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MEETING:	South Area Council
DATE:	Friday 16 June 2023
TIME:	10.00 am
VENUE:	Meeting Room 1 - Barnsley Town Hall

PRESENTATIONS

- 3 CAB welfare rights contract David Andy (Sac.16.06.2023/3) (Pages 3 12)
- 4 Stroke prevention and early detection Kaye Mann (Sac.16.06.2023/4) (Pages 13 28)

To: Chair and Members of South Area Council:-

Councillors Markham (Chair), Eastwood, Franklin, Frost, Higginbottom, Osborne, Shepherd, Smith, Stowe, Sumner, White and A. Wray

Area Council Support Officers:

Diane Lee, South Area Council Senior Management Link Officer Lisa Lyon, South Area Council Manager Rachel Payling, Head of Service, Stronger Communities Peter Mirfin, Governance Manager

Please contact Jack Moore on or email governance@barnsley.gov.uk

Date Supplement Published – 9 June, 2023



South Area Council **Community Outreach Project**

Project Report April 2022 -March 2023

Project Overview

- This project is delivered solely by Citizens Advice (Project 1 was delivered as joint working with BMBC Welfare Rights)
- The service delivers Generalist and Specialist Benefit advice to residents and workers of Rockingham, Hoyland, Darfield and Wombwell Wards
- Following Covid (telephone and digital only) all delivery channels recommenced on 28th March 2022.

Project Overview

- Drop-in services take place three times a week in community venues
- The service is currently delivered from Hoyland and Wombwell Libraries.
- The service is also delivered via clients telephoning Adviceline and also making an email request via Barnsley Citizens Advice website.

Client Numbers

 Since the 1st April 2022 to 31st March 2023, the project has assisted 697 unique clients and had a total of 1923 client contacts

• The service has supported **525** clients that are classed as vulnerable

Financial Outcomes

- From 1st April 2022 to 31st March 2023 the project has helped clients claim £575,129 of additional welfare benefits
- From 1st April 2022 to 31st March 2023 the project has helped clients manage £194,240 of debt

All Enquiry Issues

 Many of our clients gain assistance with more than one issue... from 1st April 2022 to 31st March 2023, our advisers have supported clients with:

5782 individual issues – including 2103 relating to benefits, 601 universal credit, 536 housing and 608 debt, 356 employment, 276 relationships and 263 utilities & communication

Total Project: Summary of Results

Since this project was delivered solely by Citizens Advice on 1st July 2017 we have assisted clients with:

- **7582** client contacts
- Apply for in excess of £7.63m of additional welfare benefits
- Deal with In excess of **£2.08m** of debt
- Assist clients with **16457** Issues

Case Study 1

Overview: 65 Year old female, unable to use the internet, was approaching their 66th birthday and was unable to complete the process for applying for her State Pension due to lack of I.T. skills.

Help given: Assisted client to make an online application. Completed a full benefit check and advised client what additional benefits she would be entitled to.

Outcome: Client successful in application for Pension, Housing Benefit and Council Tax Support and established she would be able to survive on the benefits received.

Case Study 2

Overview: Client was made redundant but had worked for the company for less than 2 years. Unfortunately client only received his outstanding holidays and his wage after the company went into administration. The administrator explained the client was only entitled to outstanding holiday pay and wages.

Help given: Client found out 12 months later that he had been entitled to a protective award. Client was assisted through the process of claiming the protective award by CAB. Client also had made a claim previously for PIP, related to asbestosis on the lungs, 6 months ago which was still not in payment. Assisted client to have his PIP application fast tracked.

Outcome: The Tribunal Judge awarded the Client 90 days pay, as a result of being made redundant. Client also had his PIP application approved and backdated.

Thank you





Barnsley Stroke Pathway Update

South Area Councillors Meeting 6th June 2023

à (aye Mann – Public Health Specialist Practitioner, Barnsley Metropolitan Borough Council Jamie Shepherd – South Yorkshire Integrated Stroke Delivery Network Manager







Aims of today's presentation

- To explain why we are still prioritising stroke in South Yorkshire
- To provide an overview of the Barnsley Stroke Pathway and improvements so far
- To describe the Optimal Stroke Pathway vs Sub Optimal
- To explain what the data tells us about Barnsley patients and the pathway
- To consider what we need to focus on to improve patient experience and outcomes
- To highlight what are we already progressing and what we plan to do this year



Why is stroke still a priority area for South Yorkshire?



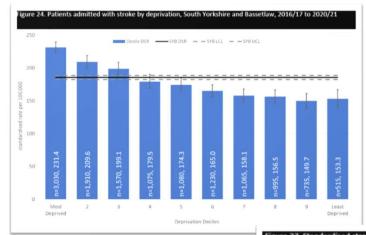
• 5th leading cause of death

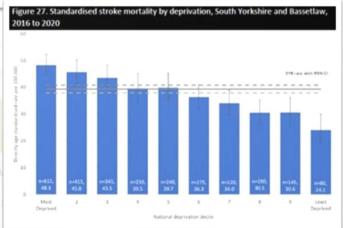
Leading cause of disability

Significant health inequalities

Unwarranted Variation

Access to urgent treatment and rehabilitation







Transforming and Improving Stroke Pathways

Key national drivers

Integrated Stroke Delivery Networks

ಹ Whole pathway approach

- Key Vehicle for transformation and improvement
- System collaboration and partnership working
- Translation of new guidance and recommendations into practice











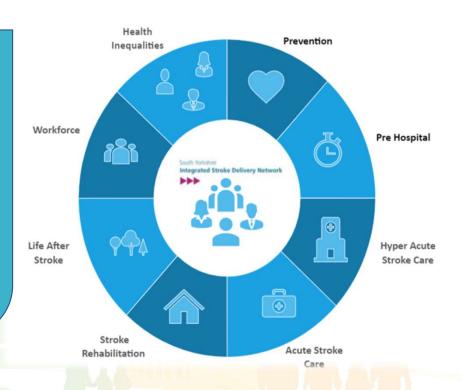






Our ambition is to ensure that people within South Yorkshire phave equal and fair access to the highest quality of stroke care across the whole stroke pathway.

To achieve this, we will bring people together empowering them to transform, innovate and develop stroke services, improving outcomes for all involved. We will listen to and act on the views of those people with lived experience of stroke and they will be at the heart of all we do.





Transforming Stroke Pathways in Barnsley



- Pre 2019: Barnsley stroke service was not sustainable and Barnsley patients were not receiving optimal care resulting in poorer outcomes.
- October 2019: New regional Hyper Acute Stroke Unit Care model was launched for Barnsley patients.

May 2020: New Integrated Community Stroke Pathway in Barnsley

By accessing this improved pathway Barnsley patients now have:

- Faster access to diagnostic imaging
- Faster access to specialist stroke teams
- Improved access to Hyper Acute Stroke Care 24/7 and early rehabilitation
- Access to life saving and brain saving treatments 'clot busting' and 'clot retrieval'
- · Improved patient experience
- Improved access to integrated, high quality rehabilitation



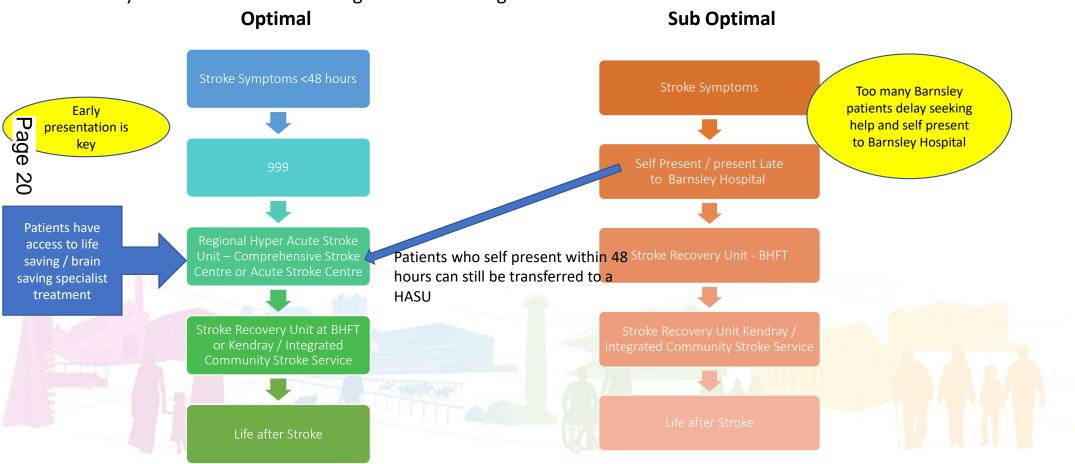
SSNAP Scoring Summary:	Team type	Routinely admitting team	Routinely admitting team	Routinely admitting team	Non-routinely admitting acute team	Non-acute inpatient team
	ISDN	South Yorkshire and Bassetlaw	South Yorkshire and Bassetlaw	West Yorkshire and Harrogate	South Yorkshire and Bassetlaw	South Yorkshire and Bassetlaw
	Trust	Doncaster and Bassetlaw Teaching Hospitals NHS Foundation Trust	Sheffield Teaching Hospitals NHS Foundation Trust	Mid Yorkshire Hospitals NHS Trust	Barnsley Hospital NHS Foundation Trust	South West Yorkshire Partnership NHS Foundation Trust
	Team	Doncaster Royal Infirmary	Royal Hallamshire Hospital	Pinderfields Hospital	Barnsley Hospital	Kendray Hospital
	SSNAP level	E			В	
	SSNAP score	78.0	75.0	82.0	74.4	89.3
	Case ascertainment band	A	A	А	A	Α
	Audit compliance band	A	В		В	A
	Combined Total Key Indicator level	E	В	А	В	
	Combined Total Key Indicator score	78.0	79.0	82.0	78.3	89.3
Number of records completed:	Team-centred post-72h all teams cohort	193	352	303	67	28
Patient-centred KI levels:						
Patient-centred Domain levels:	1) Scanning	A	В		В	N/A
	2) Stroke unit	E	В	C	D	В
	3) Thrombolysis	C	_		C	
- D	4) Specialist Assessments	E	В	В	В	N/A
ည	5) Occupational therapy	A	A	А	A	Α
<u>g</u>	6) Physiotherapy	E	В	А	A	В
$\overline{0}$	7) Speech and Language therapy	A	С	C	В	A
_	8) MDT working	E	В	C	В	В
9	9) Standards by discharge	E	В	А	В	В
	10) Discharge processes	E	В	А	A	Α
Patient-centred KI level	Patient-centred Total KI level	E	В	А	В	A
	Patient-centred Total KI score	78.0	78.0	82.0	80.0	88.6
Patient-centred SSNAP level	Patient-centred SSNAP level (after adjustments)	E	В	А	В	А
	Patient-centred SSNAP score	78.0	74.1	82.0	76.0	88.6
Team-centred KI levels:						
Team-centred Domain levels:	1) Scanning	^	В	^	N/A	N/A
ream-centreu Domain ieveis.	2) Stroke unit	F				IN/A
	3) Thrombolysis				N/A	N/A
	4) Specialist Assessments	E	-		N/A	
	5) Occupational therapy	Δ	Δ	Δ	A A	A A
	6) Physiotherapy	E	Λ Δ	Δ	Δ	В
	7) Speech and Language therapy	Δ.	C	C	, F	В
	8) MDT working	E			_	
	9) Standards by discharge	Ē			В	
	10) Discharge processes	Ē			A	A
Team-centred KI level	Team-centred Total KI level	Ē			В	A
	Team-centred Total KI score	78.0	1			
	Team-centred SSNAP level					
Team-centred SSNAP level	(after adjustments)	E			. B	
	Team-centred SSNAP score	78.0	76.0	82.0	72.8	90.0



Optimal Stroke Pathway vs Stroke Pathway



- We know that high quality stroke care, provided in specialist centres saves lives and improves outcomes.
- It's important that patients access optimal pathways and Hyper Acute Stroke Unit care early
- They can then access life saving and brain saving treatment





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What does the data tell us?



- When Barnsley patients are treated in one of the Hyper Acute Stroke Units they arrive quickly and receive high quality care.
- But, some patients are still self presenting to Barnsley Hospital
- In the April-June 2022 national audit we could see that:

35% of the patients treated at Barnsley did not arrive by ambulance
The median time from symptom onset to arrival to Barnsley hospital was 52 hours and 24 minutes
This will be affected by ambulance waits – but we know historically that Barnsley patients delay seeking help

- To compare this time was only 2 hours 45 minutes for those who arrived at a hyper acute stroke unit
- When patients are treated at Barnsley first it takes longer for them to be scanned and to arrive at a stroke unit only 18.5 % were admitted to the stroke unit within 4 hours and only 9.1% received a brain scan within an hour.

It is therefore so important that we educate the public to <u>dial 999 and to treat stroke symptoms as an emergency</u> so that they can access the right care, at the right time.



Arrival Times and Presentation to Hospital



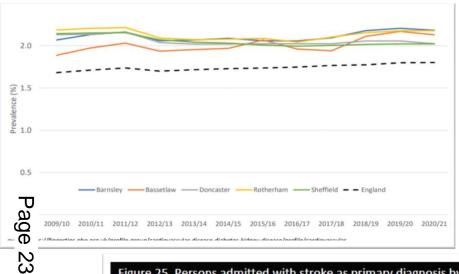
SSNAP Annual Report Team Centred Data		202	20/21			20	21/22	
	National	Barnsley Hospital	Pinderfields Hospital	Rotherham Hospital	National	Barnsley Hospital	Pinderfields Hospital	Rotherham Hospital
In hospital strokes	5.0%	3.4%	4.3%	4.7%	5.3%	6.4%	5.5%	9.1%
/യ val by ambulance	80.6%	65.8%	79.1%	62%	75.5%	61.6%	73.8%	No data
Approximate % of patient self presenting /or via another route e.g. GP	14.4%	30.8%	16.6%	33.3%	19.2%	32%	20.7%	No data
Median stroke symptom onset to arrival time at hospital (hours: minutes)	3:25	20:03	3:25	3:30	3:47	26:29	3:35	No data

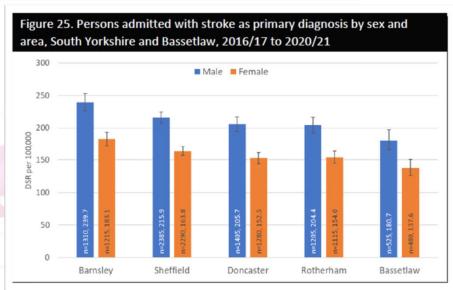
^{*}When we look at the 2020/21 data and include Barnsley patients that go to HASU's the symptom onset to arrival at hospital reduces to 11:42 - but this is still longer than we want it to be and for similar populations (E.g. Rotherham - 3:20)

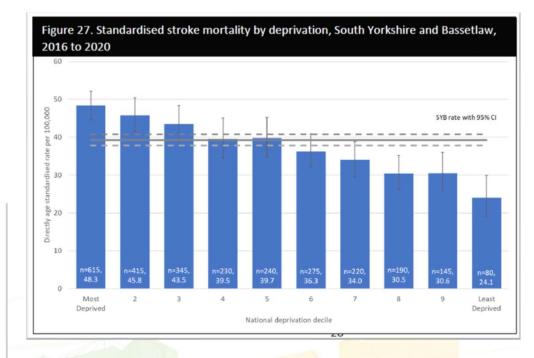


Stroke Prevalence and Stroke Admissions











Crude Stroke Admissions and Mortality



	The state of the s	on for stroke, 12 highest crude rate 2016/17 to 2020/21	s by MSOA, South
Local authority	MSOA code	MSOA descriptive name	Crude rate per 100,000
Sheffield	E02001629	Shirecliffe & Parkwood Springs	287.5
Barnsley	E02001527	<u>Dodworth</u>	278.0
Barnsley	E02001529	<u>Worsbrough</u>	273.3
Ba ⊤ ey	E02001525	Worsbrough Common	272.1
_ 01	The state of the s		- N

Please Note: Includes data pre stroke pathway transformation

authority	couc		100,000
Sheffield	E02001629	Shirecliffe & Parkwood Springs	287.5
Barnsley	E02001527	<u>Dodworth</u>	278.0
Barnsley	E02001529	<u>Worsbrough</u>	273.3
Ba ⊤ ey	E02001525	Worsbrough Common	272.1
Sh & eld	E02001662	<u>Intake</u>	266.2
Sh O eld	E02001659	Woodhouse West	264.5
Rc 22 rham	E02001601	Whiston	264.3
Barnsley	E02001528	Darfield & Great Houghton	264.1
Sheffield	E02001615	Grenoside & Ecclesfield North	262.4
Sheffield	E02001672	Charnock & Basegreen	260.6
Sheffield	E02001654	Woodhouse Mill	256.9
Barnsley	E02001512	Mapplewell & Staincross	250.8
	10		265

Local authority	MSOA code	MSOA descriptive name	Crude rate per 100,000	
Sheffield	E02001629	Shirecliffe & Parkwood Spr	ings	86.3
Sheffield	E02001654	Woodhouse Mill	Woodhouse Mill	
Doncaster	E02001543	Carcroft		74.0
Sheffield	E02001662	<u>Intake</u>		66.5
Barnsley	E02001524	Silkstone, Hoylandswaine	& Cawthorne	65.8
Sheffield	E02001614	Chapeltown		64.6
Barnsley	E02001513	Darton & Kexborough		64.5
Doncaster	E02001552	Armthorpe North	•	63.6
Barnsley	E02001529	<u>Worsbrough</u>		63.1
Barnsley	E02001512	Mapplewell & Staincross		62.7
Doncaster	E02001563	Bessacarr Bawtry Road	•	62.2
Rotherham	E02001594	Rotherham Central		62.0

Please Note: This is crude data and so does not take into account local population structures / care home locations.





So...what do we need to focus on to improve outcomes?

Prevention

Optimise diagnosis, urgent treatment and rehabilitation

Our actions: A Whole Pathway Approach



Awareness

Barnsley Task and Finish Group – Bespoke Public Health Campaign

Stroke Prevention Training

Stroke Awareness Video

Stroke Survivor and Carer Panel and Engagement

Prevention

Prevention Task and Finish Group / Programme

Community Stroke
Team BP Checks

Place based CVD prevention

Pre Hospital

Pre Hospital Stroke Video Triage projects

Paramedic Training

Acute

Peer Review Recommendations

Local Barnsley Stroke Service Improvement Plan

Expanding access to Thrombolysis ('clot busting') and Mechanical Thrombectomy ('clot retrieval')

Rehabilitation / Life after Stroke

Barnsley Integrated Community Stroke Service – A rated

Social Prescribing Link Worker Project

Life after Stroke Worker



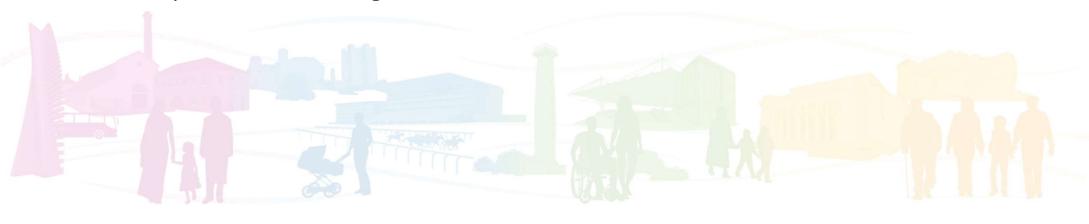
South Yorkshire Integrated Care Board

New Barnsley Campaign

 Barnsley specific – language, data

- Key messages:
 - Awareness of signs and symptoms
 - Importance of calling 999



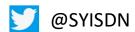






Any Questions?

Jaimie.shepherd1@nhs.net



KayeMann3@barnsley.gov.uk

