

MEETING OF THE PUBLIC TRUST BOARD – 1 st October 2020				
Walsall Together Partnership Board Highlight Report			AGENDA ITEM: 11.1 ENC: 11	
Report Author and Job Title:	Trish Mills Trust Secretary	Responsible Director:	Anne Baines - Non Executive Director.	
Action Required	Approve □ Discuss ⊠ Inform ⊠ Assure □			
Executive Summary	 The report provides the key messages from the Walsall Together Partnership Board meeting on 23rd September 2020. The key points for the attention of the Board are: The Director of Public Health, Walsall Council provided a COVID- 19 updated, giving credit to regulatory services, community teams and ongoing community support for the fact there has not been large outbreaks in the community. 			
	 An enhanced care homes support delivery model was approved which demonstrates the additional benefit that the Walsall Together Alliance can bring to transforming community based services. The approach taken to care homes during COVID-19 by Walsall Together was recently cited as good practice in the national Social Care Taskforce Report. 			
	 There are growing concerns about the requirement for staff going into homes to have weekly COVID-19 swabbing, since Community Services are unable to access the swabs to implement this. It raises concerns about the viability of the commissioned strategy to support care homes over the winter, and will be added to the risk register. Significant pressures are being placed on mental health services, with unprecedented numbers presenting to accident and emergency. Discussions will continue on how the partnership can assist the mental health partnership to address this. 			
Recommendation	Members of the Board are asked to note the report.			
Risk in the BAF or Trust Risk Register	This report aligns to the BAF risks for Care at Home (S02) and COVID-19 (S07)			
Resource implications	There are no new resource implications associated with this report.			

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Respect Compassion Professionalism Teamwork

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Legal, Equality and Diversity implications	There are no legal or equality & diversity implications associated with this paper.		
Strategic Objectives	Safe, high quality care 🗆	Care at home 🛛	
	Partners	Value colleagues 🗆	
	Resources 🗆		

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WALSALL TOGETHER PARTNERSHIP BOARD

KEY AREAS FOR CONSIDERATION BY THE BOARD

The Committee met on 23rd September 2020, with the meeting Chaired by Mrs Anne Baines, Committee Chair and Non-Executive Member of the Walsall Healthcare Trust Board.

The Committee reports to all Partner Boards each month on key issues from the meeting.

1. Patient Story/User Update

Walsall Housing Group highlighting the integrated work that is being undertaken as part of their Social Prescribing model, which is aimed at reducing social isolation and improving the physical and mental health of their customers.

A user story presented to the Partnership Board illustrated the use of the "what matters to me" approach under the Social Prescribing model, with the focus being placed on the customer, with bespoke actions put in place for their particular needs. The Partnership Board heard of a range of actions introduced for one individual that included help with communication tools to contact family, do online shopping and socialise; assistance with utility providers; referrals for home adaptations; fire safety checks; and a pendant alarm. The Partnership Board commended the work of the Walsall Housing Group and recognised the significant improvements this brought to their customers with relatively small investment.

2. Operational Update

Key performance indicators were reviewed for partners noting:

- Referrals to the care coordination service remain higher than at the start of the year
- This work is being absorbed by the Rapid Response Team with increased support provided by the Locality Teams
- The numbers of patients at Walsall Manor Hospital who are medically stable remain at a significantly reduced level
- The Decision Support Tool process has been resumed but the backlog clearance for people predominantly in care homes will take >4 months
- In care homes, resident numbers have started to increase slowly and deaths have returned to normal levels

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There are concerns about the requirement for staff going into homes to have weekly COVID-19 swabbing, since Community Services are unable to access the swabs to implement this. It raises concerns about the viability of the commissioned strategy to support care homes over the winter. This has been added to the risk register as one of the primary risks.

Partner restoration and recovery activities were discussed, noting the increase in demand for both primary care and mental health services.

3. Programme Update

The overall status of the Programme Plan is 'green'. There are 2 items that have been delayed in starting and 1 item that is now overdue. The following exceptions are reported:

- Approval of the Tier 0 Resilient Communities Plan is overdue; an updated position will be provided following a workshop with key stakeholders to be arranged for as soon as possible in September or early October;
- The above delay is impacting on the Grant Funding Programme within Resilient Communities and this is currently showing as a delayed start;
- The integration of primary and community mental health services is delayed; Black Country Healthcare have paused their transformation initiatives during COVID-19.

The Partnership Board received an overview of health inequalities in the context of the partnership and how deliverables in the plan are prioritised according to their importance in delivering integrated care and reducing health inequalities. These priorities include the deployment of the population health module, creating a living directory for community and voluntary services and ensuring there is a robust, single model for social prescribing in Walsall. It was agreed that the focus on health inequalities needed to be more prominent and run as the golden thread through everything the partnership does. There is currently an analysis underway of population health needs which will inform the population health strategy in this regard.

4. Winter Plan and Flu Arrangements

A winter planning sub-group has been established to synthesise what planning is to be delivered and how it is to be resourced. Current focus is on hospital discharge services and the social care COVID-19 winter response plan.



5. Walsall Palliative Care Services

The addition of the 12 beds at Goscote was recognised as an opportunity to enhance the partnership's end of life pathways, and partners are working closely with Compton CCG to strengthen integration in this regard.

6. Enhanced Support in Care Homes

The Partnership Board approved an approach to a system-wide and integrated overall delivery model for enhanced support to care homes in Walsall, commending the primary, community and care home integration in the model.

The delivery model draws upon lessons learned from the COVID-19 response to date and aims to establish the programme of enhanced support for care homes as a formal programme as part of the Walsall Together Partnership. This includes a consolidation of the current support arrangements to reduce duplication and to make more effective use of the overall level of resources by improving the extent of co-ordinated and multi-disciplinary working.

There was support in principle from the CCG on the funding aspects of the model which are currently covered by COVID-19 funding, and the Partnership Board noted that this would be the subject of internal governance to commit to additional resources.

7. Walsall Together Branding

The Partnership Board were pleased to approve the new branding for Walsall Together, the logo of which is set out below:



8. Risk Register

The Partnership Board operates within the governance arrangements of Walsall Healthcare Trust as Host Provider. Each organisation retains its statutory responsibilities and accountability for risk management, as outlined in the Alliance Agreement. Partner organisations were requested to share sections of their corporate/strategic risk registers that are pertinent to the partnership in order that the Partnership Board can offer support with mitigation and also be informed of any individual organisation risk that may have implications for the partnership.

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There are 7 risks identified with current risk scores range from 8 to 16. Those rated at 16 (major) are (a) the availability of funding to deliver the full transformation; and (b) the size and complexity of the local population health challenges.

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The risk related to swabbing capacity and availability will be added to the risk register.

