



Sandwell and West Birmingham NHS Trust Board Committee Chair's Report

Meeting:	Integration Committee		
Chair:	Waseem Zaffar		
Dates:	7 th June 2023 & 5 th July 2023		
Present:		7 th June 2023	5 th July 2023
	Waseem Zaffar, Non-Executive Director (Chair)	Attended	Attended
	Lorraine Harper, Non-Executive Director (Member)	Apologies	Attended
	Daren Fradgley, Chief Integration Officer (Member)	Attended	Attended
	Dave Baker, Chief Strategy Officer (Member)	Apologies	Attended
	Mel Roberts, Chief Nursing Officer (Member)	Attended	Attended
	Rachel Barlow, Chief Development Officer (Member)	Apologies	Attended
	Tammy Davies, Group Director (PCCT)	Attended	Attended
	Val Taylor, Assoc. Non-Executive Director	Attended	Attended
	Dan Conway, Associate Director of Corporate Governance	Attended	Attended
	Jatinder Sharma – Non-Executive Director	Apologies	Attended
	Liam Kennedy, MMUH Delivery Director	Apologies	

* See Reading Room for assurance classification

1.	<p>IC Committee Effectiveness report and draft update Terms of Reference</p> <p><u>Chair's opinion:</u></p> <ul style="list-style-type: none"> • Committee completed an internal review of its effectiveness in April 2023 with a report presented to committee. • Areas of good practice included reporting of data requirements have improved over the last 12 months, the chair is very visible in the Trust and approachable to discuss matters offline, and the community takeovers have been positively received both internally and externally. • Areas of potential improvement include a review of work plan to be undertaken, a standing item to be included for a verbal update on any issues from other board committees, all board committees are on a journey with the quality of reports, etc. 	Substantial Assurance
2.	<p>SHCP Update</p> <p><u>Chair's opinion:</u></p> <ul style="list-style-type: none"> • The enhanced care homes model in Sandwell has delivered improvements with those homes receiving intensive, targeted care seeing significantly fewer ED attendances and admissions. • The integrated discharge hub has continued to focus on reducing the total number of patients in acute beds with No Criteria To Reside (NCTR_ and to increase the number of discharges within 48 hours. 	Substantial Assurance
3.	<p>LWPB Update</p> <p><u>Chair's opinion:</u></p> <ul style="list-style-type: none"> • Positive dialogue and progress between system and Trust particularly around MMUH. • Significant progress with operational delivery and planning, although yet we are not seeing measurable benefits. It is anticipated that improvements in outcomes will be evidence in the next 3 months. • Ladywood and Perry Barr has been identified as an accelerator site for the system integrated neighbourhood model. 	Reasonable Assurance
4.	<p>Provider collaborative update</p> <p><u>Chair's opinion:</u></p> <ul style="list-style-type: none"> • Work being carried out at the request of the collaborative chair to develop the governance of the projects. • At present 57 key projects have been identified – this needs to be refined into key projects in phases. 	Reasonable Assurance
5.	<p>Integration Metrics</p> <p><u>Chair's opinion:</u></p> <ul style="list-style-type: none"> • There are areas of success which include urgent community response achieving the 70% 2-hour response target for 3 months. • Admission avoidance and readmissions are also showing positive performance. • Further work required to consistently improve the discharge performance and overall bed occupancy. 	Reasonable Assurance
6.	<p>Sandwell Place – Governance Review and Alliance Agreement</p> <p><u>Chair's opinion:</u></p> <ul style="list-style-type: none"> • Governance review included simplifying reporting structures, bringing clarity to authority and decision making and streamlining appropriate engagement • The draft Alliance Agreement aims to bring formality to the partnership which includes roles and responsibilities of members. 	Substantial Assurance
7.	<p>Great Barr Medical Centre: Caretaking arrangements</p> <p><u>Chair's opinion:</u></p> <ul style="list-style-type: none"> • Trust has taken on a caretaking role to deliver primary care services from this Practice following suspension of the CQC registration resulting from an unannounced inspection. We have been engaged following a request from the Black Country ICB to assist. 	Substantial Assurance

	<ul style="list-style-type: none"> The trust are delivering the rescue package which includes addressing immediate quality and safety concerns and preparing for a CQC re-inspection. 	
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8.	MMUH Metrics <u>Chair's opinion:</u> <ul style="list-style-type: none"> Beds usage reducing with 45 beds closed and on track to achieve target. However, occupied bed days is increasing. Length of stay for the target Frailty cohort at Sandwell Hospital has seen a 10.3% reduction in the first three months of 2023, compared to 1.1% reduction at City Hospital where there are no provisions. 	Reasonable Assurance
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Positive highlights of note	Matters of concern or key risks to escalate to the Board	Matters presented for information or noting	Actions agreed
<ul style="list-style-type: none"> Committee completed an internal review of its effectiveness in April 2023 with a report presented to committee. Areas of good practice included reporting of data requirements have improved over the last 12 months, the chair is very visible in the Trust and approachable to discuss matters offline, and the community takeovers have been positively received both internally and externally. The enhanced care homes model in Sandwell has delivered improvements with those homes receiving intensive, targeted care seeing significantly fewer ED attendances and admissions. Trust has taken on a caretaking role to deliver primary care services from the Great Barr Medical Practice following suspension of the CQC registration resulting from an unannounced inspection. We have been engaged following a request from the Black Country ICB to assist. 	<ul style="list-style-type: none"> 	<ul style="list-style-type: none"> 	<ul style="list-style-type: none">

9.	IC Committee BAF Chair's opinion: <ul style="list-style-type: none"> Will be fully presented at the next meeting following a deep dive. 	N/a
10.	SHCP Update Chair's opinion: <ul style="list-style-type: none"> Place interventions are embedded and starting to convey positive results. Meeting received update on the refreshed governance structure. Considerable progress across urgent care and unplanned care delivery groups with improvements in the timeliness of discharges. However, the uncertainty regarding the System Development Funding (SDF) is creating uncertainty and risk to continue delivering these vital services that assist substantially in reducing attendance, admission, and length of stay. 	Substantial Assurance
11.	LWPB Update Chair's opinion: <ul style="list-style-type: none"> Progress continues to be made in relationships with partners and there is now more alignment with MMUH amongst partner organisations. Work is being initiated on the neighbourhood model in West Birmingham but the continued approach of system to work across the entire Birmingham City Council geography does raise more questions than answers. 	Reasonable Assurance
12.	Provider collaborative update Chair's opinion: <ul style="list-style-type: none"> The key highlight is the work taking place to create a Joint Provider Committee (JPC) across the four trusts as a committee of member boards. Governance arrangements for this committee are being initiated. The work of collaborative is twofold: lead the delivery of improvement in both clinical and corporate areas and secondly to embed the JPC governance to ensure that collaborative is acting on behalf of the member Trusts. 	Reasonable Assurance
13.	Integration Metrics Chair's opinion: <ul style="list-style-type: none"> Key metric of reducing acute care occupied beds by 86 in line with plans to fit into MMUH are progressing and currently reduction of 42 has been achieved. Plans for a further reduction of 20 are progressing well too. On the metric to maintain over 70% of patients are seen within two hours urgent community response target, whilst increasing contacts per month from 1200 to 1500 per month has seen good progress. Currently at 1000 to 1200 per month contacts has been achieved 	Reasonable Assurance
14.	UTC Development Update Chair's opinion: <ul style="list-style-type: none"> Lack of clarity around where the £13.6m capital funding required to deliver this very important UTC will come from. £2m needed in the current financial year to achieve phase 1 of the modular build. Revised plans include a reduction from a 24/7 operation to 14.5 hours per day over 7 days 	Partial Assurance
MMUH and Place rightsizing assurance report		

15.	Chair's opinion: <ul style="list-style-type: none"> Assurance received on the governance arrangements that have now been established with the rightsizing programme now moving into implementation stage. Committee noted that the risk to delivery of the scheme is linked to the lack of programme and project resource which needs urgent addressing. 	Reasonable Assurance	
16.	MMUH Metrics Chair's opinion: <ul style="list-style-type: none"> Committee reviewed the May 20203 performance against the right MMUH Board metrics and note next steps for improvement. 	Reasonable Assurance	
17.	Great Barr Medical Practice Chair's opinion: <ul style="list-style-type: none"> CQC report has been published. Good assurance that the work of the trust at the practice is focusing on the key issues outlined in the report. Concern around the long term management of the practice. 	Reasonable Assurance	
Positive highlights of note	Matters of concern or key risks to escalate to the Board	Matters presented for information or noting	Actions agreed
<ul style="list-style-type: none"> Excellent community take over in Lozells by the Active Wellbeing Society (TAWS) and the Villa Cross Coup Kitchen. Place based projects in Sandwell are being embedded and starting to show good results particularly in terms of reductions in attendance, admission, and length of staff Continued progress being made in Ladywood and Perry Barr with key work around neighbourhood based provision at the next stage. 	<ul style="list-style-type: none"> The uncertainty regarding the System Development Funding (SDF) is creating uncertainty and risk to continue delivering these vital services that assist substantially in reducing attendance, admission, and length of staff. Lack of clarity around where the £13.6m capital funding required to deliver this very important UTC will come from. The Trust has been asked to take over the Great Barr Medical Practice following CQC intervention. Work is progressing well but there is reputational risk in the Trust going in and assisting a practice with substantial issues as well as the long term future of the management of the practice. 	<ul style="list-style-type: none"> 	<ul style="list-style-type: none">