

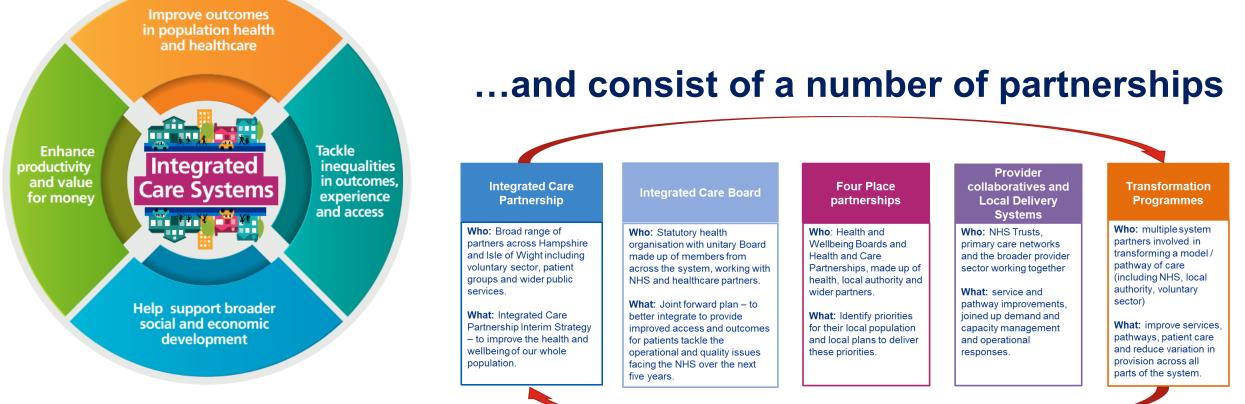
Integrated Care Partnership Interim Strategy

Update, emerging themes and next steps

November 2022

Integrated care systems have four broad aims...





The approach we take to developing our strategy and plans together will help to strengthen our partnerships

Our aim is to publish an interim strategy by end December and a strategic/joint forward plan by the end of March

Interim Integrated Care Partnership Strategy (December 2022)

Describes our ambitions and priorities where we can achieve tangible benefits by working together as a new, wider partnership across the system

- builds on work already completed (including the Joint Strategic Needs Assessments and Health and Wellbeing Strategies)
- focuses on better integration of health or social care services with "health-related" services
- ✓ sets priorities for joint working where collective working (beyond place) is most helpful
- ✓ must be published and copies distributed
- ✓ Is **co-developed** with a wide range of partners
- will likely **be updated** once new arrangements are fully in place

Integrated Care Board joint forward plan (March 2023)

How healthcare partners will deliver services to meet the health needs of our population and deliver the aims of the strategy, ensuring universal NHS commitments are met

- sets out how the Integrated Care Board will exercise its function as commissioner of health services
- supports the delivery of the Integrated Care Partnership interim strategy but covers a wider range of services
- ✓ is a more **internal-facing** "NHS" document

SOURCE: Department of Health and Social Care guidance on the preparation of integrated care strategies, July 2022



Our strategic priorities for the next five years



Our shared aims		kle inequalities in erience and acces		Enhance productivity and value for money		Help the NHS support broader social and economic development.	
Our challenges	Our population is growing and ageing. Improvement in life expectancy has stalled and begun to fall. Vulnerable people are dying younger and suffering poorer health than the general population. Inequalities are getting worse and drive worse outcomes. Challenges in workforce supply, funding, demand for services outstripping supply, impact of Covid-19 and cost of living. Without check inequalities will grow, years lived in poor health will increase and services will not cope.						
A radically different approach	Working together across all partners to take a community-centred approach to wellbeing. Seizing the opportunities offered by working together as a system and partnership with a mandate to use collective resources in new and different ways to build a better future - health, happiness, wealth and wellbeing.						
Priority areas: Themes that emerged from evidence and conversations in Hampshire and Isle of Wight	Children and young people We want all children to get the best possible s in life, regardless of where in Hampshire and l of Wight they are born.	start We want Isle all that w	Mental wellbeing We want mental wellbeing to be at the forefront of all that we do and to ensure as much importance is given to mental wellbeing as physical health.		Supporting people to build health, happiness, wealth and wellbeing We want to enable every individual to live more of their life in a state of good health and be able to access resources and services in their communities.		
Initial areas of focus for the partnership	Work to ensure the "best start in life" for every child by focussing on the care and support that families receive in the first 1000 days of a child's life						
	Providing proactive, integrated care for people with complex needs to provide care closer to home and shift focus from cure to prevention						
	Improving social connectedness (reducing social isolation) to enhance people's physical and mental health and wellbeing						
	Supporting people with the cost of living to reduce the impact of financial pressures on people's lives						
	Better supporting people affected by childhood trauma by adopting a trauma informed approach across our services						
	Providing healthy lifestyles and mental wellbeing support in community settings for examples schools and youth groups, community centres						
We will focus on these areas to enable delivery of our priorities	Our workforce: We want to ensure we can hire and retain excellent staff to deliver health and care services and for our staff to feel fulfilled, motivated and cared for in their careers		Workforce supply and models	Skills and capability development		ny working Inments	Developing meaningful careers
	Digital, data and insights: We want to harne that digital solutions can offer and ensure they to everybody, regardless of age and househol	v are available	Digital inclusion	"Digital empowerment"	Joinec intelli <u>c</u>	l up data and jence	Digital systems that work seamlessly together
Developing the "Hampshire and Isle of Wight way"	As we work together to deliver our priorities, we will continue to learn together, and build our culture, capabilities and collaboration as a new integrated care partnership: working with communities; adopting a continuous learning approach; developing a shared vision; focusing on outcomes; building a high trust and high support culture; drawing on insights from all partners; focussing on priorities that resonate with all partners; making the best use of collective resource and capacity, strengthening our population health approach.						

Overview: How did we arrive at the emerging areas of focus?



Review of the data and evidence (Hampshire and Isle of Wight Joint Strategic Need Assessments, Health and Wellbeing strategies, system diagnostics)

- 2 Collation of perspectives (partner interviews to understand perspectives, priorities and strategies, views of local people and other stakeholder insights)
- 3 This led to the **identification of 5 themes for initial focus:** children and young people; mental wellbeing; prevention of ill health and healthy lifestyles; workforce; digital and data

We used the partnership event on the 28 September to **review the evidence** under each theme, together with pre and post events discussions with other system colleagues, and **distilled a longlist** of potential areas of focus from the discussions

> 5 The next step is to agree the **key areas of focus** for our strategy based on an assessment of the longlist against the design principles we have developed for the strategy, and taking into account the strategy guidance

We started by gathering insights and inputs from a variety of people and sources, including:



Review of the data and evidence

2

Collation of perspectives

> The views of local people and other stakeholder insights

Healthwatch, Hampshire **Together and Isle of** Wight public engagement, people and digital strategy coproduction, community engagement events, stakeholder surveys



assessment and Health and Wellbeing Board strategies

Portsmouth, Southampton, Isle of Wight and Hampshire JSNAs and strategies, plus the combined ICS JSNA and covid impact needs assessment



Partner perspective, priorities and strategies

Directors of strategy, medical directors, clinical leaders, public health, fire, police, elected members, adult and children's services, programmes through clinical cabinet, prevention & inequalities board, digital group, quality board, transformation board, system chiefs, **Bluelight Hub, Health & Wellbeing Boards**

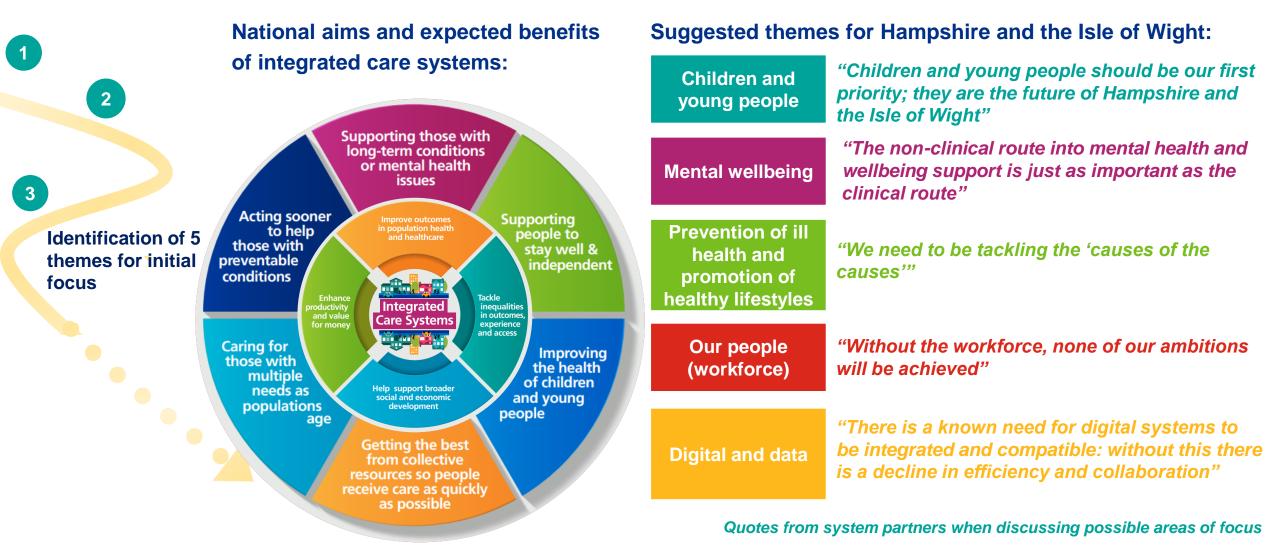


Other data, evidence and information

CQC, NHS Staff Survey, HES (Hospital Episode Statistics) data, financial and workforce returns, NHS payments to General **Practice, Skills for Care** workforce estimates, reference costs, Office for **Health Improvement and Disparities; Office for National Statistics (the** above summarised in system diagnostic)

This suggested five themes to prioritise, which are supported by the national policy backdrop





Our five themes are grounded in national and international policy

Children and young people

- <u>Reducing child health inequalities, what's the problem?</u> reports that adverse health outcomes would be reduced by 18% to 59% if all children were as healthy as the most socially advantaged.
- The Royal College of Paediatrics and Child Health report, <u>State of child</u> <u>health - England: 1 year on</u>, highlights that children living in England have poorer health outcomes than average across the EU15+ (the 15 European Union countries plus Canada, Australia and Norway)
- The <u>NHS Long Term Plan</u> sets out the priorities for expanding Children and Young People's Mental Health Services over the next 10 years

Prevention of ill health and promotion of healthy lifestyles

- The government states that the 2020s will be the decade of proactive, predictive, and personalised prevention
- The 10 year forward plan signals a clear focus on prevention. A 'renewed' NHS prevention programme will focus on maximising the role of the NHS in influencing behaviour change, guided by the top five risk factors identified by the <u>Global burden of disease study</u>: smoking, poor diet, high blood pressure, obesity, and alcohol and drug use.

Our people (workforce)

- Addressing staffing issues in the NHS is among the top priorities for the public, reiterating the desperate need for a long-term, fully funded workforce strategy for the health and care service.
- The <u>People Plan 2020/21: action for us all</u>, set out a range of actions to deliver more people, working differently, in a compassionate and inclusive culture.

Mental wellbeing

 <u>The Five Year Forward View for Mental Health</u> made a series of recommendations for the NHS and Government to improve outcomes in mental health by 2020/21The <u>NHS Long Term Plan</u> included further commitments to improve mental health services. In 2022 the Government issued a call for evidence to inform a new, 10-year crossgovernment <u>Mental health and wellbeing plan</u>.



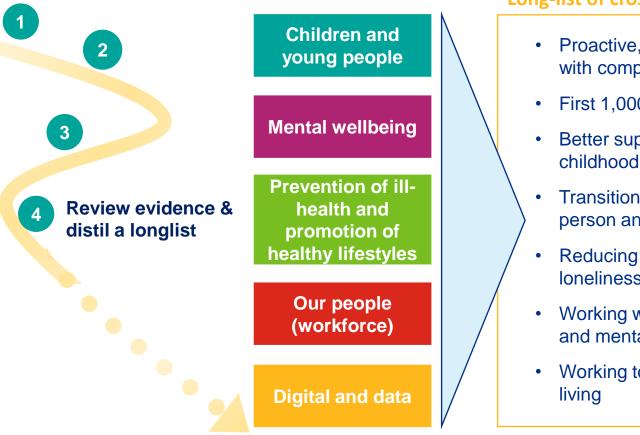
Digital and data

- Population health is one of the core strategic aims for integrated care systems; to improve physical and mental health outcomes, promote wellbeing and reduce health inequalities across an entire population, with a specific focus on the wider determinants of health
- Using data held by the NHS, and generated by smart devices worn by individuals, we will be able to usher in a new wave of intelligent public health where everyone has access to their health information and many more health interventions are personalised.



11 potential areas of focus for the strategy have emerged from strategy development discussions to date





Long-list of cross-cutting potential strategic priorities for the ICP strategy

- Proactive, integrated care for people with complex needs
- First 1,000 days
- Better supporting people affected by childhood trauma
- Transitions from child to young person and on into adult life
- Reducing social isolation and Ioneliness
- Working with schools on prevention and mental health support
- Working together to impact cost of

- Maximising the opportunities of anchor institutions – greater impact through more targeted work
- Our people (workforce), further:
 - o enable
 - integration/mobility/transferability
 - support wellbeing, including Covid-19 trauma counselling
 - leveraging untapped volunteers 0
 - workforce supply
- Digital inclusion
- Designing and implementing a joinedup IT system and / or integrated dataset

Other ideas were considered, but discounted on the basis that they:

- Would be better tackled at Place / organisational level
- Weren't cross-cutting enough i.e., didn't excite all partners
- Would / could be tackled through the emerging themes selected

• Had an evidence base but we haven't heard passion for these areas in our work to date and have agreed with partners to go where the energy is

Next steps



- For the areas we are shortlisting, we will be testing and socialising with colleagues and partners, as well as:
 - o gathering further evidence to strengthen the case for change and/or sharpen our strategic focus
 - describing our strategic ambitions for each of the shortlisted priority areas, identifying target outcomes and implementation plans (this work is already in train)
- Testing, socialising, developing through key groups, including
 - Integrated care partnership committee in November
 - Board of the integrated care board in December
 - Health and wellbeing boards
 - ICS NHS Executive Leadership Group
 - Integrated care board senior leaders
 - Peer groups across the system
 - People and public involvement groups
 - Partnership reference group

In the meantime:

- We are working through the early steps in the process of developing the Integrated Care Board's strategic (joint forward) plan
- Please email <u>sarah.reese1@nhs.net</u> or <u>Roxanne.ransome@nhs.net</u> if you would like to work through your thoughts on the development of the strategy