



All Together Better

Sunderland

Operational Plan 2021/22

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 ATBSunderland

 AllTogetherBetter



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Welcome to our Operational Plan for 2021/22

The past 18 months have seen times of immense challenge and pressure for our health and care system in Sunderland, but they have also been times of immense pride. Our ways of working have been tested and strengthened. The problems and obstacles we have faced have been phenomenal and the way we have overcome them together, has been truly outstanding. We have done this by sticking to our values and supporting each other along the way.

No sooner had ATB published its first operational plan in November 2019, than our world was taken over by COVID-19. The transformation and improvement plans we had set out to deliver together as a system, were overtaken by the events that unfolded not just here in Sunderland, but across the entire NHS.

In many respects, the pandemic was a further catalyst for change and we have been able to innovate at a pace and scale like never before. The trusting relationships we had built between partners put us in good stead to manage what was undoubtedly the most challenging time that health and care services have ever seen.

Our collective focus throughout has been on the people we serve, on doing the right thing, protecting the vulnerable and making sure patients had access to the right care and support when they needed it. This is testament to the way health and care partners pulled together across the City and is something which we should all be very proud of.

The pandemic has without doubt exposed health inequalities even further and we know that some parts of our communities have been negatively impacted more than others.

Health inequalities are unfair and avoidable differences in health across the population and between different groups within society. They arise because of the conditions in which we are born, grow, live, work and due to our age. These conditions influence our opportunities for good health, and how we think, feel and act. This shapes our mental health, physical health and wellbeing.

Addressing health inequalities was already a priority for ATB, but the inequalities further exposed by COVID-19 now means we must work harder than ever to close the gaps that exist. We must make sure everyone has access to the same high quality care.

The pandemic has only accelerated the need for change and all ATB partners remain absolutely committed to reducing health inequalities and making this a cornerstone of our recovery and transformation plans.

To do this, we are making sure that conversations about health inequalities are now part and parcel of our routine business and a key consideration in everything we do.

In line with the Healthy City Plan, we are using data and intelligence to help prevent and mitigate health inequalities widening. We are also supporting local partners to consider how their work may impact on health inequalities.

As Wave 3 of the pandemic subsides, we are once again turning our collective efforts and attention to look at what we have learned and where we must continue to innovate and improve care for people right across Sunderland.

Over the past few months we have worked together to take stock and re-set our improvement priorities for

the year ahead which are laid out in this updated operational plan.

As the NHS landscape changes around us, new structures and ways of working are emerging through the establishment of the North East and North Cumbria Integrated Care System (ICS). As ATB partners, we all remain committed to building on our successes so far and continuing all the good work we have underway to keep making a difference in our communities.

A sincere thank you to everyone working across health and care services in Sunderland. Your efforts and commitment to do better for the people we serve is humbling and nothing short of phenomenal.

Let's keep looking to the future and building on our success so far.

Nothing great is ever achieved alone and we stand firm in our belief that we really are All Together Better.



Dr Martin Weatherhead
GP Chair



Philip Foster
Managing Director

Who we are

All Together Better (ATB) Sunderland is a formal alliance of health and care organisations established in April 2019. Our roots stem from a mutual recognition between local health and care leaders of the need to do something different.

Our City is one of the most deprived areas in England with poor health outcomes and low life expectancy. We have a simple, shared vision to deliver better health and better care for the people of Sunderland. As we do this, we are focused on reducing the health inequalities that exist.

Building on foundations laid by the NHS vanguard programme, ATB has been at the forefront of developing truly integrated ways of working since 2015. As the partnership has grown and matured, significant work has taken place to improve how care is delivered and develop a genuine culture of collaboration across the entire local health and care system which was pivotal in our COVID-19 response.

Our vision

Better health and care for Sunderland

Our mission:

A healthy city - more people living healthier longer lives

Outstanding care - every time, for everyone and reducing inequality

Delivery of high-quality services - through effective partnerships

System efficiency - deliver innovative, financially and clinically sustainable services

What we stand for

Our values



People-centred

- Care and support organised around the person
- Outstanding, safe and compassionate care
- High quality, responsive and effective community services



Collaborative

- Working together as one team dedicated to meeting peoples' needs
- Clinical leadership guides our decision making
- Listening and learning from each other



Integrity

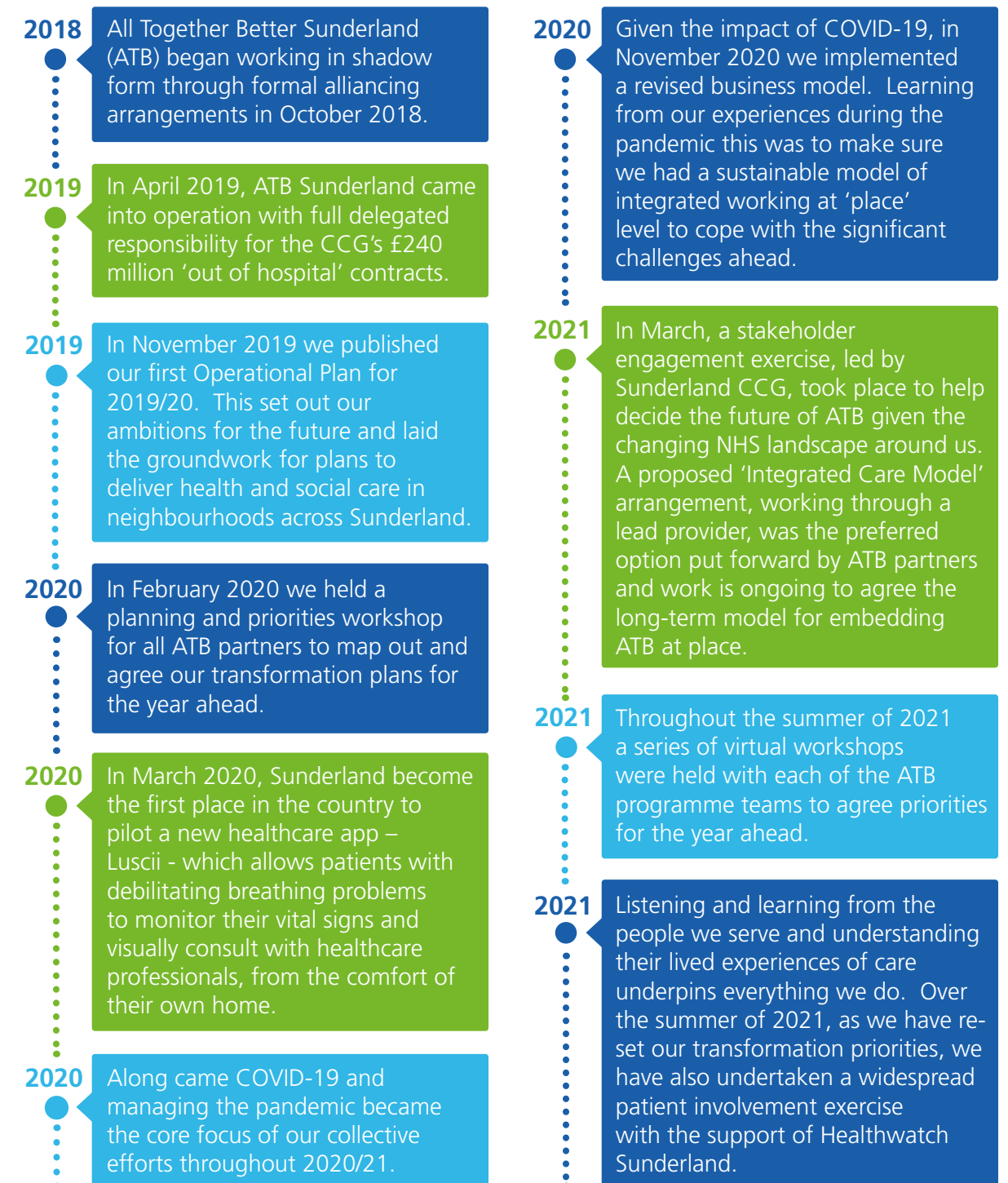
- Acting with honesty and transparency
- Deliver what we said we will deliver
- Respect and embrace difference

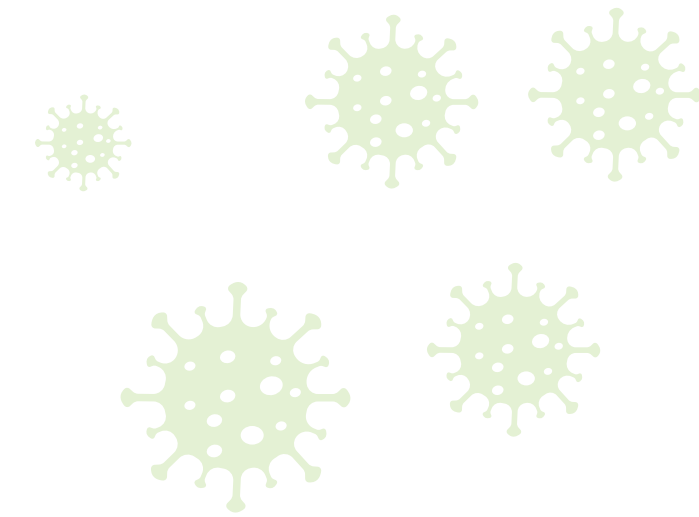


Quality and safety

Quality and safety are implicit in our vision and values and our underpinning governance framework will enable quality and safety to be at the heart of everything we do.

A reminder of where we have been and how we have grown





Reflections on COVID-19

The COVID-19 pandemic has changed the NHS and social care landscape forever. It has brought about rapid change and transformation at a time of immense pressure and personal and professional challenge. In response, ATB Sunderland has learnt together as a system and has grown immensely with significant service reforms implemented on the ground in a short timescale to enable a co-ordinated response to the pandemic.

Our firm foundations of partnership working paved the way for Sunderland's emergency response and undoubtedly led to improved care, experiences and outcomes for patients during the pandemic.

Here are just some of our highlights:



We quickly helped establish two 'hot hubs' across Sunderland to manage COVID-19 positive patients who needed clinical assessment, but not hospital admission. Around 30 patients were seen daily.



Training all (49) care homes in just three weeks to use National Early Warning Score (NEWS) technology to monitor residents' vital signs (oxygen and respiratory rates). 2,200 scores were inputted monthly from March 2020. An initial pilot with eight care homes resulted in 336 fewer trips to ED, saving £180,000. Without NEWS monitoring, hospital admissions would have been much higher.



We gave focused support for a care home with over 90% of residents and a high percentage of staff testing positive for COVID-19. For six weeks, district nurses visited twice daily to help with personal care, hygiene and meals, providing psychological support and infection control advice. Care home staff said the physical presence of nurses was the most important support received during the pandemic.



13,000 vulnerable people shielding across Sunderland were contacted by ATB partners for a welfare check. 4% (over 570 people) received food parcels and medicines from volunteers and nurses.



A multi-agency project in a deprived part of Sunderland worked with residents to understand social and financial issues contributing towards poor mental health and frequent hospital attendances. Social prescribers, GPs and local charities are providing a local peer support system.



We launched a pioneering new app - 'Luscii' – to monitor patients with chronic breathing problems, those with confirmed COVID-19 at home, or recently discharged from hospital. In May 2020, 1,813 readings were submitted and 5% were red flagged resulting in 133 video calls with nursing staff. The app allows patients to speak to staff remotely and avoid social isolation through befriending networks and a digital library. Initial evaluation estimates a 13% decrease in ED attendances and 35% reduction in bed days, saving approximately £83,000.



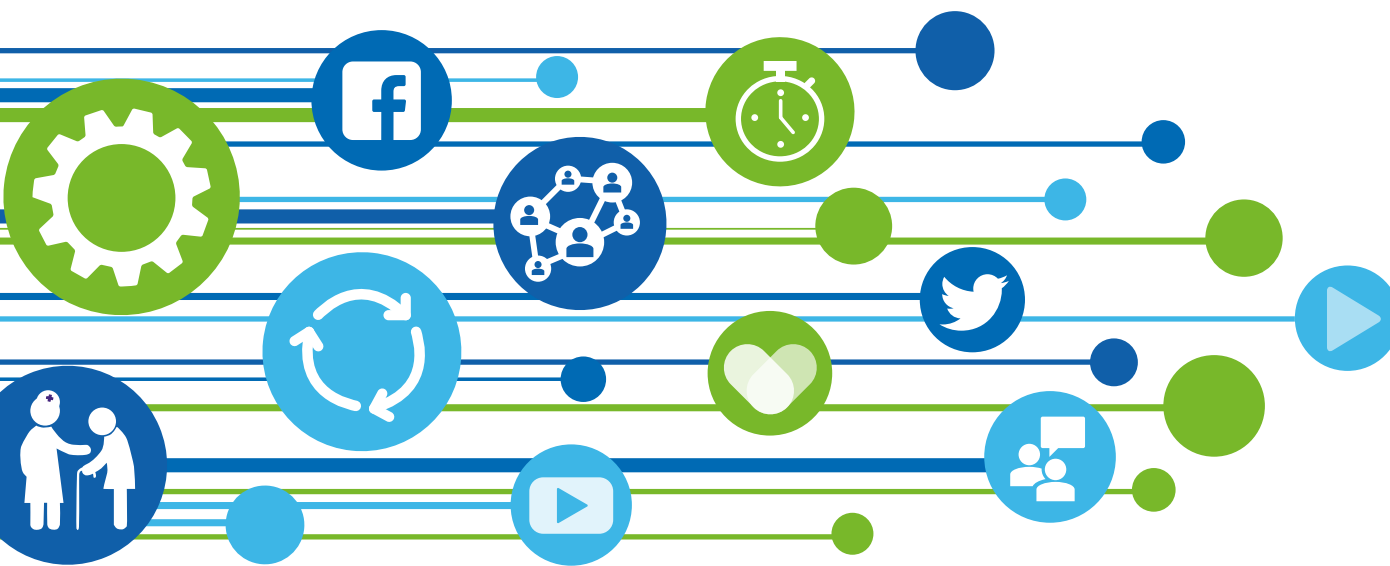
Sunderland was one of the first areas in England to vaccinate all eligible care home residents and staff, receiving praise from the Prime Minister. The wider vaccination programme advanced at pace to protect the population thanks to collective efforts from GPs, community nurses and volunteers.

Recovery principles - Learning from COVID-19

During the pandemic, we saw many positive changes and major innovations in the delivery of patient care and in the way we worked together as a system.

One of the key developments during COVID-19 was the establishment of a Clinical Pathway Group, established through ATB, to ensure co-ordination, collaboration and rapid decision making on key clinical issues affecting all parts of the system in Sunderland. This has since been expanded across South Tyneside and Durham.

ATB also developed a set of 'recovery principles' and a 'compact' to help maintain momentum and encourage continuous improvement as services began to recover and adapt in a new post COVID-19 world. These embody how we have worked together to respond during the pandemic and have guided our learning as we continue to develop new and innovative ways of working together.



Locking in our learning



– our 10 principles for COVID-19 recovery:

- 1 With urgency, build our recovery plan for service delivery for at least the next 2 years
- 2 Embrace a digital approach to deliver advice and consultations, while providing choice so patient preferences are considered
- 3 Services must maintain social distancing in line with continuing Government guidance
- 4 Clinical prioritisation must take precedence
- 5 Patients should receive their care in environments where risk is appropriate minimised
- 6 Deliver services that comply with latest national PHE infection prevention and control advice and minimise infection risk for patients, for example through hot and cold pathways
- 7 Plan and discuss widely and in greater detail what would stop in a subsequent peak.
- 8 Ensure the health, safety and wellbeing of our staff and ensure colleagues are supported and protected both physically and psychologically
- 9 Ensure any changes to service provision do not result in increased health inequalities
- 10 Develop effective mechanisms to involve the public, patients, service users and carers in our planning.

Our Compact:

- We will ensure there is absolute openness and honesty between us with a constant focus on what needs to be delivered to protect patients/public/staff.
- We will trust each other to make reliable recommendations and ensure our challenge is on an exception basis.
- Identified senior leads will ensure their decisions/recommendations take into account the wider system with appropriate collaboration built into decision-making processes at the earliest opportunity to ensure the best place-based outcome is taken forward.
- All supporting leads will take full responsibility for quickly removing/dismantling any organisational barriers which may be impeding progress of delivery to support rapid implementation.
- We will adopt a light touch approach to our management, reporting and assurance processes for the initial recovery phase.
- We will sustain a focus on speed of delivery, with an acceptance that not everyone can be involved in all decisions.
- We will use a 'small team' ethos to review, communicate, co-ordinate at pace.
- Interface issues between in and out of hospital services will be proactively discussed and managed via a clinical reference group with the commitment to avoid unintended consequences for the wider system.
- We will adopt standard system-wide approaches wherever possible but with a recognition to adapt/flex how we work to take account of local and national circumstances.
- We will continually review these principles to ensure we hold true to our commitment to this new way of working.



Revised ATB business model

During the summer of 2020 we reset our programme structure and made changes to our ways of working.

This included:

- Expanding our ATB Executive Group membership to include the City's Director of Public Health and a Primary Care Network Clinical Director to enable a greater focus on neighbourhood and PCN partnership working.
- Changing our programme structure to create a fifth programme of work focussed specifically on Integrated Health and Social Care Services. This has allowed our Enhanced Primary and Community Care programme group to have a greater focus on improving person centred proactive care, particularly for people with long term conditions, or needing end of life care.
- Creating a Neighbourhood Transformation Group to ensure that integration and neighbourhood working is considered in all transformation work delivered within ATB.



Our priorities for 2021/22

Through workshops and discussions with Senior Responsible Officers (SROs') and Senior Responsible Clinicians (SRC's) for each of our five programmes, we have agreed a set of priorities for 2021/22.

Our overriding aim is to continue to support the development of effective provider collaboration and place-based partnerships. We are also supporting the CCG move to new statutory organisation as the North East and North Cumbria Integrated Care System (ICS) comes into operation.

Our newly established Neighbourhood Transformation Group is developing ideas for how we can operate effectively at neighbourhood level. This includes refreshing the community integrated team model developed through our original vanguard work. We are also supporting the development of Primary Care Networks (PCNs) working closely with PCN directors to provide business support.

Our five programme groups are focused on providing the best care and support through transforming the delivery of services in local neighbourhoods. A key priority is accelerating the restoration of services post COVID-19 and managing the overall increased demand on services in Sunderland, in line with national guidance (NHS Operational Plan and Long Term Plan) and local priorities:

www.england.nhs.uk/wp-content/uploads/2021/03/B0468-nhs-operational-planning-and-contracting-guidance.pdf

www.longtermplan.nhs.uk/



Our neighbourhood model



Our programmes of work

Reducing inequalities is one of ATB’s top priorities and we have pledged to make measureable improvements in population health.

Preventing ill health, improving people’s wellbeing, reducing health inequalities and ensuring best use of available resources is at the heart of our approach and a theme that runs through all of our programme groups and transformation priorities. Fundamentally, we know that across Sunderland significant inequalities exist and people are living longer in ill health. By preventing physical and mental ill health, and getting to grips with issues before they become bigger problems, people will lead happier, healthier lives.

Senior Responsible Officers and Senior Responsible Clinicians for each programme of work.

1.

Programme

General Practice

Key transformation priorities

- Develop and implement a prescribing recovery plan
- Support the development of Primary Care Networks
- Implement a social prescribing strategy
- Lead the development of Community diagnostic hubs



Jon Twelves



Dr James Bell

2.

Programme

Mental Health, Learning Disability and Autism

Key transformation priorities

- Community mental health transformation
- Section 117 process, practice and package review including alternatives to detention
- Alternatives to hospital for older people with mental health needs
- Improved Access Physiological Therapies (IAPT) service development
- Mental Health Crisis and Liaison Services review
- Perinatal services
- Community provision for adults with autism and learning disabilities



Lisa Quinn



Anthony Deery



Mike Crozier

3.

Programme

Enhanced Primary and Community Care

Key transformation priorities

- Cardiovascular disease - improving the heart failure pathway in the community
- Develop a community model for diabetes care
- Re-procure the Home Oxygen and Review service
- Implementation of Long Covid Assessment Clinic to enable holistic care planning
- End of life
- Delivery of contract reviews



Peter Sutton



Alison King



Dr Raj Bethapudi

4.

Programme

Emergency Intermediate and Urgent Care

Key transformation priorities

- Review of Recovery at Home service
- Support delivery of emergency and urgent care strategy and standard
- High intensity users
- GP out of hours



Dr Sean Fenwick



Dr Tracey Lucas

5.

Programme

Integrated Health and Social Care Services

Key transformation priorities

- Ensuring packages of health and social care effectively and efficiently meet the needs of people in Sunderland
- Optimising support to care homes (includes all registered care homes)
- Front door/prevention offer/short term support services (including delivery of Carers Strategy)
- Therapy review



Graham King



Vicky McGurk

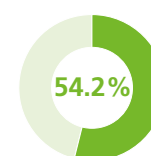
Measuring success

Since publishing our first Operational Plan in 2019, work has taken place to develop an outcomes platform and framework, based on the Bridges of Health Model. This provides powerful insights into our outcomes at system level across Sunderland and at PCN / neighbourhood level, informing planning and decision making.

Since introducing this we have seen:

- Transformation project outcomes aligned to Sunderland system level outcomes and progress monitored closely.
- Analysis of outcomes by deprivation to help address health inequalities (Index of Multiple Deprivation, IMD).
- Sharing learnings and developments within Sunderland and other areas.
- An understanding of the impact of COVID-19 on outcomes.
- A greater focus and understanding on population health and what this means for Sunderland.

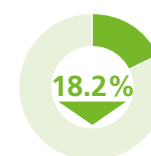
In real terms this work has led to a number of outcomes, including:



More people supported at end of life to die in their preferred place of death (8.4% improvement on March 2019 baseline with 54.2% of people now dying in their preferred place of death).



Improvement in emergency admission for chronic ambulatory care conditions with a 19.3% reduction since March 2019. The general number of emergency admissions for general ill health has also decreased since March 2020.



We have seen a consistent decrease in smoking in our healthy adult population over the last 8 years from 23% in 2014 to 18.2% in 2021.

Listening to our patients

Actively seeking and listening to feedback from our patients and service users is also a core measure of success across all ATB partners. Over the summer of 2021 we have worked with Healthwatch Sunderland to deliver a comprehensive piece of involvement work with feedback from over 500 people.

Key highlights include:

- People's experience of using GP practices is predominantly good.
- Patients reported the highest levels of satisfaction when accessing care from a nurse practitioner or practice nurse.
- Positive comments about pharmacy services, district nursing and community equipment services.
- Over half of those surveyed are on regular medication. 30% would like a medication review.
- High levels of satisfaction for Recovery at Home Services. Many of those surveyed believed the care received helped to avoid hospital admission or A&E attendance.
- Most common complaint was difficulty in getting a GP appointment.
- 1 in 2 people surveyed did not feel involved in decision making around their discharge from hospital.

Feedback reports have been shared with all ATB partners with information presented at neighbourhood level to help system leaders reflect on patient feedback and further refine improvement plans.

Involving stakeholders

Throughout the COVID-19 pandemic we have continued to communicate and engage with key stakeholders. Regular updates and information about our work is shared via our ATB newsletter and our Managing Director has been in regular attendance at the Sunderland Health and Wellbeing Scrutiny Committee to provide important updates on work taking place to improve care.

As we look to the future, we will keep working together as partners and building on the strengths of ATB Sunderland for many years to come. We look forward to keeping all stakeholders updated on the next chapter and the improvements that we have committed to make for the communities we serve.



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