

NHS Long Term Plan

Submissions from Essex ICS / STPs

Jo Cripps, Mid & South Essex STP

Susannah Howard, Suffolk and North East Essex ICS

Iain MacBeath, Herts & West Essex STP

Essex Health and Wellbeing Board

September 2019



Essex County Council

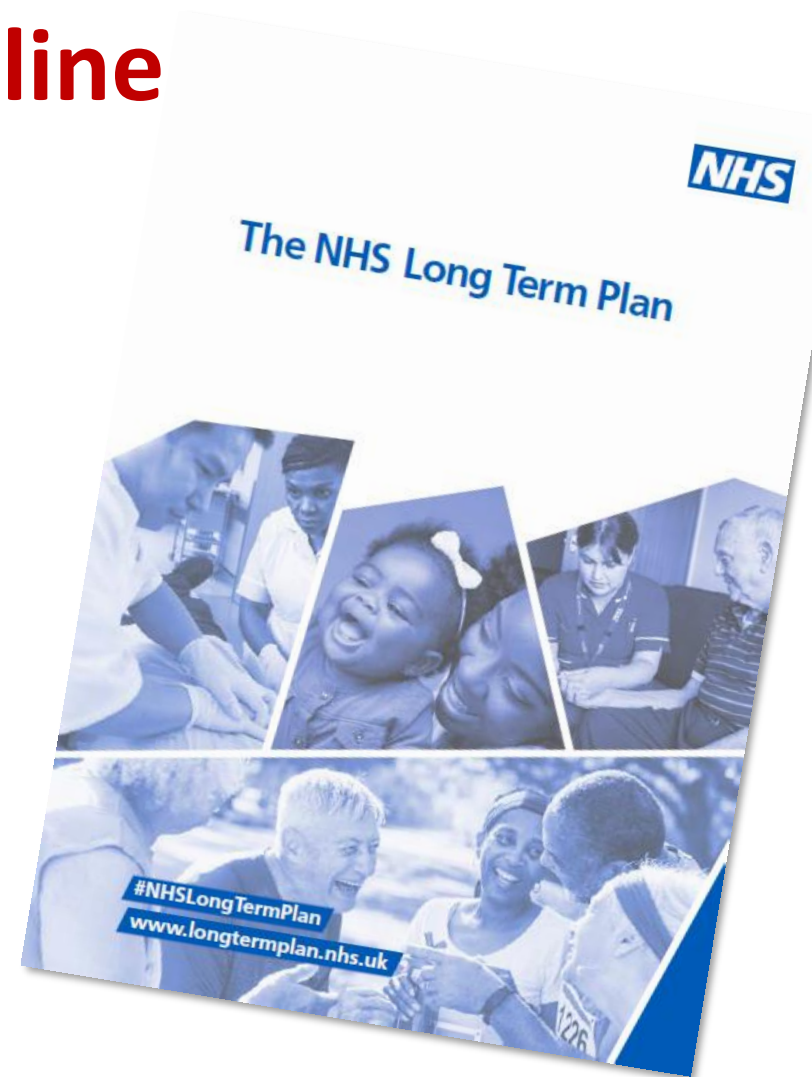
Introduction and Timeline

The NHS Long Term Plan

- Published in January 2019
 - A new service model
 - Prevention and health inequalities
 - Care quality and outcomes
 - Workforce and Digital
 - Investment from tax payers

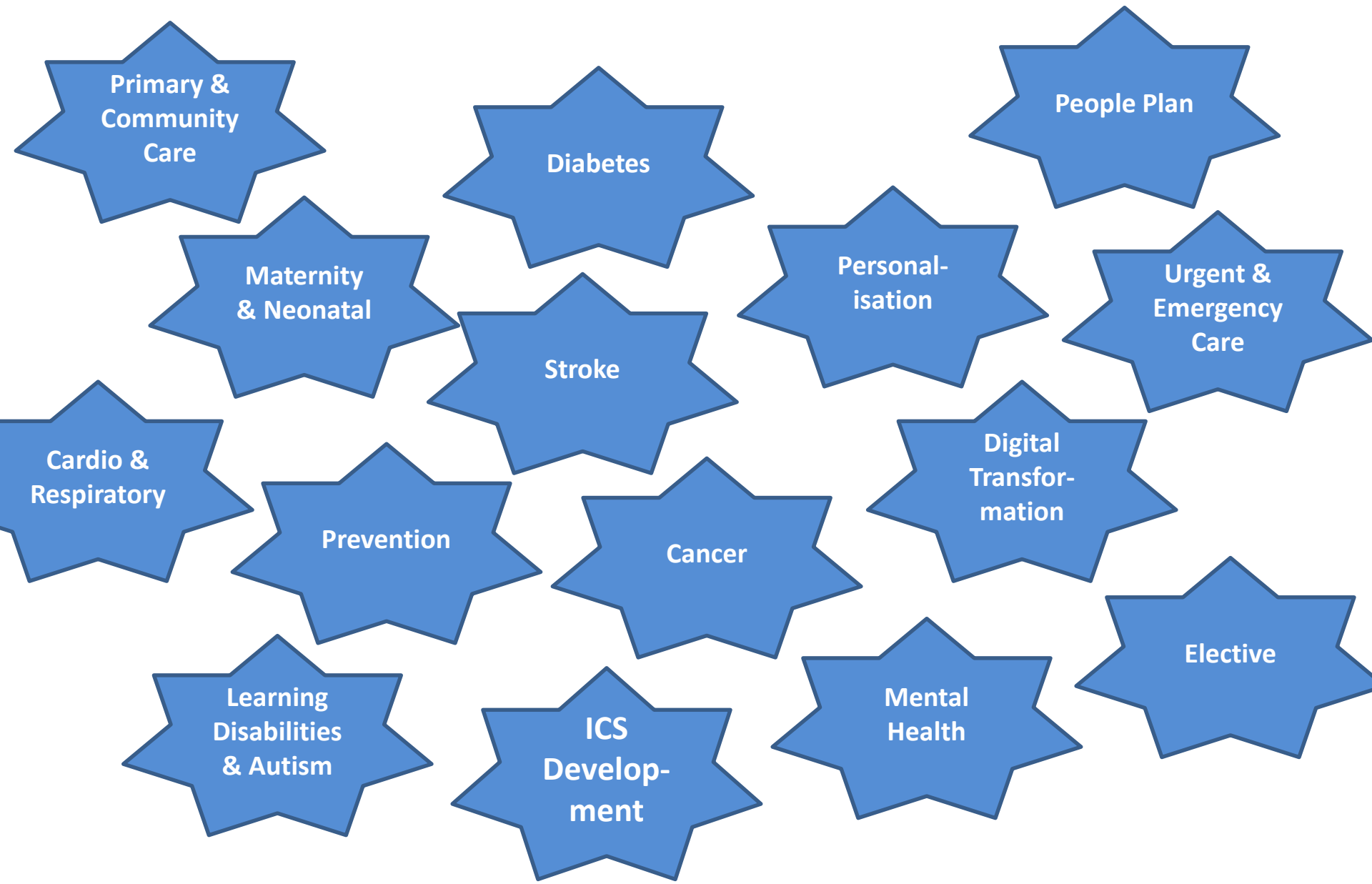
Timeline for submissions

- First draft submissions from ICS/STPs in by late September
- Feedback from stakeholders / region
- Final submissions by early November
- Publish local plans by 15 November
- National plan consolidated by December



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Delivering Long Term Plan Commitments



Our ICS is not a structure or a hierarchy – instead it creates the environment that we need to work together

Within the ICS there are a range of ways that stakeholders work together in an integrated way.

These include:

- Integrated Neighbourhood Teams
- Primary Care Networks
- Locality Alliances
- Collective commissioning
- CCG alignment
- ICS Partnership Board & Programme Office
- Health and Wellbeing Boards
- Working with other systems regionally
- Working with other systems nationally

It is our three Alliances that are the engine rooms for local delivery.



Developing our Five Year System Strategic Plan

- Central conceptual framework for our plan based around Outcomes Based Accountability (OBA) – Why, How, What
- Agreed timeline and partnership approach involving CCGs, public health, Healthwatch, etc.
- Cross sector planning event – 16th August
- ‘Thinking Differently’ event – 13th September



Key Features of our Five Year System Strategic Plan

WHY WE NEED TO WORK TOGETHER

High Level Outcome Framework

Our population, health inequalities

Priorities linked to JHWSs

‘Thinking Differently’

HOW WE PLAN TO MAKE A DIFFERENCE

Outcomes, benefits & enablers

How we will measure delivery across
our Alliances

WHY? – HOW? – WHAT?

HOW WE WILL WORK TOGETHER

A thriving ICS - PCNs, Alliances

System Control Total & Investment

Commitment to coproduction

Population health management

WHAT WE WILL DELIVER

Our Higher Ambitions

NHS Long Term Plan

Enabling Programmes

Sector Specific Plans

Our Health & Wellbeing Boards inform the Higher Ambitions for our ICS

1 Every child in Suffolk to have the best start in life

- Icon: Baby in a car seat. Increase the numbers of children who are a healthy weight in Suffolk
- Icon: Family with a child. Enable early intervention to support children who are vulnerable in Suffolk, including those experiencing adverse childhood experiences such as parental drug and alcohol misuse and domestic violence
- Icon: Person with a graduation cap. Improve social mobility in Suffolk so that our children young people realise their potential

£ Reducing health inequalities

Icon: Person running. A healthier life for everyone

Icon: Person with a heart. Emotional wellbeing from the start of life

Icon: Person with a heart. Zero Suicide

Icon: Document with a heart. Earlier diagnosis and treatment for cancer

Icon: Person with a heart. An effective treatment pathway for obesity

Icon: Person with a heart. The best quality of life as we grow older

Icon: Person with a heart. The care and support we need at the end of life

Reducing the health gap



2 People of working age are supported to optimise their health and wellbeing

- Icon: Heart with a pulse line. Prevent cardiovascular disease in Suffolk, including supporting people to be healthy at work
- Icon: Person with a heart. Effectively support those with chaotic lifestyles and high needs in Suffolk
- Icon: Document with a heart. Diagnose cancer earlier in Suffolk so that outcomes improve

1 Improving mental health and wellbeing

- Icon: Person with a heart. Lay the foundations for lifelong mental health at school, pre-school and beyond school
- Icon: Person with a heart. Remove the barriers to sustained recovery through focusing on friends, finance, jobs and homes
- Icon: Person with a heart. Reduce loneliness and social isolation

2 Addressing obesity, improving diet and increasing physical activity

- Icon: Fork and knife. Develop food literacy from pre-school onwards, and ensuring children in Essex meeting the national guidelines for daily activity
- Icon: Person running. Promote physical activity and healthy diet in the workplace
- Icon: Person with a heart. Co-design appropriate mobility programmes for older adults and addressing barriers to older adults eating well

3 Older people have good quality of life

- Icon: Person with a heart. Reduce the impact of frailty on the lives of older people in Suffolk
- Icon: Person with a heart. Provide a co-ordinated response to the challenges of dementia and depression in older people
- Icon: Person with a heart. Support carers in Suffolk more effectively
- Icon: Person with a heart. Ensure Suffolk residents are supported at end of life

4 People in Suffolk have the opportunity to improve their mental health and wellbeing

- Icon: Person with a heart. Ensure Suffolk residents have access to good quality, effective and equitable mental health services when they need them
- Icon: Person with a heart. Reduce the rate of suicide in Suffolk
- Icon: Person with a heart. Improve the mental health and emotional wellbeing of children and young people in Suffolk

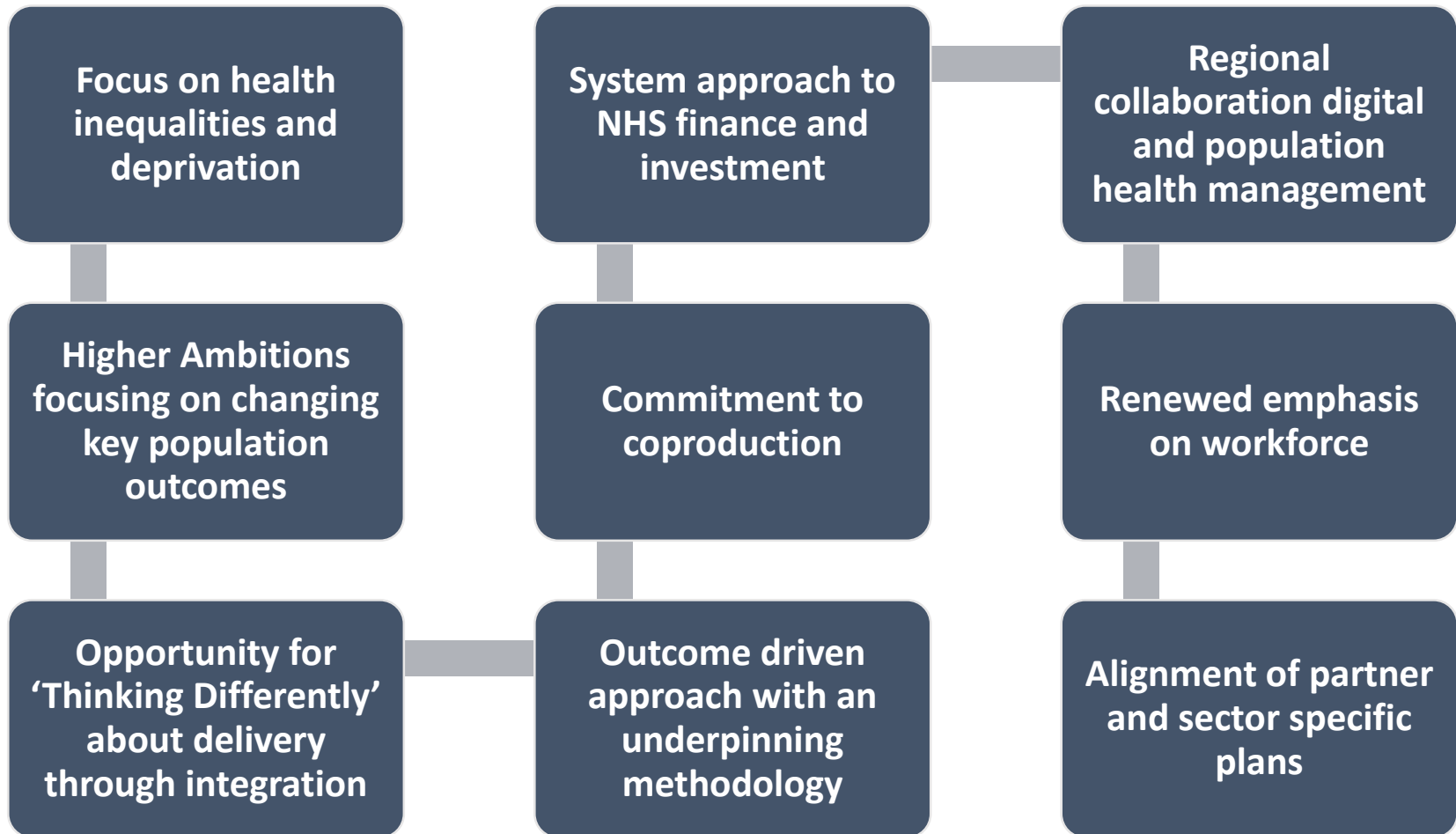
4 Enabling and supporting people with long term conditions and disabilities

- Icon: Person with a heart. Prevent mental health needs through early interventions
- Icon: Person with a heart. Support people with long term conditions and disabilities into employment and ensuring they have full access to all public services
- Icon: Person with a heart. Tackle social isolation, support for carers and optimising reablement

3 Influencing conditions and behaviours linked to health inequalities

- Icon: Person with a heart. Improve educational attainment and outcomes for the most vulnerable children and young people in Essex
- Icon: £. Develop substance misuse services in Essex and working with individuals and families who experience multiple deprivation
- Icon: Person with a heart. Reduce social isolation and loneliness and improving housing and transport for vulnerable older people

Highlights from our Five Year System Strategic Plan



Our Challenges:

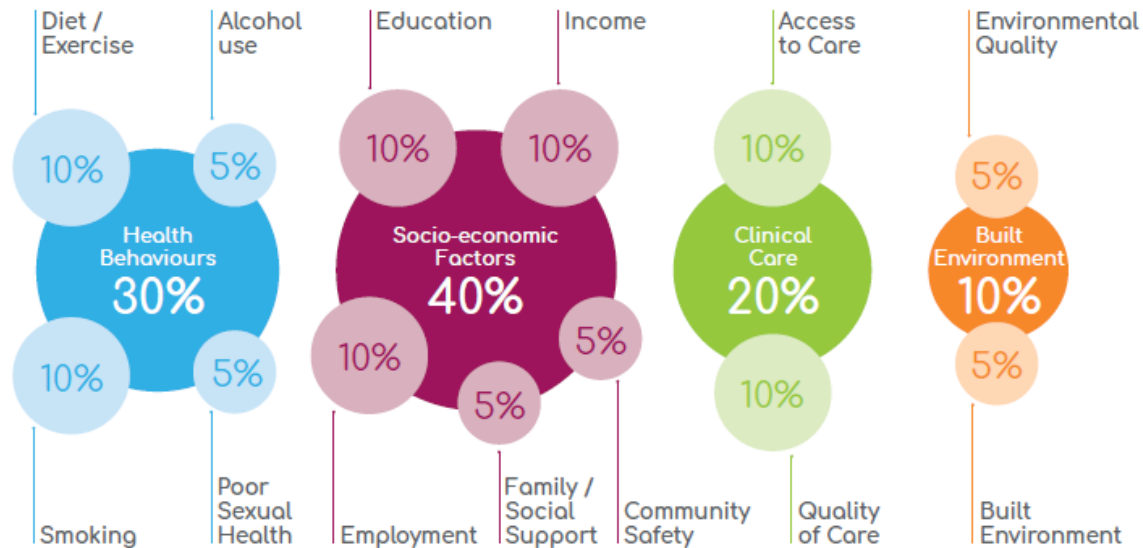
- Ageing population
- Significant housing growth
- Increasing deprivation
- High prevalence of mental health conditions (Basildon & Southend)
- High proportion of overweight/obese adults
- Low rates of screening uptake
- High mortality from cancer, respiratory and cardiovascular disease
- Workforce challenges
- Financially challenged system

Our priority work streams:

- Population health management & prevention
- Primary care and locality development
- Acute hospital reconfiguration

Impacting Lives

Access to, and quality of, clinical care contributes just 20% to the wider determinants of health, and that's why we need to work together...



SOURCE: Robert Wood Johnson Foundation and University of Wisconsin Population Health Institute in US to rank countries by health status

Enablers:

- Digital transformation
- Estates
- Workforce

Our residents have told us...

Through consultation and engagement, we have identified what is important to people in our communities:



Access to the help and treatment I need when I want it.



Choosing the right treatment is a joint decision between me and the relevant health and care professional



I want to be able to stay in my own home for as long as possible



I can talk to my doctor or other health care professional when I need to

People with long-term conditions have identified that they value:



Good post-diagnosis support



Information on how to manage their condition(s)



Better communication between health and care professionals



Knowledge about local support available, both from health and care professionals, and also from community and voluntary organisations

Outcomes we want to achieve

Creating Opportunities:
Education, Employment, Housing & Growth

Supporting Health & Wellbeing:
Healthy Lives & Healthy Behaviours

Transforming & improving:
Our health & care services

Ensuring Equality:
Address inequalities &
reduce unwarranted variation

Guiding principles



Where we will be in the future....



Integrated Care Partnerships will agree and deliver plans, overseen by Health and Wellbeing Boards, for:

- // Prevention
- // Self Care support
- // Physical and mental health services
- // Care and support services
- // Community and voluntary sector services
- // Primary Care Networks



Our Challenges

1 Population health challenges

- 12% of our population receives care that takes up 43% of our budget
- By 2025, 38% more people will have dementia

2 Workforce challenges

- Living costs are high / London effect
- 14% staff turnover rate across the STP, rising to 30% within social care
- 25% of our workforce are over 50

3 Increasing Demand

- Our 2025 population will grow by 150,000 / Over 65s up by 12%
- People are living longer, but spending more years in poor health

more

4 Finance and Capital

- In 19/20 the STP has an underlying deficit of circa £89m
- The estate at West Herts Hospitals and Princess Alexandra Hospital requires significant capital



Our Strategy

“Together we aim to deliver an effective health and social care system” by:

- Moving to a ‘population health’ approach
- Focusing on self-management
- Preventing ill-health in the community
- Being as efficient as we can be



Our Priorities

1
FRAILITY

2
CHILDREN

3
PLANNED
CARE

4
POPULATION
HEALTH

1
WORKFORCE

2
DIGITAL

3
ESTATES

4
FINANCE &
CONTRACTS

Governance

1 Integrated Care System

- Finalising the functions of our ICS
- Finance and contracting changes
- Contributions to the STP
- Shadow ICS Year in 2020/21

2 CCG Closer Working

- Joint Accountable Officer for our three CCGs before April 2020
- Joint management team soon after
- Consider merger of CCGs by 2021

3 Integrated Care Partnerships

- Three geographical ICPs – West Essex
- Considering a Specialist MH & LD ICP
- Roadmaps in place for each
- Principle of subsidiarity

4 Clinical / Enabling Workstreams

- Three clinical workstreams prioritised
- Four enabling workstreams prioritised
- STP Programme Management Office
- ICP collaboration between partners

NHSE Accelerator

- Hertfordshire and West Essex have agreed to be an NHSE/I Accelerator STP with support and consultancy to move forward in our chosen areas over the next 15 weeks.
- Currently self-assessed as 'developing' against the ICS Maturity Matrix
- Our four chosen areas are:

1
POPULATION
HEALTH
MANAGEMENT

3
GOVERNANCE

2
CONTRACTING
AND FINANCE

4
LEADING
PARTNERSHIPS



Local engagement - Workstreams

- All our workstreams have representation from West Essex CCG, EPUT, ECC and other relevant local stakeholders

Examples:

- Within **Planned Care**, recent education events in Essex include those for diabetes (4 June); respiratory (9 July); musculoskeletal (9 February)
- Within **Outpatient Transformation**, patient engagement was involved in the planning of this developing programme. We will be conducting patient activation measures and surveying the experience pre and post interventions
- Within **Frailty** and **Medicines Optimisation**, hospices and Essex LPC feed into both the STP high-level design and local implementation and delivery of our various initiatives including personalisation and end of life
- The **Primary Care** Oversight Group membership includes WECCG reps and meets monthly; its work programme includes key primary care transformation and workforce/education workstreams
- We have West Essex participation in all of the delivery groups around the six major **Workforce** workstreams, monthly workstreams lead meeting and quarterly Local Workforce Action Board

Local engagement

STP Community Reference Group

- **April Meeting** – focus on **Outpatient Transformation** and **Personalised Care**

At this meeting we updated stakeholders on our Integrated Health and Care Strategy and had early discussions on certain areas of the NHS Long Term Plan. On the day we had attendance and feedback from: the Chair of Harlow and District Patients Forum, the Chief Executive of CVS Uttlesford and the Chief Executive of St Clare Hospice.

- **September Meeting** – will focus on **Workforce plans** and **Mental Health**

At this meeting we will be further talking about our plans around the NHS Long Term Plan. Attendees confirmed include: CE Healthwatch Essex CE; West Essex MIND; CE Uttlesford CVS (representing wider CVS in West Essex). We are also in contact with Harlow Ethnic Minority Umbrella (HEMU) and the Carers groups.

Cross-Essex Working

Local Care & Health Record

- Working together through the LHCRE Board to create the environment for inter-operability.

Population Health

- All systems adopting a population health approach; exploring opportunities to work together to achieve economies of scale

Workforce

- All systems challenged with workforce; sharing work on new roles, OD plans.



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What support do we need?

- Joined up approach across Essex districts on priorities and actions
- Common approach to prevention activities
- Support with workforce challenges
- Help us with local engagement



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thank you



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