



**HEALTH AND WELLBEING BOARD**

**DATE: FEBRUARY 2020**

<b>REPORT TITLE</b>	<b><u>NHS ENGLAND QUARTERLY REPORT TO WIRRAL HEALTH AND WELLBEING BOARD</u></b>
<b>REPORT OF</b>	NHS England

**1. Purpose of this report**

The aim of this report is to update Wirral Health and Wellbeing Board regarding the activities and responsibilities of NHS England and NHS Improvement, together with specific updates on priorities of NHS North West

**2. NHS England and NHS Improvement: Working Together**

From 1 April 2019, NHS England and NHS Improvement came together to act as a single organisation. The Boards of NHS England and NHS Improvement continue to operate separately meeting as committees in common. The two Boards share an integrated management team.

The organisational change has been conducted over three phases. Phases one and two were concerned with establishing a single management structure at executive and regional level and were completed earlier this year. Phase three is concerned with establishing the integrated staffing structure for NHS England and NHS Improvement below executive level. Staff were consulted on proposed changes through July and August 2019. The outcome of the consultation was published in September 2019 and phase three implementation began in October with internal recruitment to posts continuing until the end of January 2020.

With the majority of posts now filled, the single operating model for an integrated NHS England and NHS Improvement North West Region will be in place from April 2020. Teams are currently undertaking alignment and preparation e.g. 2020/21 business and resource planning.

### **3. Planning**

#### **3.1. Operational Planning and Contracting Guidance 2020/21**

NHS England and NHS Improvement published the operational plan for 2020/2021 in January 2020. This sets out the 2020/21 elements of the NHS Long Term Plan commitments, which local systems will be planning to deliver over the next 12 months including:

- Mental Health investment and deliverables, with an additional investment of £1.5bn in mental health services. This will fund the service improvements set out in the mental health implementation plan, including expanding access to Improving Access to Psychological Therapies (IAPT) by over 14% so that nearly 1.5 million people are able to benefit.
- Investment in primary medical and community services in line with the funding guarantee, 100% of the population with access to online GP consultations, and further develop primary care networks
- Outcomes and care for people of all ages with a learning disability or autism and delivering against the commitments to reduce the number of adults and children receiving care for in an inpatient setting
- Prevention of ill-health, through expansions to smoking cessation, alcohol care and diabetes prevention services, and embracing the opportunities offered by technology to improve care, moderate demand growth and deliver services more efficiently
- Emergency Care, all providers should plan for a material improvement against 19/20 benchmark:
  - To achieve this systems and organisations will be expected to reduce general & acute bed occupancy levels to a maximum of 92% .
  - In 2020/21, we are asking all providers to deliver Same Day Emergency Care for 12 hours per day by September 2020.
- Referral to Treatment, all systems should plan to reduce waiting lists:
  - Delivery of this requirement may be managed at STP/ICS level, in agreement with the regional team, with every provider expected to make a significant contribution.
  - Providers must eradicate waits of 52 weeks or more.
- Cancer, each Cancer Alliance to set out a plan for full recovery of the operational standards for cancer in 2020/21:

- delivery of the cancer 62 and
- delivery of the 28-day Faster Diagnosis Standard (FDS), which will be introduced from 1 April 2020 at the proposed initial threshold of at least 70%
- Embed and strengthen the governance of our systems as we move to a ‘system by default’ operational model and prepare all systems to become an Integrated Care System (ICS) by April 2021

Operational plans will implement the first year of local strategic plans, System leaders are asked to:

- Agree individual commissioner and provider plans to ensure they are consistent with the goals, assumptions and financial trajectories in system plans that have been agreed with NHS England and NHS Improvement.
- Submit a short operational narrative to set out any operational risks or variation from their agreed strategic plan and describe the action that system partners will take to manage this during 2020/21.
- Set out proposals to use revenue transformation or capital funds where these have been allocated to systems and the benefit they anticipate from the application of those resources.
- NHS and Local Authority partners agree the key elements of the planning for the Better Care Fund and assumptions for increasing health and social care capacity

The timetable for the operational planning process is set out below:

First submission of draft operational plans	5 March 2020
First submission of system-led narrative plans	5 March 2020
2020/21 STP/ICS led contract/plan alignment submission	12 March 2020
Deadline for 2020/21 contract signature	27 March 2020

The full Operating Plan can be found here: [NHS-Operational-Planning-Contracting-Guidance 2020/2021](#)

## 4. Delivery

### 4.1. Roll out of Rapid NHS response teams to help people stay well at home

Local health service and council teams will begin the roll out of Urgent Community Response teams from April, as part of the [NHS' Long Term Plan](#) to support England's ageing population and those with complex needs.

The teams will give those who need it fast access to a range of qualified professionals who can address both their health and social care needs, including physiotherapy and occupational therapy, medication prescribing and reviews, and help with staying well-fed and -hydrated.

Older people and adults with complex health needs who have a very urgent care need, including a risk of being hospitalised, will be able to access a response from a team of skilled professionals within two hours, to provide the care they need to remain independent.

A two-day standard will also apply for teams to put in place tailored packages of intermediate care, or reablement services, for individuals in their own homes, with the aim of restoring independence and confidence after a hospital stay.

The urgent response standards are part of a range of commitments, including enhanced NHS support to care homes, which local health and care leaders will be rolling out over the next few years to help keep older people well at home and reduce pressure on hospital services.

Health and social care systems across the country already work hard to support people at home, putting in place personalised packages of care including physiotherapy, nursing care, and occupational therapy.

However, up to now the NHS hasn't set national expectations or strategy, meaning that there is wide variation in how these services are delivered across the country.

At present, no part of the country is consistently delivering community urgent care services 365 days a year in line with these new national standards – meaning that all areas are expected to see a significant improvement in the offer to local people.

Seven 'accelerator' sites have been selected to develop the two hour/two day NHS standards, and include partnerships of providers of community health services, NHS commissioners, councils and adult social care teams, and 111 and ambulance services.

They are:

- Warrington Together (Cheshire and Merseyside STP);
- West Yorkshire and Harrogate Health and Care Partnership (Kirklees);
- Leicester, Leicestershire and Rutland system;

- Cornwall system;
- Buckinghamshire, Oxfordshire and Berkshire system;
- South East London system; and
- Norfolk and Waveney system

#### **4.2 Covid-19: Wirral Quarantine centre and local preparations**

The contribution the quarantine centre on the Arrow Park site has made in supporting UK citizens returning to this country who may have been exposed to Covid-19 has been recognised by national leaders, public and patients alike.

The first two cohorts of UK citizens returning from China were housed in the isolation unit on the Arrow Park site and left symptom free after 14 days. A third cohort from the Cruise Ship in Japan arrived on the evening of Saturday 22<sup>nd</sup> February. Four of the guests' test results were positive and these four individuals have been transferred to Infectious Disease units in the North of England

As the spread of Covid 19 continues internationally, local arrangements have been put in place to ensure the NHS and partners are able to respond quickly in treating patients and limiting the spread of the virus:

- Acute Trusts now have isolation 'Pods' with 111 contact arrangements in place to steer patients away from Emergency Departments
- Walk in Centres are currently putting in arrangements as above
- CCGs are looking to commission a Community Swabbing service through Community providers
- Public Health England are holding regular calls with all key stakeholders

NHS England & NHS Improvement are leading the Emergency Planning response locally with support from key multi-agency stakeholders.

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