#### **Health and Wellbeing Board**

#### Feedback from the Place Forum

15 September 2020

#### Recommendations

The Health and Wellbeing Board is asked to:

 Note and comment upon the outcomes of the joint meeting of the Coventry and Warwickshire Place Forum and Health and Care Partnership Board meeting on 15<sup>th</sup> July.

## 1. Executive Summary

- 1.1 Coventry and Warwickshire's Health and Wellbeing Boards met as the Place Forum in a joint meeting with the Health and Care Partnership Board on 15<sup>th</sup> July 2020. The meeting was held online via Microsoft Teams and attended by over 70 people.
- 1.2 The meeting reflected on the response by health and care system agencies to the Covid-19 pandemic and allowed the opportunity to have wider conversations about the implications of COVID19 and the opportunities for working together as a health and wellbeing system and to enable consideration of the most effective route forward.
- 1.3 The aims of the session were to:
  - 1.3.1 Reflect on the experience and learning from the Covid-19 pandemic
  - 1.3.2 Understand how the pandemic has affected our local communities
  - 1.3.3 Share plans for ongoing virus management and restoration and recovery
  - 1.3.4 Provide key business updates
- 1.4 The agenda and presentations are available at: <a href="https://www.happyhealthylives.uk/about-us/our-partnership-board/">https://www.happyhealthylives.uk/about-us/our-partnership-board/</a>

# 2. Outcomes of the Joint Place Forum and Health and Care Partnership Board

- **2.1 Learning from our Covid-19 response:** Two case study examples of learning from the COVID19 response were shared:
  - an emerging proactive approach to staff wellbeing which is being led by Coventry and Warwickshire Partnership Trust, to address the psychological impact of COVID19 on staff across the system; and

• collaborative action between NHS, local authorities and community and voluntary sector partners to implement the national discharge requirements locally – emphasising the strength of existing relationships which enabled a rapid and effective response.

It was noted that the first case study importantly emphasised the inequalities that have been highlighted by the impact of Covid-19 and the need to work across sectors and partners to address these. Related work recently completed by the NHS Assembly was referenced.

- 2.2 Understanding our communities the impact of Covid-19 (Duncan Vernon): Findings about the impact of Covid-19 on our communities from a rapid Covid-19 health impact assessment undertaken collaboratively by local authority and CCG insight and intelligence teams were shared. The presentation and discussion reinforced the wide-ranging and long-term consequences of the pandemic and the importance of working together beyond the health and care system, in wider partnership-based approaches, to address these. It was noted that the pandemic has exacerbated and entrenched existing inequalities, and an ongoing collective response will be critical.
- 2.3 Covid-19 Local Outbreak Control Plans local implementation as a beacon site (Monica Fogarty, Valerie de Souza): The meeting received a presentation on the COVID19 Local Outbreak Control Plans and the role of Warwickshire, Coventry and Solihull as one of 11 national beacon sites for implementation of the Test and Trace programme. Work in each of the 9 priority workstreams was described, with additional capacity being commissioned in key areas of testing and infection control and prevention (IPC). Discussion focused on the importance of establishing trust with local communities and working with community partners to reinforce key messages to prevent and contain the virus. There was concern about mixed and confusing messages and the importance of "culturally competent" communication, with recognition that compliance would be achieved through community support rather than enforcement.
- 2.4 Looking forward: Resetting health and wellbeing in Coventry and Warwickshire (Pete Fahy, Shade Agboola): Plans to reset health and wellbeing priorities in Coventry and Warwickshire were shared, emphasising the need to take a population health approach to recovery. Key discussion points included "cultural competency" i.e. understanding values within different cultures and how what we do responds to what they need. This means working with communities and not assuming we know the answer. Discussion also included the need to reduce health inequalities and priority setting for this. The Health and Wellbeing Boards have a key role to play in priority setting, and in ensuring that data and evidence about how to address inequalities is used to inform priorities. There is a need for partners to take responsibility for addressing inequalities both within organisations and collectively as a system. The importance of place-based approaches was also emphasised – data must be combined with local intelligence to inform action in communities.

- 2.5 Looking forward: NHS Covid-19 restoration and recovery (Adrian Stokes, Andy Hardy): Details of the NHS Covid-19 Restoration and Recovery programme were presented, including examples from Primary Care and Cancer Care of how services have adapted in the context of the lockdown. Primary Care had seen a significant shift to telephone first, and digital consultations where possible, and similarly with 48% of cancer consultations happening through telephone or video. Work is now underway to reopen elective care, with challenges around productivity and prioritisation due to the complexity of different phases of pandemic management and recovery happening concurrently. The acute response to the pandemic was mobilised at impressive speed and this was dependent on collaborative work with system partners
- 2.6 CCG merger update (Sarah Raistrick, Sharon Beamish, David Spraggett): An update was given on the planned merger of the three CCGs, which remains on track for national approval in autumn 2020, to be effective from April 2021. The merger is an important step in the move to an Integrated Care System and will simplify commissioning, allowing a focus on population health and providing a vehicle to delivery at place. Recruitment to a single accountable officer post across all 3 CCGs is now in progress and it is expected that the appointment will be announced in September. Once the merger is approved, a new chair will also be recruited.

### 3. Financial Implications

3.1 There are no financial implications from this update.

# 4. Environmental Implications

4.1 There are no environmental implications from this update.

# 5. Timescales associated with the decision and next steps

- 5.1 The following next steps were agreed:
  - Ensure that the achievements, challenges and lessons learnt from the system-wide response to the pandemic are captured and harnessed to inform future activity
  - Use the Coventry and Warwickshire COVID-19 Health Assessment to inform recovery, restoration and reset plans as a system, in our places and in our organisations
  - Work collectively as a system to ensure that priority is given to addressing inequalities in outbreak management and recovery plans
  - Re-emphasise our system commitment to health and wellbeing in its widest sense by ensuring our population health model is the framework for

- all outbreak management, prevention and recovery activity
- Support development of place recovery plans, working together with local communities to tackle inequalities and improve population health.
- 5.2 The next meetings of the Place Forum and the Health and Care Partnership Board are scheduled to take place on 3 November 2020
- 5.3 At the Place Forum meeting on 3 March, there was support for a proposal to hold a summit event, involving wider colleagues from the voluntary and community sector, primary care and community services, focused around the five year plan. An event in this form was not feasible in the current context but it is possible that this proposal could be revisited and, if appropriate at the time, the opportunity could be taken in November to connect with a wider audience.
- 5.4 Proposals for the November meeting will be developed and brought to a future meeting of the Board.

#### **Appendices**

None

#### **Background Papers**

None

	Name	Contact Information
Report Author	Gemma Mckinnon,	gemmamckinnon@warwickshire.gov.uk,
	Catherine	catherineshuttleworth@warwickshire.gov.uk
	Shuttleworth	
Director of Public	Dr Shade Agboola	shadeagboola@warwickshire.gov.uk
Health		
Lead Director	Nigel Minns	nigelminns@warwickshire.gov.uk
Lead Member	Cllr Caborn	cllrcaborn@warwickshire.gov.uk

The report was circulated to the following members prior to publication: WCC members: Councillors Caborn, Redford, Bell, Adkins, Kondakor and Roodhouse