Prevention and Health Inequalities Board

Committee / Group / Meeting, Date

Integrated Care Partnership Board 22nd January 2024

Presenter Authors/Contributors:

Liz Noakes Director Health & Wellbeing Telford & Wrekin Council

NHS STW Health Inequalities Team

ICB Programme leads

Report sign-off:

Tracey Jones, Director of Mental Health, Learning Disabilities & Autism, Children & Young People and ICB Lead for LTP Prevention and Health Inequalities Liz Noakes, Director Health & Wellbeing, Telford & Wrekin Council

1. Background

Integrated Care Partnership members will be aware that Prevention and addressing Health Inequalities are a core component of the Integrated Care Strategy and associated Joint Forward Plan.

As a system there are actions undertaken which addresses the wider determinants of health which are reported and monitored through both Shropshire and Telford and Wrekin Health and Wellbeing Boards and other local authority governance boards. Whilst these are not highlighted in the body of this report, the Board are asked to note that this work is ongoing alongside the specifics of the NHS healthcare requirements in the Operational Planning Guidance.

To formally monitor the objectives in the Joint Forward Plan, a system wide Prevention and Health inequalities Board was established in September 2023, chaired by the Director of Health and Wellbeing, Telford & Wrekin Council. Members of the Board include Executive/Board Health Inequalities leads of provider organisations and Local Authority Directors of Public Health. Managerial support is provided through the ICB Health Inequalities team. The Board has met twice and held a workshop. This report provides the high-level detail of the monitoring that is in place with regard to the progress of the specific programmes currently being undertaken.

In addition, the role of the system Prevention and Health Inequalities Board is to ensure greater collaboration takes place across the system. A workshop event in December 2023 has identified four key areas of focus to enhance collaborative working and impact during 2024/25:

- Waiting well initiatives to improve health and wellbeing particularly relating to those waiting for MSK interventions.
- Assessment of our system's maturity as an anchor institution and develop a programme of work to increase our impact as an ICS.
- Utilise systematic pathway approaches to ensure our prevention offers (including weight management and smoking cessation) are integrated into existing practices and that we continue to focus on the interrelated elements of physical and mental well being.
- Working with our Population Health Management Group develop our system wide knowledge and intelligence and agree key performance metrics.

Prevention and Health Inequalities Board

2. Key Requirements in Joint Forward Plan relating to Operational planning Guidance

Tackling inequalities in outcomes, experience and access of healthcare services is one of four key purposes of Integrated Care Systems (ICSs) and should be central to everything we should do.

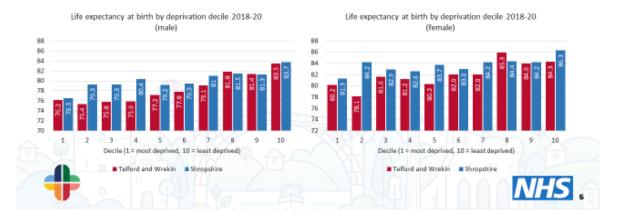
According to the 2021 Census, there are 60,100 people living in the 20% most deprived areas nationally in Shropshire, Telford & Wrekin, of which 45,400 live in Telford & Wrekin and 14,700 live in Shropshire. These areas are those to which the National Core20 approach to target improvements in health and healthcare inequalities is targeted. There are also a range of other excluded groups that we have considered locally as part of this approach, for example, those with Learning Disability and households at risk of rural exclusion.

Life expectancy is lowest in the most deprived 20% of areas (Decile 1 & 2 below) and there is a gradient in life expectancy by deprivation in both Telford & Wrekin and Shropshire.

Inequality in Life Expectancy

In both Shropshire and Telford and Wrekin life expectancy at birth is lower in the most deprived areas than in the least deprived areas.

However life expectancy at birth in the most deprived parts of Telford and Wrekin is considerably lower than in the most deprived parts of Shropshire.



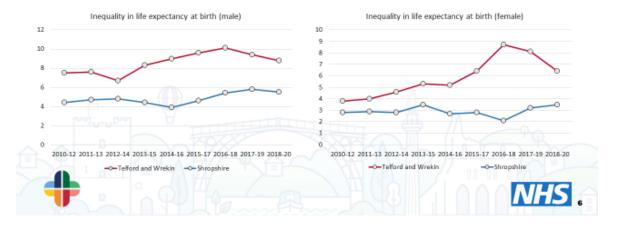
Inequality in life expectancy is largest in Telford & Wrekin compared to Shropshire. However, both local authorities have smaller gaps compared with their statistical neighbours. Inequalities in life expectancy has been increasing over the last decade but in 2016-18 in Telford & Wrekin started to decrease.

Prevention and Health Inequalities Board

Inequality in Life Expectancy – Slope Index

Slope index of inequality in life expectancy shows that inequality in life expectancy for both men and women in Shropshire and in Telford and Wrekin was greater in 2018-20 than in 2010-12.

Inequality for men and women in 2018-20 was greater in Telford and Wrekin than in Shropshire.



The body of the report to the Integrated Care Partnership relates primarily to delivery of the following strategic objectives as outlined in the 2023/24 Operational Planning Guidance and National Core20PLUS5 Approach to Reducing Healthcare Inequalities:

- i. **Restoring Services Inclusively** using local data to plan the inclusive restoration of healthcare services, ensuring that waiting list performance reports are delineated by ethnicity and deprivation.
- ii. **Mitigating Against Digital Exclusion** enabling robust data collection to identify which populations are accessing face-to-face, telephone and virtual consultations (broken down by relevant protected characteristic) and ensuring the impact of digital innovation is assessed, considered, and mitigated.
- iii. **Ensuring Datasets are Complete and Timely** to improve the collection and recording of ethnicity data across primary care, outpatients, A&E, mental health, community services and specialised commissioning.
- iv. **Accelerating Preventative Programmes** driving initiatives which focus on the prevention of long-term conditions including those focused on lifestyle-related risk-factors and the clinical areas outlined in the Core20PLUS5 for Adults and Children & Young People.
- Strengthening Leadership and Accountability ensuring named executive leads are appointed for tackling health inequalities, improving awareness and knowledge of the workforce, and supporting access to relevant training and development.

The report highlights the findings from the monitoring of these programmes to the Prevention and Inequalities Board. The section below outlines the potential implications of those objectives and associated risks.

Prevention and Health Inequalities Board

3. Assurance Report

3.1 Areas of non-compliance/risk; matters to be addressed urgently; or matters requiring escalation to progress

ALERT – The following programmes or projects have been brought to the attention of the **Prevention and Health Inequalities Board**, as they:

- Represent non-compliance with required standards or pose a significant risk to the ability to deliver responsibilities or objectives and therefore require action to address, OR
- Require the approval of the Committee for work to progress.

Strategic objective: Long Term Plan Prevention 1: Alcohol

Programme of work/project: Implementation of Alcohol Care Teams

Reason for escalation: Significant delays in implementation mean the project will not be completed by the anticipated completion date of 31st March 2024. This is the result of changes in staff throughout the lifespan of the project. Mitigations are in place with support from the ICB and T&W Council to drive forward progress with underspent national funding and a dedicated lead at the Trust has been appointed to support implementation.

<u>Strategic objective: CYP 2: Diabetes – access to glucose monitors/insulin pumps and</u> Type 2 AHC's

Programme of work/project: Diabetes Transformation Programme

Reason for escalation: Slow progress in a number of areas due to commissioning and capacity challenges, including:

- The Diabetes Transformation Board seeks to have diverse patient representation but to date, no representatives have been appointed.
- The policy for access to Continuous Glucose Monitors has not yet been approved by the Clinical Assurance Group.
- There are delays in approval of Type 1, 2 and foot pathways which were to be agreed by the end of Q3 2023/24. Whilst the type 2 pathway has been approved, the foot pathway is expected to be approved 19th December and Type 1 pathway in January 2024.
- No progress has been made regarding funding to support the provision of continuous glucose monitors and insulin pumps for deprived communities.

Prevention and Health Inequalities Board

3.2 Areas of on-going monitoring with new developments

ADVISE – The following programmes or projects have been brought to the **Prevention and Health Inequalities Board's** attention as they represent areas for ongoing monitoring, a potentially worsening position, or an emerging risk to the ICS' ability to deliver its responsibilities or objectives:

Strategic objective: Inclusive restoration of NHS services

Programme of work/project: Elective Recovery Transformation Programme

Reason for escalation: Many actions are pending due to system wide capacity challenges.

- EQIA's for the Elective Transformation Programme are complete. Provider Trust Elective Recovery EQIA's and the system-wide combined Elective Transformation & Recovery EQIA are pending.
- Business Intelligence Teams are working to split waiting lists down by ethnicity and deprivation.
- DNA audits have commenced and the outcomes will inform the development of a whole system integrated Elective Transformation & Recovery SMART Inequalities Plan.
- Engagement work has taken place with sight-loss Shropshire to improve patient communication and pathways for those with sight loss.
- Standards are also in place to ensure face to face appointments are offered where needed to mitigate digital exclusion.

Strategic objective: Mitigating against digital exclusion

Programme of work/project: Development of STWs 2023/24 Digital Strategy and incorporation of key objectives to mitigate against digital exclusion.

Reason for escalation: Slow progress due to capacity and recent change in senior leadership for digital innovation and transformation.

• The 2023/24 Digital Strategy has not yet been published, although it has been drafted and influenced by the Prevention and Health Inequalities Team. A new Head of Digital Innovation and Transformation has been appointed and will work closely with the Prevention and Health Inequalities Team to ensure the accompanying Digital Strategy Action Plan (due to be developed in Q4 2023/24) reflects and adopts the actions set out in the NHSE Digital Inclusion Framework. Engagement is taking place to inform mitigations for known digital exclusion and opportunities for stakeholder involvement in action plan development.

Strategic objective: Long Term Plan Prevention 2: Tobacco

Programme of work/project: Implementation of Tobacco Dependency Teams **Reason for escalation:** Limitations in available funding for the provision of NHS-funded

Reason for escalation: Limitations in available funding for the provision of NHS-funded Nicotine Replacement Therapy (NRT) and community-based smoking cessation support.

- 3/3 Tobacco Dependency Services are fully established including maternity, inpatient acute and mental health.
- Engagement is taking place with community pharmacies to encourage sign-up to the enhanced service specification to bolster the post-discharge support offer across the patch.
- Work is taking place to understand smoking cessation support on offer to those in community hospital beds.

Strategic objective: Adult 2: Severe Mental Illness

Prevention and Health Inequalities Board

Programme of work/project: Deliver an improved pathway to ensure adequate provision and improved uptake of annual physical health checks for those living with Severe Mental Illness.

Reason for escalation: SMI check completion figures are low and system-wide support, although improving, remains disjointed. Regionally figures continue to demonstrate high levels of health issues in the SMI population i.e. Cancer.

- Work continues to consolidate GP registers and improve the coding of health check activity from secondary care (MPFT) to EMIS (primary care). Primary Care will code ongoing health checks and backlog health checks (approximately 343 health checks in total) and a guide has been produced to support the process. A recovery plan will remain in place and be reflective of the current position.
- The annual health check specification is being reviewed and a proposal is due to go to Commissioning Working Group for approval/GP Board review.
- Work is taking place to explore an outreach service offer which should increase activity and reduce DNAs.
- Quality reviews of SMI Annual Health Checks are due to start imminently and programme leads are working with VCSE and Local Authorities to integrate and improve lifestyle factors.

<u>Strategic objective: Adult Clinical Area 3: COPD – a clear focus on COPD and driving uptake of vaccinations to reduce infective exacerbations and emergency hospital admissions.</u>

Programme of work/project: Improved provision of local Spirometry Services

Reason for escalation: Significant backlog with spirometry due to capacity challenges in primary care, engagement challenges and lack of investment.

- Work taking place in primary care to understand spirometry activity, demand, and resource needs. A benchmarking exercise will take place against other systems.
- Non-recurrent funds are required to support, and an EOI for 50k has been submitted to NHSE. Plans to address backlogs include looking to an external provider.

<u>Strategic objective: CYP Clinical Area 3: Epilepsy – increase access to epilepsy specialist nurses and ensure access in the first year of care for those with a learning disability or autism</u>

Programme of work/project: CYP transformation for epilepsy

Reason for escalation: Delays due to the care bundle being released by NHSE November 2023, behind expected plan schedule.

- A small system working group has been established to support the delivery of the care bundle. Two epilepsy nurses have been recruited 1 day per week to support this work (posts commenced early November for 12 months). A Psychologist post has also been recruited to support and will commence February/March 2024.
- A separate Task and Finish Group is in place to progress delivery of epilepsy nurse input into Educational Health and Care Plans (EHCPs) for children and young people with Special Educational Needs and Disabilities (SEND).
- Work is taking place to identify baseline data to inform the bundle and Epilepsy audit.
- A pathways mapping exercise will take place in the next quarter for neurodevelopmental pathways, Non-Epileptic attack disorder, Tertiary neurology and the Children's Epilepsy Surgery Service.

<u>Strategic objective: CYP Clinical Area 4: Oral Health – addressing the backlog in tooth</u> extractions for under 10s

Prevention and Health Inequalities Board

Reason for escalation: Delivery challenges with brushing for life and lack of progress in undertaking an audit of current waiting lists.

- 16 training sessions have been delivered to local workforce, exceeding the original target of 10.
- Resources and an action plan to encourage uptake of the national 5 year old dental survey across Shropshire, Telford & Wrekin have been developed which will support targeting and monitoring of preventive programmes going forward.
- 32 settings (and an estimated 3,200 children) are taking part in the Brilliant Brushers Programme which teaches supervised toothbrushing in early years settings.
- There are ongoing challenges around the recording of activity and delivery of the Brushing for Life programme which offers free toothbrushes and toothpaste to the community. Shropshire has improved in part since throughout the last quarter but further work is needed in Telford & Wrekin. Meetings are planned with the relevant teams to understand and discuss barriers and plan improvements.
- A social media platform has been developed to raise awareness of oral health programmes and support (such as Brilliant Brushers) and key oral health messages.
- There is a lack of progress in undertaking a waiting list audit. This is due to insufficient capacity in the commissioning team, provider team and lack of data to support this due to the national dataset requirements not aligning the Core20plus5 metrics. This has been raised nationally.

<u>Strategic objective: CYP Clinical Area 5: Mental Health – improving access rates</u>

Reason for escalation: capacity challenges have led to risks of delay. These are mitigated by recruitment of new leads to drive progress and prioritisation exercises to ensure priority actions are progressed.

Programme of work/project: Education and awareness of childhood trauma

 An initial awareness session was shared at the ICB Virtual Huddle 18th April 2023 which proposed next steps to work with system leadership and commissioners to embed trauma approaches in commissioning and service delivery. A training plan and resource pack for the 'Miss Kendra' approach has been rolled out to schools.

Programme of work/project: National Mental Health Support Teams (MHST) in Schools

• There is ongoing MHST workforce development, with a recent focus on training and frontloading a service offer for a whole school approach. 9 MHST practitioners have been secured for training which starts January 2024.

Programme of work/project: Analysis of access to mental health services for CYP

• Analysis will be undertaken in quarter 4 to identify referral hotspots. Further work is taking place to develop a metric which will monitor access rates for 'at risk' cohorts of children and young people.

Prevention and Health Inequalities Board

3.3 Areas of assurance

ASSURE – The following programmes or projects have been brought to the **Prevention** and **Health Inequalities** Board's attention as they highlight good news stories, positive progress and do not raise any concerns related to the delivery of year-end targets.

Strategic objective: Ensure Complete and Timely Data

Programme of work/project: Improved data-sharing across the system and the provision of baseline data to facilitate population analytics, and PHM approach to improvement programmes.

 BI team continues engagement with the Local Medical Committee (LMC) to jointly progress the facilitation of data access via the EMIS X Analytics tool. Assurance around governance is being provided in January with approval anticipated paving the way for practice-level engagement and implementation. Successful recruitment of PHM Analyst post and new BI developer role secured in ICB to develop PHMfocused intelligence assets and systems.

Programme of work/project: Improve the recording of ethnicity

 Engagement is taking place with main providers to improve the capture of ethnic data and on the implementation of new Electronic Patient Record Systems (EPRs) to support. Work is additionally taking place with community and mental health Providers to develop national datasets (CSDS and MHSDS) to reconcile to internal EPR recording of key metrics.

Strategic objective: Improved Leadership and Accountability

Programme of work/project: Governance and Planning

Dedicated SROs and Leads have been identified across all system organisations.
The System-wide Prevention and Health Inequalities Board was established in Q3
2023/24 with oversight of the health inequalities objectives outlined in the 2023/24
Operational Planning Guidance. A system-wide workshop was held December
2023 to identify key priorities and integrated and targeted initiatives for 2024/25.

Programme of work/project: Awareness, training, and resources

 A variety of methods are in place to support colleagues across the system with developing their understanding of health and healthcare inequalities, e.g., the ICB Health Inequalities Team are developing a space on the Shro and Tel intranet, development sessions are taking place at various Boards/Services and systemwide webinars are being arranged where needs are identified such as Inclusive Restoration. 15 Core20PLUS Ambassadors successfully accepted into the National Ambassador Programme (ranging across the ICB, secondary care and Primary Care Networks).

Programme of work/project: Equality, Diversity, and Inclusion

- Delivery of steering group priorities action plan continues to be monitored and positive progress is being made for most priorities. A dedicated Chair has been appointed to lead the EDI Steering Group, as well as appointed EDI Leads within organisations and an increased number of EDI Champions.
- The Prevention and Health Inequalities Team will be attending an EDI Stakeholder Workshop in January 2024 to present on Healthcare Inequalities and draw links with EDI priorities.

Prevention and Health Inequalities Board

Strategic objective: Long Term Plan Prevention 3: Obesity and Weight Management Programme of work/project: NHS Digital Weight Management Programme

 Shropshire, Telford & Wrekin have historically been one of the highest achieving referrers across the nation. 45/52 GP Practices have made 1,200 eligible referrals since April 2023 and in the remaining quarter 3 and 4 will be focused on areas of high deprivation. STW GP Practices have been asked to showcase their success at an upcoming DWMP event.

Strategic objective: PLUS, Group 1: Learning Disability and Autism

Programme of work/project: Improved Uptake of Annual Health Checks

All practices are signed up to the LDAHC DES and continue to offer LDAHCs to
patients annually, performance trajectory is on track against 23/24 improvement
plan. Quality audits are scheduled, and learning will be shared with all practices.

Programme of work/project: LeDeR Action Plan

- Positive progress is being made against most priorities within the LeDeR Action Plan and the steering group has increased its membership having been joined by Experts by Experience.
- A separate Oliver McGowan working group has been established to drive progress in training.
- A communication plan is in development with LeDeR system partners (to include lessons learned from reviews).
- The performance of completed focused reviews in 6 months and quality of LeDeR reviews is an area of risk. To mitigate this, the frequency of Governance panels has increased, Contract Review Meetings have been reinstated and the quality review processes strengthened.

Strategic objective: PLUS, Group 2: Rural Exclusion

Programme of work/project: Exploration of the impact of rurality on health

- A comprehensive review has been undertaken with good engagement from system partners. This will inform a report and broad range of recommendations for all partners to improve rural community support. A scrutiny report will be considered for adoption by Council Cabinet in January 2024.
- The Integrated Care Board has agreed to integrate the 'rural proofing for health toolkit' into service planning processes.
- Discussions will continue with Regional Colleagues regarding a Rural Health network.

Strategic objective: Adult Clinical Area 1: Maternity

Programme of work/project: LMNS Equity and Equality Action Plan

- The LMNS Equity and Equality action plan has been signed off by the LMNS programme board and will imminently be published for public review. Progress on actions will be monitored through individual maternity and neonatal workstreams.
- Recruitment is taking place for an EDI Midwife at SaTH and roll out of the Civility, Respect, Inclusion and Kindness (CRIK) training has commenced across the Trust.
- A Business Case from maternity and neonatal voices partnership (MNVP) has been approved for an increase in funding.
- Baby First Aid classes have been rolled out across Telford and Wrekin within areas of significant socio-economic deprivation. These have seen high uptake.

Prevention and Health Inequalities Board

• An Antenatal education specification has been agreed with the Trust. The project is being finalised and is due to commence imminently.

<u>Strategic objective: Adult Clinical Area 3: COPD – a clear focus on COPD and driving uptake of vaccinations to reduce infective exacerbations and emergency hospital admissions.</u>

Programme of work/project: Covid-19 Vaccination Programme

 Accelerated autumn/winter Covid-19 Vaccination Campaign commenced September 2023, initially focusing on care homes but extended to offer increased access for under-served communities through targeted outreach at community bases, fire stations, pop-up locations etc. Vaccination communications are targeted to those who are at risk (specifically those with COPD).

<u>Strategic objective: Adult Clinical Area 4: Early Cancer Diagnosis (diagnostic pathways)</u>

Programme of work/project: Early Cancer Diagnosis Objectives

- The first stage of the Community Diagnostic Centres opened in Telford November 2023.
- FIT compliance has been maintained with further development of a straight-to-test flexible sigmoidoscopy pathway for FIT negative patients.
- GP education sessions were held with the Colorectal consultant from Primary Care a further session is planned in Jan 24 to include use of the NSS pathway.
- A task and finish group has been set up to begin planning of the Targeted Lung Health Checks. An outline options appraisal has been developed and used to inform initial roll-out areas.
- A Teledermatology hub is due to open in the Community Diagnostic Centre in February 2024. Further hubs are planned following options appraisal/business case approval by Commissioning Working Group.
- Analysis will take place across all diagnostic pathways to identify key areas of need and enact targeted intervention.

<u>Strategic objective:</u> Adult Clinical Area 4: Early Cancer Diagnosis (screening) Programme of work/project: Early Cancer Diagnosis Improvement Plan

- Breast screening round length is now recovered.
- A detailed equity intelligence profile is in progress and a draft has been presented to the Cancer Strategy Board in September.
- Five GRAIL referrals to SaTH with 82% uptake and more are anticipated in next round.
- A breast cancer awareness event took place in Telford community settings with Seldom Heard Voices in May and October 2023. These were attended by other local projects included Cancer Champions.
- South East Telford PCN have created a video for non-responders resulting a 25% increase in cervical screening uptake amongst 25-year-olds at Stirchley GP Practice.

<u>Strategic objective:</u> Adult Clinical Area 4: Early Cancer Diagnosis (primary care) Programme of work/project: PCN DES

 All 8 PCNS are delivering the PCN DES requirements and developing care coordination for cancer patients. New PCN Cancer Care Coordinators are in post and trained on Motivational Interviewing/cancer and systems and processes are

Prevention and Health Inequalities Board

- being reviewed and improved, such as escalations and flags for late diagnosis and the sharing of learning.
- There is a FIT testing proforma on F12 and all staff are aware with a trial for pop-up reminders and training to GPs.
- Teledermatology is being piloted in Primary Care and a survey was completed in September to inform future models.
- A non-specific symptom pathway is being developed in quarter 4.
- Excellent work is taking place in South East Telford PCN through Care Coordination, including a focus on late-stage diagnosis for prostate cancer, focusing on black men aged 40 and above with abnormal PSA/BPH.

<u>Strategic objective: Adult Clinical Area 4: Early Cancer Diagnosis (Community Awareness)</u>

Programme of work/project: Core20PLUS Connectors (STW Cancer Champions)

 Significant progress has been made against all deliverables with over 180 Cancer Champions recruited from a diverse range of backgrounds. The project team are working closely with colleagues across the system to embed changes based on Champion insights, including building these into the refreshed Cancer Strategy. The project was successfully chosen to showcase its successful approach to partnership working at the Midlands Health Inequalities Conference in November 2023.

<u>Strategic objective: Adult Clinical Area 5: Hypertension and Lipid Casefinding/Management</u>

Programme of work/project: Innovation for Healthcare Inequalities (InHIP) Targeted secondary lipid management

- Ongoing support is being provided for risk stratification and system searches to support targeted reviews, with reviews ongoing in 4 practices with a named lead or champion for each practice.
- Campaign materials have been developed and education sessions offered and resources will be shared with all participating practices.
- Secondary care clinics have commenced.
- POC device repurposed from Primary Care. Device application submitted to Trust.

Programme of work/project: Innovation for healthcare inequalities (InHIP) hypertension case-finding

- Shropshire, Telford & Wrekin have been successful in their bid for 185k of national CVD Prevention and Health Inequalities funding to support, sustain and enhance the community hypertension case-finding.
- In Telford and Wrekin excellent progress has been made to deploy volunteers and implement activities for targeted groups and IMD areas. Successful case study where an individual was diagnosed hypertensive, pre-diabetic and encouraged to make lifestyle changes.
- In Shropshire a different model has been successfully developed to train "Level 1" volunteers to disseminate information and awareness of risks re high BP and "Level 2" volunteers who take BP readings and direct those with high BP readings for 7- day monitoring via Social Prescribers in GP practices.
- The project was showcased at an interactive market stall event at the Regional Health Inequalities conference in Birmingham on 29th November.
- There have been challenges and delays with DPIA documentation and arrangements for sharing blood pressure data obtained in the community with GP Practices but this has now been resolved and is moving forward.

Prevention and Health Inequalities Board

 Developments are ongoing to integrate hypertension case-finding with services offered by Community Pharmacy and Dental Surgeries.

Programme of work/project: Hypertension treatment to target

 A project has been initiated by the system CVD Prevention Clinical Lead and ICB PMO to identify efficiencies in practice and support outlier Practices (those within lowest IMD deciles, high BAME populations or rural areas) to adopt UCL Partners resources and improve optimal treatment. Work is ongoing to align with Health Innovation West Midlands to support GP Practices to increase treatment percentages to 80% and educational workshops with partners via GP Forum and PLT events to support all Practices.

Strategic objective: CYP Clinical Area 1: Asthma

Programme of work/project: CYP transformation and personalised care for asthma

• The programme is making positive progress with 232 Reviews undertaken since April 2023; 200 CYP using the Asthma App. 352 Completions of L1 training and a Reduction average of 20 admissions during 2022/23. 70% of schools across STW are asthma-friendly accredited (43% 2021/22) and Specific, tailored asthma training offered to practice nurses (to carry out paediatric spirometry), early years staff and sessions in planning for housing associations. STWs work improving outcomes for children and young people with asthma was successfully chosen to present at the Midlands Health Inequalities Conference in November 2023.

4.0 Conclusion / Recommendation

The Committee is asked to:

- 1. NOTE the establishment of the system wide Prevention and Health Inequalities Board
- 2. NOTE the progress of actions across the system in relation to delivering high level objectives in the System Operational Plan contributing to delivery of the Joint Forward Plan.
- 3. NOTE the plans to progress 4 key system priorities for collaborative working in 24/25.