

SUNDERLAND HEALTH AND WELLBEING BOARD

14 March 2024

SUNDERLAND PLACE COMMITTEE ASSURANCE UPDATE

Report of the Chief Executive, Sunderland City Council

1.0 Purpose of the Report

- 1.1 To provide assurances to the Health and Wellbeing Board that the Sunderland Place Committee continues to function in a way that supports effective integration of health and care, as set out in the Sunderland Place Plan, Sunderland Healthy City Plan and Integrated Care Strategy (Better Health and Wellbeing for All).
- 1.2 To seek approval for the sign-off of the Quarter 3 2023/2024 Better Care Fund (BCF) submission report, in-line with national BCF conditions.

2.0 Background

- 2.1 The Sunderland Place Committee (SPC) is a formal sub-committee of the North-East and North Cumbria Integrated Care Board (NENC ICB), established in May 2023 for the purposes of enabling health and care decision-making at place-level, and to support improved integration of care with Local Authority and wider statutory partners.
- 2.2 The SPC meets monthly in-common with a Partnership Board, that oversees all joint commissioning arrangements between the ICB and Sunderland City Council. Such arrangements are typically managed via local Section 75 partnership arrangements that enable the delegation and/or joint exercising of specific NHS and Local Authority health-related functions, in instances where such arrangements effectively secure improved health and care outcomes for residents.
- 2.3 The Health and Wellbeing Board (HWB) has a statutory role in instilling the mechanisms for joint working arrangements are in place, and that such arrangement actively support improved health and wellbeing outcomes for the local population. As such, regular assurance is provided on behalf of the Sunderland Place Committee, to assure the HWB that SPC arrangements, continue to support HWB responsibilities in-line with local needs and the ambitions as set out within in the Healthy City Plan, Place Plan, Integrated Care Strategy and Better Care Fund Narrative Plan 2023/2025.

3.0 Place Committee Assurance for December 2023 to February 2024

- 3.1 The table below provides an overview of business discussed and decided at the SPC between December 2023 and February 2024.

| Ref | Item | Place Plan Priority | Item for decision | Item for discussion | Impact/Output |
|-----|---|--|-------------------|---------------------|---|
| D1 | OFSTED Report for Children's Services (December 2023) | Priority 3 (Best Start in Life) | | Yes | <p>An overview of the recent (October 2023) OFSTED visit was presented to the Committee. The visit focused on arrangements for children-in-need, and those subject to a child protection plan. The Committee discussed the positive findings of the report and noted areas of improvement in relation to early identification of neglect, and written records of supervision, case discussions and management direction.</p> <p>The Committee acknowledged the need to improve system-wide representation at core group meetings. Further recommendations were made in relation to ICB children's commissioner involvement in planned feedback sessions, as well as seeking assurance that poverty-related concerns would be addressed within the Starting Well delivery board arrangement.</p> |
| D2 | Development of a Community Frailty Service | Priority 2 (Supporting People to Live and Age Well) | Yes | Yes | Commercially sensitive. A proposed Community Frailty Service model was supported by the committee, with a recommendation to be submitted to the NENC ICB Executive for formal approval. |

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| D3 | Pharmaceutical Needs Assessment (PNA) (December 2023) | Priority 1: (Primary and Community Care Integration) | | Yes | <p>The Committee were presented with a report outlining the potential impact of recent pharmacy closures and changes to opening hours, on the current PNA. The Committee acknowledged a recommendation to be approved at December's Health and Wellbeing Board, that no supplementary statement or revision to the current PNA would be required.</p> <p>The Committee discussed the potential impact of the 'Pharmacy First' roll-out, and the recently acquired ICB delegations for pharmacy commissioning, on future place-based governance arrangements. The Committee agreed that pharmacy provision could be better incorporated into Place Plan priorities for recovering access to primary care, and that Committee and collaborative arrangements may need to evolve to reflect this going forward.</p> |
| D4 | System-wide efficiencies (December 2023) | Priority 5 (System Enablers) | | Yes | <p>The Committee were informed of the current financial position of the ICB, which identified overspends in relation to Section 117 arrangements. It was identified within discussions that ICB financial pressures reflected wider system pressures, and work to create a system-response to this was still outstanding.</p> <p>The Committee agreed to update the Terms of Reference for the Place Committee to include membership of the SCC Director of Finance.</p> |

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| D5 | Place Based Assurance Framework (October 2023) | Priority 5 (System Enablers) | Yes | | <p>A further update to the proposed framework for Place Committee Assurance was presented, which included specific consideration of the implementation of the Place Plan policy objectives for tackling inequalities and supporting a shift toward increased prevention (see section 3.2 below).</p> <p>A formal assurance report will replace the current quarterly HWB reporting format for Place Committee assurance from June 2024, this will include providing the HWB with a clear position on Place Plan deliverables, and associated narrative for any underperforming objectives.</p> |
| D6 | Population health update (December 2023) | Priority 2 (Supporting People to Live and Age Well) | | Yes | <p>The Committee were updated on the current position in relation to demographic changes to the population and the impact of this on service demand and capacity. The Committee were informed that a business case to address GP registration pressures had been developed and funding was being sought to implement proposals.</p> <p>Concern was raised that a business case proposal to address a lack of TB provision in the city was rejected by the ICB Executive. The Committee agreed this was a continued risk. A letter of concern had been submitted to the ICB on behalf of the Director of Public Health (Gerry Taylor) and the Committee agreed that continued</p> |

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| | | | | | monitoring and management of the issue would be picked up via the Vulnerable Groups meeting. |
| D7 | Place Oversight Meeting (December 2023) | Priority 5: (System Enablers) | | Yes | The Place Committee were briefed on the outcome of the Sunderland Place Oversight meeting. The oversight report had been positive overall, with some improvement work needed to clarify place priorities in relation to the children's Core20Plus5 framework. |
| D8 | Better Care Fund and Section 75 Review (December 2023) | Priority 1: (Primary and Community Care Integration) Priority 5: (System Enablers) | Yes | Yes | The Place Committee were presented with a proposed timeline for a strategic review of Sunderland's BCF and accompanying section 75 arrangements. This included a regional ICB-led value for money exercise, which required a stocktake of all BCF-related specifications by January 2024. The committee approved the proposed timeline and recommended approach to review, which would conclude with a refreshed BCF plan in May/June 2024, in-line with national timescales. |
| J1 | Homelessness Action Plan (January 2024) | Priority 2: (Living and Ageing Well) | | Yes | The Assistant Director of Housing and Communities attended the Committee to present a report on the current homelessness position in Sunderland, and recommendations on the role of the Place Committee in supporting delivery of the Homelessness Action Plan. |

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| | | | | | <p>The Place Committee agreed the importance of supporting aligned actions within the Homelessness Action Plan that reflected Place Plan priorities, including Place Plan policy objectives to tackle inequalities through the Core20Plus5 framework. There was also acknowledgement of the positive impact some elements of the Homelessness Action Plan (HAP) was having in relation to hospital discharge processes. The Committee agreed that regular updates to the Committee in relation to the HAP was needed, and that clear, SMART objectives that aligned to Place Plan priorities was required in order to clarify Place Committee contribution to the homelessness agenda.</p> |
| J2 | <p>Adult and Children's Collaborative Development (January 2024)</p> | <p>Priority 5: (System Enablers)</p> | | <p>Yes</p> | <p>The Committee were provided within an update on the development of the adult and children's collaborative arrangement. This included agreement to merge the current Health and Care Alliance and ATB Executive arrangement in order to address gaps in leadership capacity post April.</p> <p>The Committee were informed that a workshop was being held in February to form the basis of a refined options appraisal for future collaborative working, with the expectation that a formal recommendation be made to the Committee in March 2024.</p> |

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| J3 | Palliative End of Life Care and Homelessness Inclusion Nurse Post (January 2024) | Priority 2 (Supporting People to Live and Age Well) | Yes | Yes | <p>The Committee were presented with a case for a homelessness inclusion nurse, and a palliative and end-of-life care self-assessment process.</p> <p>The Committee agreed to a recommendation for South Tyneside and Sunderland NHS Foundation Trust to recruit a homelessness inclusion nurse, to support an improvement in proactive access into health care within the homeless population. It was identified that this would additionally have a positive impact in reducing avoidable and preventable access to Emergency Departments (ED) and Urgent Treatment Centres (UTC) within this group.</p> <p>The Committee additionally agreed a proposal to undertake a clinically led self-assessment of palliative and end-of-life care audit. The Committee acknowledged the challenges in obtaining dedicated clinical support, and the impact this might have on the anticipated timescales for completion (end of March 2024)</p> |
| J4 | ICB 2.0 (January 2024) | Priority 5: (System Enablers) | | Yes | The Committee were provided with an update on the current ICB restructure. |
| J5 | BCF Strategic Review and Quarter 3 Reporting (January 2024) | Priority 1: (Primary and Community Care Integration) | | Yes | An update on progress against the BCF strategic review was presented. A quarter 3 update in relation to the BCF was presented (section 4) |

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| J6 | System Diagnostic on Managing Discharges and Avoidance Admissions (January 2024) | <p>Priority 1: (Primary and Community Care Integration)</p> <p>Priority 2 (Supporting People to Live and Age Well)</p> <p>Priority 5: (System Enablers)</p> | | Yes | Provisional findings from the Newton Europe System Diagnostic (commissioned jointly with South Tyneside Council) were presented to the Committee. Key opportunities for service level improvement and efficiencies were identified across a range of intervention pathways, with some identified challenges emerging in relation to optimisation of home-first pathways of care. A diagnostic workshop will be held in February 2024 with South Tyneside partners to support the translation of findings into a service improvement plan. |
| F1 | System Diagnostic on Managing Discharges and Avoidance Admissions (February 2024) | <p>Priority 1: (Primary and Community Care Integration)</p> <p>Priority 2 (Supporting People to Live and Age Well)</p> <p>Priority 5: (System Enablers)</p> | | Yes | <p>Newton Europe attended the Place Committee to provide a high-level overview of the System Diagnostic work that had been undertaken across Sunderland and South Tyneside. The Committee were advised that the work was now moving into the dissemination phase, with workshops and board attendances to be carried out across February and March</p> <p>Opportunities for avoiding admissions and A&E attendance within communities was identified as a key area for improvement, and further work to understand the role of prevention within the diagnostic improvement plan would be explored in future sessions.</p> |

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| | | | | | <p>The Place Committee also identified that further clarity was needed with regards to the role of the Place Committee and Adult Collaborative arrangement in overseeing next steps for transformation and improvement. This would include aligning key Place Plan priorities and objectives relating to primary and community care integration and frailty, to ensure a coherent and comprehensive approach to system improvement emerged from the diagnostic.</p> |
| F2 | <p>Care Closer to Home and Adult and Children's Collaborative Development (February 2024)</p> | <p>Priority 1: (Primary and Community Care Integration)</p> <p>Priority 2 (Supporting People to Live and Age Well)</p> | | Yes | <p>Place Committee were updated on plans to better integrate primary, community, hospital and social care, around the Care Closer to Home (CCtH) agenda. The committee were advised that a CCtH group was to be established following agreement at a cross-system workshop in January 2024. This group would feed into the Adult Collaborative, ensuring the work was embedded within place-based governance arrangements.</p> <p>The Place Committee were updated on progress against the development of the Adult and Children's collaborative, including a decision to merge two existing leadership arrangements (the All Together Better Executive and Health and Care Alliance). The Committee identified that further work was required to bring together the disparate parts of the development, and to ensure parity between the adults and children's health and care agenda.</p> |

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| F3 | Terms of Reference (February 2024) | Priority 5: (System Enablers) | Yes | | <p>In-line with ICB governance processes, the Place Committee were reminded of the requirement to annually review governance arrangements, including the Terms of Reference (ToR) for the Place Committee. Members agreed that the ToR needed to be updated to include SCC's Director of Finance, and GP representation.</p> <p>The ToR will require further updates in the future to reflect wider ICB staffing changes, schemes of delegation and financial governance arrangements.</p> <p>The Place Committee supported the revisions to the ToR, and agreed to continue to review the ToRs, as required, to bring committee arrangements in-line with wider system changes.</p> |
| F4 | Neurodevelopment Pathway Review (February 2024) | Priority 3 (Best Start in Life) | | Yes | <p>Place Committee were provided with an update on the neurodevelopmental pathway review and how the findings of the review had been implemented to inform the Getting Help multi-disciplinary team pilot.</p> <p>Key areas for consideration included pathway development and improvements in data flows in regard to diagnostic pathways. Further work to improve public communication and understanding of support arrangements, would also be rolled out in Spring 2024.</p> |

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| F5 | General Practice Forward Plan and Workforce Update (February 2024) | Priority 1: (Primary and Community Care Integration) | | Yes | <p>Place Committee were presented with an overview of the Primary Care Forward Plan and were provided with a progress update. The plan focuses on five priority areas: general practice stability and resilience; integrated neighbourhood teams; improving general practice access; primary care workforce, estates and digital; and pharmacy optometry and dental.</p> <p>The committee were informed that the plan was on-track to meet objectives, including those aligned to the Primary Care Access Recovery Plan (PCARP) and Sunderland Primary Care Workforce Plan. Place Committee were keen to understand the approach to primary care workforce planning and estates within the plan.</p> |
| F6 | Better Care Fund Quarter 3 Monitoring Submission (February 2024) | Priority 1: (Primary and Community Care Integration) | | Yes | The Place Committee were presented with the quarter 3 BCF submission (see section 4.0). |
| F7 | Sunderland Finance Report 2023-24 | Priority 5 (System Enablers) | | Yes | The Place Committee were presented with the current ICB financial position, which included a place-level underspend in relation to Continuing Health Care. Place Committee noted the financial position, as at, 31 st December 2023. |

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| F8 | Any Other Business: Substance Misuse and Alcohol | Priority 2 (Supporting People to Live and Age Well) | | Yes | The Place Committee were updated that Sunderland's proposed use of the Substance Misuse and Treatment Grant were likely to be approved. Place Committee agreed that the interdependencies with Place Plan priorities warranted further consideration at the committee. This item will be added to the March 2024, Place Committee. |
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Table 1.1. Summary of Sunderland Place Committee and Partnership Board business (December 2023 to February 2024)

- 3.2 As outlined in D5 of table 1.1, an update position in relation to the ICB's Place-Based Assurance framework was presented to the SPC in December 2023. This included recommendations on the proposed assurance of the Place Plan policy objective to actively tackle inequalities across all place priorities, with a specific focus on Core20Plus5.
- 3.3 Alongside wider assurance of Place Plan priorities, a tripartite approach to the assessment of how effective place-level integration arrangements are working to address inequalities has been proposed. This proposed approach is intended to support assessment of Place Plan achievement, whilst also supporting future Care Quality Commission (CQC) inspection arrangements in relation to integration, which specifically includes an assessment on work to address inequalities at HWB-level. The proposed approach is outlined below:
- Identifying six **health inequalities metrics** within the assurance framework that will act as a “barometer” for assessing overall impact of key place plan deliverables on inequalities. These will additionally be linked to the five clinical domains of the adult Core20Plus5 (C20P5) framework, with one overarching measure for children and young people¹, as set out further below. Baselines for agreed metrics will be established in 2023/24, with target trajectories identified as part of the 2024/25 Place Plan refresh. Metrics proposed include:
 - % of women smoking at time of delivery from the 20% most deprived areas in Sunderland (target reduction)
 - % of SMI checks completed for patients identified as homeless (target increase).
 - % gap in respiratory related admissions attributable to those within the 20% most deprived areas compared with the general population (target reduction).
 - % gap in early cancer diagnosis at stage 1 or 2, between those within the 20% most deprived to the general population (target reduction)
 - % of eligible services users within substance misuse and alcohol services, benefiting from in-reach cardiovascular screening.
 - % gap in <18 (years) ambulatory care sensitive admissions between the 20% most deprived and the general population (target reduction)
 - Providing an objective measure of the shift toward **increased investment in prevention**, as reported through an annual assessment of BCF spend that is aligned to prevention schemes (as set out within BCF planning framework).

¹ NB One of the adult C20P5 measure additionally aligns to priority 3 (Best start in life) deliverables, i.e. % of women smoking at the time of delivery deriving from 20% most deprived area.

- **Annual assessment** of Place Plan deliverables against KLOE's identified and agreed by the Health and Wellbeing Board (HWB) sub-groups, as set out below (examples KLOEs provided in appendix 2):
 - Priority 1: Strengthening Primary and Community Care (Ageing Well)
 - Priority 2: Supporting People to Live and Age Well (Ageing Well/Living Well)
 - Priority 3: Enabling the Best Start in Life for Children and Young People (Starting Well)
 - Priority 4: Transforming mental health, learning disability and autism services (Living Well)
 - Priority 5: Delivering place-shaping innovation & sustainability through investment in critical system-enablers (Inequalities sub-group)

3.4 From 2024/2025 the HWB assurance reporting arrangement will evolve to include assurance on inequalities and prevention, in-line with the tripartite process outlined above, as well as provide a Sunderland Place Plan Delivery Dashboard, outlining progress and achievements against revised Place Plan objectives.

4.0 Better Care Fund Quarter 3 Update

4.1 In-line with national BCF arrangements, Health and Wellbeing Boards are required to approve quarterly BCF report submissions or make appropriate recommendations to delegate this. A copy of the BCF report submission for quarter 3 has been included in Appendix A of the report, and a summary of key findings have been outlined below.

Section 75 Agreement

4.2 In-line with national conditions, a formal section 75 arrangement is required to underpin BCF arrangements. Sunderland has a signed Section 75 agreement in place between Sunderland City Council and NENC ICB. In addition, a strategic review of the BCF and Section 75 arrangement is underway (as outlined in D8 and J5 of table 3.1), which includes an external review of the existing Section 75 agreement. This has been carried out by Hill Dickinson LLP and will form the basis of a revised Section 75 to be agreed by May/June 2024.

4.3 A consideration within the revised Section 75, will be the appropriate delegation of approval for signing-off the BCF quarterly monitoring submissions. It is recommended that this role is delegated to the SPC on behalf of the HWB as part of future arrangements. Under this proposal, quarterly BCF monitoring will continue to form part of the SPC assurance to the HWB.

Better Care Fund Metrics

4.4 All BCF metrics are on-track to meet targets as outlined in figure 4.1 below.

| Metric | Definition | For information - Your planned performance as reported in 2023-24 planning | | | | For information - actual performance for Q1 | For information - actual performance for Q2 |
|--|---|--|-------|-------|---------|---|---|
| | | Q1 | Q2 | Q3 | Q4 | | |
| Avoidable admissions | Unplanned hospitalisation for chronic ambulatory care sensitive conditions (NHS Outcome Framework indicator 2.3i) | 296.7 | 265.6 | 300.9 | 310.1 | 221.2 | 121.1 |
| Discharge to normal place of residence | Percentage of people who are discharged from acute hospital to their normal place of residence | 88.6% | 90.0% | 91.0% | 92.0% | 89.8% | 91.2% |
| Falls | Emergency hospital admissions due to falls in people aged 65 and over directly age standardised rate per 100,000. | | | | 2,732.5 | 384.3 | 243.0 |
| Residential Admissions | Rate of permanent admissions to residential care per 100,000 population (65+) | | | | 994 | 2022-23 ASCOF outcome: 1057.6 | |
| Reablement | Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement / rehabilitation services | | | | 80.0% | 2022-23 ASCOF outcome: 78.9% | |

Figure 4.1 BCF metric position (Qtr 3)

Financial Expenditure

4.5 Current expenditure is in-line with the anticipated quarter 3 position, with £31,373,529 total spend to date. This compares to anticipated year-end expenditure of £56,523,242.

Summary

4.6 The quarter 3 position for the BCF is favourable in relation to expected performance, finance and activity targets. Further work to develop the Section 75 continues to be required, with specific consideration of how associated finance and commissioning arrangements may be impacted by the ICB restructure, and respective cost saving programmes within the ICB and Local Authority.

5.0 Recommendations

5.1 The Health and Wellbeing Board is recommended to:

- i. note the content and summaries from recent Sunderland Place Committee meetings;
- ii. be assured that the work of the Sunderland Place Committee is progressing in a manner that supports effective integration of health and care, as set out in the Place Plan, Sunderland Healthy City Plan and Integrated Care Strategy (Better Health and Wellbeing for All);

- iii. note and agree the proposed approach for assuring Place Plan objectives continue to be met, with specific reference to proposed process for assuring that integration arrangements actively address health inequalities within Sunderland; and
- iv. approve the quarter 3 BCF report, in-line with national conditions and support the proposal outlined in section 4.3, to formally delegate the sign-off of quarterly BCF monitoring submissions to the Sunderland Place Committee from April 2024/2025.