



Meeting of the Partnership Senate

Summary sheet

Date of meeting: 14 January 2021

For: Public session (Part 1)

For: Decision

Agenda item: Cornwall & Isles of Scilly Health and Care Partnership System Board Objectives

Author(s): Carolyn Andrews

Presented by: Carolyn Andrews

Purpose of report

The purpose of the report and verbal update is to brief the Senate on progress so far and to seek the Senates approval of the revised defined system objectives.

Recommendations and specific action the Partnership Senate needs to take at the meeting

The Senate is asked to:

1. To note the progress to date and further work required.
2. To support and accept the revised defined system objectives recognising work in progress in a challenging environment

Additional required information

Engagement and involvement: There have been numerous and various discussions with Programme Board Directors and Chairs as well as Business Intelligence colleagues in the development.

Risks and issues: None identified

Equality and prevention implications: The objectives identified meet the strategic context within the Long Term Plan, Health and Wellbeing Strategy to implement prevention options and equity of provision.

Climate change implications: None



Programme board objectives

One Vision Board (children and young people's transformation)

Best start in life

Children's will achieve their optimum physical and emotional development ensuring they are ready for learning at 2 and ready for school at 5.

Building resilient families

Families will be supported to overcome adversity whilst protecting children from harm.

Healthy children and belonging

Children and young people's additional needs will be identified early and they will receive an appropriate integrated service.

Improving mental health and emotional wellbeing

Children's mental health needs will be identified at the earliest opportunity and they will receive the right help at the right time to promote recovery and prevent escalation.

Planned care (outpatients transformation)

Advice and guidance (A&A)

Formal, electronic advice and guidance services available across all services, again, regardless of source.

Patient initiated follow-up (A&A)

When a patient, or their carer, can initiate their own appointments as and when they need them. The patient initiated follow-up approach helps to empower patients to manage their own condition and to take responsibility for arranging the appointments they need, and plays a key role in enabling shared decision making and self-management in line with the personalised care agenda.

System wide waiting and patient treatment lists

Establish, monitor, book from and report on a single Cornwall waiting lists and a single Cornwall referral to treatment patient treatment list, achieving equitable waits, regardless of provider.

System wide referral assessment service (A&A)

1 single electronic point of entry for all referrals and requests regardless of source. Enabling vetting and triage of requests and referrals to the most appropriate event type and capacity, regardless of provider.

Collaborative community board (Embrace and Ageing Well accelerator programme)

Ageing Well urgent community response

Deliver the Ageing Well urgent community response model as 1 of 7 accelerator sites. With the aim of providing a rapid community clinical crisis response service within 2 hours and providing reablement services within 48 hours.

Community intervention offer

Designing, and implementing an integrated health and social care frontline service model that makes the original aims of primary care networks and population health management a reality – local, flexible, placed-based care and leadership.

Temporary bedded care

Remodelled bed base providing effective bedded rehabilitation and reablement for those that are unable to return home. Reducing reliance on temporary bedded care and reducing the length of stay in community hospitals.

Urgent and emergency care board (discharge to assess)

Discharge to assess (D2A)

- Increase active discharge planning from the moment the patient arrives in hospital.
 - Increase home based reablement and assessment to ensure quick discharge from the hospital.
 - Create capacity and increase referrals to Steps and Home First.
 - Secure and increase D2A beds.
 - Reduction in bedded care.
 - Reduction in holding ambulances.
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People board

Delivery of the local NHS people plan alongside the national people plan.

Attract and recruit

- Continuous development of marketing techniques to attract high calibre staff.
- Offer flexibility in the way we work including rotational and placement opportunities across health and care settings.
- Be inclusive and support different ways of recruiting, for example Department of Work and Pensions or local enterprise partnership.

Develop and upskill

- Ensure access to high quality education and learning activities.
- Plan our workforce of the future based on the needs of our local community.
- Prepare colleagues to work in new and innovative ways by giving them the skills to do this.
- Promote digital skills to upskill.

Retain and support

- Deliver effective health and wellbeing activities
 - Deliver flexible career development opportunities including rotational opportunities across health and care settings.
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