

Acting Chair's report

FOR INFORMATION/DISCUSSION

1. Acting arrangements

During Steve's continuing poor health I've acted as agreed, working closely with Geoff and the Executive Team. I've passed Board members' and external stakeholders' good wishes to Steve and I know he's looking forward to seeing everyone again when he's well enough. It has not been necessary to make any major decisions in which the Board has not already been involved but I thought that a written report might be useful as background for the Board's discussions.

2. National context

Since our previous meeting, the NHS marked its 75th anniversary, prompting a wave of comment and speculation about its future. The NHS Assembly produced a thoughtful [report](#), including a central theme about giving people more power in the system, which Board members may find of interest. This quarter also finally saw the publication of the first long-term [NHS workforce plan](#). While it attracted some criticism for excluding social care and the lack of a full funding commitment, it marks a significant milestone on the journey to tackle workforce problems and their impact upon patients and professionals alike.

Both of these developments took place against the backdrop of long waiting lists – a long-term problem made worse by the pandemic – and strike action by junior doctors, consultants and other professions which has a further impact on waiting times. NHS England has announced a [hospital matching system](#), intended to make maximum use of capacity and enable patients who are willing and able to travel for treatment to do so. It remains to be seen how great an impact this will have, both on waiting times and potentially on health inequalities.

3. Our system context

This quarter saw the culmination of a number of planning exercises in which we've informed the thinking of system leaders. The following strategies and plans are now in place, covering the Hertfordshire and West Essex Integrated Care System.

The [Integrated Care Strategy](#) was approved by the Integrated Care Partnership, of which we are a member organisation, in March 2023. It was followed by discussions during this quarter, in which I took part, at the Health and Wellbeing Board and at a workshop involving a wider range of partnership organisations, leading to the Integrated Care Board's adoption of its [five-year forward plan](#) and the Integrated Care Partnership Board's approval of its related forward plan (papers, presentations and minutes of the relevant meeting are available [here](#)). These plans will provide the framework in which health and care decision-makers will consider and act upon our future intelligence. The way the main issues, objectives and messages are structured is likely to be of use during our own strategy discussions in the Autumn.

The ICB's Primary Care Board, which I attend, and the main ICB Board have now approved the Primary Care Strategic Delivery Plan 2023-2026 (attached as **Appendix 1**). I think you'll be able to see the impact of the work that we and our Healthwatch Essex colleagues have done so far. Our challenge will now be to help make sure that the plan is implemented in ways that make effective use of people's feedback, and to support longer-term thinking and ambitions.

The Hertfordshire Health and Wellbeing Board met in June (papers, presentations and draft minutes are [available here](#)). We agreed to develop a women's health strategy and to maintain Hertfordshire's family safeguarding model. We also heard updates on a two-year pilot programme to support adults experiencing homelessness and multiple disadvantage and on the Discharge To Assess programme. We approved the 2023-25 Better Care Fund planning submission and discussed developing arrangements for joint commissioning across the county. These conversations provided opportunities for me to stress the importance of co-production and to identify ways in which our insight would be useful, for example our work on the menopause, on race equality and on cost of living.

4. Annual report and Annual General Meeting

Our team worked wonders with this year's impactful and impact-full [annual report](#), as always turning a legal obligation into an important means of helping the people we serve and the partners we work with to understand the breadth and the importance of our activity. I'm pleased to report that we

have had very positive feedback about it from Healthwatch England. It was also a pleasure to chair our first in-person [Annual General Meeting](#) in four years, at which attendees heard about the team's achievements in amplifying people's voices and shaping decisions but also put real energy into thinking about constructive and collaborative ways to take action on the basis of our findings. The agenda for this Board meeting has been designed to create an opportunity for the Board to reflect upon what we can learn from the contents of the annual report, ahead of our future strategic thinking.

4. Cost of Living report

Our work on this critically-important issue has been a huge feature of the staff team's programme and I'm delighted that the positive response it received when it was presented at the AGM continued when it was launched the following day. The quality, breadth and depth of the [report](#) and the clarity of our messages secured media coverage, senior-level engagement from decision-makers in our local system and interest from national policy audiences, not least because of the work the team did to develop excellent [factsheets](#) highlighting the findings concerning the worst-affected demographic groups. That all bodes well for the most important thing: making sure that people are supported to manage the challenges they told us about. We are already seeing the impact of having shared the interim report earlier in the year and I look forward to hearing more about how the final report is helping people in the months to come. I raised some of the wider issues for all ICSs in a piece for the [Health Service Journal](#) (paywalled but the article is accessible if you register).

5. 'Holding to account' and other meetings

During this quarter I joined Geoff in constructive meetings with the chair and chief executive of the Integrated Care Board, Hertfordshire County Council Adult Social Care leaders and the chief executive and strategy/estates director of Princess Alexandra Hospital. I also chaired the ICB's online primary care delivery plan public engagement event and took part in stakeholder panels for the appointments of the Chief Nursing Officer and the Strategy Director at West Hertfordshire Teaching Hospitals NHS Trust and the Partnership Development Director at the South West Hertfordshire Health and Care Partnership.