



Hertfordshire and
West Essex Integrated
Care Partnership

Presentation to: update on the initial stages of developing an Integrated Care Strategy

Thursday 28th July 2022

**Working together
for a healthier future**



National Background

The Health and Care Act 2022 requires Integrated Care Partnerships to write an Integrated Care Strategy to set out how the assessed needs (from the JSNA) of local people of all ages can be met through the exercise of the functions of the Integrated Care Board & partner local authorities.

The strategy is an opportunity to improve people's health and wellbeing, by encouraging collaboration, joint working, and integration.

The Strategy should:

- Set the direction across the area of the Integrated Care Board and Integrated Care Partnership, setting out how commissioners in the NHS and local authorities can deliver more joined-up, preventative, and person-centred care for their whole population, across the course of their life.
- Be considered as part of commissioning arrangements, functions, plans and strategies (including the Integrated Care Board and Partner NHS Trusts and Foundation Trusts five-year joint forward plan) and working with their system partners.

The strategy can be used to agree the steps that partners will take together to deliver system-level, evidence-based priorities in the short-, medium- and long-term. These priorities could drive a unified focus on the challenges and opportunities to improve health and wellbeing.

It may also include a statement on the integration of health and social care services with health-related services. It differs from the Joint Local Health and Wellbeing Strategy as it is at system, rather than place, level.



National Background (Cont)

- CQC's reviews will assess how the Integrated Care Strategy is used to inform the commissioning and provision of quality and safe services across all partners, within the ICS, and that this is a credible strategy for its population.
- The Health and Wellbeing Boards remains responsible for both the JSNA and the Joint Local Health and Wellbeing Strategies.
- It should identify where needs could be better addressed at Integrated Care System level and bring learning from across places and the system to drive improvement and innovation
- ICP's to determine how the HWB and Integrated Care strategies will complement each other and ensure that the assessed needs are addressed between them.
- ICP's expected to refresh and develop the Integrated Care Strategy as they grow and mature
- The strategy must relate to the needs of the whole population of HWE including those of different ages
- The HWB strategies can be used for the Integrated Care Strategy in year 1

Detailed national guidance will be published shortly.



National Background (Cont)

. The ICS Strategy must:

- Have regard to the NHS mandate
- Involve the people who live and work in their area
- Involve the local Healthwatch organisations whose areas coincide with, or fall wholly or partly within the Integrated Care Partnership
- Consider if the needs could be met more effectively using the partnership arrangements under Section 75 of the National Health Service Act 2006
- Be published, and shared with the relevant local authorities and Integrated Care Board

Strategy to be signed off by December 2022 and supported by a five-year join forward plan to be submitted by the end of March 2023.

We are proposing that the strategy sets out the ICP ambitions for **10 years** with a supporting forward plan outlining how we will achieve our ambitions in years 1-5.



Overview of links to HWB Strategies

Place – Hertfordshire and West Essex

Joint Strategic Needs Assessment
Sets out the needs of the local authority's population
Produced by the Health and Wellbeing Board

Joint local Health and Wellbeing Strategy
Meets the needs set out in the JSNA
Produced by the Health and Wellbeing Board

System

Integrated Care Strategy
A single ICS Strategy that sets out a core set of priorities for the system
Jointly produced by statutory partners under the ICP.

ICB 5 year joint Forward Plan
Has regard to ICS strategy
Produced by ICB and partners.
Partners also produce forward plans in line with strategy.



Things to consider including in strategy:

- **Shared Outcomes-** agreement across the ICS on priority areas
- **Recommendations on section 75 arrangements**
- **Addressing Disparities in Health and Social Care** – in particular **how will we address unwarranted variation** in population health, access, outcomes and experience of health and care across the population and the drivers of these variations
- **Improving population Health and Prevention**
- **Evidence Based Prevention Measures** – to **prevent and reduce** mental and physical ill health and their risk factors; avoidable and premature mortality, long-term ill-health; and future care needs.
- **Anchor institutions** - the role that local government, NHS, other large employers and partners play and the potential they have to benefit communities and enhance socio economic conditions
- **Health Protection**
- **Transition Points** - key transition points and continuity of care
- **Workforce** - developing system-level workforce data and aligning workforce planning, opportunities to promote and develop joint recruitment, talent management, training and development pathways across the ICP and further workforce integration.
- **Data and information sharing**



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The Evolving Local Position

Actions to date:

- Established an initial small focused team to co-ordinate & push development of the plan
- Held 2 initial workshops with a range of partner engagement to:
 - set a high level timeline for the plan development
 - Develop high level scope & assumptions
 - take stock of the information available to help us understand our population, gaps, inequalities and good practice.
 - Identify a potential range of priorities for the ICP to consider for the next stage of work up & engagement
- Agree small core team to move work forward



Reflections to date

- Strong base to move forward from with Hertfordshire & Essex having both recently published refreshed Health & Wellbeing Board Strategies with clear overlaps between both documents.
- The development of an ICS wide health needs analysis which allows us to have an overview of our local population which can be segmented to look into communities at a variety of levels
- Two very strong approaches to the development & use of JSNA data.
- Recommendation: an early slot on the ICP development agenda to receive a high level presentation of the health needs analysis work and JSNAs to ensure all partners have a shared level of understanding
- Need to ensure in developing the plan , we use a common language for example what do we collectively mean by co-production, engagement & consultation
- There is a significant volume of work already happening across the partnership which partners are not always aware of and good practice is not always shared
- We need to boarder the range of people/organisations involved in the next steps
- We need to start the development of the communication & engagement plan rapidly



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Proposed Timeline:

August:

1. Sense check priorities with system leads
2. Further develop priority details

September:

1. Wider Stakeholder engagement
2. Draft Strategy Developed
3. Reviewed with Strategy Steering group

October:

1. Formal consultation of strategy undertaken
2. Planning for Forward Plan development undertaken

November:

1. Strategy updated following consultation
2. Final version reviewed by Strategy steering group

December:

1. Final Strategy taken to system boards for final sign off
2. Submit to NHSEI



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Scope & Assumptions

Scope

- Strategy to cover system vision, priorities and ambitions for the HWE population
- Strategy to focus on 2023-2033
- To be supported by 5 year Joint Forward Plan
- Strong focus on prevention & wellbeing – ‘shift left’
- Not to only focus on NHS or social care must-dos – these should be picked up by operational plans/refreshes

Assumptions

- Will describe how the assessed health, care and wellbeing needs of the local population are to be met by the ICB, County Councils and other partners
- To be delivered by all partners
- To be delivered at place – with the right level for place determined by the priority
- Will need to link to the refresh of the NHS Long Term Plan
- Will focus on 4 to 5 key areas
- One strategy rather than separate ICP and ICB strategy – but will build on existing plans and strategies



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Emergent Principles

- All ages needs to be represented
- Balance of health & non health priorities
- Must have shared outcomes
- Ensure existing good practice shared & used
- Focus on gaps and where a collective drive can make a difference
- Be prepared to challenge ourselves to move on some of the wider determinants
- Have an oversight framework that allows both population and targeted approaches
- Embed engagement of our population in the process
- Concentrate on a small number of core priorities
- Important we ‘tilt the lens towards the community’



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Potential Priority Structure



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Example Ambition Structure

Ambition: To reduce emissions across HWE by 80% by 2032

Rationale:

NHS Net Zero Targets
Hertfordshire & Essex Declaring Climate Emergencies



Enablers:

Existing Local Authority Strategies
Healthcare Provider Strategies
NHS Net Zero Plan



Outcomes:

Improved air quality
Increased life expectancy
Reduced use of health services for respiratory conditions



Lead Partner: Public Health



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Priorities Feedback from workshop

Addressing inequalities/
promoting equity

Children & a good
start in life

Prevention –
Shift left

Empowering
communities

Healthy &
sustainable
communities

Promote mental &
physical wellbeing

Enable a healthy
standard of living

Focus on
accessible support

Address long term
conditions with a
system approach

Workforce

Support long term
independence

Improve mental
health

Reduce substance
misuse, smoking &
alcohol
consumption

Tackle on the day
demand for health
& care

Good nutrition
healthy weight &
physical activity

Life Long Education
(making the right
choices)



Proposed Next Steps

- Continue steering group led by statutory partners working jointly with wider partners.
- Work up c10 priorities areas in more detail including information on ambition, rationale, enablers, outcomes and suggested lead organisation as basis for engagement process in October/November.
- Outline structure for document being worked up
- During August scope our engagement approach including looking at different approaches to engagement
- Recommend ICP thinks about its appetite for change and how aspirational it would like to see the vision? What do we want to do differently?
- Maintain a focus group (of c,25 people) to test the work and its development over the next 6-9 months.

Areas for Further Consideration

- What finance to we align to the strategy & its delivery?
- What governance sign off do we need to build into the timeline
- How to ICP members help to shape the next stage of the work?

