



Chief Executive Report

Health Executive Group

12th October 2021

Author(s)	Lesley Smith		
Sponsor			
Is your report for Approval / Consideration / Noting			
For noting and discussion			
Links to the ICS Five Year Plan (please tick)			
Developing a population health system <input checked="" type="checkbox"/> Understanding health in SYB including prevention, health inequalities and population health management <input checked="" type="checkbox"/> Getting the best start in life <input checked="" type="checkbox"/> Better care for major health conditions <input checked="" type="checkbox"/> Reshaping and rethinking how we flex resources		Strengthening our foundations <input checked="" type="checkbox"/> Working with patients and the public <input checked="" type="checkbox"/> Empowering our workforce <input checked="" type="checkbox"/> Digitally enabling our system <input checked="" type="checkbox"/> Innovation and improvement	
Building a sustainable health and care system <input checked="" type="checkbox"/> Delivering a new service model <input checked="" type="checkbox"/> Transforming care <input checked="" type="checkbox"/> Making the best use of resources		Broadening and strengthening our partnerships to increase our opportunity <input checked="" type="checkbox"/> Partnership with the Sheffield City Region <input checked="" type="checkbox"/> Anchor institutions and wider contributions <input checked="" type="checkbox"/> Partnership with the voluntary sector <input checked="" type="checkbox"/> Commitment to work together	
Where has the paper already been discussed?			

Sub groups reporting to the HEG: <input type="checkbox"/> Quality Group <input type="checkbox"/> Strategic Workforce Group <input type="checkbox"/> Performance Group <input type="checkbox"/> Finance and Activity Group <input type="checkbox"/> Transformation and Delivery Group	System governance groups: <input type="checkbox"/> Joint Committee CCGs <input type="checkbox"/> Acute Federation <input type="checkbox"/> Mental Health Alliance <input type="checkbox"/> Place Partnership
Are there any resource implications (including Financial, Staffing etc)?	
N/A	
Summary of key issues	
<p>This monthly paper from the System Lead of the South Yorkshire and Bassetlaw Integrated Care System provides a summary update on the work of the South Yorkshire and Bassetlaw health and care partners for the month of September 2021.</p>	
Recommendations	
<p>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.</p>	

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SOUTH YORKSHIRE AND BASSETLAW
INTEGRATED CARE SYSTEM

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1. Purpose

This paper from the South Yorkshire and Bassetlaw (SYB) Integrated Care System (ICS) System Lead provides an update on the work of the South Yorkshire and Bassetlaw health and care partners for the month of September 2021.

2. Summary update for activity during August

2.1 Coronavirus (COVID-19): The South Yorkshire and Bassetlaw position

Covid case rates continue to remain high across SYB at between 400–600 (per 100,000 which is due to a range of factors, including the return of in-person teaching, regular and enhanced COVID-19 (Covid) testing and pre-pandemic levels of social mobility.

Regionally, SYB is now on a par with neighbouring West Yorkshire, but we are still seeing a comparatively higher number of cases than our counterparts in North Yorkshire/York and the North East.

The case rates among 12-15 year-olds remain the highest, followed by the under-12s and 16-17 year-olds. A consequence of the increased Covid rates within children and young people in SYB is starting to have a small effect on older populations, with some increases among 30-39 and 40-49 year-olds (parents/guardians/carers).

Our most vulnerable populations, particularly the over-70s, are also starting to show signs of very low-level increases in Covid-positive cases.

Work is now underway to offer Covid vaccine boosters across our communities in line with national guidance. There has also been encouraging results from new research which suggests that Covid jabs provide many months of high immunisation from Covid, as released by The Lancet showing '90% effective against hospitalisation for at least six months' (based on the Pfizer/BioNTech vaccine).

2.2 Regional update

2.2.1 Leaders meeting

The North East and Yorkshire (NEY) Regional ICS Leaders meet weekly with the NHS England and Improvement Regional Director. During September, discussions focused on the ongoing Covid response and vaccination programme, urgent and emergency care and winter resilience, planning and recovery and ICS development.

2.3 National update

2.3.1 COVID-19 (Covid) autumn and winter strategy

Over autumn and winter, the Government has set out its aims to sustain the progress made and prepare the country for future challenges, while ensuring the NHS does not come under unsustainable pressure.

The Government plans to achieve this by:

- Building our defences through pharmaceutical interventions: vaccines, antivirals and disease modifying therapeutics.
- Identifying and isolating positive cases to limit transmission: Test, Trace and Isolate.
- Supporting the NHS and social care: managing pressures and recovering services.
- Advising people on how to protect themselves and others: clear guidance and communications.
- Pursuing an international approach: helping to vaccinate the world and managing risks at the border.

There are a number of variables including: levels of vaccination; the extent to which immunity wanes over time; how quickly, and how widely social contact returns to pre-pandemic levels as schools return and offices reopen; and whether a new variant emerges which fundamentally changes the Government's assessment of the risks.

2.3.2 2021/22 priorities and operational planning guidance: October 2021 to March 2022

In March NHS England and Improvement published the 2021/22 priorities and operational guidance setting out the priorities for the year. Since then the NHS has risen to the challenge of restoring and transforming services while continuing to meet the needs of patients with COVID-19 and dealing with increases in urgent and emergency care (UEC), primary and community care and mental health demand.

The updated guidance, published on 30th September, reiterates the six areas set out in March, which remain the priorities:

1. Supporting the health and wellbeing of staff and taking action on recruitment and retention.
2. Delivering the NHS COVID vaccination programme and continuing to meet the needs of patients with COVID-19.
3. Building on what we have learned during the pandemic to transform the delivery of services, accelerate the restoration of elective and cancer care and manage the increasing demand on mental health services.
4. Expanding primary care capacity to improve access, local health outcomes and address health inequalities
5. Transforming community and urgent and emergency care to prevent inappropriate attendance at emergency departments (EDs), improve timely admission to hospital for ED patients and reduce length of stay.
6. Working collaboratively across systems to deliver on these priorities.

Efforts will also continue to focus on the five priority areas for tackling health inequalities and redoubling efforts to see sustained progress across the areas detailed in the NHS Long Term Plan, including early cancer diagnosis, hypertension detection, respiratory disease, annual health checks for people with severe mental illness, continuity of maternity carer, and improvements in the care of children and young people. To support this, NHSE/I will be improving the quality and presentation of health inequalities data and will shortly set out further details of the approach. There is also an ask for all NHS Board performance reports to include reporting by deprivation and ethnicity.

The government has agreed an overall financial settlement for the NHS for the second half of the year which provides an additional £5.4bn above the original mandate. This includes, £1.5bn

funding (£1bn revenue and £500m capital) to support the continued recovery of elective activity and of cancer services. This reflects the challenges over the next six months: managing Covid, the growing backlog of care, and the significant UEC pressures areas are experiencing ahead of the usual seasonal peaks over winter.

2.4 Integrated Care System update

2.4.1 System Development

NHS England NHS Improvement (NHS E/I) has published four new framework documents as part of ongoing integrated care development guidance:

- Thriving places: the development of place-based partnerships as part of statutory integrated care systems
- Working with people and communities
- Effective clinical and care professional leadership
- Partnerships with the voluntary, community and social enterprise sector

These plans build on the foundations already set out in previous guidance, notably the ICS Design Framework and the three publications relating to integrated care guidance (HR framework, provider collaboratives and ICS people function) already published.

The guidance documents provide further clarity on effective leadership, clinical accountability and public engagement at a time when we are likely to see further developments gather pace until April 2022 when ICS' become NHS statutory bodies.

2.5 Funding announced for Community Diagnostic Centres for South Yorkshire and Bassetlaw

£3million of capital funding has been confirmed to develop two new Community Diagnostic Centres in South Yorkshire and Bassetlaw.

Two initial sites have been identified for the first year of funding, The Glass Works in Barnsley and Montagu Hospital in Mexborough, with bidding plans underway for future funding to develop further centres across South Yorkshire.

The Glassworks site is set to include Ultrasound, X-ray, Breast Screening (Mammography), Phlebotomy, echocardiography and DEXA scanning, while the Montagu Hospital site will include CT and MRI services to complement the diagnostics already delivered at the site along with phlebotomy, point of care testing and physiological measurement.

The funding has been secured as part of a national programme to help the NHS further accelerate diagnostic activity and recover services from the impact of the COVID-19 pandemic as quickly as possible. It is a share of a £350m national pot to create 40 new Community Diagnostic Centres announced by the Government and NHS. The new one-stop-shops for checks, scans and tests will provide a combined 2.8 million scans in their first full year of operation.

2.6 Support for mental and physical health through Green Social Prescribing

Voluntary and community organisations in SYB have the opportunity to bid for £400,000 of grants funding from national and local funding to demonstrate how they can support the Green Social Prescribing programme through existing activities to:

- Provide green or blue activities, eg linked to canals and waterways, fishing groups or local reservoir walks
- Support people with mental ill health

- Improve access to green social prescribing for those most impacted by Covid-19; Black and Ethnic Minority Communities, young people, people who are “Clinically Extremely Vulnerable” (people who were asked to shield during the pandemic) and people living in areas of deprivation

The South Yorkshire Community Foundation is supporting the grants process on behalf of the South Yorkshire and Bassetlaw Integrated Care System

2.7 QUIT update

SYB's QUIT programme, funded by Yorkshire Cancer Research, has successfully recruited more than 200 'QUIT Champions' to help reduce smoking-related illnesses across the region.

Tobacco Treatment Advisers (TTAs) will provide the majority of specialist support and are being supported by the new QUIT Champions who help provide first-hand experience of having quit successfully - and how they did it.

QUIT is one of the first such stop-smoking programmes to launch across the UK, at scale, and has the potential to save up to 2,000 lives and 4,000 hospital readmissions every year. At its heart, QUIT recognises that smoking is an addiction – not a lifestyle choice - and should be treated like any other illness or chronic relapsing condition as part of routine hospital care.

2.8 NHS Communicate Awards 2021 Nominations for SYB

SYB was recognised in a number of categories in this year's NHS Communicate Awards 2021.

South Yorkshire and Bassetlaw Integrated Care System was shortlisted in the 'Use of insight and data for innovation in communications award' thanks to the community-based approach that was used in the development of the revamped ICS website. South West Yorkshire Partnership NHS Foundation Trust (SWYPFT) was also nominated in the same category in appreciation of an internal communications campaign to increase staff vaccinations - with a high proportion now fully vaccinated.

Rotherham Doncaster and South Humber NHS Foundation Trust (RDaSH) was also nominated for two award categories; Working in Partnership and also the Best Behaviour Change or Public Health Campaign Award categories in recognition of their 'Rethink your Drink' campaign, which in its second year, overcame the barriers faced by alcohol-services during the pandemic across Doncaster.

While not winners, both the ICS and RDaSH were highly commended for their work.

2.9 Partner appointments

Sheffield Health and Social Care NHS Foundation Trust (SHSC) has appointed Sharon Mays as the new Chair of their board. Sharon succeeds Mike Potts, who completed his fixed-term appointment as Interim Chair at the end of September, and will join SHSC in October.

SHSC have also recently seen their Care Quality Commission (CQC) inspection (August 2021) improve to 'requires improvement', improving from its previous 'inadequate' rating (July 2021).

I would like to welcome Sharon and extend thanks to Mike for all he has done while at SHSC and also congratulate CEO Jan Ditheridge, the Board of Directors, the Council of Governors and all the teams involved in driving forward these service improvements.

3. Finance

The revenue surplus at Month 5 is £25.3m which is an increase of £1.9m since Month 4. The forecast has also increased from a surplus of £20m at month 4 to £22.5m at Month 5. The adjusted forecast capital spend is now in line with plan as the forecast now reflects slippage which will offset the additional £12.4m forecast spend at Doncaster Royal Infirmary this year following the critical incident.

Planning guidance has now been issued and work will be undertaken to agree a distribution of the system envelope and agree plans for the second half of 2021/22.

Lesley Smith

Deputy System Lead, South Yorkshire and Bassetlaw Integrated Care System

Date: 7^h October 2021