

Restoration Update

July 2020

Phase 2 Recovery April – July

- 40 initial recommended actions outlined in Simon Stevens and Amanda Pritchard letter of 29 April for urgent and clinical services over the proceeding 6 weeks. Recommendations covered:
 - Urgent and Routine Surgery and Care (8)
 - Cancer (4)
 - Cardiovascular Disease, Heart Attack and Stroke (4)
 - Maternity (2)
 - Primary Care (6)
 - Community Services (3)
 - Mental Health and Learning Disabilities/Autism Services (7)
 - Screening and Immunisations (4)
 - Reduce the risk of cross-infection and support the safe switch-on of services by scaling up the use of technology-enabled care (3)
- Establishment of 6 key system wide Restoration Cells (see slide 4)
- Ongoing management of the Incident via the ICC and Cell Structures

Phase 3 Plan

- Development of a Somerset Wide recovery plan by the end of July covering August 20 – March 2021
- Applying the 7 tests of recovery (outlined on the following slide)
- Building on the Phase 2 principles:

Our Strategic Approach: Fit for My Future

- Delivering joined up services closer to home
- Health and care cross system working
- Focus on community and neighbourhood settings
- Deliver mental health & community settings of care consultation & engagement

Forward not back

- build on rapid pace of transformation and digital delivery
- not returning to organisational or silo working approach
- Reset or restructure rather than restoration ...

Moving towards virtual by default

- outpatients, primary care, diagnostics, community and mental health
- shared records – SiDER, EMIS View
- digital working – e.g MS Teams

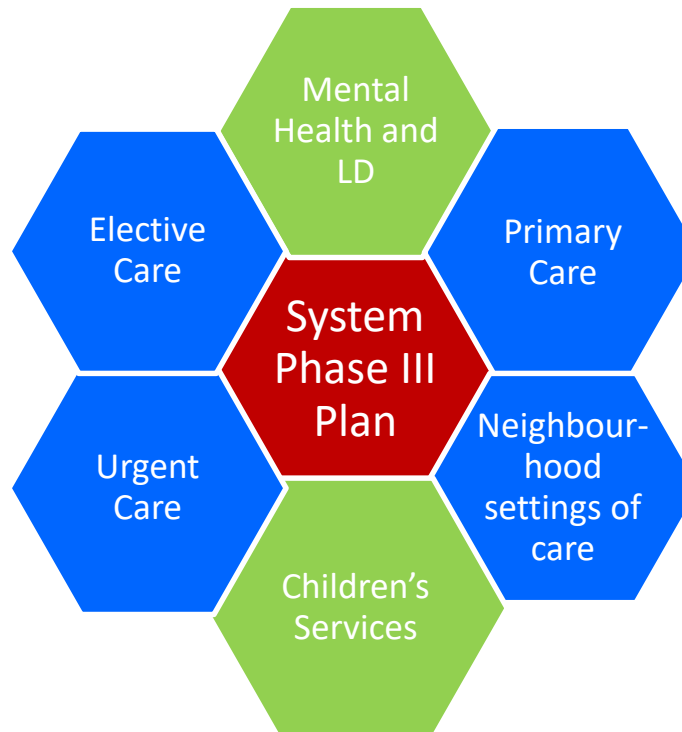
Somerset Phase 3 tests

Seven tests for recovery

Meet patient needs			Address new priorities		Re-set to a new NHS	
Covid treatment capacity	Non-covid urgent care, cancer, screening and immunisations	Elective care	Public and mental health burden of pandemic response	Staff wellbeing and numbers	Primary and community care and innovation in models of care	New NHS landscape
Maintain the critical care infrastructure to sustain readiness for future Covid demand, including covid-non-covid separation	Identify the highest risk services; act now to minimise the risks as much as possible; develop plan for mitigating post-pandemic	Quantify the backlog; act now to slow growth in backlog as much as possible; develop the plan for clearing over time	Identify the highest risk services; act now to minimise the risks as much as possible; develop plan for mitigating post-pandemic; align with LTP	Catalogue the interventions now in place; identify additional actions now to support staff; develop the plan for recovery	Catalogue the innovations made; determine those to be retained; evaluate; plan for widespread adoption post pandemic	Catalogue the service and governance changes already made and which can still be made or accelerated; define ICS role
Examples:	Examples:	Examples:	Examples:	Examples:	Examples:	Examples:
Beds, equipment, supply chain, estate, workforce	Unexplained reduction in CVD presentations; reduced cancer diagnoses, low uptake of screening and imms	52 WW increases; RTT backlog; potential use of additional estate to diagnoses/treat; accelerate outpatients reform	Addressing health inequalities, mental illness, domestic violence; harness positives such as greater air quality, vaccination acceptance	Staff support offer; delivering workforce manifesto commitments, maintaining flexible working, and the focus on addressing workplace inequalities	Model for primary and community care; changes to discharge arrangements; lower UEC demand	Focus of ICPs and ICSs, future service configuration, financial architecture, link with local authorities, regulatory and oversight framework
Securing long term capacity						

Restoration Governance

- Restoration Governance to be provided by the ICS with a restoration cell structure in place covering 6 key themes
- Restoration to be underpinned by Fit For My Future

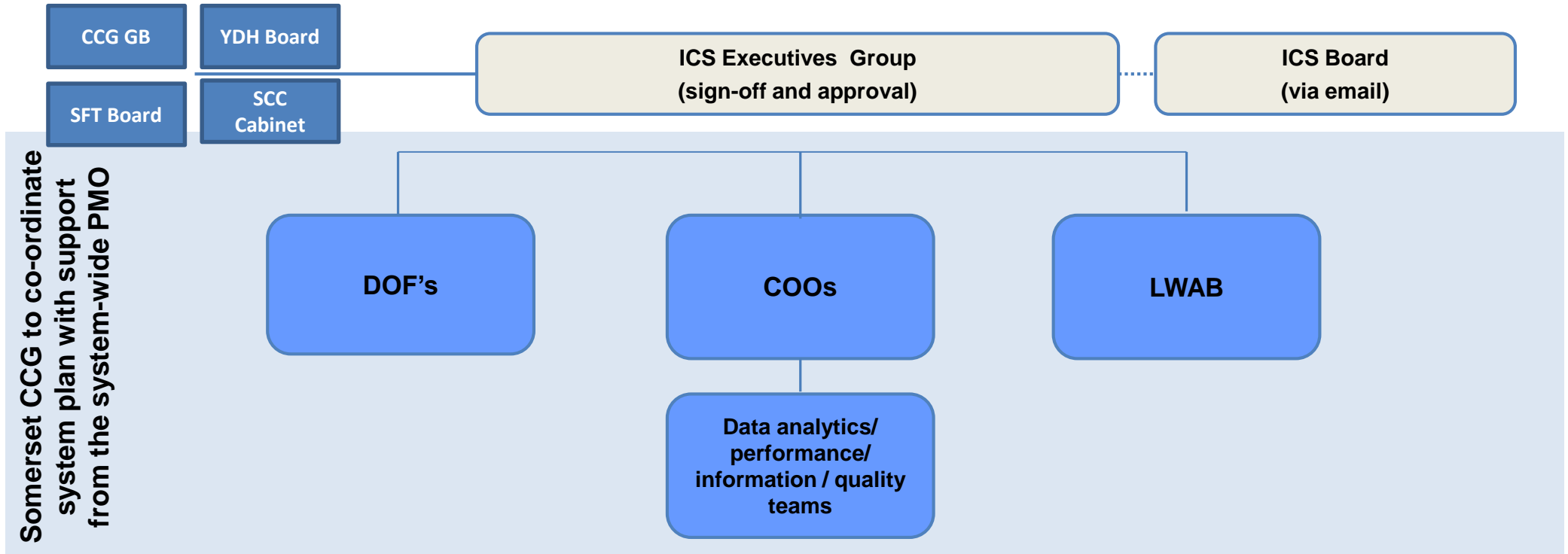


Cross Cutting Themes– Health Inequalities, Digital, Finance, Workforce

Phase 3 System Planning Sign Off Process



Somerset
Clinical Commissioning Group



System Plan to include:

- Strategic Vision
- Narrative plan
- Financial plan
- Performance trajectories
- Demand and capacity
- Workforce Plan
- Digital plan

Learning from the Incident

- Inter organisational lessons learnt Exercise Completed
- AHSN system wide Rapid Learning research to start early July
- Patient and Carer engagement linking with
 - * Healthwatch
 - * Citizen's Panel
 - * Regional Colleagues