

Report Title:	Place Based Partnerships – The next 6 months		
Sponsoring Executive:	Daren Fradgley – Executive Director of Integration (interim)		
Report Author:	Daren Fradgley – Executive Director of Integration (interim)		
Meeting:	Trust Board (Public)	Date	2 nd December 2021

1. Suggested discussion points *[two or three issues you consider the Trust Board should focus on]*

Last month the Trust Board approved the short term development areas for the creation of a functioning Sandwell Place Based Partnership with the Trust as a Host. This paper provides an update against these areas as noted below.

- **Senior Leadership**
- **Governance & Lines of Assurance**
- **Transformation Plan**
- **Financial and contractual profiling**
- **Workforce review and leadership development**
- **Data management and modelling**
- **Communication and Engagement**

In addition, further work is underway to develop how we support the creation of the Ladywood & Perry Barr Place Based Partnership to maintain equitable service across the ICS boundary which supports the patient flows in and out of current services whilst planning for the opening of MMUH.

This work is critically important given the Birmingham and Solihull system has a differing view of place based accountability, favouring Birmingham as a whole as the place. The Trusts position in influencing the retention of a local Place Board for this population is of critical importance if we are to address the local wider determinants of health.

2. Alignment to our Vision *[indicate with an 'X' which Strategic Objective this paper supports]*

Our Patients	Our People	Our Population	
To be good or outstanding in everything that we do	To cultivate and sustain happy, productive and engaged staff	To work seamlessly with our partners to improve lives	x

3. Previous consideration *[where has this paper been previously discussed?]*

The Case for Change –September 2021
Place Based Partnership guidance October 2021
6 month road map – November 2021

4. Recommendation(s)

The Trust Board is asked to:

- a. NOTE** the contents of the paper
- b. DISCUSS** any suggested changes in the approach proposed
- c. APPROVE** As part of the post-governance review action planning, approve in principle the establishment of a Board Integration committee, replacing the Public Health Committee from the previous structure

5.	Impact <i>[indicate with an 'X' which governance initiatives this matter relates to and where shown elaborate]</i>					
Trust Risk Register	x	Risk register in development				
Board Assurance Framework	x	BAF for this item in development				
Equality Impact Assessment	Is this required?	Y	<input type="checkbox"/>	N	<input type="checkbox"/>	If 'Y' date completed
Quality Impact Assessment	Is this required?	Y	<input type="checkbox"/>	N	<input type="checkbox"/>	If 'Y' date completed

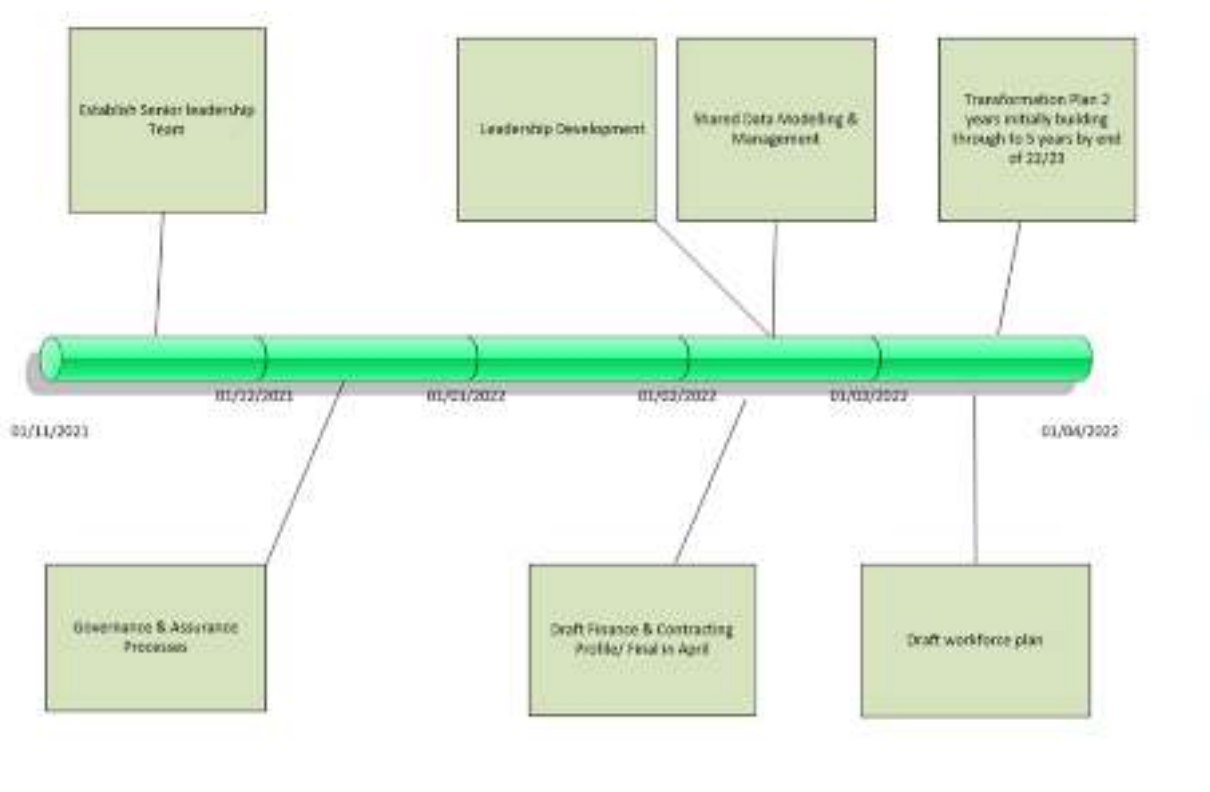
SANDWELL AND WEST BIRMINGHAM HOSPITALS NHS TRUST

Report to the Public Trust Board: 2nd December 2021

Place Based Partnership update

1. Introduction

- 1.1 This paper provides an update against the 7 core themes that were approved at last month's Trust Board for the Sandwell Place. It also provides an update for the Ladywood and Perry Barr Place.
- 1.2 Embedded within this update is the progress of some items such as work on discharge to assess and intermediate care which fall into the scope of Place.



2. Sandwell Place progress and Senior Leadership

- 2.1 The 7 themes agreed at the Trust Board were also fully supported by the Sandwell Place Board and definition of these items and more importantly delivery is underway.
- 2.2 Whilst the recruitment of the Place Based Development team (PMO) has not yet been agreed, the agreement that one needs to be established and the requirement to fund this initially through the transformation element of the Better Care Fund is agreed. It is expected that some of this team will come from provider and commissioner roles within the Place already working on similar pieces of work that can immediately align.
- 2.3 The Place Board has now agreed to establish the Senior Leadership Team (SLT) with immediate effect and the membership for the first meeting in early December is being established at the time of writing
- 2.4 It has been identified that there is a tension both on the time for primary care leadership to attend meetings but also how they represent and cross cover each other.

To address this, a few of the primary care Clinical Directors have agreed to come up with a collaboration agreement.

3. Governance & Lines of Assurance

- 3.1 A draft governance wiring diagram has been agreed at the Place Board and commitment from all of the partners that further work on the subgroups will take place over November and early December so this can be concluded and deployed by the end of the calendar year
- 3.2 Initial discussions have taken place to look at an Integration Committee being established as a committee of the Sandwell & West Birmingham Trust Board focusing on Place both in Sandwell and Ladywood and Perry Barr. This will replace the current Population Health Committee and subject to agreement as part of the governance review action planning, should commence from January 2022. A graphic of how the structure of the groups will be formed is outlined below. Work is now underway to establish the terms of reference for these groups and the relevant approvals to fit in with the governance of the partner organisations. It should be noted that this is still a work in progress and not yet for formal approval.



4. Transformation Plan

- 4.1 The Place Board has agreed to work in partnership on the following items whilst the wider transformation plan is delivered:-
 - 4.1.1 Discharge to assess to ensure that a safe process is maintained through winter and incremental improvements month on month are maintained.

- 4.1.2 Deployment of the Knowle Integrated Health and Care Centre by the local authority that will add an additional 80 step down and step up beds into the system. It should be noted that there currently a recurrent funding gap for this facility which is being coordinated by the local authority and will need resolving with all partners before this is commissioned.
- 4.1.3 Deployment of the End of Life transformation programme through the newly agreed 6 Place promises.
- 4.2 In addition to this work, the Trust's PCCT Group is working on a proposed Care Coordination Function which will align the efficient access of patients and professionals into Trust services similar to a traditional single point of access. No such facility exists to date and when deployed in other areas, it has proven to streamline uncoordinated access to services, remove duplication and improve timeliness of care and support to patients.
- 4.3 A future fit estates option that will place a physical partnership presence in each of the neighbourhoods we serve with the collective ambition of health and wellbeing centres is being finalised. Several buildings have already been identified as viable and work is underway to see how they can be deployed into the new Place model. Supporting this, work is underway to establish the 6 neighbourhood teams to support the towns of Sandwell and align with the local authority social care teams.

5. Financial and contractual profiling

- 5.1 Support from the commissioners that the Place will now work in partnership with the commissioners initially on the allocation and prioritisation of the Better Care Fund.
- 5.2 The commissioners have agreed to invite the Place providers to the BCF planning meeting to align the decision making with a future ambition to merge together the commissioning and senior leadership teams over a period of time. Board members will note from the governance wiring diagram above that this is outlined.

6. Workforce review and leadership development

- 6.1 It has been agreed to allocate funding to the development of the Place based leadership team with a strategic principle of removing organisation boundaries and aligning organisation decisions. This work, which will commence in January, will start to address the cultural differences that exist between the different organisations in the place. The funding has been sourced from the system development fund.

7. Data management and modelling

- 7.1 Agreement has now been reached by the Place Board to focus the collective knowledge of the partners in building an information and response picture for the operational teams. This will look at three domains. 1) The operational flow of the patients and citizens through the Place Based services, 2) The wider determinants of health and the needs of the populations 3) The health inequalities that exist within the borough and how we are addressing them or not as the case may be.
- 7.2 The Trust has already commenced this work with a population health database which is advanced. Whilst this information is feature rich and can be used immediately, it will be

used in conjunction with wider Place data to build a greater picture of the needs of the citizens and not just the patients.

8. Communication, Brand and Engagement

8.1 Initial scoping underway to understand what additional resource is required to link the partners together and build on the work already started on the public engagement for MMUH. This is vitally important so that both major programmes of work link together and complement each other. All the partners agree that a central coordinating function for communication and engagement is required. This resource will be added to the place development team but will report directly to the host's Director of Communications.

9. Ladywood and Perry Barr Place

- 9.1 The above Place board continues to meet and develop a plan of work to establish a Place Based Partnership within the BSOL system. It is fair to say that to date the same progress has not been made in this area and all partners agree that more dedicated development resource is required to ensure that the same progress is made here. A proposal from BCHC is being developed
- 9.2 Birmingham Community NHS Foundation Trust is leading this Place with the support of the Trust and the other partners and their CEO has committed to aligning the thinking in this area and increase the pace of change required.
- 9.3 The thinking of the creation of Places smaller than the Birmingham footprint is not yet aligned with the Black Country and does place a material risk to progress in this area. However all partners agree that there will be a retained local board for this area but the levels of delegation from the wider Birmingham system are unlikely to match those provided to Sandwell from the Black Country System.
- 9.4 It is clear that the Trust must retain influence in this area if it is to maintain equality of services to the patients of West Birmingham through MMUH. To this end we have agreed to establish similar work with the West Birmingham GP's as we have in Sandwell and the Trust will work further to maintain primary care alignment with other partners in that part of the operational geography.

10. Recommendations

10.1 The Trust Board is asked to:

- NOTE the contents of the paper
- DISCUSS any suggested changes in the approach proposed
- APPROVE: As part of the post-governance review action planning, approve in principle the establishment of a Board Integration committee, replacing the Public Health Committee from the previous structure

Daren Fradgley
Executive Director of Integration (Interim)
November 2021