



Staffordshire and  
Stoke-on-Trent  
Integrated Care Board

# Integrated Care Board Briefing

Staffordshire and Stoke-on-Trent  
ICB Meeting

17 October 2024

## NHS Staffordshire and Stoke-on-Trent Integrated Care Board

This briefing aims to keep partners informed of the discussions at the NHS Integrated Care Board (ICB) meeting in public. To watch the recording and read the papers [visit the ICB website](#).

### ICB Chair and Executive update

- David Pearson, Chair, and Peter Axon, Chief Executive Officer, presented the report.
- David was pleased to share that the Veteran Friendly Accreditation is continuing to be rolled out and the number of practices accredited continues to increase, with 88% of practices in Staffordshire and Stoke-on-Trent now being accredited.
- David also advised that selected Primary Care Networks (PCNs) in Staffordshire and Stoke-on-Trent will be developing women's 'health hubs' to address health inequalities.
- David also wanted to draw attention to the [Director of Public Health Annual Report for Staffordshire County Council](#) and encouraged Board members to take the time to read the report.
- Peter advised that the vaccination programme across Staffordshire and Stoke-on-Trent is underway, and the system is performing well at delivering vaccines again this year.
- Peter shared that NHS England's Primary Care Medical Director, Claire Fuller, visited the system in October. The event brought together system partners to discuss how the system can encourage and promote proactive and preventative care.
- Peter advised that there is ongoing work around the medium-term plan. The Autumn Budget is expected soon, and Peter hopes that this will include funding updates for government departments including Health and Social Care.

The Board thanked David and Peter for the report. The Board asked about the impact of palliative care prevalence and the link with this and Continuing Health Care. The Board also commented that the Practice Open Day in Barlaston was a good initiative and if this could be extended to support other communities. The Board asked if these points could be considered as actions and provided with updates in the November Board meeting.

### ICB Review of Intensive and Assertive Community Mental Health Care Action Plan

- Nicola Bromage, Associate Director for Mental Health, Learning Disability and Autism and Children and Young People, Ben Richards, Chief Operating Officer at North Staffordshire Combined Healthcare Trust (NSCHT) and Senior Responsible Officer for Mental Health, Learning Disability and Autism, Lisa Agell, Operations Director at Midlands Partnership Foundation Trust (MPFT) , Upkar Jheeta, Head of Mental Health Transformation at MPFT and Deborah Hargreaves, Senior Service Manager at NSCHT, presented the report.
- Ben advised that this work is based on a recommendation from NHS England to conduct a review after the Valdo Calocane case.
- Nicola advised that the Care Quality Commission (CQC) undertook a rapid review of Mental Health Services at Nottinghamshire Healthcare Foundation NHS Trust.
- The CQC recommended that NHS England should work with the Royal College of Psychiatrists and the Department of Health and Social Care to review the Community Mental Health Framework for adults with a view to standardise pathways of care and ensure that there is a specific pathway for individuals that require assertive support.
- Nicola advised that all Mental Health services had clear policies and practice in place, which included not discharging patients with serious mental health issues if they do not attend appointments.
- There will be a lot of work around understanding experience, outcome and data and how we capture this to make sure we are demonstrating effective Mental Health Services. There is an expectation that there will be further funding to deliver some of the ambitions.

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- NHS England have asked the ICB to review the community services offered in Staffordshire and Stoke-on-Trent. Nicola advised that there are a lot of teams who play a vital role in supporting patients with complex psychosis and there needs to be a pathway to support those who might require assertive support.
- Lisa advised that although some of this work is following the Valdo Colocane case, there are also other reviews that have taken place that also feed into this piece of work.
- It's important to have knowledge of an individual's case history and vital that services understand a person's needs and how to meet them.
- From previous reviews, family members or carers can often provide context and information on not just an individual's wellbeing but their adherence to treatment. Lisa advised that we don't engage enough with families or carers, and this is a key aspect of work going forwards.
- Lisa also advised that individuals may have periods of relapse and remission. It's important to take a long-term view of an individual's care and how we can support those people to maintain recovery for longer and engage with services.
- The aim of the local reviews is to meet the needs of a particular group of people with psychosis or symptoms of psychosis. These individuals may not respond to or may struggle to access services and are vulnerable to relapse.
- Deborah advised that work has been ongoing with various teams across NSCHT and MPFT including early intervention teams, intensive outreach, nursing and quality and patient safety and patient experience.
- NHS England have asked the ICB to review all policies and procedures to highlight gaps and any barriers to achieving a high-quality service. Local authorities, VCSE and police should all be involved in the review.
- Additional time has been allowed for the report as NHS England have recognised that there is a long list of actions that need to be completed.
- Upkar advised that as part of the submission, a set of short-term and long-term actions have been formulated. The short-term action predominantly focuses on identification, changing clinical systems, training staff and creating Standard Operating Procedures. The longer-term actions require significant investment from the national team. Both Trusts would need additional resources to support these actions.
- Nicola advised that NHS England are reviewing the returns and will collate the national trends. The reviews will contribute to broader pieces of work such as the new Mental Health Act and digital changes.

The Board thanked Nicola, Lisa, Debroah and Upkar for the report. The Board asked if any funding has been agreed and how these feed into the 2025/26 planning to see the long-term actions as priorities. Ben and Nicola both advised that no funding has been agreed yet and part of the submission of the review is to inform the investment that is needed. The Board also asked whether the gap in the system has been identified. Nicola responded that the gap is the level of scale and depth that is required to engage with individuals to ensure that the level of treatment is there. The Board also asked why race wasn't included in the review to ensure it is inclusive. Upkar responded that in the longer-term actions, there is a specific workstream that will involve service users however, the initial stages are clinically led for clinicians to identify the target audience.

## Staffordshire and Stoke-on-Trent ICS Strategic Organisational Development Plan

- Mish Irvine, Interim Chief People Officer, and Pauline Grant, Associate Director of Organisational Development at NSCHT, presented the report.
- Mish thanked colleagues across the system who have taken part in building the collaborative, high level strategic plan.

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- The targets within the plan are high level and over the next three months work will be underway with colleagues to understand what our delivery plans are going to be and ensure we have the resource to deliver them.
- Timelines have been produced but these may need to be re-considered with the development of the medium-term plan.
- Pauline advised that the purpose of the plan is to strategically shape the overall organisational development approach, focusing on fostering collaboration, leadership, culture and particularly enhancing inclusivity.
- There has been engagement with teams across the system and they have identified their current priorities.
- In co-production with partners, four areas have been identified around inclusion and belonging, system culture and collaboration, leadership and management and inclusive talent management.
- In terms of next steps, the plan does need to be socialised widely and there needs to be plans in place on how the plan can be delivered.

The Board thanked Mish and Pauline for the report. The Board asked how the plan will impact patients and if there will be any difference to services they receive. Mish advised that through the work, patients can see an inclusive approach to the services they receive.

### Quality and Safety Report

- Heather Johnstone, Chief Nursing and Therapies Officer presented the report.
- Heather advised that the ICB, supported by system NHS mental health trust partners, have completed a self-assessment against the NHS England Midlands Mental Health – Host and Home ICB guidance pilot programme. There are improvement actions in place to support maintaining the quality and safety of patients.
- There is still a backlog for the Looked After Children work however, the timeframes for this to be completed are improving and Heather is optimistic the work may be completed sooner.
- From November 2024, GP practices across Staffordshire and Stoke-on-Trent will stop prescribing antenatal prescriptions for pregnant women. Trusts have been asked to take into consideration long-term requirements for training midwives in prescribing to ensure that patients can access the drugs they need during pregnancy.
- Through working closely with Shropshire, Telford and Wrekin ICB, the joint collaborative Quality Improvement network now has over 550 members.

The Board thanked Heather for the report. The Board asked if the issue around antenatal prescriptions is just across the system or if it's a national issue. The Board also asked whether the mitigations would be implemented on time for the changes. Heather responded that this is a national issue, and work is ongoing to make sure that there aren't delays in place for patients receiving medication. The Board also asked if there were plans in place to GPs limiting the number of appointments with respect to quality and safety. Heather responded that there are regular updates from the Primary Care team into the Quality and Safety Committee. Phil Smith, Chief Delivery Officer, also commented that we are monitoring the activity levels as we head into Winter. There are also regional discussions taking place and the Board will be updated if there are any changes to those trends. Rachel Gallyot, Deputy Chief Medical Officer, also advised that the ICB is working closely with the Local Medical Committee and any decisions that are made will be highlighted to the ICB.

## Finance and Performance Report

- Jacqui Charlesworth, Director of Operational Finance, Phil Smith, Chief Delivery Officer, and Megan Nurse, Non-Executive Chair of Finance and Performance Committee, presented the report.
- Jacqui advised that at the end of month five the system reported an adverse variance to plan of £25.8m. The system has identified an unmitigated risk of £103m. The system is working together to identify the delivery of additional actions that are needed to achieve the financial plan for 2024/25.
- An external supplier is being recruited to support delivery of the required financial recovery.
- Phil advised there has been significant pressures from September onwards. As a result, the category 2 responses times for ambulances for the population have gone beyond the 30minute national standard. The demand is being seen across the region and there has been an increase in COVID-19 in hospital settings.
- The system was invited to a Winter risk event with the national urgent and emergency care director and their times. This was an opportunity to share learning and re-affirm plans.
- A surge plan is being developed and will be discussed and ratified at November's Board meeting.
- NHS England are completing an assurance visit of the system, ahead of winter and will involve presentations and walk-around clinical areas.
- There has been significant progress within the 65-week waits and are on track with all trajectories for cancer.
- Megan advised that we will not achieve the agreed system financial target of £90m deficit. A system recovery plan has been agreed and work is underway but does not bridge the gap between our current position and the agreed deficit.
- NHS England have directed us to enter an investigation and intervention process should hopefully move us closer towards the agreed deficit.

The Board thanked Jacqui, Phil and Megan for the report. The Board accepted the recommendations presented to them, which include:

1. Noting the high-level performance against the five priorities.
2. Noting the update on key programme deliverables at a high level.
3. Noting the financial position.

## People Metrics and People Culture and Inclusion Assurance Report

- Mish Irvine, Interim Chief People Officer, presented the report.
- The overall metrics are looking positive for Staffordshire and Stoke-on-Trent for turnover and staff vacancies.
- Sickness levels are increasing and the ICB is working with provider colleagues and HR business colleagues.
- There has been positive feedback in terms of oversight and understanding of the workforce issues and how collaborative working is helping to address these issues.
- Mish advised that at a recent People Culture and Inclusion Committee, there was a conversation about ensuring that clinical, operational and workforce colleagues are working closely together to make sure services are safe and patients are receiving the best care.
- Mish also advised there was an online full day conference for system colleagues for Sexual Safety and Misconduct. Colleagues from Shropshire, Telford and Wrekin ICS were

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also invited. Mish advised that we are moving forwards to standardise our approach on this subject.

- Mish advised that there are a number of events taking place in October for Black History Month.

The Board thanked Mish for the report. The Board accepted the report with the purpose of briefing committee members on the workforce position to plan, grip, and control activities, supporting and informing wider decision-making in respect of the people agenda.

### Quarter 2 2024-2025 System Board Assurance (SBAF) Update

- Claire Cotton, Director of Governance at UHNM, presented the report.
- Claire advised that there are two strategic ambitions that are demonstrated around addressing inequalities and a sustainable and resilient ICS.
- The top risks identified are reducing Health Inequalities, sustainable finances and workforce.
- Claire also acknowledged that there are six out of eight risks that have a partial assurance rating and wanted to remind the Board that the purpose of the assurance report is to drive the agendas of the committees.

The Board thanked Claire for the report. The Board was asked to discuss and confirm whether the Quarter 2 risk scores and assurance assessments accurately reflect the current position, as well as to review and confirm the adequacy of the associated controls and assessments.

### Staffordshire and Stoke-on-Trent Health and Care Senate Summary and Escalation Report

- Rachel Gallyot, Deputy Chief Medical Officer, presented the report.
- Rachel advised that the Senate has approved the system approach to the malnutrition policy.
- The Senate also had discussions about some of the strategic matters and the medium-term plan.

The Board thanked Rachel for the report. The Board asked if the issues with quoracy have been resolved. Rachel advised that this has been resolved.

**Date and time of next meeting in public:** 21st November 2024 at 12.30pm held in Public, Staffordshire County Council, Council Chamber, County Buildings, Martin Street, Stafford, ST16 2DH