



# Humber, Coast and Vale Health and Care Partnership

## Annual Report

2019/20



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# Introduction

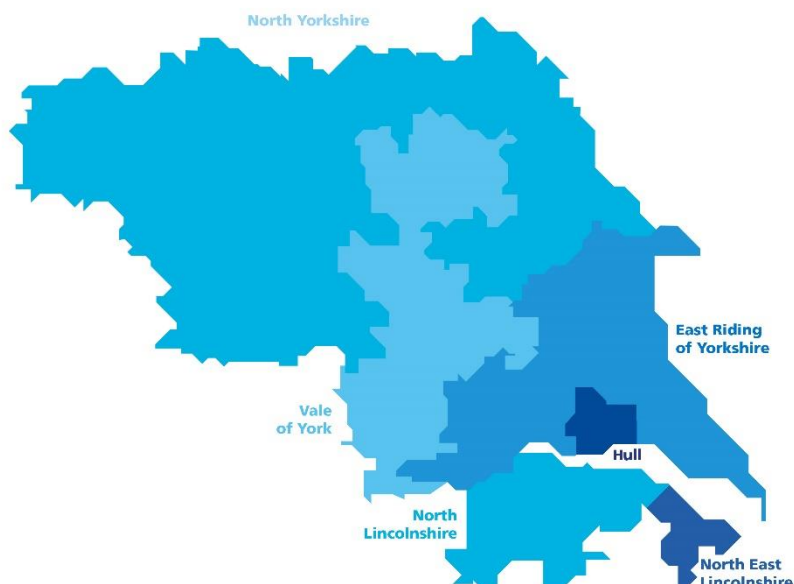
## Our Partnership

The Humber, Coast and Vale Health and Care Partnership is a collaboration of health and care organisations which believe they are stronger when working together. We are striving to improve the overall health and wellbeing of our population as well as the quality and effectiveness of the services we provide.

Our Partnership was established in early 2016, when organisations from the NHS, local councils, other health and care providers, and the voluntary and community sector came together to start thinking about the challenges facing the NHS and wider health and care sector in future years.

Since then, we have been working together – within our six places (shown on the map), and across wider geographies where it makes sense to do so – to look for ways to join up health and care services and to make them work better for our local people.

In late 2019, the Partnership's geography was expanded further in to North Yorkshire to include the areas covered by Harrogate and Rural District Clinical Commissioning Group and Hambleton, Richmondshire and Whitby Clinical Commissioning Group (both CCGs are to merge with Scarborough and Ryedale CCG to form the North Yorkshire CCG from April 2020).



In June 2019 the Partnership became one of only a handful of developing sustainability and transformation partnerships (STPs) in the country to be accepted on NHS England and NHS Improvement's [integrated care system \(ICS\) accelerator programme](#).

The programme supports a developing STP to become an ICS, which is an even closer collaboration with NHS organisations, in partnership with local councils and others, taking collective responsibility for managing resources, delivering NHS standards, and improving the health of the population they serve. Local services can provide better and more joined-up care when different organisations work together in this way.

The Partnership is on track to become an ICS by April 2020. It is expected that every sustainability and transformation partnership will develop into an integrated care system by April 2021.

Our invitation to become an ICS a year early is recognition of the Partnership's hard work over the last three years and the progress the Partnership has made in developing local health and care services that meet the needs of our population.

The emergence of the Covid-19 pandemic, with a national lockdown introduced in March 2020, has affected how the Partnership operates but our work of supporting and enabling collaboration across Humber, Coast and Vale has continued.

Our [Partnership Long Term Plan](#), which was published in December 2019, sets out the work the Partnership has begun to undertake and will continue to undertake through to 2024 as we continue to work with our partner organisations to improve the health and wellbeing of the 1.7 million people who live in the Humber, Coast and Vale area.

To support and inform the development of our Long Term Plan, the Partnership engaged with a broad range of stakeholders, including hosting four stakeholder engagement events during the summer of 2019.

This annual report provides an overview of the Partnership's work and documents some of our key achievements across eight priority areas during 2019/20.

We want everyone in our area to have a great start in life and to have the opportunities and support they need to stay healthy and to age well.

## Key Achievements and Highlights

Below are just a few of the many achievements of the work that has been undertaken in partnership across Humber, Coast and Vale over the year from April 2019 to March 2020.

By working collectively as a Partnership we:

- [Launched the NHS Lung Health Check Programme in Hull](#) with our partner organisations in the city. The programme aims to save lives by detecting lung cancer and other conditions early.
- Were chosen as one of the first areas in the country to [pilot new integrated mental health care services for adults](#), while we used £1.1m transformational funding to introduce individual placement support services in every area, supporting people with severe mental illness to gain and maintain employment.
- [Introduced the first contact practitioner scheme](#) in East Riding of Yorkshire and North Lincolnshire. The scheme involves physiotherapists being based in GP surgeries as the



first point of contact for people with musculoskeletal conditions, so they can access specialised care more quickly, closer to home and in a more familiar environment.

- [Recruited 145 advanced clinical practitioners and nursing associates](#) within the Humber, Coast and Vale area during 2019/20, helping to create a new, sustainable workforce for the future. Some 158 advanced clinical practitioners and 223 nursing associates have been recruited in the area since 2018.
- [Trained more than 900 people to become cancer champions](#) this year so they have the knowledge and skills to raise awareness and help to spot the signs of cancer in their communities. More than 1800 cancer champions have been trained in Humber, Coast and Vale since the programme launched in September 2018.
- Expanded the [continuity of carer model](#) across all parts of the Humber, Coast and Vale Local Maternity System area, so all pregnant women in these areas can experience continuity in the clinicians providing their maternity care. This continuity of care and relationship between care giver and receiver has been proven to lead to better outcomes and safety for the woman and baby.
- Were [shortlisted for a national HSJ award](#) in recognition of the strength of our joint working to improve mental health outcomes for our population.
- [Launched the Partnership Long Term Plan](#) which sets out how the Partnership and its partner organisations will work together to improve the health and wellbeing of our population over the next five years. The Partnership [ran an extensive engagement programme](#) with stakeholders and communities across Humber, Coast and Vale to develop the plan.
- Gained support from NHS England and NHS Improvement to [make rapid progress to achieve integrated care system status](#) (one of only a handful of STPs to be invited to do so in 2019/20). Becoming an ICS means greater collaboration between our partners to develop local health and care services for the good of our local people.

Further details of these and other successes are set out in the report below. These are grouped by each of our collaborative programme areas.

# Cancer

## Introduction

Cancer survival is at an all-time high. In Humber, Coast and Vale the percentage of people surviving at least one year following diagnosis has increased from 64.5% in 2001 to 72.1% in 2017.

Over the last 12 months, [Humber, Coast and Vale Cancer Alliance](#) has continued to collaborate with stakeholders to address variation, transform cancer services and improve patient experiences by focusing on the four identified workstreams of the Alliance: awareness and early diagnosis, diagnostics, treatment and pathways, and living with and beyond cancer.

## 2019/20 priorities

Our priorities for 2019/20 were to ensure cancer pathways are as robust as possible and to work collaboratively and proactively with all stakeholders to identify cancer earlier, enhance outcomes for patients including quality of life in the long-term, and work towards the ambitions set out in the [NHS Long Term Plan](#).

## 2019/20 successes

### Roll-out of NHS Lung Health Check Programme in Hull

In January 2020, we launched a new [NHS Lung Health Check Programme in Hull](#) for people aged 55 to 75 who smoke or used to smoke and are registered with a Hull GP.

Linked to high levels of deprivation and higher rates of cancers and smoking, Hull was selected as one of 10 sites in England to pilot the new programme, which aims to save lives by detecting lung cancer and other conditions early.

### Cancer champions

Over the last 12 months, we have continued to raise awareness of the early signs and symptoms of cancer, promoted the national screening programmes, and encouraged early detection through our [cancer champion programme](#).

Our focus for 2019/20 was to engage with secondary educational establishments and there are now more than 1,800 cancer champions in our region, including students from John Leggott College in Scunthorpe, East Riding College, and York College.

### Introduction of faecal immunochemical test (FIT)

The faecal immunochemical test (FIT) is a test which helps diagnose cancer by detecting traces of blood in stool samples.

Over the last 12 months, FIT tests have been rolled out across Humber, Coast and Vale and we have worked closely with the Yorkshire and Humber bowel screening service to ensure that everyone invited to take part in the NHS bowel screening programme will be given a FIT kit.

We have also commenced pilot FIT testing to guide the management of individuals who present with low-risk symptoms and this impact will be reviewed in the future.

### Radiology reporting

We have progressed the technical roll-out of a radiology workflow solution, which will enable images to be reported on anywhere across Humber, Coast and Vale.

Through increasing efficiencies in the system and enabling more rapid access to specialist opinion, this work will help support the Alliance's ambition for earlier diagnosis and better outcomes for patients. The system is expected to go live in 2020/21.

Transformation funding has also allowed us to support the development of the imaging workforce in areas including ultrasonography, nuclear medicine, MRI, CT and fluoroscopy, which will help to build diagnostic capabilities for the future.

### Digital pathology

In 2019/20, we procured digital slide scanners for Hull University Teaching Hospitals NHS Trust and York Teaching Hospital NHS Foundation Trust, and offered training and support to clinicians.

The introduction of digital pathology across Humber, Coast and Vale will allow pathologists to diagnose on a high-resolution computer display as opposed to viewing physical slides with a microscope, therefore speeding up the process of diagnosis and enabling secure online results storage.

### Rapid diagnostic centres

Rapid diagnostic centres (RDCs) combine diagnostic equipment and expertise to ensure patients receive a clear and prompt diagnosis with appropriate onward referral for treatment, whether they have cancer or not.

Over the last 12 months, we have worked in collaboration with York Teaching Hospital NHS Foundation Trust to pilot a full RDC pathway for patients with serious non-specific symptoms. We are also building on prior work to embed the RDC principles and pathways across our region.

### Personalised stratified follow-up

Personalised stratified follow-up pathways are tailored to individual needs to improve patient experience and quality of life post-cancer treatment.

By working with Hull University Teaching Hospitals NHS Trust, York Teaching Hospital NHS Foundation Trust and Northern Lincolnshire and Goole NHS Foundation Trust we have ensured protocols are now in place for breast cancer patients.

Colorectal risk stratified follow-up pathways are also in place at York Teaching Hospital NHS Foundation Trust and Hull University Teaching Hospitals NHS Trust, with work taking place to develop and roll-out protocols at Northern Lincolnshire and Goole NHS Foundation Trust as well as personalised stratified follow-up pathways for prostate patients within all three Trusts.

#### End of treatment summaries

End of treatment summaries give patients and their GPs information about the treatment received, possible side effects, signs and symptoms of what to look out for, who to contact with any concerns, and follow-up details.

York Teaching Hospital NHS Foundation Trust and Hull University Teaching Hospitals NHS Trust have started offering treatment summaries to patients, and the development of the summaries was supported by the provision of transformation funding from the Alliance.

#### Cancer care review audit

Cancer care reviews give patients an opportunity to discuss their cancer diagnosis and any concerns they have with their GP and, if appropriate, be referred to services or signposted to support.

Over the last 24 months, we have distributed cancer care review folders to GP practices across our region to support primary care to deliver them as effectively as possible for patients.

#### Health and wellbeing support

Working with cancer charities, local support groups and other partners, we have continued to develop an online directory to signpost those affected by cancer to support within our area: [hvcanceralliance.org.uk/support-groups](http://hvcanceralliance.org.uk/support-groups).

#### Celebration conference

In March 2020, we hosted our first conference, which recognised and celebrated the exceptional work taking place across the Alliance.

More than 150 people attended the event, which included many presentations to showcase the work taking place. Delegates also heard from the Positive Note Choir, which highlighted the importance of ongoing support after a cancer diagnosis and also performed at the event.



For more information about the Humber Coast and Vale Cancer Alliance please visit:  
[hvcanceralliance.org.uk](http://hvcanceralliance.org.uk)

# Maternity

## Introduction

The Local Maternity System (LMS) is one of the priority clinical programmes of the Humber, Coast and Vale Health and Care Partnership. The requirement for an LMS was first described in the [Better Births report](#) in 2016.

The Humber, Coast and Vale LMS was therefore assembled to provide links between the different parts of the maternity system in the area and facilitate cross-boundary delivery of care. The scope includes pre and post-conception services, labour and birth, links with neonatal care and support for related physical and mental health and wellbeing initiatives.

The national agenda arising from Better Births includes the requirement to support the aims of improved safety for women, babies and families to ensure these families can make informed choices, provide care personalised to their needs and to offer 'continuity of carer' so there is consistency of midwifery care throughout pregnancy, birth and beyond.

Additionally, support for postnatal care needed to be improved, professionals needed to work more closely together in the system, and the implementation of the LMS had to support the Humber, Coast and Vale Health and Care Partnership and vice versa.

Additionally, woman-centred care is at the core of the Better Births vision, and co-production of services with women and families is a key enabler to achieving this. [Maternity Voices Partnerships \(MVPs\)](#) are made up of service users and local stakeholders, and are recommended as best practice. By the end of 19/20 we had five well established MVP groups in different areas in our region.

## 2019/20 priorities

The LMS began to grow during 2019/20. It was agreed that a programme lead should be appointed to lead the team and support the key requirements around service transformation. This lead joined on a part-time basis in July 2019 and transitioned to full-time in August 2019.

Key programme milestones required to be met during 2019/20 included:

- Phase two of the continuity of carer requirement with a target of 35% compliance with the pathways by 31st March 2020; and to ensure measures are in place to gather experience data.
- Completion of the [Humber, Coast and Vale LMS website](#) to provide a robust information source for pregnancy care and place of birth options in the LMS area.

- Completion of the [Humber, Coast and Vale MVP group website](#) to ensure all women and families can provide feedback about the maternity care they received via the website and associated surveys.
- To work to further develop the LMS safety group remit and continue to work to publish LMS-wide guidelines, and to develop a post-natal work plan.
- To support providers to achieve outcomes set out in [Saving Babies Lives](#) and the associated requirements of the [Clinical Negligence Scheme for Trusts](#).
- To gain agreement for and start to specify the requirements for a single maternity IT system across the area.
- To work with partners, such as Health Education England, to continue to develop sustainable training and succession plans that will support continued delivery of midwifery, obstetric and neonatal services.
- Progression of scoping work around prevention of health inequalities, including smoking in pregnancy, promotion of breastfeeding, weight management, diabetes support, alcohol and substance misuse leading to prioritisation and action plans.
- Decrease interventions where possible and increase the percentage of women giving birth at home or in midwifery led units.

### 2019/20 successes

A number of key priorities were achieved during 2019/20, with particular success around the recruitment of key personnel, working to the governance structure and supporting the projects described earlier.

Due to the 2018/19 figure being under the required target there was a real focus on strengthening continuity of carer; particularly in the hospital trusts where staff confidence needed to be built and the offer of continuity clarified to give real value to patients and families.

The proportion of women on a continuity of carer pathway across the LMS at the end of March 2020 was 43.4%, in excess of the target, and the highest figure of the northern England regions.

The saving babies lives work also progressed during this period, with gap analysis highlighting specific areas of concern where further support from the LMS was necessary. The development of the guidelines group in the latter part of the year ensured the process for writing and publishing LMS guidance is now consistent and timely.

Communications was also a big part of the work during this period, with the LMS website further enhanced, with a clear structure and development plan and launch in November 2019. This development was supported by partners and is becoming a valuable source of information for families and health professionals in Humber, Coast and Vale.

The development of the MVP group website and surveys, and investment in service user engagement tools alongside improved promotion of local MVPs, provided more opportunities to gather both general and project specific feedback.

Additionally, the data requirements of the LMS were reviewed and work done with acute trust partners to provide information relating to the LMS on a real-time basis. Approval was also given in Q4 to continue with the specification and procurement of a single maternity IT system across the LMS area which will benefit all areas of the programme.

### Priorities for 2020/21

- Continuity of carer progress, monitoring and improvement against targets, and quicker achievement of input from BAME families, to continue to be prioritised.
- Continued LMS core team growth; prevention lead to commence post Covid-19 and support work on breastfeeding, weight management, alcohol and smoking in pregnancy.
- LMS to lead adoption of the [ICON prevention of abusive head trauma programme](#) across the Humber (already introduced in the York and North Yorkshire areas of Humber, Coast and Vale)
- Continued consideration and prioritisation of the requirements of the NHS Long Term Plan.
- Continuation of joint working with the perinatal mental health workstream to put forward a plan to provide a new maternal mental health service around maternal trauma and loss.

# Primary Care

## Introduction

The Humber, Coast and Vale primary care priorities for 2019/20 were aligned with the national planning requirements set out in the [General Practice Forward View](#), the [NHS Long Term Plan](#) and the [five-year framework for GP services](#), as well as the changes to the framework offer set out in the updated GP contract agreement (20/21 to 23/24).

The emerging Covid-19 pandemic and lockdown from March impacted on the planned programme of work. Going forward this meant that some of the workstreams planned for 20/21 were deferred or varied to support the immediate priorities to maintain access to core primary care services.

## 2019/20 priorities

The local priorities and plans were developed to be delivered over the next five years:

- To optimise funding to support the development of primary care.
- To invest in and develop our existing workforce to improve service resilience.
- To utilise the opportunities presented through digital transformation to extend and enhance the care offered to patients and improve access; support clinicians and other staff to manage workloads but continue to deliver care effectively and efficiently.
- To improve the infrastructure across primary medical care services through the optimisation of the funding through the [Estates and Technology Transformation Fund](#).
- To ensure people can access services that are both safe and consistent in quality across the area.
- To establish and enable the development of primary care networks to start to take a lead in the development and delivery of services to meet the unique health and care needs of their local populations, and deliver clear benefits for both patients and clinicians.
- Develop the role for community pharmacies to support primary care networks.
- Support the urgent care agenda by providing urgent access to medicines.

## 2019/20 achievements

### Investment in primary care

The total of resources planned to be utilised and invested through CCGs in Humber, Coast and Vale in 2019/20 totalled £223.86million. This total is expected to reach £1.2billion by the end of the five-year funding programme (the end of 2023/24).



This means that there is a year-on-year increase in the delegated primary medical care service budgets to CCGs and required plans to implement the changes to services to enable the investment.

The priority for investment was aligned to the delivery of the NHS Long Term Plan and five-year framework to include the CCG's delegated budgets to pay for local GP primary medical services, core CCG funding (£1.50 per person) to invest in service development and improved access to services outside of normal working hours, primary care network clinical directors, General Practice Forward View programme investment in service resilience and improvement to support the international recruitment of GPs to live and work in Humber, Coast and Vale, and the clinical pharmacists' scheme to work in general practice.

Transformation funding through the General Practice Forward View programme has been allocated across the four key programme areas:

- Practice resilience: this has been used to help practices manage unforeseen business and services pressures, staff recruitment or service development.
- GP retention: this has enabled GPs to remain in or return to practice after an absence. There are currently 35 GPs working under this scheme currently.
- Reception and clerical staff training: across all six of the Humber, Coast and Vale CCGs to support the roll-out of a programme of training ranging across care navigation, for example, and the 10 high-impact areas that have been identified as key to the future resilience and development of primary medical care services.
- Online consultation and triage: was enabled with a view to improve patient access to care and support clinicians to manage increasing demands on their time. The initial uptake was limited but by the end of the year the change was significant and crucial in maintaining patient access to care.

### Primary care networks

The primary care network contract was launched from 1<sup>st</sup> July 2019 following the completion of the initial registration process and issue of variations to contracts for all GP practices and primary medical care providers in Humber, Coast and Vale. This established 100% geographical coverage in Humber, Coast and Vale with 39 primary care networks.

### Workforce

Work continued in collaboration with Health Education England to support and develop the workforce to deliver the capacity and skills needed across the primary care teams in Humber, Coast and Vale.

There is an estimated requirement to recruit 86 trainees in our region every year and this target was achieved in 2019/20.

The Humber, Coast and Vale primary care workforce development group supported the implementation of all national programmes and progress on local work and programmes that had already been launched, including:

- Care navigation training programme
- Practice manager, reception and clerical training
- Workforce planning
- Non-medical prescriber course
- Online consultation
- Medicines optimisation in care homes
- Cervical cytology training
- Leadership and management development programmes
- Social care prescribers
- Supporting frail and vulnerable people in care homes (complex care team)
- Mental health training
- Falls
- Learning disabilities
- Mental health training
- Integrated care

### Digital technology

Work to support the delivery of the digital roadmap for Humber, Coast and Vale continued to allow the implementation of the changes set out in the NHS Long Term Plan and GP contract reform within the five-year framework document.

The priority was to move the entire primary care community forward, with all primary care networks and practices benefiting from [Digital First](#) services.

This work involved investing in a comprehensive upgrade of IT infrastructure, systems and equipment worth £4.5million, including the roll-out of Windows 10, removal of fax machines, data governance, digitalisation of records by 2022 and work to support the implementation of contract changes around online appointment booking.

Funding worth £1.7million was also allocated to support investment in priority projects including the Yorkshire & Humber Shared Care Record, video conferencing, developing IT in care homes, the deployment of online consultations.

Towards the end of 19/20, funding was used to support the urgent requirements to underpin the Humber, Coast and Vale primary care covid-19 response, including equipment and infrastructure.

The investment in online technology was crucial to ensure patients could still access care and treatment when face-to-face services were paused or reduced by the pandemic.

### Estates and Technology Transformation Fund

A further eight major building development projects were completed in 19/20 across Humber, Coast and Vale. The projects were partly funded by £5.45million acquired through the Estates and Technology Transformation Fund.

The projects were successful in increasing the capacity of practices to develop existing services for their patients through significant extensions, or remodelling of existing facilities.

### Community pharmacy

Community pharmacies have continued to become more integral in the development of primary care services through increasing collaboration with primary care networks, including by providing more services to support access to the most appropriate healthcare professional. Pharmacies implemented an open-door approach to support access to medicines at the start of the Covid-19 pandemic.

### 2020/21 priorities

- Maintaining investment in primary care through the General Practice Forward View and the GP five-year framework.
- Continue with the workforce development programme across the five-year schedule for General Practice Forward View and five-year GP framework. Expand the additional roles reimbursement scheme across the six further clinical roles as set out in the GP five-year framework.
- Estates and Technology Transformation Fund: complete the projects scheduled for 2021 from the remaining 11 projects.
- Primary care networks: support organisational and/or operational and workforce development plans for recruitment to additional roles.
- Phase three NHS response to Covid-19: restoring activity, proactive care for vulnerable patients, addressing the backlog in screening and vaccinations and immunisations, building on the care home support service, and expanding access to restore face-to-face consultations but continue offering online services.
- Deliver a collaborative flu vaccination programme across GP practices and community pharmacies.

# Mental health

## Introduction

This year we have seen our health and care system work together to improve mental health services for our people, and have achieved a number of successes.

In August 2019, the Partnership was shortlisted for a Health Services Journal award in system leadership. None of this work would have been possible without the support of our partners and all of our staff working hard every day to offer the best care to our people in Humber, Coast and Vale.

The NHS and its key partners have been challenged this year in ways many of us could never have imagined, particularly at the start of 2020 with the global Covid-19 pandemic affecting the way we live, work and access health and care services.

In response, our mental health staff in Humber, Coast and Vale have risen to the challenge of finding new and innovative ways to support people through this challenging time.

We couldn't be prouder. This report showcases the significant progress made in 2019/20 in relation to our transformational work, highlighting the incredible efforts prior to the pandemic; but also our early response to Covid-19.

Alongside the prioritisation of partnership working, families, carers and service users have been key in the development of the work we deliver, their input fundamental at every stage.

## 2019/20 priorities

Our priorities for 2019/20 were:

- Adult eating disorders
- Autism and learning disabilities
- Children and young people's mental health
- Community mental health teams
- Urgent care (mental health)
- Dementia
- Forensic pathways
- Individual placement support
- Perinatal mental health
- Suicide prevention

## 2019/20 successes

While 2019/20 has been an unprecedented year, especially the final few months as Covid-19 became prevalent in the UK, we're extremely proud of a number of successes.

- Bereavement support services and real-time surveillance introduced across Humber, Coast and Vale to support our suicide prevention work. Suspected suicides significantly reduced compared to the previous 12 months.
- Individual placement support services are now operating in every area, supporting people with severe mental illness to gain and maintain employment.
- Establishment of the Humber, Coast and Vale mental health provider collaborative, enabling providers to have greater control and responsibility over decisions made about specialised mental health services.
- Establishment and pilot of a community mental health team and implementation plan.
- The adult eating disorder steering group was established, along with a clinical network.
- Development of an online digital offer including establishing and launching online dialectical behavioural therapy and mindfulness courses.
- Implementation of a 24/7 open access for urgent mental health telephone support, advice and triage in response to the NHS England and NHS Improvement directive to accelerate delivery from April 2022 to April 2020.
- From the outset of the pandemic we utilised digital technology to ensure perinatal mental health patients were still assessed and received regular support or treatment.

### Priorities for 2020/21

In 2020/21 we will continue to deliver service transformation relating to our priority workstreams as well as focusing on some key system developments outlined below:

- Learning disabilities and autism: From 2020/21 the Humber, Coast and Vale mental health programme will expand its scope to include learning disabilities and autism.
- Governance: The programme will regularly review its governance and ensure the processes in place involve all relevant system stakeholders, have commitment from the highest level of our partner organisations (through our newly formed executive leadership group) and enable timely decisions to be made.
- Resilience: Mental health resilience will be a key part of our system being able to deliver sustainable services during and beyond the Covid-19 pandemic. We will appoint a programme lead to work with our partners to develop our mental health resilience hubs, which will support staff and the public.
- Co-production: Continue to work with partners and service users from across our system to better inform our planning and service delivery.
- [NHS Long Term Plan](#): Continue to align our programme work to the ambitions laid out for mental health in the NHS Long Term Plan.
- Workforce: We know that in order to make our services successful and sustainable, we will need a workforce with the right mix of skills, knowledge and experience. Our workforce professionals will be working with our organisations and education providers to develop our workforce according to our future requirements.



2019/20 has been a successful and challenging year. We look forward to some of the exciting developments we will be working on in 2020/21 to ensure the people of Humber, Coast and Vale have access to mental health services and support we are proud of.

# Urgent and emergency care

## Introduction

Urgent and emergency care is a key part of the health care system and the programme is working to ensure that people are able to access advice, care and support in an urgent or emergency situation in an easy and straightforward way.

In 2019/20 the programme set out ambitious plans to work towards the goal of achieving a seamless integrated service that is easy to access when needed.

## 2019/20 priorities

The urgent and emergency care programme set out the following 2019/20 priorities:

- **Relaunching the urgent and emergency care network:** to ensure people understand the contribution it's making to get better engagement and involvement from all stakeholders, including regular engagement with the A&E delivery boards (including collaborative workshops).
- **Ensure that the [NHS Long Term Plan](#) priorities for urgent and emergency care are delivered in Humber, Coast and Vale, including:**
  - Humber, Coast and Vale covered by round-the-clock integrated urgent care, accessible via NHS 111.
  - All hospitals with a major A&E will provide same-day emergency care for at least 12 hours a day and provide an acute frailty service for at least 70 hours a week.
  - Further reduce delayed transfers of care in partnership with the local authorities.
- **Improved performance to provide an overview and assurance on delivery to the Partnership on:** constitutional targets, specific targets, monitoring information from A&E delivery boards, develop high intensity user plans across Humber, Coast and Vale using NHS RightCare information and address system-wide issues.
- **Sharing good practice:** to ensure that the Humber, Coast and Vale urgent and emergency care network supports the delivery of urgent and emergency mental health targets; identifies what is working well elsewhere; understands the impact of good practice and transformation across the region (staffing, activity etc); and identifies support that can contribute to delivery.
- **Supporting the Humber and Scarborough acute service reviews.**
- **Link to other Humber, Coast and Vale clinical programmes:** to ensure the urgent and emergency care initiatives are aligned to their work.

## 2019/20 successes

In 19/20 the urgent and emergency care programme spent time embedding the urgent and emergency care network in to the wider system and improving its links and profile. It was

felt that this was an important baseline to achieve, to support the wider system changes needed to deliver urgent and emergency care transformation.

This was achieved by providing monthly updates to the A&E delivery boards to give a better understanding and awareness of the priorities and focus of the network, while the programme's colleagues also attended the meetings of the three A&E delivery boards more regularly to improve engagement and our relationships with the place-based communities.

The programme held a collaborative workshop in September 2019 to share examples of good practice within Humber, Coast and Vale; and build end-to-end pathways through quality improvements within all systems. The workshop was well attended by colleagues from all areas of Humber, Coast and Vale.

The NHS Long Term Plan priorities for urgent and emergency care include working towards reducing A&E attendance, and the programme supported some local-level initiatives to be established in 19/20, including a rapid response programme run by the British Red Cross.

The network also supported the implementation of an urgent and emergency care app, [RAIDR](#), to enable the system to respond better to emerging system pressures. The aim was to implement in a phased approach across all commissioners and providers by June 2020. The systems that have already implemented the app have found it to be a useful tool.

Nationally the profile of stroke increased during the year with recognition that action needed to be taken to achieve relevant ambitions set out in the NHS Long Term Plan. The responsibility for this work sits within the urgent and emergency care programme.

A series of 'getting it right first time' events for stroke were held across Humber, Coast and Vale to highlight and share examples of good practice, including Humber, Coast and Vale being the first area in the country to use interventional radiology training for thrombectomies.

During January to March 2020, we took the first steps towards developing integrated stroke delivery networks in Humber, Coast and Vale. During March, an informal network was put in place, with work largely focused on supporting continued delivery of services during the first wave of Covid-19.

## Priorities for 2020/21

The Humber, Coast and Vale urgent and emergency care priorities for next year are:

- Consolidating relationships within the Humber, Coast and Vale Health and Care Partnership, strengthening links to the Humber and Scarborough acute service reviews and provide more targeted and focused support to the local areas to facilitate delivery against our ambitions to reduce A&E attendances by:

- i) Developing and implementing a model of care of right person, right place, first time; supported by the NHS 111 First approach with direct booking wherever possible.
  - ii) Ensuring that alternative services are fully implemented and consistent to avoid unnecessary A&E attendances.
  - iii) Reviewing and implementing a consistent urgent treatment centre model.
  - iv) Expanding the use of the voluntary sector to support alternative pathways for treatment.
- Implementing RAIDR, the urgent and emergency care app, in the remaining Humber, Coast and Vale areas which have yet to adopt this technology.
  - Establishing and embedding the integrated stroke delivery network, supported by completing gap analysis of community services, reviewing location and quality of hyper acute stroke care, workforce development, improved data quality and development of a dashboard, and addressing any inequalities highlighted by this work.

# Elective (planned) care

## Introduction

Elective care is routine care, which can be planned or booked following a referral by a GP or an outpatient clinic and is how the majority of people access NHS services.

Currently in Humber, Coast and Vale more than 1.6 million outpatient appointments, 200,000 diagnostic scans and around 220,000 planned surgical procedures take place each year, which equates to nearly two appointments per person each year.

The elective care programme has set out to work towards changing how we deliver planned healthcare by moving away from the traditional outpatient models of care with referral from primary care to specialists in secondary care. With a focus on prevention, early diagnosis and management of long-term conditions to improve outcomes and experience, particularly for people with diabetes, cardiovascular disease and respiratory conditions.

## 2019/20 priorities

The main focus for 2019/20 was on increasing the provision of prevention and self-care services for patients in cardiovascular disease, diabetes, and respiratory disease to help provide better outcomes for patients. We aim to transform our outpatient services to reduce waiting times for planned care.

## 2019/20 achievements

### Cardiovascular disease (CVD)

The [Humber, Coast and Vale Healthy Hearts website](#) provides information and support for people in our area to reduce their risk of developing CVD. The website went live in August 2019 and was promoted at various points of the year, including awareness days/months such as Restart a Heart and Stoptober.

The Humber, Coast and Vale atrial fibrillation programme sought to address a detection gap of 1,027 patients (based on predicted prevalence), and engage with 685 patients needing anticoagulants which could prevent an estimated 27 debilitating strokes.

We worked with Humberside Fire & Rescue Service to train their staff on CVD prevention as part of their [make every contact count initiative](#).

### Diabetes

The Holderness primary care network's low-calorie diet pilot programme in East Yorkshire commenced in February. By July 2020, 16 patients had been referred to the programme and have enjoyed positive health outcomes. On average, each patient lost 8.7kg (8.6% of starting weight). The most weight lost by an individual patient was 17kg (14%).



There have been 2,732 referrals into the Humber, Coast and Vale NHS diabetes prevention programme, with nearly nine in 10 GP practices from our area referring patients. The programme's provider adopted digital technology to continue to run the programme from the outset of the Covid-19 pandemic.

### Respiratory conditions

The focus has been on improving outcomes for patients with respiratory issues by increasing flu and pneumococcal polysaccharide vaccine (PPV) uptake, optimising the diagnosis and treatment of chronic obstructive pulmonary disease (COPD), and improving pathways for patients with pneumonia and those in pulmonary rehabilitation.

Clinicians in York and Scarborough were trained to help them encourage more COPD patients to self-manage their condition using the [myCOPD app](#), and increased access to advice and support from healthcare professionals to reduce instances of emergency hospital admissions.

Clinicians and healthcare professionals in all areas of Humber, Coast and Vale were offered refreshed inhaler technique training to help their patients get the most benefit from their medication. A pathway for patients who suffer from breathlessness is being developed in North Lincolnshire, while work was carried out across Humber, Coast and Vale to improve pulmonary rehabilitation services.

### Elective care activity, outpatients and waiting times

Three acute hospital trusts in Humber, Coast and Vale - Hull University Teaching Hospitals NHS Trust, York Teaching Hospital NHS Foundation Trust and Northern Lincolnshire and Goole NHS Foundation Trust - received support from NHS England and NHS Improvement to enable transformation of elective outpatient services. A patient-initiated follow-up pilot programme in rheumatology has commenced in York and Scarborough.

York and Scarborough's rapid expert input programme has been refreshed. The programme aims to introduce a model of outpatient-based care which ensures the patient gets the input they need from the most appropriate healthcare professional as quickly and as conveniently as possible.

The programme is focused on empowering clinicians to get patients access to the expertise they require, without necessarily defaulting to a face-to-face outpatient appointment.

Hull University Teaching Hospitals NHS Trust introduced its [patients know best App](#) in October 2019. This app, which now has more than 40,000 users, provides patients with the means to work with clinicians to achieve better health outcomes. York Teaching Hospital NHS Foundation Trust and Northern Lincolnshire and Goole NHS Foundation Trust are planning to offer this app to their patients in the future.

Video consultations for diabetes and cancer patients were piloted in York, while discussion is ongoing with digital colleagues to further digitise outpatient services. Video consultation was rapidly deployed from the outset of Covid-19.

### 2020/21 priorities

The Humber, Coast and Vale elective care priorities for 20/21 are to support the response to Covid-19 and the recovery of services, particularly to support a return to pre-Covid-19 levels.

We will continue to work on:

- Transforming outpatients
- Maximising elective care treatment capacity
- Improving support for people with long-term health conditions, particularly diabetes and respiratory conditions
- Prevention (particularly the impacts of smoking, obesity and a lack of exercise) on:
  - Diabetes
  - Respiratory conditions
  - Medicines management
  - Cardiovascular disease
  - Musculoskeletal conditions

Our priorities are underpinned by reducing health inequalities and harm to patients.

# Workforce

## Introduction

To address workforce challenges across Humber, Coast and Vale in 19/20 the focus of the [programme](#) has been to grow advanced clinical practitioner (ACP) and physician associate (PA) roles, as well as strengthen the recruitment, retention and development of health and care staff.

Creating the growth needed across Humber, Coast and Vale to address workforce gaps and increase diversity within our skilled, multi-professional teams is necessary to continue delivering high-quality care for people living in the area.

## 2019/20 priorities

**Workforce planning:** Analysis of Humber, Coast and Vale data, creating a system approach to reviewing information and identifying key priorities to support staff. Development of place-based workforce delivery plans that enable community delivery.

**Increase future workforce supply:** Strengthening and expanding participation, developing new roles, increasing apprenticeships and maximising recruitment opportunities:

- i) Develop a step into health and social care framework.
- ii) Strengthen work with schools and colleges as a pipeline into health and care.
- iii) Coordinate nurse associate training across Humber, Coast and Vale to promote the growth needed, particularly in the general practice and care sector.
- iv) Maximise use of the apprenticeship levy across Humber, Coast and Vale.
- v) Recruit to and evaluate the health and care rotational apprenticeship programme for Humber, Coast and Vale.
- vi) Ensure effective communication and engagement through media and newsletters.
- vii) Planned growth of ACPs and PAs, determined by workforce need.

**Develop the existing workforce:** Concentrating on retention, progression, development of skills and system leadership. Key priorities include:

- i) Skills platform to promote available learning opportunities and equity of access.
- ii) Greater access to learning opportunities for hard-to-reach workforces (i.e. care home staff).
- iii) Develop career pathways for health and social care staff in Humber, Coast and Vale.
- iv) Support the development of the registered manager workforce in care homes.
- v) Ongoing learning opportunities for ACPs and PAs with opportunities to network.
- vi) Develop career pathways for ACPs and PAs.
- vii) Development of leadership skills and system leadership.

**Develop the workplace:** By focusing on employment practice, wellbeing of the workforce and looking at new employment models. Create opportunities to share good practice across and within communities.

## 2019/20 successes

The 2019-20 achievements for the workforce programme include:

**AIEM framework created:** An engagement framework is now on the [Humber, Coast and Vale Health and Care Partnership website](#) demonstrating good practice and processes that enable wider participation, and encouraging people into health and social care careers. It has received national interest from Health Education England and other excellence centres.

**Careers pathway developed:** In collaboration with stakeholders to increase recruitment, retention and progression of support staff across the health and care sector. It can be flexed to showcase specific roles and targeted to areas with greatest demand. Other areas are also interested in the Humber, Coast and Vale model.

**Humber, Coast and Vale levy transfer guidance document produced:** To cover aspects such as: the process of transferring levies from one organisation to another, or by avoiding unspent levies being returned and bringing benefits to the community as a whole by promoting a systematic approach. As a result of this document being developed and used, there have been many instances where levies have been transferred to care homes and general practices to enable new roles to be recruited to.

**Increased nursing associate activity:** The workforce programme now has oversight of all nursing associate activity across Humber, Coast and Vale and is proactively working with primary care, hospices and care homes to increase these roles within these sectors.

**Support for care home registered managers:** Supporting recruitment and retention in care homes. Seminars have been held for registered managers to support recruitment and retention of this workforce. The seminars promote resilience and ongoing development in response to workforce gaps and care home closures.

**ECHO project: Improving learning opportunities for hard-to-reach groups (i.e care home staff):** Hubs now established for staff in North Lincolnshire/North East Lincolnshire, North Yorkshire, and Hull/East Yorkshire.

**Scarborough careers event:** The first 'could you care' health and care careers event took place in Scarborough in November 2019.

**Recruitment of ACP trainees:** The workforce programme has successfully coordinated the recruitment of 67 trainee ACPs (29 in general practice) this year.

**Physician associates ambassador:** A physician associates ambassador, funded by Health Education England, has been recruited to work in Humber, Coast and Vale one day a week to promote the role.

**Annual conference for ACPs and PAs:** Fully booked event, with excellent feedback received from attendees.

**PA preceptorship scheme:** A two-year preceptorship programme has been developed and Health Education England funding secured.

## Priorities for 2020/21

The workforce priorities for next year are:

**Workforce focus review:** Review of activity and need against the [NHS People Plan](#), [Skills for Care workforce report](#) and Health Education England's workforce information to ensure delivery plans reflect key priorities.

The workforce strategy will be focused on the delivery of the NHS People Plan, building the infrastructure we need, and ensuring appropriate use of available funding.

### **Increase the future workforce supply:**

- i) Developing new roles.
- ii) Increasing training places.
- iii) Increasing apprenticeships.
- iv) Maximising recruitment.

### **Develop the existing workforce:**

- i) A focus on retention with targeted support for areas of specific need.
- ii) Development of skills and system leadership.
- iii) Local pathways supporting talent management and steering colleagues into alternative opportunities within the health and care sector to be explored to support retention.
- iv) Expansion of the ECHO project into primary care and domiciliary care teams.
- v) Promotion of in-house apprenticeships that enable development and progression.

**Develop the workplace:** By focusing on employment practice, wellbeing of the workforce and exploring new employment models. Talent management at a place-based level with rotational posts and learning opportunities. Contracts and agreements that remove the need for numerous honorary contracts.

# Digital

## Introduction

Digital technology continues to play an increasingly important role within the health and care sector in Humber, Coast and Vale. Over the last year, the digital programme has achieved many transformational outcomes within our geography.

Towards the end of 2019/20, we adjusted our digital plans to support the Partnership-wide effort in response to the Covid-19 pandemic.

The long-term aim of the Humber, Coast and Vale digital programme is to produce a coherent digital strategy for the Partnership as a whole, which will underpin the Partnership's clinical transformation strategies, along with the areas highlighted in the following section.

## Priorities for 2019/20

The digital programme set out the following 2019/20 priorities:

- **Sharing information to improve care:** We know from engagement with patients, particularly those with long-term health conditions, that their experience of treatment and care would be significantly improved if basic information about their treatment was available to all professionals involved in their care across the different providers in our health and care system.
- **Provide a fully-joined up digital care record across all health and social care providers:** The vision is for all of our health and care services and teams to have access to a secure [Yorkshire & Humber Care Record](#) for all patients.
- **Connecting Social Care:** Firstly, we wanted to extend the internet connectivity in social care organisations, including care homes. Secondly, we wanted to increase visibility of patients' end-of-life wishes and ensure this information is available to GPs, hospitals, hospices, ambulance services and specialist services.

## 2019/20 successes

Achievements across the Humber, Coast and Vale digital programme during 2019/20 included:

### Sharing information to improve care:

- We have started to share patient's [end-of-life information \(EPaCCS\)](#) with GP practices in North Lincolnshire, Hull and East Yorkshire. End-of-life information has started to be shared with care homes also.

- Patients can now book a GP appointment by contacting NHS 111.
- Patients can use online or video consultations with their GP practice.

#### **Increased use of the Yorkshire & Humber Care Record:**

- More than half (52%) of GP practices have signed up to access the Yorkshire and Humber Care Record.
- Hospital information from Leeds Teaching Hospitals NHS Trust is now available in the Yorkshire and Humber Care Record.

#### **Connected social care:**

- Improved the infrastructure and rolled out internet access to care homes.
- Increased the end-of-life (EPaCCs) information for more than 3,300 patients.

### **Priorities for 2020/21**

The digital priorities for next year are:

- Continue work to provide a fully joined-up digital care record across all health and social care providers in Humber, Coast and Vale.
- Ensure all GP practices in the region are signed up to access the Yorkshire and Humber Care Record (As of 2019/20, 52% of practices were signed up).
- Increase the use and sharing of the end-of-life (EPaCCs) system.
- Further develop the use of the NHS111 booking into GP practices.