



Barking and Dagenham Place-based Partnership Winter Summit:

How do we keep people well and safe in their homes and out of hospital?

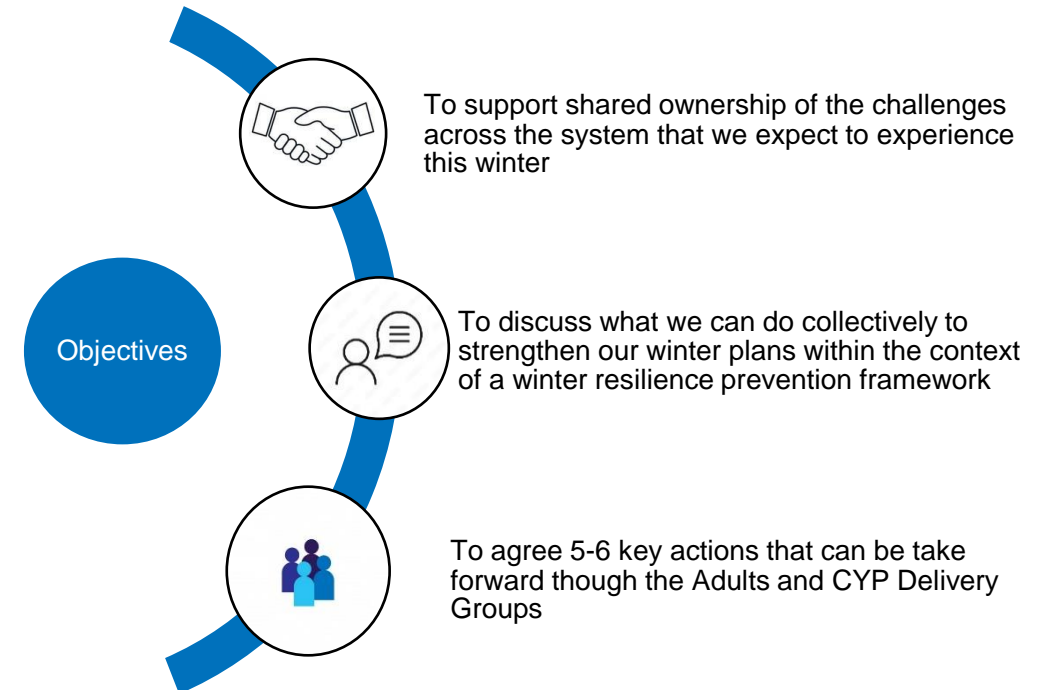
Output slides

Overview

The Barking & Dagenham Winter Summit took place on Thursday 20th October and was attended virtually by representatives from across the partnership.

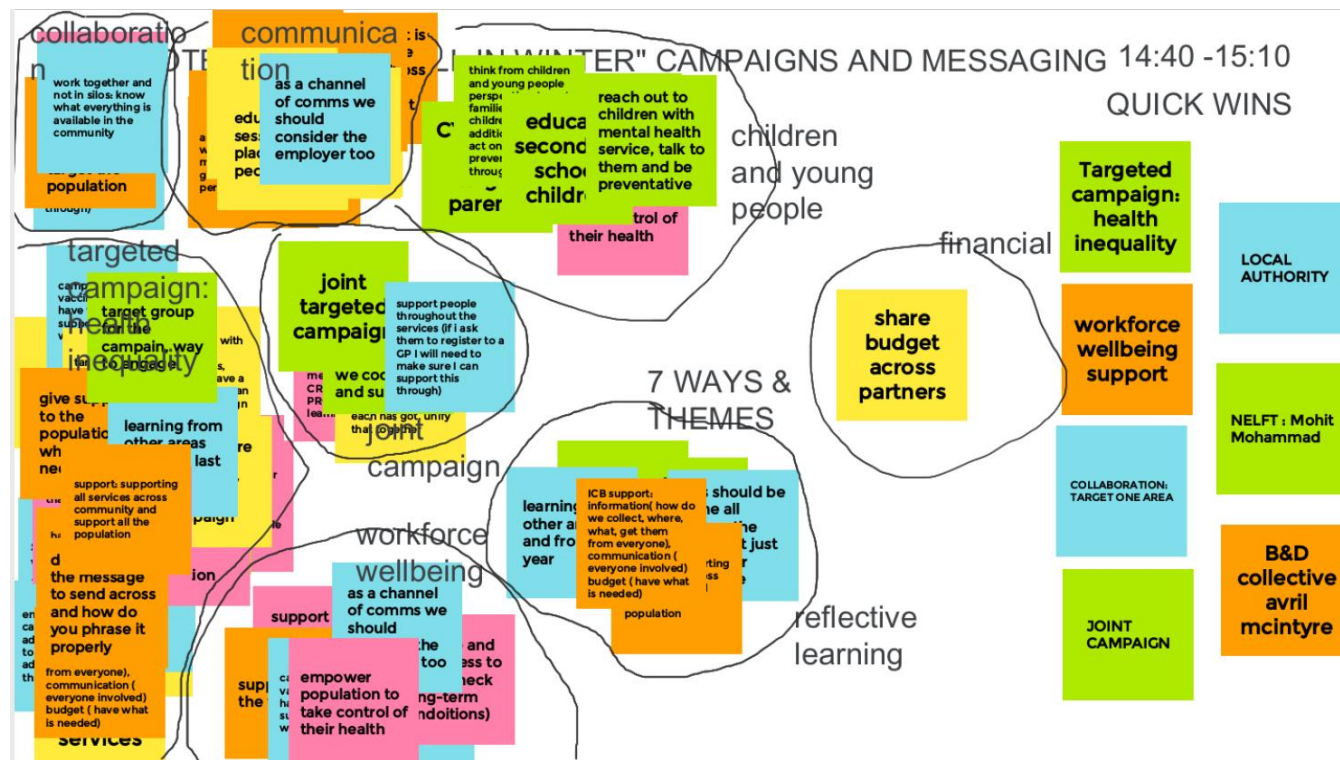
| Time | | Lead |
|--------------------------------|--|---|
| 14:00pm | Introduction, agenda and objectives | Dr Rami Hara |
| 14:10pm | Outlining the challenges of keeping people in their homes and out of hospital | Sharon Morrow |
| 14:20pm | Developing a place-based approach to health and wellbeing this winter | Matthew Cole |
| Breakout room workshops | | |
| 14:35 - 14:40 | Introduction to breakout rooms: 1) Prevention: promote “staying well in winter” campaigns and messaging 2) Proactive Care: Optimise case finding, diagnosis and management of long-term conditions 3) Workforce: How do we support the health wellbeing and resilience of the health and care workforce? | Giulia Ponza/ Lara Dobbie/ Kouroush Sharifi-BHRUT, QI |
| 14:40-15:10 | Idea Generation on defined themes | |
| 15:10-15:30 | Refining Ideas and Generating Quick Wins | |
| 15:30-15:45 | Volunteers and Time Scales | |
| Return to main meeting | | |
| 15:45pm | Feedback from groups | Facilitators |
| 15:55pm | Summary and next steps | Dr Rami Hara |

| Organisation | Representation |
|---------------------|----------------|
| BHRUT | 4 |
| Care provider voice | 2 |
| Community Pharmacy | 1 |
| NEL ICB | 13 |
| B&D GP Federation | 1 |
| Healthwatch | 1 |
| LAS | 2 |
| LBBB | 10 |
| NELFT | 4 |
| PELC | 1 |
| Primary Care | 6 |
| Public Health | 1 |
| Red Cross | 1 |
| NHS Camden | 1 |



Breakout Discussion1

The session was broken into 3 discussion workshops, facilitated by the QI team at BHRUT. The idea was to generate as many ideas as possible, theme them, then agree on a set of actions for the short, medium and long term that the group could work together on to implement.



Group 1 was on the theme of 'Prevention: promote "staying well in winter" campaigns and messaging'.

Some 'quick win' actions that were agreed by the group were:

- To run a targeted campaign on health inequalities – Local Authority colleague (TBC)
- Promote workforce wellbeing support - Local Authority colleague (TBC) and Mohammed Mohit from NELFT
- Collaboration: target one area – Mohammed Mohit from NELFT and Avril McIntyre, B&D Collective
- Holding joint campaign - Avril McIntyre, B&D Collective

Volunteers to carry these actions forward have been identified above.

Promote staying well in winter campaigns- key themes

Collaboration

- Need to move away from silo working – understand the range of services available in the community and make every contact count

Targeted campaigns

- Co-ordinated joint campaigns targeted at underserved groups, informed by an understanding of what the community needs with clear messaging and using a variety of communication tools
- Joint campaigns focused on workforce wellbeing

Young people

- Reach out to CYP with mental health issues
- Education of secondary school children – action on prevention through schools
- Target families with children who have additional needs

Proactive care – key themes

Systematic approach powered by data sharing

- Take a systematic approach to early identification and treatment using data/intelligence to identify vulnerable groups and those who slip through the net
- Better use of technology e.g. apps to support care and treatment

Targeted interventions and collaborative working/early intervention

- Proactive case finding across primary care and the voluntary sector – including HIU, unsafe discharges
- Ensure patient and carer reviews are taking place and review MDT working
- Set up dedicated clinics/hubs across PCN footprints that enable co-location of services and engagement with the voluntary sector, aligning resources and support to improve care; condition themed community support
- Review the respiratory pathway for CYP and support required through winter, including transition

Improve community engagement and patient empowerment

- Clear messaging on why it is important for people to have their health checked in culturally appropriate language
- Better use of community champions to engage and empower residents

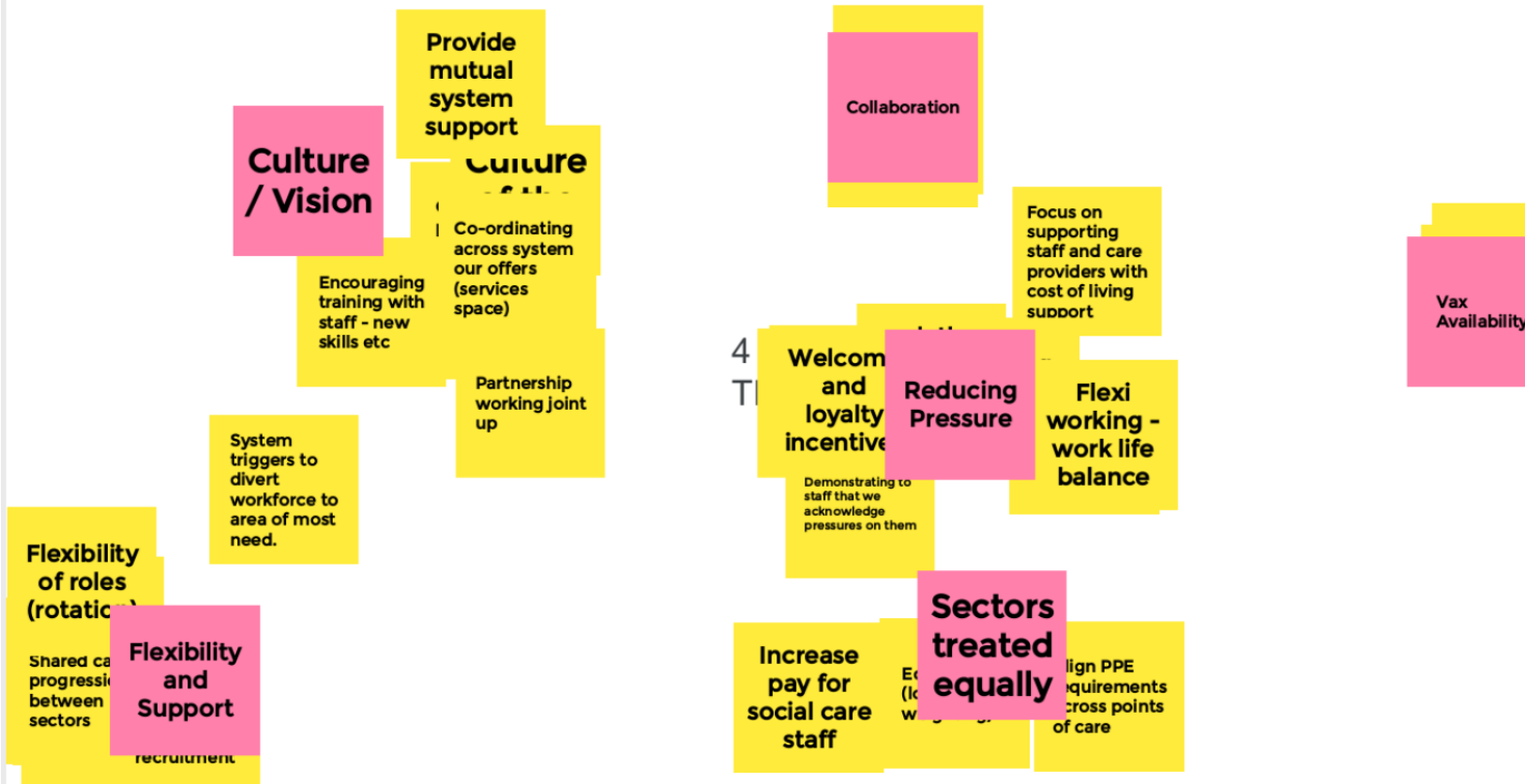
Workforce

- Ensure support for our own staff who have LTC

Breakout Discussion 3

WORKFORCE

14:40 -15:10



Group 3 was on the theme of 'Workforce: How do we support the health wellbeing and resilience of the health and care workforce?'

Some 'quick win' actions identified:

- Culture/vision: 'launch' the partnership to establish values and direction
- Vaccine availability for staff: strengthen comms about where to go, outreach for those who are hesitant

Mid-term:

- Collaboration- e.g. working with schools and training organisations

Long term:

- Sectors treated equally
- Culture change
- Reducing pressure via flexibility/support: link in HR to enable staff to move around system

Ann Hepworth, BHRUT, agreed to start conversations towards launching the partnership in order to promote values/organisational identity

Workforce – key themes



Culture and vision

- Co-ordinate the service offer across the system and spaces where people work from
- Staff training – to support core training to achieve outcomes and encourage new skills development

Reducing pressure

- Demonstrate to staff that we acknowledge pressures on them; ask them what we can do support
- Support staff and care providers with the cost of living pressures
- Consider welcome and loyalty incentives to improve recruitment and retention

Collaboration

- Making best use of volunteers
- Collaboration with schools to promote training into health and care roles

Vaccine availability

- Build confidence in, and provide access to COVID and flu vaccines for staff

Sectors treated equally

- Equality of pay – aligning London weighting across NEL; increasing pay for social care staff
- Align PPE requirements across points of care

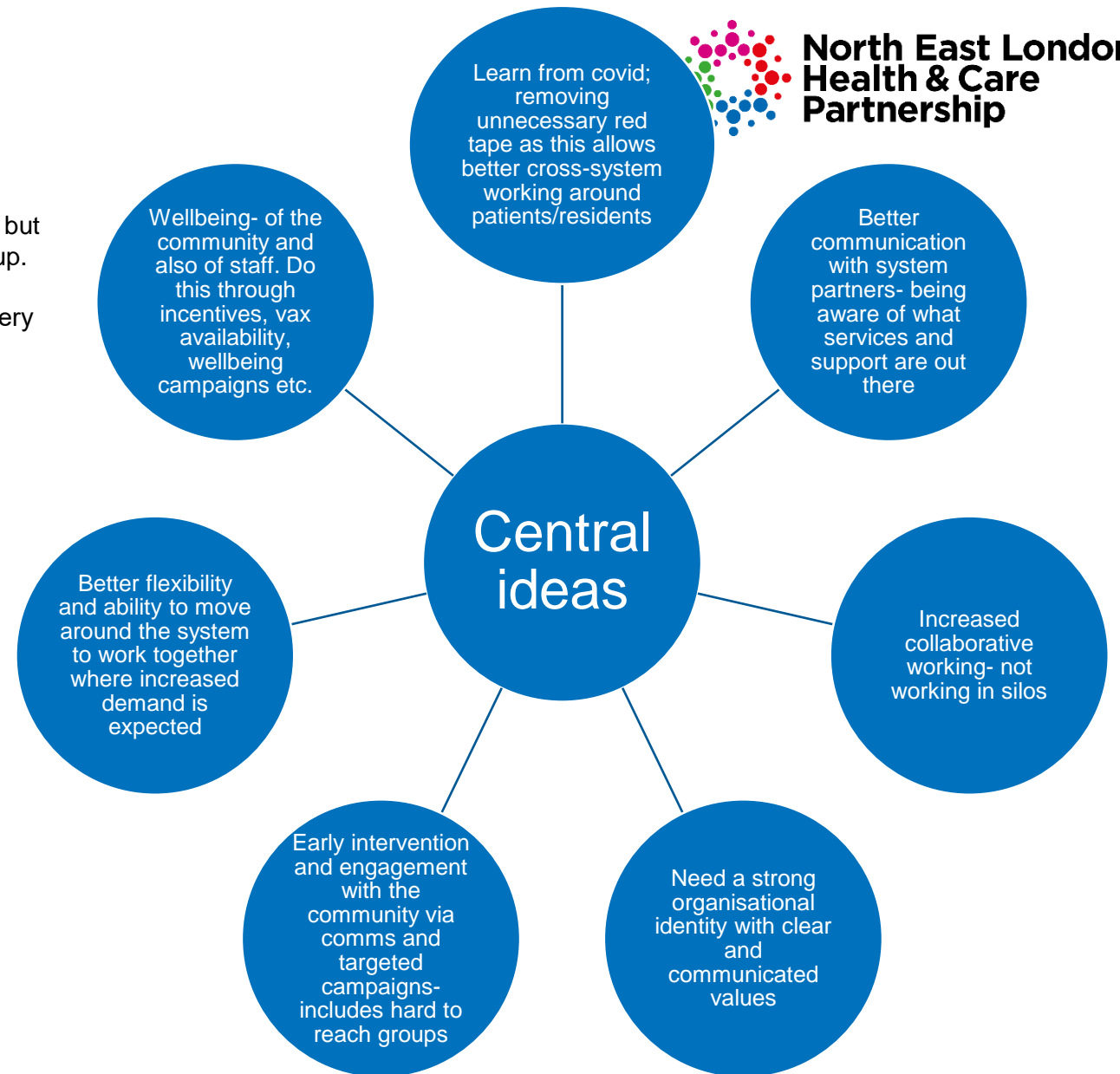
Summary and actions

It was widely recognised in breakout discussions that this winter will be extremely challenging due to a 'perfect storm' of factors, namely: covid/flu, the ongoing cost of living crisis and workforce and capacity issues.

Volunteers have been identified from each breakout session to pick up short term actions but task and finish groups may be needed to progress these with support from a working group.

Outputs from these discussions will be shared at the next B&D adults and children's delivery groups and the B&D Partnership Board.

| Session | Actions |
|--|---|
| 1) Prevention: promote "staying well in winter" campaigns and messaging | Need all partners to discuss how to coordinate a targeted campaign- will need more work to ensure all organisations give the same message to the population on health inequalities and promoting workforce wellbeing support in particular. Mohammed Mohit from NELFT and Avril McIntyre, B&D Collective volunteered to feedback names on who will be part of the group/support set up |
| 2) Proactive Care: Optimise case finding, diagnosis and management of long-term conditions | Matthew Cole, Public Health, to share themes of targeted intervention and collaborative working, systematic approach powered by data sharing, and early intervention to the next adult's delivery group on 17/11/22 to gather feedback/ideas. Ronan Fox, CYP Lead ICB, will also share at the next children's delivery group- date TBC. Invites to groups will be extended to colleagues in the breakout session. |
| 3) Workforce: How do we support the health wellbeing and resilience of the health and care workforce? | Ann Hepworth, BHRUT, agreed to start conversations (with Sharon) towards launching the partnership in order to promote values/organisational identity. Individual organisations to strengthen their comms messaging around vaccine availability for staff and staying well. |



Next steps

Volunteers have been identified from each breakout session to take forward several actions, which will aim to fulfil collective system objectives in the respective areas of discussion. Quick wins to be scoped further over the next 2 weeks and worked up through:

BCYP winter planning session – 15th November
Adults Delivery Group – 17th November
Executive Committee – 18th November

Winter planning update required for the Health Scrutiny Committee on 14th November.

BHR System Command and Oversight Group (SOCG) has been reconvened and will meet weekly for escalation – first meeting 27th November.