

Report title: Mid and South Essex Joint Forward Plan 2023-2028	
Report to: Essex Health and Wellbeing Board	
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Date: 19 July 2023	For: Confirmation
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County Divisions affected: <i>Mid and South Essex</i>	

1 Purpose of Report

- 1.1 The Health and Care Act 2022 ("The Act") establishes Integrated Care Boards (ICBs) as the statutory body responsible for NHS services in each locality, and Integrated Care Partnerships which draw together wider partners concerned with improving health and wellbeing outcomes for residents. Each ICB, along with its partner NHS Trusts/Foundation Trusts must prepare a five-year Joint Forward Plan (JFP), working with local Health and Wellbeing Boards (HWBs) to ensure that the joint local health and wellbeing strategy and relevant joint strategic needs assessments are reflected in the JFP.
- 1.2 As MSE's JFP was not available for discussion at the last meeting of the HWB, it was agreed that it would be circulated by e-mail to Board members (13th June), to enable the HWB Chairman then to write back to MSE with any comments ahead of the 30th June deadline. It was further agreed that it would then be brought back to July's HWB meeting for formal acknowledgement.
- 1.3 The Chairman's letter of opinion is attached as **Appendix One**
- 1.4 The Mid and South Essex JFP is included as **Appendix Two**

2 Recommendations

- 2.1 Members are asked to confirm the Chairman's endorsement of the MSE JFP and its alignment with the Essex Health and Wellbeing Strategy, having been given the opportunity to respond to the draft JFP.

3 Background

- 3.1 The 2022 Act established 42 Integrated Care Systems (ICSs), which are partnerships of organisations that come together to plan and deliver joined up health and care services, and to improve the lives of people who live and work in their area.
- 3.2 Each ICS is made up of two main committees:
- **Integrated Care Board (ICB):** A statutory NHS organisation responsible for developing a plan for meeting the health needs of the population, managing the NHS budget, and arranging for the provision of health services in the Integrated Care System area. The establishment of ICBs resulted in Clinical Commissioning Groups being closed.
 - **Integrated Care Partnership (ICP):** A statutory committee jointly formed between the NHS ICB and all upper-tier local authorities that fall within the ICSs area (councils with responsibility for children's and adult social care and public health). The ICP will bring together a broad alliance of partners concerned with improving the care, health, and wellbeing of the population, with membership determined locally. The ICP is responsible for producing an Integrated Care Strategy on how to meet the health and wellbeing needs of the population in the Integrated Care System area.
- 3.3 The Act requires each ICB to prepare a JFP and national Guidance on the development of JFPs, which NHS England shared with ICBs on 24th December 2022, establishes JFPs must be reviewed and updated or confirmed annually before the start of each financial year. The draft JFP for Mid and South Essex covers the key areas identified in the Guidance and other relevant local priorities.
- 3.4 The Guidance states that, as part of the process of developing JFPs, ICBs must come to the HWB(s) which are within the geographic area the JFP covers for discussion and approval. The guidance states engagement with HWBs should be as follows:

"ICBs and their partner trusts have a duty to prepare a first JFP before the start of the financial year 2023/23 – i.e. by 1 April. For this first year, however, NHS England is to specify that the date for publishing and sharing the final plan with NHS England, their integrated care partnerships (ICPs) and Health and Well-being Boards (HWBs), is 30 June 2023. We therefore expect that the process for consulting on a draft (or drafts) of the plan, should be commenced with a view to producing a version by 31 March, but recognise that consultation on further iterations may continue after that date, prior to the plan being finalised in time for publication and sharing by 30 June".

[...]

“ICBs and their partner trusts must send a draft of the JFP to each relevant HWB when initially developing it or undertaking significant revisions or updates. They must consult those HWBs on whether the draft takes proper account of each JLHWS [Joint Local Health and Wellbeing Strategy] published by the HWB that relates to any part of the period to which the JFP relates. A HWB must respond with its opinion and may also send that opinion to us, telling the ICB and its partner trusts it has done so (unless it informed them in advance that it was planning to do so)”

[...]

“The JFP must include a statement of the final opinion of each HWB consulted.”

*(NHS England, Guidance on developing the joint forward plan
23 December 2022)*

4. Approach to developing the JFP

- 4.1 The JFP has been developed taking the Integrated Care Strategy for Mid and South Essex ICS, also previously approved by this Board, as its starting point. In this regard, the key priorities will be familiar to the HWB.
- 4.2 There has been a shared desire to ensure that, alongside the varied NHS commitments, the JFP is able to pinpoint the most impactful issues that NHS partners should work together on. The draft JFP is therefore presented as a 3-part document:
- Part 1 – provides some background to the current challenges the NHS is facing in Mid and South Essex, and identifies a number of areas where, as NHS partners, we will work together to make an impactful change. Detailed plans will be developed to ensure that we deliver on these commitments, together.
 - Part 2 – provides the underpinning aspects of our approach, describing our work on population health improvement, health inequalities and prevention, and also describes our approach to local delivery – through our Alliances.
 - Part 3 – contains a number of appendices which describe our approach to delivering on NHS Long Term Plan commitments and other statutory duties placed upon the NHS. These commitments are delivered by various partners across our system, working in provider organisations and the ICB – each appendix describes the governance arrangements for ensuring delivery, including oversight and assurance arrangements through our relevant system governance mechanisms.
- 4.3 The operational approaches identified in Part 3 will of course develop over time, taking into account existing and future local and national NHS priorities and system pressures. Members were asked to place particular focus on Part

1 and Part 2, to ensure there is clear understanding of how we proposed to prioritise our work and approaches to partnership working across the wider system.

5 Engagement with partners and residents

- 5.1 The Integrated Care Strategy outlines a system-wide ambition to move from occasional engagement initiatives to a model of continued engagement with partners and residents, building relationships and trust, and ensuring there are regular opportunities throughout the year where residents can meet with health and social care services and influence the work directly.
- 5.2 In May 2023, the ICB commenced an annual programme of '*Spring Conversations*' to engage with partners and residents directly on the priorities included the JFP. Over a series of ten workshops, and in two online sessions, over 140 local residents, system leaders and staff working across health and social care, and representatives of voluntary and community sector organisations, came together to look at specific lines of enquiry directly relating to this JFP.
- 5.3 In addition to the open access '*Spring Conversations*', a series of sessions with residents who come from more marginalised groups who are less often heard, often referred to as '*Inclusion Health Groups*' were also held. These targeted workshops and drop-in sessions engaged 460 residents, including members of the traveller community, parenting groups, older peoples' groups, young people (via Essex Council for Voluntary Youth Service), carers support groups and with groups supporting people with Learning Disabilities and Autism.
- 5.4 Each session was co-hosted by a member of the Integrated Care Partnership, or a local community leader, and was based on the principles of 'appreciative enquiry' - a strengths-based, positive approach, opening up conversations about what is working well, and how participants can support and contribute to the change they wish to see. In addition to specific the lines of enquiry relating to the JFP, participants explored the part they can play across four domains: as individuals and in our families; in the neighbourhood where we live; the organisations we work or volunteer in; and as leaders. Engagement activities took place in community hubs, village halls, and in local pubs and at a comedy club.
- 5.5 In addition, the 'Essex is United – Your Questions Answered' Facebook group and the associated private Facebook Messenger group, was used to ask a series of questions of residents. These engagements collectively reached over 35,000 residents, with 218 specific comments or questions, each of which was responded to directly by the group admins. A total of 732 social media group 'admins' were contacted for support, represent a wide range of communities of interest, need or geography.

- 5.6 Running alongside the engagement work, was a more detailed online questionnaire, which was completed by individuals wanting to respond in a more detailed way to the sections included with the JFP.
- 5.7 The outcome of this engagement work has significantly influenced the shape of this JFP and will continue to influence how we deliver on the priorities we have identified together. A summary of these conversations will be summarised in the developing 'Insight Bank', an open access, searchable database of insights about the experiences gathered across the partnership, both from those delivering and receiving health and care services.

6 Governance

- 6.1 The Integrated Care Board approved the draft JFP at its meeting on 18th May 2023. Mid and South Essex Foundation Trust approved the draft at its meeting on 25th May 2023. Remaining provider Boards are being asked to approve the plan over the course of June. There will be ongoing opportunities for partners to receive feedback and influence the delivery of the JFP, through the commitment to review and update or confirm the JFP annually before the start of each financial year.
- 6.2 The ICB determined that it needed to work through its internal governance process at the appropriate pace (ensuring proper review by the ICB and NHS provider boards, etc.). Also, the ICB wanted to ensure all three HWBs in Mid and South Essex had equal opportunity to be informed of and influence the JFP. With two of the three HWBs not sitting at key milestones in the development of the JFPs (due to local elections) the ICB sought advice, and it was agreed it could wait and bring forward the draft JFP when all three HWBs were sitting and therefore able to consider them concurrently.

7 Options

- 7.1 MSE JFP needed to be approved and published by 30 June 2023.
- 7.2 Councillor John Spence, as Chairman of the Essex Health and Wellbeing Board, submitted a letter on behalf of the board, please see **Appendix One**, feeding back comments and confirming that it aligns with the Essex Health and Wellbeing Strategy.
- 7.3 It therefore has now been submitted, but it was agreed to bring back to the Board to ensure formal confirmation.
- 7.4 Members are asked to confirm the Chairman's endorsement of the MSE JFP and its alignment with the Essex Health and Wellbeing Strategy, having been given the opportunity to respond to the draft JFP.

8 Financial implications

- 8.1 MSE JFP set out the respective ICB's five-year plan and includes a section on Finances. The paper itself though is not asking for financial investment.

9 Legal implications

- 9.1 None

10 Equality and Diversity implications

- 10.1 The Public Sector Equality Duty applies to the Council when it makes decisions. The duty requires us to have regard to the need to:
- (a) Eliminate unlawful discrimination, harassment and victimisation and other behaviour prohibited by the Act. In summary, the Act makes discrimination etc. on the grounds of a protected characteristic unlawful
 - (b) Advance equality of opportunity between people who share a protected characteristic and those who do not.
 - (c) Foster good relations between people who share a protected characteristic and those who do not including tackling prejudice and promoting understanding.
- 10.2 The protected characteristics are age, disability, gender reassignment, pregnancy and maternity, marriage and civil partnership, race, religion or belief, gender, and sexual orientation. The Act states that 'marriage and civil partnership' is not a relevant protected characteristic for (b) or (c) although it is relevant for (a).
- 10.3 The Equality Comprehensive Impact Assessment indicates that the proposals in this report will/will not have a disproportionately adverse impact on any people with a particular characteristic. *(Describe the specific equality and diversity implications of the proposal, any adverse findings from the Equality Comprehensive Impact Assessment and your proposed mitigation measures)*

11 List of appendices

- **Appendix One:** Chairman's letter of opinion
- **Appendix One:** NHS Joint Forward Plan for Mid and South Essex.

12 List of Background papers

Members may wish to consider the NHSE's Guidance on developing the joint forward plan Version 1.0, published 23 December 2022, which is available at this link <https://www.england.nhs.uk/wp-content/uploads/2022/12/B1940-guidance-on-developing-the-joint-forward-plan-december-2022.pdf>