

# Humber, Coast and Vale Health and Care Partnership

## Update Report

October/November 2020

The Partnership Executive Group, now known as the Partnership Board, continued to meet monthly. The following report provides an overview of the issues and topics discussed at the meetings held on 14<sup>th</sup> October and 11<sup>th</sup> November. This update report also provides a brief overview of recent developments from across the Partnership and highlights some examples of the ways in which the HCV Partnership is supporting the response to Covid-19 across our region as well as planning for the future.

A full list of our priorities and further information about the work of the Partnership can be found on our website at [www.humbercoastandvale.org.uk](http://www.humbercoastandvale.org.uk).

### Partnership Board Overview – October

#### Health Inequalities and Anchor Institutions

The core aim of the Partnership is to improve the lives and live chances of the population living within the Humber, Coast and Vale region and addressing underlying health inequalities is the golden thread that runs through all the Partnership's strategic plans and transformation programmes. At the October Partnership Board meeting colleagues discussed the role of the health and care sector within the local economy in each of our localities. An update was provided on the work being undertaken with the Health Foundation and Partnership colleagues to develop and solidify the role of partner organisations as anchor institutions in each of our local communities. This work seeks to ensure our NHS and Local Authority partners are as effective as possible in taking a pro-active role to address underlying causes of health inequalities, looking beyond the impact of the services they provide to our collective role in supporting the local economy. This includes, for example, maximising our use of local supply chains, creating new high-skilled jobs in our organisations and related industries, contributing to education and training opportunities for the local workforce.

#### Inclusivity focus on Black, Asian and Minority Ethnic (BAME) communities

A progress update was provided at the meeting by Steve Russell, Chair of the Partnership's Black, Asian and Minority Ethnic (BAME) Steering Group. This included an update on activities undertaken to support Black History Month and developments in setting up the Humber, Coast and Vale BAME Network of Networks.

The BAME Steering Group will be undertaking work jointly with the HCV Voluntary and Community Sector steering group to develop our knowledge and understanding of existing community leaders and support organisations within our BAME communities across HCV. This work will support the Partnership to engage and involve more effectively with community



organisations and local leaders across our diverse communities. In addition, we hope to create stronger links between community representatives and our BAME workforce, which is important for attracting new BAME staff members to our workforce.

A Humber, Coast and Vale Allyship / Active Allies Group is also being established consisting of non-BAME volunteers across the Partnership who wish to help support and empower their colleagues. At least one member of this group will join the meetings of the BAME Network of Networks Group.

### **Restoration of Services – Clinical Prioritisation**

The Partnership's Clinical Lead provided an update to the Board on behalf of the HCV Clinical and Professionals Group. The Clinical and Professionals Group has developed a set of [system-wide principles and shared approach to clinical priorities](#) to support organisations and individual clinicians to effectively deliver and prioritise non-Covid services over the coming months. There is a widespread recognition of the impact of responding to the Covid-19 pandemic on patients and residents with other health needs who are awaiting treatment or other clinical intervention. Whilst this is not unique to Humber, Coast and Vale, it is nevertheless a vitally important issue for our Partnership and remains a key focus of our collective efforts as a Partnership.

Partner organisations are committed to working together to ensure that we get the most out of all the skills, expertise, buildings and equipment across the health and care system so that as many patients can receive the treatment they need as quickly as possible within the current constraints. Partners also agreed to also work with voluntary sector and other wider partners to ensure a wide range of support is in place to meet the mental and physical health needs of our communities as effectively as possible.

### **Strategic Commissioning**

An important aspect of the long-term development of the Partnership is the confirmation of the Partnership's future operating arrangements and defining our future approach to strategic commissioning. The Board discussed current thinking and agreed where further work needed to be undertaken. It was also noted that there was the potential for legislation in the New Year, as trailed in the NHS Long Term Plan and implementation guidance. Key aspects of our emerging approach to strategic commissioning include a continued focus on 'Place', addressing health inequalities and improving health outcomes for the population.

Further details of the Partnership's [shared operating arrangements](#), [leadership arrangements](#) and [strategic objectives for 2020/21](#) are available on the [Partnership website](#).

### **Partnership Board Overview – November**

The November meeting was shortened, in light of operational pressures on partner organisations, and only covered the issue of responding to the second wave of Covid-19.

## Covid-19 – Managing Wave 2

As set out in previous Partnership updates, system-wide plans were developed during the summer months, setting out the next stage (phase 3) of the Partnership’s response to Covid-19. Our system-wide plans set out how organisations would work together to ensure that all available capacity within the health and care system is utilised effectively such that capacity for non-Covid health services could be maximised, whilst planning for winter demand pressures and surge plans to deal with future Covid spikes.

The November Partnership Board meeting was focused on reviewing local surge plans in light of the rising incidence of Covid-19 across the region, which saw some areas in Humber, Coast and Vale with community prevalence rates amongst the highest in England, creating significant pressure on local hospital services. Partners discussed plans and work underway to support mutual aid between providers to help manage spikes in demand and ensure continued provision of the most urgent care. Partners reviewed the escalation framework that had been agreed across the Partnership and would be used to assist in decision making. Robust incident management protocols are in place across the system to ensure a collective approach to managing risk and facilitating effective communication and the delivery of mutual aid.

## Other news from the Partnership

### Voluntary, Community and Social Enterprise (VCSE) Sector Update

Following a successful bid to join the VCSE Leadership Programme in early 2020, the Partnership began reviewing its approach to engagement with the sector. The programme aims to facilitate better partnership working between STPs/ICSs and the VCSE sector and enhance the role of the sector in strategy development and the design and delivery of integrated care in communities.

A VCSE sector Steering Group was formed in April 2020, with a VCSE representative from each of the six ‘places’ within HCV alongside senior leaders from NHS and Local Authority partners. The remit of the group is to influence and facilitate greater collaboration between the Humber, Coast and Vale Health and Care Partnership and the Voluntary, Community and Social Enterprise Sector, enhancing the role of the VCSE sector in the delivery of the transformation of health and wellbeing and cementing their role as a key strategic partner.

A high level work plan has been developed with leads agreed for each area as follows:

Workstream Priority	Named Lead
System Transformation	Jason Stamp (Hull)
Digital	Susan Oliver (North Lincolnshire)
Commissioning	Pippa Robson (North East Lincolnshire)
Workforce	Leah Swain (North Yorkshire)
Health Inequalities and Prevention	Andy Barber (East Riding)
Mutual Understanding	Alison Semmence (York)
Sustainability and Investment	Jan Garrill

Forming and embedding the Steering Group at pace, while the pandemic was still at its peak, has enabled the voluntary sector to be factored into conversations about system reset, recovery and restoration from an early stage, and has enhanced visibility and appreciation of the sector's role which is still ongoing.

A fuller update on the work undertaken to date is available to download from the [Partnership website](#).

### **Urgent and Emergency Care Programme Update – NHS 111 First**

Over recent months the HCV Urgent and Emergency Care Network has been working to develop a more integrated urgent and emergency care offer to all residents, with the aim of simplifying a complex and difficult to navigate network of services. We want it to be as simple as possible to find and access the right care and support – first time, every time. A key aspect of this work is the NHS 111 First programme, being developed by partner organisations across Humber, Coast and Vale.

On Tuesday 1<sup>st</sup> December a national communications campaign will be launched to support the rollout of the NHS 111 First programme. The campaign will encourage members of the public to contact NHS 111, by phone or online, when they have an urgent but not life-threatening medical need, rather than going straight to A&E. If the patient needs urgent care, NHS 111 can now arrange a time slot for them to arrive and be seen quickly and safely in A&E or at another appropriate service.

NHS 111 First ensures patients access the clinical service they need both in and outside of hospital. This will be managed through a clinical assessment as close to first contact as possible and in most cases in the COVID-19 environment this will be through a phone or video consultation. NHS 111 First also helps to reduce the risk of transmission of COVID-19 between patients and to staff by reducing crowding in waiting areas and support organisations to comply with government guidelines on social distancing and steps to reduce the spread of infection. Further details about the programme are [available on the Partnership website](#).