

Report to: East Sussex Health and Wellbeing Board

Date of meeting: 29 September 2022

By: Executive Managing Director, East Sussex, NHS Sussex and
Director of Adult Social Care, East Sussex County Council

Title: East Sussex Health and Social Care Programme – update report

Purpose: To provide an update on progress with our system integration and related areas of collaboration

RECOMMENDATIONS

The Board is recommended to note the contents of this update, including:

- the further proposed updates to the Health and Wellbeing Board (HWB) membership, and;
 - the draft Sussex Integrated Care Strategy will be brought to the December meeting of the Board for endorsement.
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1. Background

1.1 At the last meeting of the Health and Wellbeing Board (HWB), alongside information about our local health and social care programme, the HWB endorsed the updated Health and Wellbeing Board Strategy 'Healthy Lives, Healthy People 2022 – 2027', and received an update about progress with the new developments that are being put in place to support our joint working in the context of the new statutory arrangements for the NHS.

1.2 Within this, members of the Board also noted changes to the terms of reference for the HWB. This detailed the Board's relationship with the new statutory Sussex Health and Care Assembly and the development of an integrated care strategy for Sussex, which will build on the three joint local Health and Wellbeing Strategies and Joint Strategic Needs Assessments (JSNAs). The East Sussex population needs and outcomes in the strategy will be drawn from our JSNA and refreshed Health and Wellbeing Board Strategy.

1.3 This report sets out the progress made to further embed these new working arrangements, and the development of the Sussex integrated care strategy, along with an update about our place-based programme.

2. Supporting information

Integration programme

2.1 The monitoring supplement is attached at Appendix 1 for information. Alongside our ongoing progress with plans for integrated services across children and young people, mental health, community, urgent care and planned care we have collectively been finalising our assurance plans for winter. Due to a number of factors including; the current high levels of activity across the system, the continuing recovery of health and care services; potential new variants of COVID and Flu, and other challenges such as the cost of living and fuel crisis, we are anticipating that this will be a challenging season over and above what we would normally expect.

2.2 In light of this we are concentrating on access and supply of services for our population emphasising the support needed to help people to avoid needing hospital care unnecessarily, and supporting people to get back home quickly after an episode of ill health, including helping to

maintain and continue to enable access to social care. Current work is focussed on assuring ourselves as a system of the robustness of our plans in a number of areas including the following:

- Out of hospital services and urgent and emergency care pathways
- Discharge pathways
- Plans recognise the increasing need for mental health crisis response services, support for discharge, and the need to respond as a system to support good access to services
- Continued sustainable recovery of elective care.

2.3 The current assurance work is part of a new process introduced by NHS England, in preparation for the formal Winter planning cycle. As is the case every year planning processes are also in place to ensure we have a robust Sussex-wide System Winter Plan finalised. A separate report about this will be brought to the HWB about this as in previous years.

2.4 Progress has also been made by partners working on actions aimed at improving population health and wellbeing, increasing prevention and addressing health inequalities. In the last period this includes:

- Actions aimed at increasing the uptake of screening and health checks across circulatory disease and cancer are taking place.
- Annual Health Check trajectories for people with learning disabilities have been exceeded in all areas of Sussex for Q1 2022/23, and the new Locally Commissioned Service for Physical Health Checks for people with a serious mental illness was launched across Sussex in April 2022, with the first stage of the training programme delivered to clinicians and practice staff.
- Collaboration on licensing and age of sale legislation enforcement is continuing to contribute to reduced harm from alcohol. The annual review of the Healthy Weight Plan undertaken illustrating early achievements, and planning work is taking place to identify strengths and areas for development in reducing harm from tobacco.
- Reports from the engagement exercise to support a long term vision for community hubs and a systems approach to loneliness and isolation were reviewed, and partnership planning discussions have taken place to respond to the recommendations. An action plan has now been finalised for endorsement.
- 26,442 Holiday Activity and Food Programme sessions took place over the holiday period, and approximately 4,000-4,500 individual young people will have accessed provision during the summer.
- As part of the national Integrated Care System (ICS) Population Health and Place Development Programme, action learning sessions have taken place with representatives from health, social care and Voluntary, Community and Social Enterprise (VCSE) teams focussed on the population covered by the Foundry Primary Care Network (PCN) in Lewes, exploring the increased use of shared data to better understand risks of hospital admission for frail elderly people with dementia, and enable local proactive care interventions to be better targeted.
- Evaluation activity has been progressed to inform approaches based on supporting individual and community resilience and strengths, and targeted action to improve health in Hastings and Rother. The Community Connectors programme has focussed on drawing in learning, including from actions focussed on vaccination uptake and diabetes.
- Evidence has been reviewed to identify the health inequalities of LGBTQ+ communities and Carers as requiring enhanced focus.

Sussex Integrated Care System arrangements

2.5 The Sussex Health and Care Assembly has now been established as a statutory joint committee between health and care partners in Sussex including the NHS and East Sussex County Council (ESCC), West Sussex County Council (WSCC), Brighton & Hove City Council

(B&HCC) and VCSE partners to come together to formally agree the strategic direction for our system to meet the broader health, public health and social care needs of the population in the ICS footprint. It will hold its first meeting in public on 19th October. The Chair of the Health and Wellbeing Board represents ESCC at the meetings of the Assembly. More information about the Assembly, including the other representatives and meeting papers can be found [here](#).

2.6 The NHS Sussex Integrated Care Board (ICB) held its second meeting in public on 7th September. ESCC, WSCC and B&HCC are each represented as partner members that still retain individually responsibility for their own services and budgets. Meeting papers and more details about the Board can be found [here](#). As previously reported, the ICB covers a wider footprint than the previous CCGs and has also taken on primary care commissioning functions from NHS England, including General Practice, community ophthalmology, pharmacy and dentistry, which are planned to be commissioned at place level.

2.7 The Health and Wellbeing Board's role is unchanged and is to provide whole system leadership and strategic influence over commissioning in East Sussex, including ensuring commissioners have regard to and contribute to the delivery of the Joint Local Health and Wellbeing Strategy. Under the new NHS Sussex commissioning arrangements, HWBs in Sussex will focus their role on overseeing place-based commissioning through the work of the three place-based health and care partnerships.

2.8 Given the new NHS commissioning structure and transfer of wider primary care commissioning functions from NHS England to the ICB, NHS England is now unlikely to undertake significant commissioning activity at a 'place' level in the future. It is also the case that under the local ICS arrangements NHS providers will work more closely together and with commissioners through the local place-based partnerships.

2.9 In addition, in view of the creation of the ICB and the three underpinning 'place' based partnerships in East Sussex, Brighton & Hove and West Sussex bringing local commissioners and providers together as part of the wider ICS, it is proposed that one NHS provider trust Chief Executive represents all local providers on each of the three Health and Wellbeing Boards in Sussex. For East Sussex this is proposed to be the Chief Executive of ESHT.

2.10 As a result, further to the previously reported changes to the HWB Terms of Reference, and in order to more closely align the membership of the HWB with new commissioning arrangements within the Integrated Care System, the following additional changes are being proposed, subject to County Council approval:

- Removal of NHS England, Sussex Partnership NHS Foundation Trust and Sussex Community NHS Foundation Trust as members of the Board;
- Addition of a notification that NHS Sussex will represent NHS England on the Board;
- Addition of a notification that ESHT will provide representation on the Board for all NHS provider trusts delivering services in East Sussex; and
- Removal of Maidstone and Tunbridge Wells NHS Trust and University Hospitals Sussex NHS Foundation Trust as invited observers.

Sussex Integrated Care Strategy development

2.11 Our Sussex Health and Care Assembly's role will be to formally agree the strategic direction for our system to meet the broader health, public health and social care needs of the population in the ICS footprint. It will do this primarily through considering Sussex-wide matters and agreeing an integrated care strategy for Sussex, building on local Joint Strategic Needs

Assessments and Health and Wellbeing Strategies in each of the three 'places' in Sussex (East Sussex, West Sussex and Brighton & Hove).

2.12 The Department of Health and Social Care published guidance on 29th July on the preparation of integrated care strategies for the agreement by ICS Integrated Care Partnerships (the Sussex Health and Care Assembly) by December 2022. Some key points include:

- It is a joint NHS ICB and Local Authority responsibility to produce the strategy. The wide variation in how ICSs are structured in England and their differing maturities is acknowledged and there is flexibility for ICSs to translate the strategy into the local context, and in how developmental or ambitious it needs to be.
- An emphasis is placed on the principle of subsidiarity and place within the strategy which aligns well with Sussex ICS arrangements.
- Future Care Quality Commission (CQC) 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 integrated care system, and that this is a credible strategy for the population.
- There will be a requirement to give due consideration to the NHS mandate within the strategy, and one of the detailed plans it will inform is the new '5-Year joint forward plan', which is to be published before the next financial year (2023/24). This is a joint plan shared by NHS Sussex ICB and NHS Trusts and Foundation Trusts within the ICS which will be produced January – March next year, and will be delivery focussed, taking in the issue of NHS Operational Planning Guidance for the following year. The joint 5-year forward plan will be updated annually.
- The strategy will be high level and relatively 'steady state', and for example could be updated when there are substantial changes in understanding population needs, for example through the JSNAs.

2.13 **Appendix 2** sets out the four principles that have been agreed to guide the strategy development process, and the suggested chapter framework that the strategy is built around. It is proposed that the strategy is built around six key chapters to arrive at a concise, publicly accessible document.

2.14 A co-production process is now underway involving organisations across the ICS to prepare the strategy in order that the Sussex Health and Care Assembly can agree it in December. This includes an engagement model for our citizens and workforce to ensure it is based on all the insight we have about health and care services. The draft strategy will be brought to the next meeting of the Health and Wellbeing Board for endorsement.

3. Conclusion

3.1 Our focus on improving population health and embedding prevention, early help and intervention is taking place in the context of continuing high levels of need for services in our population. Additional collective preparations for winter are in train to support the normal winter planning process to ensure we can best organise care and services for our population in response to what we anticipate will be challenging circumstances over the season.

3.2 The membership of our HWB has been updated to reflect our new NHS commissioning arrangements, and the role that the HWB continues to play in overseeing place-based commissioning and the work of our East Sussex Health and Care Partnership.

3.3 Our recently refreshed HWB Strategy 'Healthy Lives, Healthy People 2022 - 2027' will be used to inform and shape the content about our population's health and care needs in the Sussex Integrated Care Strategy as it is developed. This will set out how the three Health and Wellbeing Boards and the Sussex Health and Care Assembly can work together to improve health, reduce health inequalities and integrate care for their populations.

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Background documents

None

Appendix 1 Monitoring information supplement

Appendix 2 Sussex integrated care strategy key principles and framework