

## Forum/Assembly Representative

### Feedback Report

Please provide a **brief** summary of meetings you have attended on behalf of the Bradford District Assembly/VCS Forum. This report will be used to inform the Assembly Steering Group/Forum that you represent. The information contained within it will be posted on the Bradford District Assembly website [www.bradfordassembly.org.uk](http://www.bradfordassembly.org.uk) . If you wish to report on something confidential, please **mark this clearly**.

Name of Representative	Stephanie Smith
E mail / contact details	Stephanie.smith@ageukbd.org.uk
Title of the board / group you sit on	Integrated Urgent Care Operations Board (IUCOB)
Date the meeting took place	04.04.19
Date of next meeting	TBC
Did you receive the meeting papers in time to have a pre-meeting?	no

#### 1. What was the purpose of the meeting?

Integrated Urgent Care Operations Board is an off shoot of the A&E Delivery Board.

#### 2. Main areas of discussion (bullet points).

- KPIs and evaluation of services to indicate value for money / cost savings – as a VCS we struggle to evidence this through robust measures.
- How VCS can 'embed' within clinical teams – discussion around the concept of a 'team within a team' (discussion was a follow on from Winter pressures evaluation).
- Delayed Transfers of Care (DTC) the DTC definition has changed nationally, which will have an impact in Bradford. The reasons for DTC in our area are multifactorial, and the national way of coding has changed. The moving on policy needs to gather pace and development for clinical staff to work with patients (CS providing support through CR and BTM for making information accessible and digestible for patients and families). Acknowledged there is a lack of understanding of what services are available to provide wrap around care for patients outside of the hospital. Care Coordination needs to link into this and the remit Care Coordination can provide to support this.
- The IUCOB will develop 4 task and finish groups to look at specific areas of high need, it was proposed that these would be:
  1. Frailty
  2. Working Age
  3. Mental Health
  4. Respiratory

The view is that these would be led by an appropriate clinical lead and smaller projects would be developed to support. There was discussion about how appropriate these

task and finish groups were in terms of the themes (I.e cross over between conditions and demographic factors). Suggested it would be better to focus on demographics e.g children , young adults, working age adults , older people.

- Presentation from community pharmacy team – Bradford has 144 pharmacies, many of which provide out of hours services. This asset needs to be utilised better. One initiative is being trialled in conjunction with one of the CPs is DMIRS (Digital Minor Illness Referral Service).

**3. Were there any discussions or decisions which you feel you had particular impact or influence on?**

- Development of task and finish groups – VCS representation essential and the ‘themes’ of the groups to be reviewed.
- Ongoing – how can the VCS be a team within a team within the clinical sector.
- Culture of people to go to GPs and under utilisation of community health care services e.g pharmacy – how do we influence and change this?

**4 Issues or points for Forum/Group/sub-group and/or the wider membership to follow up**

See 8

**5 Do you require input or specialist information from other forum members?**

Not at this time.

Contact has been made with VCS providers who deliver services out of A&E (both routinely and through WP money)

Would be beneficial to link with the community anchors in each CP to link with developments in primary care to ensure consistent messages from VCS to health.

**6 Please tell us about any additional support requirements you have in relation to your role and effectiveness**

Handover from KSJ scheduled for early May following election as new rep in April.

Induction appointments with other board members being scheduled

**7 Are you involved in any additional areas of work or meetings as a result of your attendance?**

A&E Delivery Board

Frequent attender reviews

**8 Have you any other comments or observations?**

Once the task and finish groups are finalised VCS representation would be beneficial on these groups for information and influence.

**Please email to:** [janet@cnet.org.uk](mailto:janet@cnet.org.uk)

**Or post to:**

Janet Ford

CNet, Centre for Enterprise

114-116 Manningham Lane, BD8 7JF

:CNet Rep feedback JF updated 2.6.2914



