Report author(s): Susan Robins	

Report of: Susan Robins (Director of Commissioning, NHS Leeds CCGs)

Report to: Leeds Health and Wellbeing Board

Date: 28 September 2017

Subject: Leeds Health and Care Local System Delivery Plan 2017-18

Are specific geographical areas affected? If relevant, name(s) of area(s):	☐ Yes	⊠ No
Are there implications for equality and diversity and cohesion and integration?	☐ Yes	⊠ No
Is the decision eligible for call-In?	☐ Yes	⊠ No
Does the report contain confidential or exempt information? If relevant, access to information procedure rule number: Appendix number:	☐ Yes	⊠ No

Summary of main issues

The Leeds Health and Care Local System Delivery Plan 2017-18 is an operational plan that is supported by a narrative document (Appendix 1). It describes the preparation and work undertaken by the Leeds health and social care system during 2017 to prepare for surges in demand, most frequently seen during winter.

It plays an important role in contributing to the delivery of the vision and objectives of the Leeds Health and Wellbeing Strategy 2016-2021. A resilient system is one that is able to maintain service delivery and high quality care to patients even during times of pressure and high demand.

The plan also supports the Leeds Health and Care Plan in its ambitions to make progress against addressing the three gaps that have been identified by health, care and civic leaders. These are gaps in: health inequalities; quality of services; and, financial sustainability.

Recommendations

The Health and Wellbeing Board is asked to:

- Agree that the approach taken to plan for winter aligns with our shared city ambitions
- Reinforce our shared ownership and collective action as 'Team Leeds' as we deliver Leeds Health and Care Local System Delivery Plan 2017-18

1 Purpose of this report

1.1 The purpose of this report is to provide the Health and Wellbeing Board with a brief overview of the Leeds Health and Care Local System Delivery Plan 2017-18 and to give further details in the narrative document attached. The report and appendix also includes information about key workstreams and next steps to progress the delivery of the Plan, as well as what will be different in 2017/18. This item also responds to feedback from the Health and Wellbeing Board workshop on 20 July 2017.

2 Background Information

- 2.1 Variation in the demands across a health and care system is normal and occurs throughout the year, but last winter was really challenging for health and care services. Although we did not experience any adverse weather or significant outbreaks over winter, we saw the highest system challenge and poorest patient experience and performance across our system. The stress both on services and individuals was apparent and relationships across organisations were highly tested.
- 2.2 Due to an increasing national focus on the resilience of local health and care systems, 2017/18 saw formal winter planning starting in July for the first time. The Leeds System Delivery Plan responds to NHS England / NHS Improvement's requirement for Local A+E Delivery Boards(the Systems Resilience Assurance Board (SRAB) in Leeds) to undertake more in-depth resilience planning for 2017/18.
- 2.3 Final plans will be submitted in a standard, technical template to NHS England/NHS Improvement in early September. A draft narrative has been developed to accompany the technical document, which is attached with this report. This outlines how Leeds plans to be equipped, prepared and coordinated to respond quickly and appropriately in a systematic and co-ordinated way to manage any change in demand or circumstances.

3 Main issues

- 3.1 The foundation of the Leeds Health and Care Local System Delivery Plan 2017-18 is to deliver person centred safe & effective care through partnership working, building on lessons learned from 2016/17. It is a 36 point operational working document shared by the system that details all the current workstreams. This is supported by a narrative document that is included with this report for consideration by the Leeds Health and Wellbeing Board.
- 3.2 The plan directly contributes to the shared ambitions of the Leeds Health and Wellbeing Strategy 2016-2021, its vision and its objectives, to set out a series of actions that will make our services more resilient in order to achieve its aims.
- 3.3 The plan recognises and references the collaborative work done by partners across the region to through the West Yorkshire and Harrogate Health and Care Partnership (previously STP). Through the Urgent Care workstream, Leeds is linked into that work at regional level, sharing learning and seeking innovative solutions to issues from partner organisations.

- 3.4 An important element in informing the planning process for the Leeds Health and Care Local System Delivery Plan 2017-18 was the early evaluation of winter 2016/17. Increased acuity saw high numbers of sick people admitted through non elective pathways resulting in prolonged delays in hospital for people requiring ongoing care. This placed additional pressures on our workforce in terms of capacity and case mix across all points of delivery. As a result the system became compromised and consequently we saw services become compacted.
- It was evident that if we are to have further impact in 2017/18 we needed a more proactive approach with early planning and strong system leadership and commitment. Planning started in March 2017 with system agreement on the priority areas building a vision of what would be different in 2017/18 articulated through the Leeds Health and Care Local System Delivery Plan 2017-18.
- 3.6 The Leeds Health and Care Local System Delivery Plan 2017-18 narrative document contains information about:
 - The National NHS 9 point plan- the mandated elements of system delivery that must be delivered, such as GP streaming in A&E, or work to support care homes manage patients with urgent needs, or how we work with NHS 111 system and increasing clinical assessment at the point patients phone 111
 - What worked well during winter 2016/17 and what did not work so well- the learning we gained from last winter
 - The risks and mitigation
 - The Governance of the plan and how delivery of it will be monitored
 - The refined escalation for Leeds- improvements that have been made and how it will work to greater effect in future

4 Health and Wellbeing Board governance

4.1 Consultation, engagement and hearing citizen voice

- 4.1.1 As progress is made on the workstreams within the Leeds Health and Care Local System Delivery Plan 2017-18, engagement and/or consultation will be in line with existing guidance and best practice.
- 4.1.2 Rooted in the Leeds Health and Wellbeing Strategy, the Health and Wellbeing Board has committed to Leeds needing a renewed conversation with Leeds citizens about their health, wellbeing and care. This is reflected in many of the city's shared strategies and approaches, including the Leeds Health and Care Plan. Building on previous experience and evidence, Leeds will need to agree the conversations with the public regarding the optimal use of services. Aligned with this work, a detailed communication and engagement plan for patients, the public, and health and social care staff is currently being developed and this will be assessed by the NHS Leeds CCGs PAG (Patient Assurance Group) before being agreed by SRAB (System Resilience Assurance Board).

4.2 Equality and diversity / cohesion and integration

4.2.1 Any future changes in service provision arising from the plan will be subject to equality impact assessment.

4.3 Resources and value for money

4.3.1 All elements of the plan have been assessed for financial impact and funding sought to commence or maintain projects as appropriate.

4.4 Legal Implications, access to information and call In

4.4.1 There are no access to information and call-in implications arising from this report.

4.5 Risk management

- 4.5.1 A separate risk register has been developed to support the plan's delivery with both impact and variable risks identified. These include workforce risks, unprecedented demand, variables such as adverse weather or a flu outbreak. All risks have been assessed and mitigated as appropriate.
- 4.5.2 Failure to have robust plans in place to address the gaps identified as part of the system delivery plan will impact the sustainability of the health and care in the city.
- 4.5.3 Each provider organisation has robust and tested business continuity plans and major incident plans which are regularly tested.
- 4.5.4 The effective management of these risks can only be achieved through the full commitment of all system leaders within the city.

5 Conclusions

- 5.1 The foundation of the Leeds Health and Care Local System Delivery Plan 2017-18 is to deliver person centred safe & effective care through partnership. All organisations within the Leeds Health and social care system have come together much earlier during 2017 in developing a jointly owned plan that aims to maintain services and uphold the required standards of patient safety and quality.
- We have taken learning from the winter of 2016/17 and reviewed many service areas to seek improvements and robustness.
- 5.3 We have developed several new services to support system resilience. The narrative attached details what will be different to services for our workforce and citizens.
- 5.4 National learning and mandated service developments such as described within the NHS 9 point plan, have been incorporated into the Leeds Health and Care Local System Delivery Plan 2017-18

6 Recommendations

- 6.1 The Health and Wellbeing Board is asked to:
 - Agree that the approach taken to plan for winter aligns with our shared city ambitions
 - Reinforce our shared ownership and collective action as 'Team Leeds' as we deliver Leeds Health and Care Local System Delivery Plan 2017-18.

7 Background documents

None

Implementing the Leeds Health and Wellbeing Strategy 2016-21

How does this help reduce health inequalities in Leeds?

The Leeds Health and Care Local System Delivery Plan 2017-18 being system wide and covering the full range of services from primary care through acute care and back to community services covers the full range of presenting condition and population groups. We know that ill health is linked to health inequalities and so this plan seeks to support all patients to get the assistance they need in a timely way in a place and service most suited to their particular needs.

How does this help create a high quality health and care system? See above

How does this help to have a financially sustainable health and care system? See above

Future challenges or opportunities

The communications plan for the Leeds Health and Care Local System Delivery Plan 2017-18 enables us to commence different conversations with the public in Leeds regarding how best to use services during a time of urgent need.

Priorities of the Leeds Health and Wellbeing Strategy 2016-21	
A Child Friendly City and the best start in life	
An Age Friendly City where people age well	
Strong, engaged and well-connected communities	Χ
Housing and the environment enable all people of Leeds to be healthy	
A strong economy with quality, local jobs	
Get more people, more physically active, more often	
Maximise the benefits of information and technology	X
A stronger focus on prevention	Χ
Support self-care, with more people managing their own conditions	Χ
Promote mental and physical health equally	Χ
A valued, well trained and supported workforce	X
The best care, in the right place, at the right time	Χ