

## CHIEF EXECUTIVE REPORT

October 2020

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<b>Sponsor</b>													
<b>Is your report for Approval / Consideration / Noting</b>													
For noting and discussion													
<b>Links to the STP (please tick)</b>													
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<b>Are there any resource implications (including Financial, Staffing etc)?</b>													
N/A													
<b>Summary of key issues</b>													
This monthly paper from the System Lead of the South Yorkshire and Bassetlaw Integrated Care System (SYB ICS) provides a summary update on the work of the SYB ICS for the month of September 2020.													
<b>Recommendations</b>													
The SYB ICS Health Executive Group (HEG) partners are asked to note the update and Chief Executives and Accountable Officers are asked to share the paper with their individual Boards, Governing Bodies and Committees.													

# **South Yorkshire and Bassetlaw Integrated Care System CEO Report**

## **CHIEF EXECUTIVE REPORT**

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### **1. Purpose**

This paper from the South Yorkshire and Bassetlaw Integrated Care System System Lead provides an update on the work of the South Yorkshire and Bassetlaw Integrated Care System for the month of September 2020.

### **2. Summary update for activity during September 2020**

#### **2.1 Coronavirus (Covid-19): The South Yorkshire and Bassetlaw position**

While the number of positive cases of Covid-19 are slowly increasing in all places across South Yorkshire and Bassetlaw (SYB), the cases continue to be predominantly in 15 to 34-year-olds. Admissions to hospitals are also rising slightly but they remain low overall and the death rates (as of late September) are normal for this time of year.

Some parts of our region have seen a rising trend above the SYB average and has meant that Sheffield has been added to the most recent Government Watch List under 'Areas of enhanced support and concern'. Rotherham also has higher case numbers.

Based on all the insight and data, public health experts continue to say that we are not yet in a second wave but as the infection rates move into adults from the younger generations we are expecting the numbers to climb. These are likely to peak in November and stretch through to March. If people pay heed to the changes asked of them by the Government we are hopeful that the peak will be lower than in the first wave.

A robust regional Wave 2 plan that takes account of various scenarios of increasing numbers of Covid-19 patients who would need hospital care and treatment was submitted at the end of September. Thanks to Chief Operating Officers and Directors of Commissioning across the partnership who supported the planning within a tight timescale.. The plans are based on a continuation of non-Covid-19 services and patients continuing to attend outpatient clinics and planned surgery.

The Government has published its new Personal Protective Equipment (PPE) Strategy which sets out clear targets related to reliable procurement of key items of PPE in the event of a second wave. In SYB stock levels are excellent and learning from wave one means we have well established supplies routes and ways of working that enable fair and speedy distribution across our health and care settings.

#### **2.2 National Update on Wave 2 Planning**

Following the submission of Wave 2 Plans, the regional ICS Leads in the North met with Simon Stevens and his Executive Team to discuss them.

The SYB Wave 2 Plan is built on the Phase 3 Recovery Plan and therefore starts from a robust position thanks to the extensive testing that has been done. The combination of SYB's September delivery figures being on track and in line with our plans and the track record of working together in a networked approach in SYB gave added confidence in the SYB approach. The feedback from Keith Willets, Director for Acute Care at NHSE, was that the SYB plan was impressive and the NHSE team was assured.

Simon asked ICSs to pay particular attention in the coming months to:

- The importance of using the independent sector and having a plan for using the Nightingale Hospitals
- Thinking about how to use pillar one testing to reduce staff absences
- Protecting care homes
- The importance of talking and good communications with patients about what services are available
- The importance of pregnant women being accompanied by their partners for ante-natal care and birth

### **2.3 Regional Update**

NHS North East and Yorkshire (NEY) has published its Covid-19 Interim Review. It is an evaluation of the regional NHS incident response to Covid-19 has been published. Informed by insights from SYB's health and care leaders, the Interim Review takes a functional look at the initial health response in Phase 1 of Covid-19, before setting out lessons learned and areas for further consideration as part of the restoration period (Phases 2 and 3) and for any subsequent Covid-19 resurgence.

The Review highlighted a number of thematic areas that health and care leaders attributed as good practice:

- Business Continuity - robust business impact analysis documentation allowed organisations to stand down services in a staggered and structured way in order to respond to the needs of Covid-19.
- Command, Control and Coordination – health organisations in the NEY region report positive experiences of Command and Control, both within their own organisation and with partners. Colleagues felt there was a “clear sense of purpose and shared objective across all organisations, cells and workstreams” from the outset of the response.
- The role of the Integrated Care System (ICS) in incident response - most organisations involved in the Review fed back positively around the pivotal role played by the ICS in supporting system leadership, with the ICS seen as the forum where the priorities of its member organisations were considered, valued and addressed as part of the incident response.
- Partnership Working and Coordination – Integrated Care Systems and Integrated Care Partnerships (ICP) - relationships within the NEY region were enhanced by collaborative working between colleagues in performance, improvement, system transformation and across the localities and SHCGs.
- The Review acknowledges the importance of collaboration, staff working ‘above and beyond’ and a collective joined-up mentality to get things done by taking a pragmatic, diligent approach.

The review outlined that there is more work to be done in supporting staff wellbeing – allowing frontline colleagues the opportunity to recharge their batteries – and the resultant stress and pressures placed on staff. It also covers the provision of Personal Protective Equipment (PPE), communication between national to regional cascade (and vice versa), clinical guidelines and the use of established networks such as Single Point of Contacts (SPOCs) and data reporting for the Sitreps.

### **2.4 Equality, Diversity and Inclusion (EDI) framework**

Work to support equality, diversity and inclusion across SYB is moving forward and key actions agreed include:

- Plans underway for the establishment of an SYB BAME Network
- The development of leadership programmes for BAME staff
- The wider roll-out in SYB of the 'Stepping-up' development programme for BAME nurses
- Establishing a BAME Steering Group

## **2.5 Winter communications**

Winter communications plans across the partnership will be seeking to ensure that the public continues to have confidence in using NHS services, encouraging them to attend appointments, take up the flu vaccination and to seek advice and help where they have concerns.

Partners will be backing a series of national campaigns that focus on cancer awareness and encourage people to act on their concerns and to seek support. A further campaign to encourage pregnant women to continue to access services during their pregnancy is also planned.

In addition to using wide ranging channels of communications, approaches will target communities where mainstream advertising and social media channels don't reach. In particular, there will be a focus on areas where the data shows there is extra work to do – such as BAME communities, traveller communities, asylum seekers and groups of men from skilled working, working class and non-working groups.

## **2.6 Flu vaccination programme**

There is an ICS focused approach to flu immunization this year and the South Yorkshire and Bassetlaw Flu Board is progressing well. Place based engagement and leadership is key to delivering almost double the vaccinations of last year's programme. Each SYB Place has developed a Flu Plan which have been submitted and discussed at local Accident and Emergency Boards.

Stress testing of the collective ICS plan was facilitated by the Ministry of Defence in September which built on the Covid-19 plan stress test experience. The process helped to identify any gaps and risks and put mitigation in place.

There are currently no known vaccine supply issues, although vaccine delivery is staggered across the season for some manufacturers

## **2.7 Covid-19 vaccination programme**

A new report 'Priority groups for coronavirus (COVID-19) vaccination: advice from the Joint Committee on Vaccination and Immunisation (JCVI), 25 September 2020' has been published and sets out that staff and care homes in SYB are the most likely to receive the Covid-19 vaccine first once it is available.

The infrastructure for the national Covid-19 vaccination programme is being developed and likely to include one regional vaccine hub in SYB for storage and distribution and which will be integral to implementation. Plans will also include three levels of vaccination sites – fixed mass (big venues near major transport routes such as motorways), semi-fixed (reminiscent of mobile CT scanner sites) and mobile units. Early discussions suggest that SYB could have two fixed mass, 16 semi-fixed and 130 mobile sites across the patch.

## **2.8 Diabetes Pilot Scheme**

In early September it was announced that South Yorkshire and Bassetlaw had received £50k towards funding implementation of a promising new diabetes scheme across the region. The NHS Low Calorie Diet Programme is an important new development involving ten localities across the UK. In SYB we are aiming to recruit 500 suitable patients to take part within a two year window, which will contribute towards the 5,000 national target.

The NHS, and its partners Public Health England and Diabetes UK, are working together to tackle a rise in Type 2 diabetes cases, which is estimated to cost the NHS £10 billion a year. One in every 20 prescriptions by GPs relates to diabetes treatment and this scheme aims to address this using a preventative, drug-free approach.

Patients enlisted onto the Programme will have a strict 900 calories a day diet for up to 12 weeks, replacing normal meals with soups, shakes and supplements. It is thought the majority of take-up will be amongst overweight patients, where the risk of complications and serious illness (including death) from Covid-19 is greater.

Research earlier this year revealed people with Type 2 diabetes are two times more at risk of dying from Covid-19.

## **2.9 Barnsley CCG Accountable Officer**

Barnsley Clinical Commissioning Group announced the appointment Chris Edwards as their new Accountable Officer. Chris will continue in his existing role as Accountable Officer at Rotherham Clinical Commissioning Group and lead both CCGs.

## **2.10 Shadow Board Development - Health Executive Group**

At the June 2019 Health Executive Group meeting it was agreed to support the first SYB ICS Shadow Board development programme. The Shadow Board forms part of an approach to talent management and supporting our next generation of leaders. During September 2020 they came together to celebrate their learning and share their experiences. It was great to hear from the participants how they felt that the programme had stretched and developed them and their offer of continuing to support system working. Congratulations to all participants on completing the programme.

## **3. Finance update**

The system funding envelopes were published on 15 September. The ICS has submitted its draft plan on 5 October in line with the national timetable which shows an adjusted system shortfall of £58.7m against the funding envelope of £1.9b. Further discussion is taking place with regional and national teams and within the system on how this deficit in the draft financial plan is to be managed. The national timetable allows for a final plan to be submitted by 22 October.

**Andrew Cash**  
**System Lead, South Yorkshire and Bassetlaw Integrated Care System**

**Date: 6 October 2020**