recently, partly because many people feel reluctant to complain in the current situation. Healthwatch volunteers have continued to reach out to local people, giving over 1000 hours of their time and have established a 'young Healthwatch', giving a stronger voice to younger people.

Kate shared a summary of key themes they are hearing from members of the public. This includes lots of feedback about the vaccination programme, both gratitude and praise from those who've been vaccinated, but equally that some people feel confused, anxious and are struggling with the booking process. [Surrey Heartlands has published a set of FAQs on the service which can be found [here](#). Members of the public can also contact a dedicated enquiry service by emailing: syheartlandscg.vaccination@nhs.net]. Other themes include long waits for some children's services; positives and negatives relating to primary care access and digitalisation; praise for changes in visiting arrangements for those at the end of their life in hospitals and care homes; and work with Action for Carers to understand people's reactions to more rapid discharges from hospital.

Kate concluded by describing how we should use the opportunity, as we eventually move from the pandemic into recovery, to develop real co-design based around people's holistic experience rather than specific service lines, and how feedback from the public will be essential to our overall recovery programme.

Strategy update and potential legislative change

Dr Claire Fuller gave a brief update on our strategy refresh which includes creating a single commissioning team across Surrey (for children's services, learning disabilities and autism, mental health, continuing healthcare and carers); the development of schemes of delegation for our place-based systems; continued development of our thriving community networks (centred around our primary care networks and populations of around 50,000); continued development of digital technology; and closer working between our acute hospitals, particularly around diagnostic networks.

In November NHS England/Improvement published a consultation paper outlining initial thoughts on where the NHS is heading including proposals for potential legislative change. This signals a likely direction for how ICSs could be embedded in legislation or guidance to provide a single, system-wide strategic commissioning function from April 2022. There are two proposed models:

1. A statutory ICS Board/Joint Committee with an Accountable Officer to which all system partners would be mandated as members; CCGs would remain, with new powers allowing the CCG to delegate many of its population health functions to providers.
2. A full statutory ICS body which would effectively replace CCGs, taking on commissioning functions, with a board consisting of representatives from system partners.

Surrey Heartlands has responded to the consultation incorporating views from system partners, indicating broad support for the second option – the creation of a full statutory ICS body. Individual partners also submitted their own responses. The board reflected on the importance of clinical leadership and ensuring strong representation of the voices of patients and citizens in any future structural change.

Good Governance Review

As part of our ongoing development as an ICS, last September we commissioned an independent review of our system's governance to reflect on current arrangements and to explore how we may want to develop as we continue to mature as an ICS, reflecting any future legislative change. Professor Andrew Corbett-Nolan from the Good Governance Institute gave the Board a brief overview of the findings from the review which included; a positive culture of working together between system partners, albeit with areas of disagreement; that collaboration and cooperation has been at its best during the last 12-15 months, particularly during the pandemic; and a clear desire that this stage of development should act as a single stepping-stone to any future organisational forms/governance, established through any new legislation.



Establishment of Mental Health Partnership Board

Following the Board's last meeting on 16th December, it was agreed to set up an independently chaired Mental Health Partnership Board to drive a range of urgent improvements including system-wide transformation of mental health outcomes, experiences and services; identifying best practice for early intervention to prevent mental ill-health; and to hold organisations to account for poor outcomes/ experiences.

Terms of Reference for the new Board have been agreed including membership and structure, and an independent chair is currently being sourced. The Board will report directly to the Health and Wellbeing Board and will also provide regular updates to this Board once it is firmly established, with the first meeting taking place on 5th February.

Update from Recovery Board

Given the current second wave of the pandemic and pressure on all operational services, the Recovery Board has been reviewing priorities, stepping back meetings to allow people to focus on frontline services whilst recognising some of the recovery priorities set out in the letter from Amanda Pritchard, referenced above. The Board recognised the huge toll this pandemic is having on staff, with work going on behind the scenes to consider how best to support our workforce moving forward.



Covid-19 Vaccination Programme update

Jane Chalmers, our Vaccination Programme Director, gave an update on the programme so far, describing the positive progress made in vaccinating the first four priority cohorts (over

80s and care homes; frontline health and social care staff; the over 70s; and the clinically extremely vulnerable). The expectation from the Government is for these first four cohorts to have been vaccinated by the middle of February, around 230,000 people in Surrey Heartlands. As the programme is progressing at speed, more up to date information can be found on our website [here](#).

Updates from our Integrated Care Partnerships and the CRESH system

All four systems reflected on positive progress with their vaccination programmes, whilst recognising local operational pressures and the collaborative work that is going on across the system. This includes a lot of work taking place within community services, supporting hospital discharges and providing a range of local services such as virtual wards, pulse oximetry services, and Covid-19 rehabilitation to support the huge pressure being felt within our acute hospitals and primary care.

Our next System Board meeting is being held on Wednesday 17th February.