

# Integrated Care: Barnsley Health & Care Plan - Delivery Update (Jan 22)



# Introduction

Work continues on mobilisation and delivery of the Barnsley health and care plan, which sets out 25 strategic deliverables partners will work collaboratively to deliver (see slide 3).

In October 2021 the health and care partnership, due to operational pressures re COVID, agreement that programme leads should prioritise work plans for implementation over the Winter period.

Working with programme managers a draft milestone plan has been developed, which sets out the key programme deliverables through 21/22.

Notwithstanding pressures within the system, progress continues to be made across a number of areas.

The programme priorities and status of these in terms of delivery & finance are summarised overleaf. The focus for the plan in 21/22 is on operational delivery, rather than efficiency. This will be a key focus for the 22/23 plan – see next steps on slide 7.

# Health & Care Plan - Strategic Deliverables

Delivery

## Community vaccination

3. Deliver the COVID vaccination programme in line with national requirements
4. Focussed work on low uptake groups using targeted approaches such as behavioural insights

## Planned Care

5. We will put measures in place to ensure safe and effective care for people waiting for treatment.
6. We will provide targeted interventions, such as behavioural insights, to encourage those people who may have stayed away from services in the past to come forward and access treatment earlier.
7. We will extend advice and guidance, patient initiated follow-up, video appointments and other innovations to create more efficient pathways for patients

## Children & Young People/ Early Start partnership

8. We will establish mental health and wellbeing teams in Barnsley schools.
9. We will create a single point of access for children and young people's emotional health and wellbeing services
10. We will work with our local maternity and neonatal system to fully implement the recommendations from the Ockenden review and Better Births.

## Care Closer to Home

11. We will have more and better conversations with people about their health and wellbeing and how we can co-produce solutions to issues that matter to them.
12. We will deliver targeted proactive interventions to those who are at greatest risk of poor health and wellbeing outcomes and inequalities using a community multi-disciplinary approach.
13. We will work with our communities to increase resources that support health and wellbeing using an asset-based community development.

## Urgent & Emergency Care

14. We will provide consistent messaging and signposting support to best utilise self-care and urgent care away from A&E
15. We will work with experts to review and implement a new 'Front Door' navigation and streaming model
16. We will successfully introduce the new clinical standards for emergency care

## Mental Health

18. We will produce an all age mental health strategy to underpin delivery across our partnership increasing provision of early support.

## Design/ICP Development

17. We will work with our staff and stakeholders to adopt and deliver a place-development strategy

## Integrated Workforce

1. We will develop our proposals and launch Barnsley Health and Social Care Academy
2. We will create partnership-wide training opportunities bringing together 100s of staff from across the sector to learn together and share practice. There will be focus on strength-based conversations.

## Strategic Digital

19. We will deliver a shared care record solution to enable enhanced information sharing to support direct care.
20. We will promote digital literacy and inclusion.

## Strategic Estates

21. We will undertake a six facet review of the out-of-hospital health and care estate and use it to develop a Barnsley-wide estates strategy.

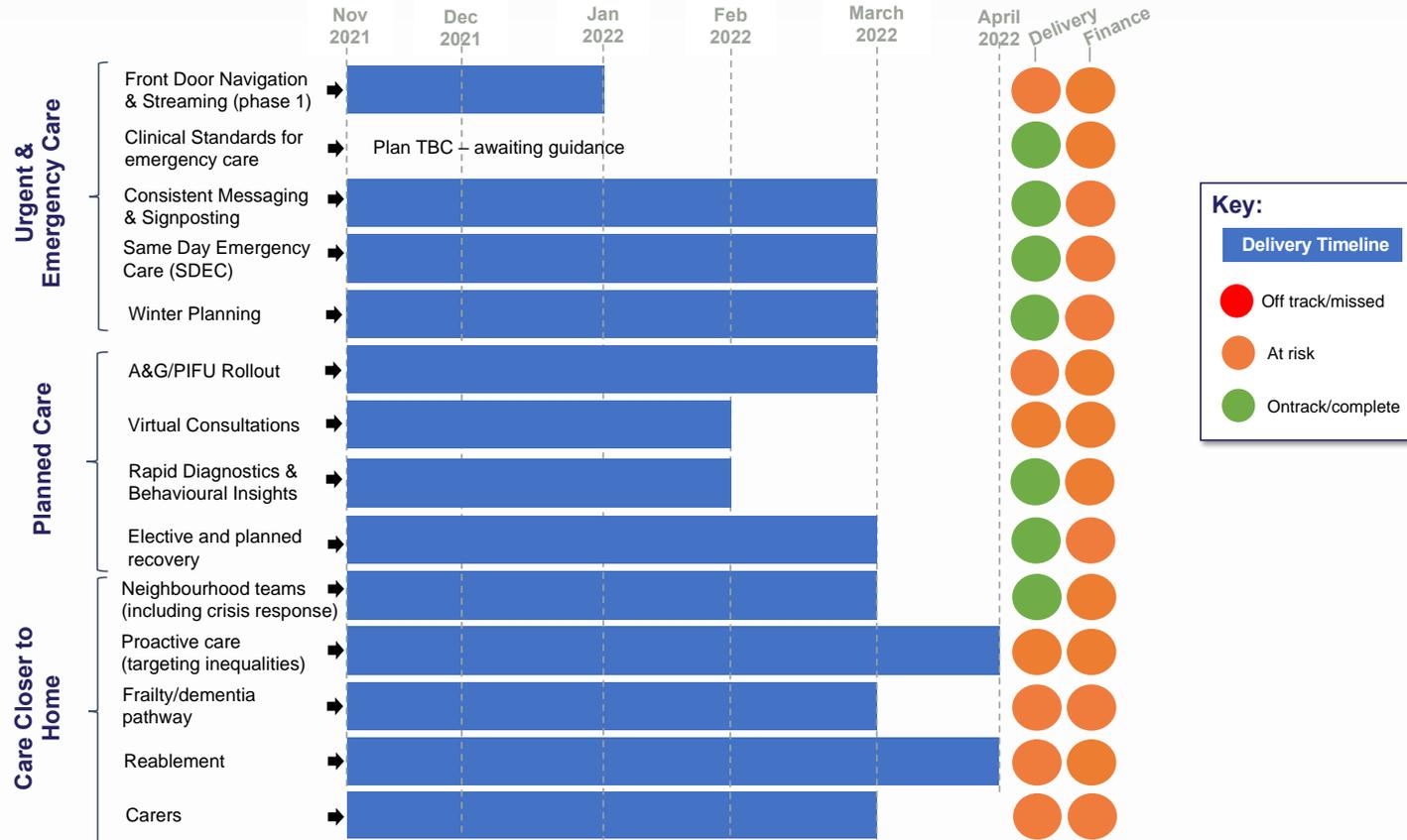
## Comms & Engagement

22. We will work with the delivery groups to put in place effective communications & engagement plans to support our ambitions.

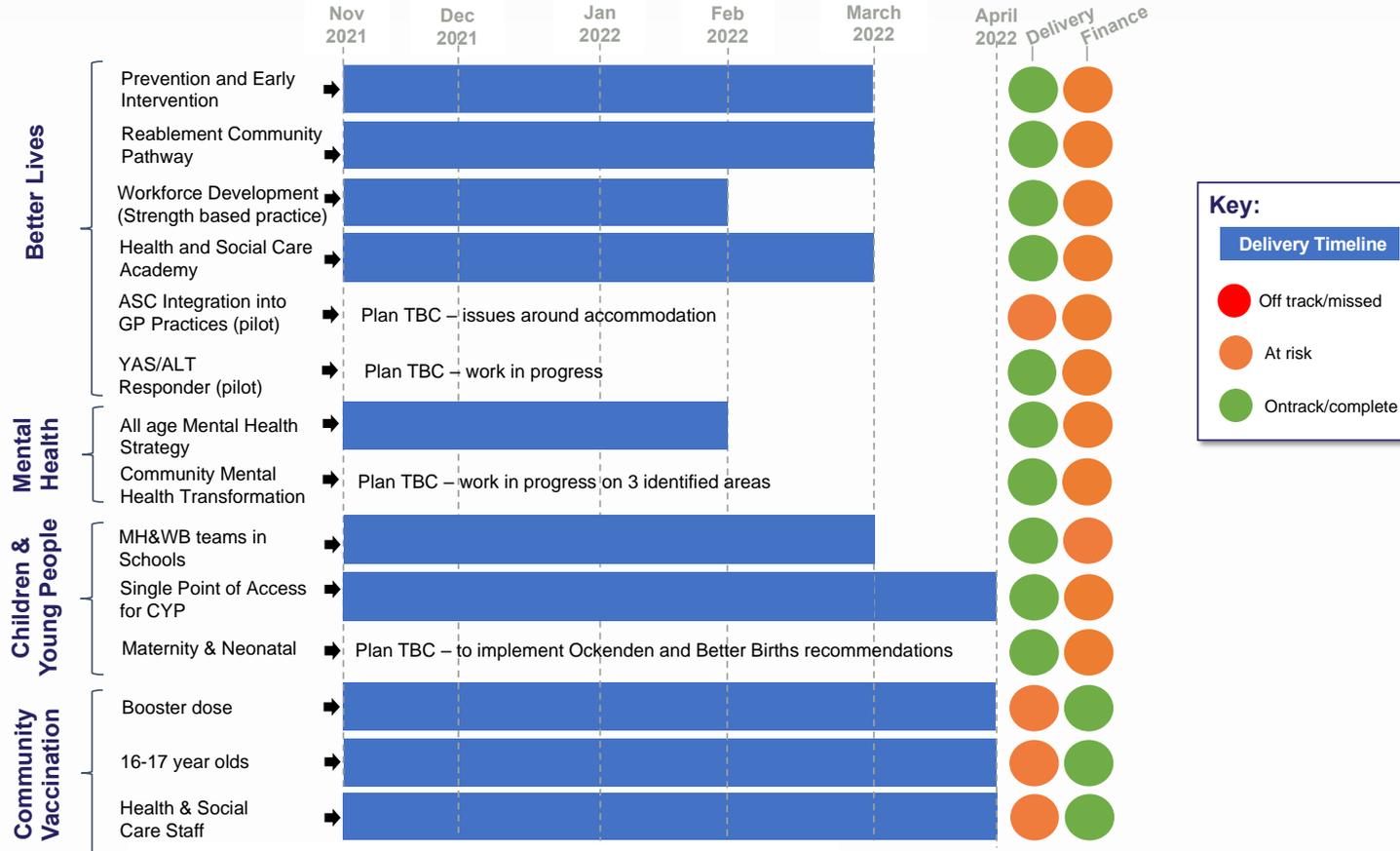
## Health Intelligence Cell

Enablers

# Programme Summary (1)



# Programme Summary (2)



# PMO Mobilisation

First integrated PMO meeting has taken place, well received from all attendees (programme managers & enabler leads) and over the coming months with a focus on implementation through a busy Winter period, it is envisaged this group will be an integral part of the place-based delivery arrangements feeding into ICDG/ICPG respectively.

Each programme asked to consider any further support requirements eg. resources to optimise delivery. Limited response to this request to this point, other than for facilitation support.

Further work required with Enablers to ensure work aligned with agreed delivery priorities  
Further work required through the Efficiency Executive to assess system efficiencies through delivery of the programmes

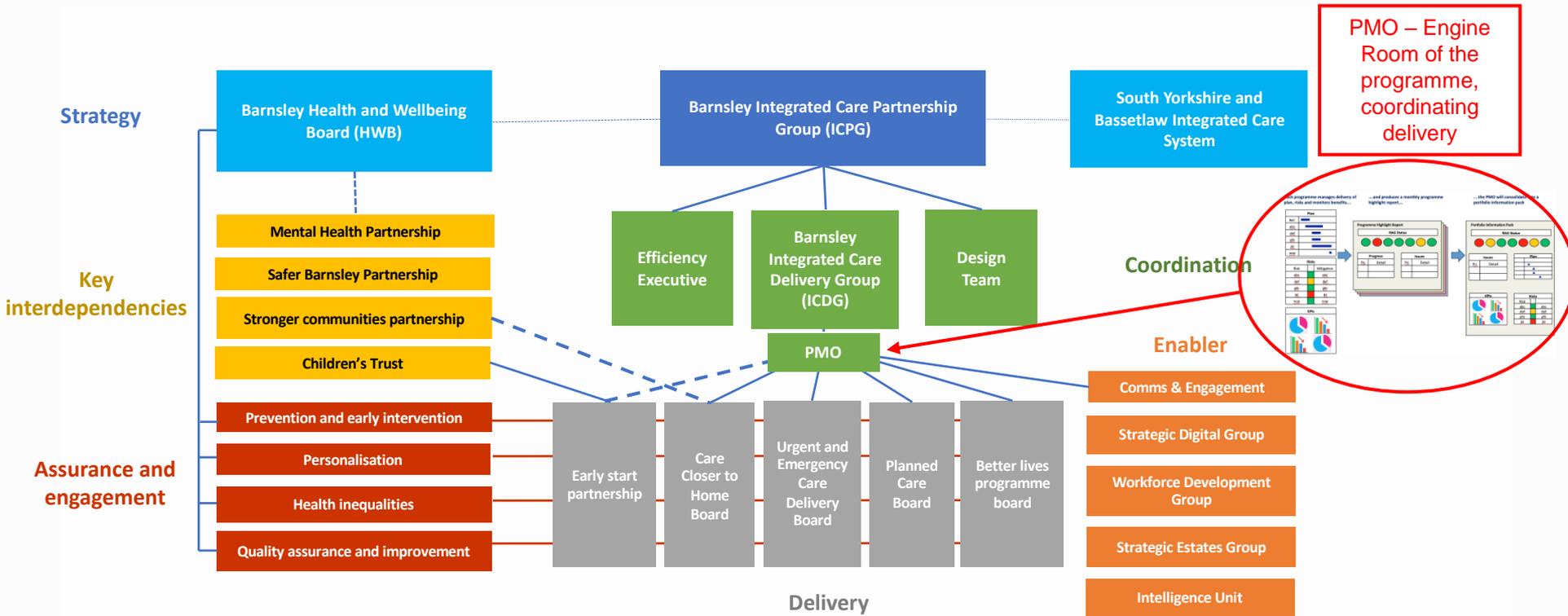
NOTE: This programme is still operating under C19 principles, recognizing operational pressures at place. All should note that some PMO BAU activities, such as PIDs, Business cases, benefits analysis, EIA, QIA processes are not being produced. **This will need to change for 22/23.**

# Next Steps

- The health and care partnership will commence planning for 22/23 and beyond (5 year plan refresh) from February 2020; operational situation permitting at that point
- Health and care partners are committed to continuing to engage with citizens and patients in the development of our 5 year plan – which will be undertaken in alignment with our ICS as well
- Most 21/22 priorities are expected to continue into 22/23, with the partnership committed to delivery
- 22/23 will see a return to a focus on efficiency and effectiveness and this will be a key element of our 22/23 planning.

# Appendix

# Governance - Reporting



# PMO Meeting – Outline Terms of Reference

Function	Members	Input	Frequency
<ul style="list-style-type: none"> <li>• Monitor and manage progress of projects and programmes milestones and any cost savings identified.</li> <li>• Identify slippage in the progress of schemes and agree plans to bring back into line with projected timescales.</li> <li>• For Opportunity Assessment/PIDs and Draft Business Cases to be discussed at PMO and approved before being taken through the HHCP governance process.</li> <li>• Agree proposed mitigating schemes to address such slippage, and to provide leadership for contingency planning.</li> <li>• Manage the HCP Risk and Issue Log and Interdependencies Log.</li> <li>• Map benefits realisation and KPI delivery.</li> <li>• Coordinate implementation of the recovery and cost savings plans</li> <li>• A forum to provide support for colleagues and to share learning and best practice.</li> </ul>	<ul style="list-style-type: none"> <li>• PMO Lead (Interim)</li> <li>• Programme Managers/Project Managers</li> <li>• Finance Lead</li> <li>• BI Lead</li> <li>• Comms and Engagement Lead</li> <li>• Digital Lead</li> <li>• Workforce Lead</li> </ul>	<ul style="list-style-type: none"> <li>• Logic Models</li> <li>• Business Cases</li> <li>• Programme Highlight reports</li> <li>• Implementation plans</li> <li>• Risk Register</li> <li>• Interdependencies Log</li> <li>• Transformation Dashboard/KPIs</li> <li>• Deep dive reports as required</li> <li>• Other reports to support project discussions</li> </ul>	<p>Monthly 2 hours</p> <p><b>Accountable to:</b></p> <p>Integrated Care Delivery Group (ICDG)</p> <p><b>Other:</b></p> <ul style="list-style-type: none"> <li>• Action and decision logs</li> <li>• Deputies are “in attendance” only</li> </ul>