

Suffolk Health & Wellbeing Board, 26 January 2017

A committee of Suffolk County Council

Information Bulletin

The Information Bulletin is a document that is made available to the public with the published agenda papers. It can include update information requested by the Committee as well as information that a service considers should be made known to the Committee.

This Information Bulletin covers the following items:

1. [Suffolk and North East Essex Sustainability and Transformation Plan \(STP\)](#)
2. [Norfolk and Waveney Sustainability and Transformation Plan \(N&W STP\)](#)
3. [Update from the Strong and Safe Communities Group](#)
4. [Data Sharing Issues](#)
5. [Pupils aged 16 to 25 with Education Health and Care \(EHC\) Plans](#)
6. [Hidden Harm](#)
7. [Transformation Challenge Award Update](#)
8. [Update on Cross-Cutting Themes Performance Framework](#)
9. [Suffolk Workforce Forum](#)
10. [Suffolk Better Care Fund 2016/17](#)
11. [Suffolk Informatics Partnership update](#)
12. [Connect Integrated Neighbourhood Teams \(INTs\) Update](#)

1. Suffolk and North East Essex Sustainability and Transformation Plan (STP)

1.1 All health and care organisations within the Suffolk and North East Essex health and care system have been working together since March 2016 to develop a shared vision, priorities for action and to explore benefits of partnership working through the production of the STP. It has become clear that there are benefits for our population if we align our goals and actions, and share knowledge and skills.

1.2 The STP shows:

- How we will work together to improve the health and wellbeing of our population
- How we will combine efforts to improve safety and quality of care within Suffolk and North East Essex
- How we will value and motivate the staff delivering care across our footprint and make Suffolk and North East Essex an attractive and enjoyable place to work

- How we will share and align our infrastructure, assets, land and technology to get the best out of them as we use them to deliver high quality care
- How we will move towards a single system-wide financial control total to make best use of our shared financial resources

1.3 The STP is:

- A plan, and a direction of travel
- A commitment by organisations to work together to improve the health and wellbeing of our population
- An opportunity to share knowledge and benefit from economies of scale
- A programme of work built up from existing projects and programmes

1.4 The STP is not:

- A “done deal” that is finished and perfect
- A contract or commercial obligation in its current form
- A new organisation or entity
- Reinventing the wheel!

1.5 The STP was published on 17 November and can be found at: <http://www.westsuffolkccg.nhs.uk/health-care-working-together-differently/>

For further information please contact: Richard Watson, Chief Redesign Officer, NHS Ipswich and East Suffolk and West Suffolk Clinical Commissioning Groups; Email: richard.watson@ipswichandeastsuffolkccg.nhs.uk, Telephone: 01473 770006.

[Back to top](#)

2. Norfolk and Waveney Sustainability and Transformation Plan (N&W STP)

- 2.1 A new Programme Director has been appointed for the N&W STP Jane Harper-Smith who is currently in her induction period which will include meeting with key individuals from Suffolk County Council and other Suffolk based agencies.
- 2.2 The programme structure will be reviewed to better enable the implementation of key STP ambitions. The STP Executive has continued to meet regularly.
- 2.3 At the most recent meeting of the System Leadership Partnership (SLP) for Great Yarmouth and Waveney the partnership reflected on the difficult financial situation partner organisations find themselves in and the potential impact that reduction in service in any organisation may have on the others.
- 2.4 The SLP also agreed that the main focus of the meeting should be to ensure that STP proposals will deliver integrated services which meet the requirements of the Great Yarmouth and Waveney population and to ensure a robust link with Suffolk based partners.

Further information about the future of health and social care in Norfolk and Waveney can be found on the Great Yarmouth & Waveney Clinical Commissioning Group’s website at

<http://www.greatyarmouthandwaveneyccg.nhs.uk/page.asp?fldArea=4&fldMenu=19&fldSubMenu=0&fldKey=664>

Norfolk and Waveney's submission to NHS England (June 2016) is available at

<http://www.greatyarmouthandwaveneyccg.nhs.uk/page.asp?fldArea=4&fldMenu=19&fldSubMenu=0&fldKey=664>

For further information please contact: Lorraine Rollo, Head of Communications and Engagement, NHS Great Yarmouth & Waveney Clinical Commissioning Group; Email: lrollo@nhs.net, Telephone: 01502 719582. Or Bob Purser, Head of Joint Commissioning, Waveney; Email bob.purser@nhs.net, Telephone: 01502 719513

[Back to top](#)

3. Update from the Strong and Safe Communities Group

3.1 An update on a meeting of the Strong and Safe Communities Group held on is attached at Appendix A

For further information please contact: Helen Lindfield, Families and Communities Officer, Forest Heath District and St Edmundsbury Borough Councils; Email: Helen.Lindfield@westsuffolk.gov.uk, Telephone: 01284 757 620.

[Back to top](#)

4. Data Sharing Issues

4.1 At its meeting on 17 November 2016 the Board asked Ed Garratt to have discussions on Data Sharing issues with colleagues in Suffolk Family Focus, Public Health and the Suffolk clinical commission groups (CCGs), and to advise the outcome to the next Board meeting.

Current Position

4.2 Meetings have taken place between ICT team of Ipswich & East Suffolk and West Suffolk CCGs and Suffolk County Council Suffolk Family Focus to ascertain the scope of work required to meet the objectives outlined in the Board paper and to align with Local Digital Roadmap ongoing work.

4.3 Initial findings are:

- a) Requirement to identify and then automate obtaining relevant “up to date” information on a regular basis from all organisations that might/do create a qualifying “trigger” to bring a family to the attention of Suffolk Family Focus including Mental Health, Drugs and Alcohol, Domestic Abuse, Housing Organisations, District and Borough Councils etc.
- b) Requirement for a single consent form to be created and completed by all members of the family at first point of contact by Suffolk Family Focus giving informed consent for other organisations to be contacted to ascertain whether that organisation is currently actively providing services to any of the family individuals.
- c) Requirement for the consent form to be recorded by the receiving organisations for information to be shared for the duration of the family being with Suffolk Family Focus and for outcome reporting.
- d) Requirement to clearly define parameters around what information would be requested from a Health organisation initially and on an ongoing basis.

- e) More robust outcome reporting (Agenda Item 10 Appendix A November 2016 Health and Wellbeing Board) is required to secure continued and additional funding and work is required to further indicate what is needed from each organisation and in what format and to implement the process for obtaining the information.
- f) Utilise the Suffolk Informatics Partnership (SIP) Clinical Information Assurance Group (CIAG) to introduce the concept of a single organisational-wide consent form for Suffolk Family Focus and agree principles.
- g) Explore “social prescribing” in Primary Care.
- h) Education and Training will be required.
- i) Requirement to have change control processes and principles in place (e.g. for changes in legislation etc.).
- j) Audit processes will need to be established.
- k) How outcome reporting can be disseminated to other involved services to demonstrate success.

Timescales

4.4 The indicative timescales are for this work to be completed by the end of June 2017. The intention is to initially run a pilot with a GP Practice in March 2017 for a period of two months and to then roll out to other required organisations.

Progress to date

4.5 Progress can be summarised as follows:

- a) CCG ICT progressing discussion with CCG Primary Care leads around potential GP pilot site.
- b) Approach to Mental Health, Wellbeing services, Drugs and Alcohol/Substance Misuse teams to identify key contacts to progress this work commenced.
- c) Invite being extended to CCG Information Sharing Programme Manager to attend a Family Practitioners meeting to ascertain relevant and appropriate information requirements.
- d) Current Child and Family consent form provided to CCG for Information Governance assessment and completion of Privacy Impact Assessment.
- e) Principles agreed at the SIP CIAG Group of:
 - i. A single consent form to be obtained at first point of contact by the Suffolk family Focus Team and disseminated to other organisations for recording
 - ii. The initial “trigger” information can be legally provided as part of “direct care” delivery
 - iii. The initial request for information following consent being obtained will be a yes/no answer as to whether the named individuals are “actively under care” within the organisation and the name of the key worker/contact.
 - iv. This remains a targeted approach not a “catch all”.
 - v. The Suffolk Police Information Sharing request form should be obtained and assessed for potential use by Suffolk Family Focus

- vi. The draft consent form will be presented at the next CIAG Group on 2 February 2017 for agreement and adoption.

Resources

- 4.6 Currently resources are being provided by the Suffolk Family Focus and the CCG ICT/Information Governance Business As Usual teams to progress this piece of work. A task and finish group is to be set up to progress the work required.
- 4.7 It is expected that additional resources will be needed in other organisations to join the task and finish group and in setting up the provision of the information required for initial “triggers” and for ongoing outcome reporting, recording the consent for Information sharing and any amendments to internal business processes/ways of working.
- 4.8 Communication around this agreed approach will be needed to be disseminated within organisations

Risks

- 4.8 There is risk that this work will slip without sufficient resources both to pull the organisations together to work and collaborate on the programme and within individual organisations.

Summary

- 4.9 In summary this piece of work is making good progress and is being undertaken to enable greater understanding and co-ordination of interventions and to avoid duplication of assessments and work for families and also to improve the quality of service to families in turn helping to improve the lives of families and the communities they live in.

For further information, please contact: Julie Baran, Suffolk and North East Essex Local Digital Roadmap Programme Manager; Email: Julie.a.Baran@suffolk.nhs.uk, Telephone: 01473 770088.

[Back to top](#)

5. Pupils aged 16 to 25 with Education Health and Care (EHC) Plans

- 5.1 On [1 December 2016](#) the Education and Children’s Services Scrutiny Committee considered the subject of ‘*Pupils aged 16 to 25 with Education Health and Care (EHC) Plans*’.
- 5.2 The Committee made a recommendation to the County Council’s Cabinet on 13 December, and to the Director of Children & Young People, to bring to the attention of the Suffolk Health and Wellbeing Board the perceived concerns that Health agencies are not meeting the legal requirements for responding and participating in EHC needs assessment and EHC Plan co-production.
- 5.3 The Committee also resolved to flag these concerns at a joint discussion with the Health Scrutiny Committee on 19 January 2017 regarding children’s emotional health and wellbeing.
- 5.4 The question that will be raised at the Health Scrutiny meeting on 19 January is, ‘*What aspects of the Transformation Plan are focused on ensuring that health*

and other agencies are meeting the statutory guidance requirements for responding and participating in Education Health and Care (EHC) needs assessment and EHC Plan co-production, as set out in the [Special educational needs and disability \(SEND\) code of practice: 0 to 25 years](#) ?

For further information please contact: Paul Banjo, Scrutiny Officer, Suffolk County Council; Email: paul.banjo@suffolk.gov.uk, Telephone: 01473 265187.

[Back to top](#)

6. Hidden Harm

- 6.1 Hidden Harm looks at the negative impact that parental substance misuse, poor parental mental health and domestic abuse have on the safety and wellbeing of children living in households where one or more of these factors are present.
- 6.2 On 12 May 2016, the Board received an informal presentation on the recent Hidden Harm needs assessment and its 17 recommendations. Following this, the Board asked for three key priority areas to be determined based on these recommendations.
- 6.3 In the autumn, Public Health hosted a multiagency workshop with a view to determining these three priority areas. There was front line and management level representation from early years and children and young people services, as well as teachers, midwives, voluntary organisations and police.
- 6.4 The three areas that were deemed to be a priority are:
 - Service development to ensure support and interventions are provided equitably across the country
 - Service development to ensure support and interventions are effective and based on evidence, research and practice based feedback
 - Establish a co-ordinated approach to preventing and responding to Hidden Harm at a strategic, commissioning and operational level
- 6.5 A risk prevention and family focused approach, coupled with support for parents and the children and young people involved, are central pillars of addressing Hidden Harm in the pursuit to keep children and young people in Suffolk safe and happy. Given this, there is a clear and visible need for a system wide approach and understanding of the Hidden Harm agenda.
- 6.6 With this in mind, it is proposed to link the work to take forward the three identified priorities with that of the actions to implement the recommendations of the Domestic Abuse Review undertaken in 2015, reporting to the Safer, Stronger Suffolk Partnership Board.
- 6.7 If the proposal is agreed by the Strong and Safe Communities Group meeting on 19 January 2017, a Hidden Harm Steering Group with revised membership will be re-established and a robust partnership action plan with outcomes developed to facilitate co-ordination and reporting of the work.

For further information, please contact Sharon Jarrett, Head of CYP Health Improvement; Email: Sharon.Jarrett@suffolk.gov.uk, Telephone: 01473 260865.

[Back to top](#)

7. Transformation Challenge Award Update

- 7.1 In 2015 Suffolk public sector leaders successfully bid to the Department of Communities and Local Government Transformation Challenge Award (TCA) fund and were awarded £3.2 million one off revenue. Government intended the TCA to provide additional capacity to unlock collaborative and transformative service re-design across the public sector to improve services and reduce cost. The Health and Wellbeing Board has requested an information bulletin update on the TCA in Suffolk as it complements the Board's duty to promote integrated approaches and the cross cutting priorities identified within its Joint Health and Wellbeing Strategy.
- 7.2 Initial allocations from the TCA have been used to invest in joined up preventative approaches, including management of the Connect place based integrated working pilots, community based local area coordinators and support to improve preventative and joined up working for staff.
- 7.3 A number of the Board's Programme Office are part of the officer working group that manages the work and provides regular progress updates to Suffolk Chief Officers' Leadership Team and Suffolk Public Sector Leaders in order to ensure that, given the wide ranging and fast paced nature of joint working, activity is focussed in the most effective way.

For further information please contact: Caroline Davison, Head of Policy, Suffolk County Council; Email: caroline.davison@suffolk.gov.uk, Telephone: 01473 264400.

[Back to top](#)

8. Update on Cross-Cutting Themes Performance Framework

- 8.1 Attached at Appendix B is an update on the four cross-cutting themes within the Health and Wellbeing Board Strategy, which are:
- a) Inequalities (Officer Lead: Anna Crispe)
 - b) Embedding Prevention (Officer Lead: Dr Amanda Jones)
 - c) Stronger, Resilient communities (Officer Lead: Sara Blake)
 - d) Integrating Care (Officer Lead: Jo Cowley)

Further information is available at <http://www.phoutcomes.info/public-health-outcomes-framework> and from Anna Crispe, Head of Knowledge & Intelligence, Public Health, Email: anna.crispe@suffolk.gov.uk, Telephone: 01473 270089.

[Back to top](#)

9. Suffolk Workforce Forum

Due to staff absence no update is available. For further information, please contact Steve Griffie, Transformational Lead Suffolk (workforce planning), Email: Steve.griffie@nhs.net, Telephone: 07944 212642

[Back to top](#)

10. Suffolk Better Care Fund 2016/17

Better Care Fund Measures quarter 2 2016/17	On Target (Y/N)	Direction of Travel during year
Measure 1 – Non-elective admissions to hospital	N	No change
Measure 2 – Delayed transfers of care	N	Worsened
Measure 3 – Permanent admissions to residential and nursing care homes	Y	Improved
Measure 4 – Effectiveness of reablement (Local Measure)	N	Improved
Measure 5 – Dementia diagnosis rate	N	Improved
Measure 6 – Support to manage long term health conditions*		

9.1 A more detailed dashboard which shows data over the whole period and broken down by clinical commissioning group area, as well as showing Delayed transfers of care by hospital and attribution will be available from Jason Joseph, Commissioning Manager (Mental Health), Suffolk County Council; Email: Jason.joseph@suffolk.gov.uk, Telephone: 01473 264954.

[Back to top](#)

11. Suffolk Informatics Partnership update

11.1 The latest iteration of the Suffolk & North East Essex Local Digital Roadmap (LDR) was submitted in October 2016 and has received a “green” approval status. We currently still await guidance from NHS England as to their next stage process, particularly associated with potential funding, but are currently preparing ‘mobilisation’ of key areas required to underpin the LDR programme of work. Both of the Suffolk Informatics Partnership Information and Communication Technology and Clinical Information Assurance Sub Groups are continuing to move forward crucial local organisational readiness work and high level linkage around the LDR and the West Suffolk Hospital Global Digital Exemplar plans is underway. A public document reflecting the content of the LDR is due to be published late January/early February.

For further information, please contact: Kate Walker, Suffolk LDR Lead, Head of ICT & Informatics, IES & WS CCG, Email: kate.walker@suffolk.nhs.uk, Telephone: 01473 770046.

[Back to top](#)

12. Connect Integrated Neighbourhood Teams (INTs) Update

12.1 The map attached at Appendix C gives the progress on development of the 13 Integrated Neighbourhood Team (INT) areas to date.

For further information, please contact: Clare Smith, Strategic Development Manager, Adult and Community Services, Suffolk County Council, Email: clare.smith@suffolk.gov.uk, Telephone: 01473 264422.

[Back to top](#)