



HCP Director Report

Sheffield Health and Care Partnership (HCP)

April 2022

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i. Purpose	
<ul style="list-style-type: none"> To provide headlines about strategic developments relevant to the partnership and the HCP programme of work, To provide an overview of other key HCP programme activities and updates 	
ii. Is your report for Approval / Consideration / Noting	
For noting / action	
iii. Recommendations / Action Required by Accountable Care Partnership	
<p>Key actions required:</p> <p style="padding-left: 40px;">Note the report</p>	
Are there any Resource Implications (including Financial, Staffing etc.)?	
N/A	

Contents:

Strategic Update	3
HCP Focus areas	3
Integration	3
Ageing Well Programme	3
Palliative End of Life Care (PEOLC)	4
Estates	4
Mental Health	4
Pharmacy	5
Planned Care	5
Inequalities	6
Racial Equity Inclusion Group and Subgroups	6
Linkages to the Public Health Team	6
Embedding the VCS within our partnership	7
People	7
Health and Care Public Forum (Sheffield)	7
Person-Centred Approaches	7
Staff Wellbeing	7
Recruitment and Retention	7
Learning and Development	8
HCP Core Team	8

Strategic Update

Operational pressures are still being felt across the health and care system. City Silver are continuing to meet on a regular basis and coordinate system efforts to manage risks. A proposal for a strategic Urgent and Emergency Care / 'System Flow' group is currently under review by the HCP partners to manage the strategic development of flow and urgent and emergency care provision in the longer term.

City Silver pulled together a Sheffield place response to the Urgent and Emergency Care questions set recently by South Yorkshire Integrated Care System in March:

- In primary care, how can we support each practice and PCN to enhance urgent access and long-term condition management? Can we improve the % of appointments within 24 hours and 1 day?
- For ambulance and acute hospitals, how can we eliminate >60-minute ambulance handover times?
- What would it take to discharge 40% of the patients who are ready to go home by 5pm each day? And to reduce the numbers of patients with long length of stay (over 21 days) to no more than 12% of our hospital capacity?
- How do we strengthen our crisis response in mental health services to reduce inappropriate out of area placements to zero?

The development of the Sheffield Place Delivery Plan is underway. The HCP core team are working with the joint commissioning team and providers in the city to develop a single plan focussing on the areas where partnership working in the city will take us towards our 10-year vision for Health and Care Commissioning and Provision.

HCP Focus areas

This section is summarised and not exhaustive. Further details about any of these points available on request; or if there is something that you want to see included in the next version of this, please get in touch.

Integration

Ageing Well Programme

This programme of work continues to make good progress. Key points to note from the three workstreams are below:

- In the **Urgent Care Community Response (UCR)** workstream, the team continue to meet the two-hour standard response time, with ongoing development work including linking into Yorkshire Ambulance Service (YAS)/111 to receive referrals and developing a screening tool to be used within the Single Point of Access to aid triage. Alongside all this work has been an extension of the GP visiting pilot for a further 3 months.

- In the **Enhanced Care in Care Homes (ECiCH)** workstream the results of a survey of stakeholders (including community teams, primary care, care home staff) asking which of the framework elements are a priority are informing the workstreams focus going forward. The RESTORE 2 tool (to support the managing deteriorating patient) pilot has been extended for a further 6 months in order to review the data and assimilate the findings. The Ageing Well Programme is also connecting with the Voice Programme run through St Luke’s ECHO and will consider opportunities for ECHO as a vehicle for training when finalising the training and education plan for the programme.
- Under the banner of the **Anticipatory Care** workstream the Ageing Well team are linking into the development of the **Team Around the Person (TAP)** model across the city, and the Citywide falls and dementia group which will transition to become the ‘**Sheffield Falls Collaborative**’ aiming to create the ‘Team Sheffield Falls Plan’.

Palliative End of Life Care (PEoLC)

This programme of work continues to make great progress and there is work underway to explore ways to bring together the different strands of work, potentially under a clearer governance arrangement. Key pieces of work to note are outlined below:

- **Tackling Inequalities in End-of-Life Care Practice Learning Initiative to take place on the 11th of May.** The target audience for this event is GPs and Practice Nurses. Speakers are drawn from Primary Care, St Luke’s Hospice, CRUSE & Sheffield Teaching Hospitals. Topics covered will be: Compassionate City, proactive advanced care planning in primary care, complexity in palliative care, bereavement skills for primary care teams, culturally competent palliative care.
- **New unified IT PEoLC template launched for Primary and Community Care (STH Integrated Care Team)** across Sheffield.
- **Bereavement strategy (COMF funding) moving to service specification and contracting.**
- **Progress with Compassionate Sheffield including development of a multicultural, multilingual patient information resource** (in partnership with Foundry PCN).
- **Growing Clinical Leadership** (including from Sheffield into South Yorkshire ICS (Sam Kyeremateng and Sarah Mitchell) **and Regional Strategic Clinical Network for PEoLC / national NHSE&I PEoLC team** (Sarah Mitchell).
- **Research** - building collaborations with the University of Sheffield Palliative Care Research Group.

Estates

Sheffield has secured **£37m to transform general practice across the city.** The funding is being used **to build new health centres, bringing together GP services, other health services, and some voluntary services under one roof.** Council services may also have a presence in some buildings. The health centres are planned for the three Primary Care Network (PCN) areas in Sheffield:

1. City Centre

2. SAPA
3. Foundry

Public involvement has started with patients who live in the proposed health centre areas to have their say on the suggested locations, accessibility, and services through an online survey [here](#). Local community partners: SOAR Community, Firvale Community Hub and Shipshape are also involved in the engagement, they will be speaking to people in their communities face to face and gaining their feedback to reach those people where English is not their first language or are digitally excluded.

Mental Health

- The CQC conducted a system-wide Assessment and Admission MHA Review of CAMHS (<18 year olds) week commencing 25th April. The outcomes of that review will be shared with the HCP EDG and Board in May.
- A broad programme of work continues in the city to improve mental health care. A work plan to deliver against the coming years commissioning intentions is under development. Key points to note since the last report:
 - The procurement of a provider for the **mental health crisis safe space pilot for 16–17-year-olds** has now completed. The **service will run for 6 months from the end of May 2022.**
 - The **tender process involving HCP partners for the Crisis café provision for people over the age of 16 closes on 3rd May 2022.** It is anticipated that the service will be available from the start of July. The café will be centrally located, and we envisage it being open from 18:00-00:00, up to 7 evening a week. NHS Sheffield CCG will be contacting partners to nominate representatives to be part of the implementation group for the café however if partners would like to nominate potential members, please contact james.sutherland4@nhs.net directly.
 - The consultation for the [NHS Mental health and wellbeing plan: discussion paper](#) is now open until July. Partners are asked to respond the consultation or, if preferred, contact james.sutherland4@nhs.net to contribute to a Sheffield place response.

Pharmacy

- **Medicines Optimisation** - Recruitment has started for a fixed-term Joint Pharmacist to work with the housebound and vulnerable.

Planned Care

This programme of work continues to make good progress, some key points of update are below:

- **Enhanced Triage / Advice & Guidance (A&G)** – The national 22/23 Planning Guidance states that providers need to deliver 16 specialist advice requests, including A&G, per 100 out-patient first attendances by March 2023. This will be measured through the number of onward secondary care referrals avoided through specialist advice based on data from the new system Elective Recovery

Outpatient Collection (EROG). An operational group has been established to oversee several trials of different ways of delivering the service before a decision is taken about which one method Sheffield should adopt. The diagnostic and enhanced triage components (which will take longer) will be developed once the A&G pathways have been established & we are seen to be making tangible progress towards the national target. The clinical group have developed a standardised clinical protocol template to trial within one high demand pathway in each of the three first phase specialties.

- **Community Diagnostic Centres (CDC):** The development of the CDC bid for regional funding is currently underway to support the development of a suitable CDC model in Sheffield.

In addition to this, a comprehensive piece of work to look at the development of the community phlebotomy offer for Sheffield has been undertaken. Patient and clinical survey responses have been reviewed, analysed and themed providing valuable insights into the current state of phlebotomy services, gaps and potential ideas for improvements. The patient survey has been translated into 6 additional languages and has had over 700 responses from diverse and often hard to reach groups. An additional survey aimed at children services was also developed created and responses analysed. All data has been themed to help identify and prioritise potential change ideas for the next phase of the programme that will look at developing specific delivery projects.

Inequalities

Racial Equity Inclusion Group and Subgroups

The **co-Chairs of our REIG Group attended the Executive Delivery Group (EDG) of the HCP and spoke to the members about the work of the group.** They covered the background to the formation of the REIG and its achievements to date, ambitions, aspirations for communities and workforce, and what an anti-racism partnership might look like. They also covered the principles of REIG within the HCP. The presentation was warmly received by the EDG, and the inherent challenges accepted. To further to the progress of the work, they invited the co-chairs to be voting members of the HCP EDG. The hope is that they will bring the voices of our minority ethnic citizens to the conversations at EDG. Both Shahida and Abiola are energised by this opportunity which will ensure representation at the highest level of health and care delivery across Sheffield.

The group continues to consider such issues as how we focus on partnership working, how we influence that Board and how we stay true to the principles whilst being flexible in the face of the changes that are on the way and continuing to speak truth to power.

Linkages to Public Health Team

Throughout the pandemic, our local public health team have been rightly focussed on responding to the pandemic. As their attention is able to move back to other areas of their work, the HCP are working with them to ensure their work with the work of the partnership are ever more closely aligned

Embedding the VCS within our partnership

- In June, the HCP Board approved proposals for further **developing the relationship between the VCS and the HCP.**
- Since June, a project group comprising of colleagues from across the HCP has committed to enabling a sustainable voluntary and community sector within the city. This month the group met to hear and discuss: the Council's draft ten-point plan to commissioning with the VCS, SYB ICS approach to commissioning with the VCS.
- This piece of work is well connected to several others and a paper was presented to the Health and Wellbeing Board in March on the progress to strengthen the strategic relationship with the voluntary sector. A regular progress update is to be given on this piece of work to the Health and Wellbeing Board going forward to showcase good practice.

People

Health and Care Public Forum (Sheffield) – Public Involvement Group

- The HCP's public advisory group, managed by Healthwatch Sheffield, the **Health and Care Public Forum (Sheffield)** meet monthly and have discussed the following topics over the last two months: creating a public version of the Director's Report; the Sheffield Outcomes Framework; Adult Social Care & Co-Production; Compassionate Sheffield. More information on the forum alongside summary notes of meeting discussions can be found [here](#).

Person-Centred Approaches

- 8 participants across the HCP attended a train the trainers (TtT) course in the 'What Matters to You' approach. The introductory course has been attended by over 200 people from across all HCP partners as part of our contracted **person-centred training programme** with Peak Health Coaching. The quarterly TtT peer learning session took place this month to introduce the new TtT to existing group and share practice on delivering the course to colleagues across Sheffield's health and care system. More information on the training courses and evaluation from participants can be found [here](#).

Staff Wellbeing

- We are continuing to connect key individuals beyond our statutory partners with the SYB ICS Health and Wellbeing team to ensure they're fully aware of the support available through the **SYB ICS Health and Wellbeing Hub.**
- **Resources to use and training to attend** on Staff Wellbeing are continually being updated as part of our Learning and Development pages on our [website](#).

Recruitment and Retention

- The **Sheffield Kickstart programme** is drawing to a close in Sheffield with seven Kickstarters (young people otherwise at risk of unemployment, not working in health and social care) across Sheffield (one having already secured permanent employment).
- **Sheffield HCP Recruitment Group** have formed to work together on a range of projects across the city. The group have identified a priority for working on recruiting entry-level care support roles and pharmacists. They will also look at such issues as: Truly working as

‘place’; winter recruitment; developing a Sheffield Health and Care recruitment pack; Kickstarters; economies of scale; funding streams; Council schemes; shared understanding of pathways into careers.

Learning and Development

- **Learning and Development resources and training opportunities** for all the health and care workforce continue to be updated. Current themes include: person-centred approaches, project management, staff wellbeing and system leadership. (The pages can be viewed [here](#))

HCP Core Team

In team news:

The current **Chair of the HCP, Tony Peddar, is stepping down from the role later this year.** The process to recruit a new independent Chair has begun with a closing date of Thursday 28th April. Details of the role can be found [here](#). The whole partnership wishes to express our thanks to Tony for all his valuable input to the work of the partnership during his tenure and wish him all the best for the future.

Mark Tuckett (HCP Director) has moved on to a new role. Mark has taken up the post of Director of Strategy and Planning at Sheffield Teaching Hospitals. Kathryn Robertshaw (Deputy Director of the HCP) will be covering Marks role until recruitment to the post is completed. Mark has done amazing work to drive forward the work of the partnership over the last 2 years and will hopefully remain closely linked to the work of the HCP in his new role.

If you would like more information on any of the work outlined, please contact the HCP team on sheffieldccg.hcp.sheffield@nhs.net

Visit our website to stay up to date with developments across our partnership:
(www.sheffieldhcp.org.uk)