



Shropshire, Telford & Wrekin
Integrated Care System

STW ICS Update

September 2021

Integrated Care System Development

Shropshire, Telford and Wrekin Integrated Care System (ICS) was established on 1st April 2021

The ICS has set out proposed priorities, governance and operating models including **ten pledges**:

1. Improving safety and quality
2. Integrating services at place and neighbourhood level
3. Tackling the problems of ill health, health inequalities and access to health care
4. Delivering improvements in Mental Health and Learning Disability/Autism provision
5. Economic regeneration
6. Climate change
7. Leadership & Governance – renewed emphasis on place, neighbourhood and provider collaborative arrangement
8. Enhanced engagement and accountability
9. Creating system sustainability
10. Making our system a great place to work

✓ There is a strong sense of encouragement from the National Board and from the Region about the progress that they see we are making as a system.

✓ The Bill related to the establishment of ICSs' has been laid before parliament for its 1st Reading this week



Urgent Care and Ambulance Pressures

Overview

- ▶ During July 21 The Shrewsbury & Telford hospital continued to see high levels of attendances at the emergency department, exceeding the levels seen at this time of year prior to the pandemic and putting increased pressures on ambulance handover and the performance of our A&E departments.
- ▶ For A&E activity overall, the level of 'majors' has also risen, especially at the Royal Shrewsbury site.
- ▶ The current configuration of Emergency departments at both RSH and PRH only allows for the accommodation of circa 11 ambulances at any one time, and recent levels have been well above this.
- ▶ There has been an increase in category 1 (*immediate response to a life threatening condition such as cardiac or respiratory arrest*) and category 2 (*serious condition such as stroke or chest pain, which may require rapid assessment and/or urgent transport*) ambulance arrivals in comparison to previous years.
- ▶ Joint work continues with West Midlands Ambulance service and our local system partners to promote alternatives to A&E and alternate admission routes.

Key Data

- ▶ **A&E**
 - ▶ 16,515 attendances in July 2021 (Type 1-3)
 - ▶ 69.3%(Type 1-3) seen within 4hrs (against 95% target).The challenges with performance was primary was driven by handing over 2 wards to surgery for their restoration work, closure of the discharge lounge on the Royal Shrewsbury site as part of this and overall high levels of activity.
- ▶ We had seen the highest ever levels of attendances in our A&Es in late May and June however the July data suggests the level attendances may have peaked and are now flatlining.
- ▶ Emergency admissions via A&E also seem to be stabilising at c.2900 for July 21 following the rises experienced between April-June 21.
- ▶ Both Emergency Departments are continue to 70 to 80 patients where capacity is circa 30-35 patients per site.

Next Steps

- ▶ All patients waiting more than 30 minutes to be offloaded are assessed on the ambulance by a Senior Doctor within the Emergency Department to maintain the safety of all patients. The Trust are now also participating in The Regional NHSEI Ambulance Improvement Programme, led by the Emergency Care Division triumvirate.
- ▶ The focus on recovery of the acute trust position remains through the Getting SaTH to good Programme which aims to maximising capacity created by SDEC models and supporting flow through from the departments by improving ward management processes
- ▶ The system continues on focussing on improving the utilisation of dedicated appointment slots for Emergency Departments, Urgent Treatment Centres and SDEC, which can be booked in via NHS111.
- ▶ The system wide winter plan is in draft with schemes to manage the winter pressures already approved through a system wide panel.
- ▶ The RSH capital build work continues and will provide additional physical capacity for the RSH site (capacity coming online from Nov 2021 through to March 2022).



COVID Vaccination Service

Overview

- ▶ The vaccination programme continues to be successfully delivered across Shropshire, Telford and Wrekin.
- ▶ We have exceeded the national target of vaccinating 85% of our population ahead of 19 July. To date STW has an overall uptake of 89%.
- ▶ We are currently focusing on encouraging those aged 16-29 to come forward for a vaccine and have launched a campaign called “#Get vaccinated” aimed at young people.
- ▶ As a system we have done particularly well at vaccinating Cohort 6 - people who are clinically vulnerable to come forward.
- ▶ We continue to work with local communities and businesses where vaccine uptake is low, including in areas of deprivation.

Key Data

- ▶ As of 29th August 2021, over 700,000 vaccine doses (including second doses) had been given in Shropshire, Telford and Wrekin.
- ▶ Adults aged 18 and over 89.3% have had at least one dose, and 81.8% have had both doses.
- ▶ 78.9% of 18-24 year olds and 76.5% of 25-29 year olds have received a first dose.

Next Steps

- ▶ We are waiting for a JCVI decision on whether to vaccinate healthy 12-15 year olds
- ▶ Phase 3 (Autumn/Winter) planning of the COVID-19 vaccination programme is now under away.
- ▶ We are waiting for announcement on the Covid-19 booster programme and the flu programme on how these will be rolled out.





Hospital Transformation Programme

Overview

- ▶ Following the extensive Future Fit consultation in 2018 and a subsequent independent review in 2019, it was concluded that the programme should “proceed without delay” and “the current model of emergency services provided through the two hospital sites, Royal Shrewsbury Hospital (RSH) and Princess Royal Hospital (PRH), compromises safety and quality”.
- ▶ A revised draft Strategic Outline Case (SOC) was submitted at the end of 2019.
- ▶ As the impact of COVID-19 has reduced for the Trust, programme resources have been re-established and work is picking up pace.

Key Data

- ▶ We have an affordability challenge to address:
 - ▶ £312 million funding approved by DHSC in March 2018; BUT
 - ▶ Cost now increased to circa £500 million.
- ▶ In December 2020, the Trust was notified by DHSC and NHS England/Improvement (NHSE/I) that a sum of £6 million had been confirmed, in principle, to support further development of the Hospitals Transformation Programme (HTP).
- ▶ Work is currently underway to finalise the SOC over the next few months, before submitting it to NHSE/I for formal review, this will be followed by the Outline Business Case in 2022 and the Final Business Case in 2023, with construction starting the same year, to be complete by 2028.

Next Steps

- ▶ Key current focus areas for the programme include:
 - ▶ Strengthening and embedding new performance management arrangements
 - ▶ Evaluating options to accelerate the transformation of in-hospital and community based clinical models of care
 - ▶ Addressing the affordability challenge
- ▶ Timelines remain indicative, but we are planning to finalise and submit the draft SOC to NHSE/I in the coming weeks, with the aim of securing NHSE/I approval before the end of the calendar year.





Community Diagnostic Hubs

Overview

- ▶ The proposal is to transform diagnostic services through the introduction of Community Diagnostic Hubs (CDHs) based on national recommendation: [Richards' Review of Diagnostic Capacity](#).
- ▶ It will see elective diagnostics delivered away from acute hospital sites and separately from urgent diagnostic scans - reducing waiting times and risk of cancellation, improving patient experience and outcomes.
- ▶ STW has been successful in being allocated £4.5 million of capital funding to develop and open a pilot CDH in the TF1/TF3 Telford. This could open by the end of Q1/Q2 2022.
- ▶ The capital funding is backed up by an initial revenue fund of more than £2.4 million to support staffing, leasing and expected requirements.

Key Data

- ▶ Why this location? Hadley is within 10% of most deprived areas in England and Wales – high health inequalities
- ▶ Early engagement work has taken place – with nearly 1,300 responses to a recent questionnaire:
 - ▶ Four out of five (80%) agreeing that there was a need for CDHs in Shropshire, Telford and Wrekin
 - ▶ 82% of people agree the NHS should invest in CDHs
 - ▶ 76% of people stating that it would make it easier for patients to access services
 - ▶ Despite the extremely positive reaction to CDHs there were some concerns expressed namely that there were not enough qualified staff for the service.

Next Steps

- ▶ Develop detailed drawings for new CDH
- ▶ Initiate work on building before end of calendar year 2021
- ▶ A new Royal Shrewsbury Hospital pod, separating elective from urgent scans, currently being built.
- ▶ Funding is in place and this is scheduled to open in September/October.
- ▶ Subject to public engagement, we are proposing to site three further CDHs in STW over the next 4-5 years (Shrewsbury, North Shropshire and South Shropshire).





Mental Health

Overview

- ▶ Rates of probable mental disorders have **increased** in STW since 2017. In 2020, **1 in 6** (16%) children aged 5 to 16 years were identified as having a probable mental disorder, increasing from **1 in 9** (10.8%) in 2017. The increase was evident in both boys and girls.
- ▶ The likelihood of a probable mental disorder increased with age with a noticeable difference in gender for the older age group (17 to 22 years).
- ▶ We are seeing more young people needing to access Child & Adolescent Mental Health Services (CAMHS), requiring Tier 4 admissions

Key Data

- ▶ Referrals into Shropshire and Telford and Wrekin children and young people mental health services have gradually increased (since the initial drop to **235** in April 2020 – following the start of the C19 pandemic), reaching **555** in February 2021, and **830** in March 2021.
- ▶ Poverty and deprivation are known risk factors for mental health disorders in children. Children from the **poorest 20%** of households are **four times** as likely to have **serious mental health difficulties** by the age of 11 as those from the wealthiest 20% (Morrison Gutman et al, 2015)
- ▶ **Shropshire and Telford and Wrekin** had **16,562** aged 0-18 years living in the most deprived areas, with over **three quarters** of this number located within **Telford and Wrekin – 12,711**

Next Steps

- ▶ We are maintaining a focus on keeping attendances away from hospital e.g. through the 24/7 Children and Young People's Crisis & Home Treatment Service, Local Authority prevention offers, mental health support teams in schools, and school nurses.
- ▶ We have added additional capacity to the CYP crisis team to offer an in-reach service to SaTH – with specific focus on Children with Eating Disorders (CEDs) and complex needs.
- ▶ We have increased the capacity of the community CEDs team with additional resource.
- ▶ We are providing additional support to social care, with recruitment in progress.





Elective Waiting Times

Overview

- ▶ Covid is now affecting elective recovery. SaTH, which continues to be under extreme pressure, has temporarily stood-down elective orthopaedics due to high levels of demand for patients needing urgent care and increasing numbers of Covid patients needing inpatient care. SaTH is working with the Robert Jones and Agnes Hunt Orthopaedic Hospital to manage higher priority orthopaedic patients and treat those facing the longest waits.
- ▶ The STW final recovery plans for the first half of 2021/22 have been submitted to NHS England and NHS Improvement and initial feedback has been positive as it achieves all the original national requirements.
- ▶ We are scheduling patients based on clinical priority rather than length of wait.
- ▶ We have high numbers of patients waiting more than 52 weeks for elective (planned) care, but we are seeing the rate of growth in this number slow.

Key Data

- ▶ Daycase and elective surgery have achieved the national thresholds of 70% in April and 75% in May.
- ▶ Daycase surgery has achieved the national thresholds of 80% in June and 95% in July
- ▶ Elective surgery has dropped below the national threshold for June and July – 66% in June (compared to the national threshold of 80%) and 81% in July (compared to the national threshold of 95%)
- ▶ Both 1st and follow up OP have achieved the national thresholds of 70% in April, 75% in May, 80% in June and 95% in May

Next Steps

- ▶ An elective recovery plan is in place.
- ▶ We are working with private providers as well as NHS hospitals in order to increase capacity and see patients more quickly.
- ▶ Providers have been writing to patients to manage expectations.
- ▶ SaTH have been working with patient representatives to develop their communications to patients
- ▶ We are reviewing operational utilisation to see if there are any further opportunities for improvement



Shrewsbury Health and Wellbeing Hub

Overview

- ▶ A new facility in Shrewsbury, which could open in Autumn 2024, is proposed which will bring a range of health and wellbeing services commissioned by the NHS, local council, and voluntary sector organisations under one roof, in a new state-of-the-art building.
- ▶ A 'listening exercise' has been launched to understand what's important to local people when they are accessing GP services and on whether they think a health and wellbeing hub would be beneficial.
- ▶ The listening exercise will run until Sunday 26 September 2021 and local people will be able to feedback via an [online survey](#).

Key Data

- ▶ The eight GP practices currently involved in the project are: The Beeches, Claremont Bank, Mytton Oak, Radbrook Green, Belvidere, Marden, Marysville and South Hermitage.
- ▶ The development does not rely on all eight practices moving to the new facility and some may choose to use the facilities for certain services on certain days only. More information can be found in the [engagement document](#) published alongside the survey.
- ▶ A stakeholder database has been completed and a patient reference group established - the first meeting will take place on Monday 2 September.

Next Steps

- ▶ Work will continue on the communications and engagement strategy, including FAQs for patients and the public.
- ▶ Ongoing mapping will take place of voluntary sector meetings as part of the engagement exercise.
- ▶ The data from the listening exercise will be reviewed regularly and a formal report produced at the end of the process to inform clinical modelling going forwards.
- ▶ A formal consultation will be launched in November when more details are known.





VCSE Memorandum of Understanding

Overview

- ▶ Closer working with VCSE partners is vital as we move towards an ICS.
- ▶ A Memorandum of Understanding (MOU) is in the final stages of draft and will be formally signed shortly.
- ▶ The MOU sets out the role of improving health, social care and wellbeing in STW and explains why a partnership is being created with shared ambitions.
- ▶ It has been drafted by both ICS and VCSE colleagues in the spirit of coproduction.
- ▶ The NHS England and NHS Improvement (NHS E/I) ICS VCSE system leadership programme has allocated £10,000 of funding to support the VCSE sector to develop alliances or leadership groups within ICSs.

Key Data

- Funding to create a 'VCSE Alliance' will be essential at place-base level in order to support VCSE representatives to bring their experience and skillset to relevant boards and provide the sector with a strategic voice.
- The funding will enable the VCSE to work together to inform the ICS boards of population needs.
- The sector will also be able to support and develop the decisions around the place-based strategy, 'scale up'/respond to these needs and be commissioned to deliver.

Next Steps

- An Expression of Interest has been submitted for funding from NHS England Voluntary Partnerships. This will be reviewed over the coming weeks.
- If funding is approved, formal Terms of Reference will be developed for a 'VCSE Alliance'.
- It is hoped that the MOU will be signed by the ICS leadership and representatives from the VCSE sector in October.





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Thank You

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