

## Appendix 1

### DRAFT summary of East Sussex Health and Wellbeing Board (HWB) Shared Delivery Plan (SDP) priorities for 25/26 (year 3)

#### Background

The 5-year Sussex [SDP](#) covers areas for improvement over the immediate, continuous and long term, as well as shared priorities specific to each of the three Health and Wellbeing Boards (HWB) and their populations in Sussex. In light of this, joint work takes place between the County Council, the local NHS, Voluntary, Community and Social Enterprise (VCSE) sector, Healthwatch, and borough and district council partners. Collectively this is known as the East Sussex Health and Care Partnership, and the joint work contributes to a range of improvement objectives for the benefit of the East Sussex population.

This draft paper provides a summary overview of our joint priorities in year 3 (2025/26) of the SDP, building on [progress made in year 2 \(24/25\)](#), and the subsequent planning that has been undertaken through our lead partnerships and workstreams. This also aligns with the national NHS planning guidance for 25/26 and existing pan-Sussex SDP priorities and work aimed at improving health and care outcomes.

The Government's 10 Year Health Plan [Fit for the future](#) was published on 3 July 25, which is likely to prompt a further review of our Sussex SDP more broadly by partners in the Sussex ICS as part of a system-wide response. In addition, the recently announced wider reforms of health and care (in particular the need to respond to the national [model Integrated Care Board \(ICB\) Blueprint](#) and reduction in size by December 2025) may also further impact on plans and priorities in our shared Sussex SDP, and expectations about the role of Place-based partnerships and HWBs within a future reformed health and care system. This refreshed and updated account of our East Sussex HWB SDP priorities will help put our East Sussex Health and Care Partnership on a strong footing to inform that process, noting that it will be necessary to be as flexible as possible in order to manage and adapt to any changes as we move through the year.

#### 1) Health outcomes improvement

East Sussex HWB SDP priority	Date	What we will achieve
We will continue to deliver our agreed whole system action plans on cardiovascular disease (CVD), Chronic Respiratory Disease (CRD), healthy ageing and frailty and mental health prevention, and monitor progress on a quarterly basis through the Health Outcomes Improvement Oversight Board, with a deep dive into one priority area each quarter.  We will ensure that the health outcomes improvement and learning are used to inform ICT implementation and address variation in outcomes.	March 26	Improved outcomes for the population
<b>Summary of plans</b>  In 25/26 our focus will be maintained on delivering our plans to support improved outcomes in CVD, CRD, Healthy ageing and frailty and mental health as areas where we want to see improved life expectancy and healthy life expectancy. This will be informed by the outcomes from the recent HWB development session on improving healthy life expectancy, alongside national NHS planning guidance and alignment with pan-Sussex priorities aimed at improving health outcomes, including any additional priorities identified, for example through the Sussex Health		

and Care Population Health Outcomes Framework, where we can have positive impacts for the East Sussex population.

## 2) Role and vision of the Health and Wellbeing Board

East Sussex HWB SDP priority	Date	What we will achieve
<p>We will continue to strengthen the strategic stewardship role and vision of the Health and Wellbeing Board (HWB) through completing our programme of development sessions aimed at growing a deeper shared understanding of our population health and care needs and strengths and understanding how well we are working together as a system to improve outcomes.</p> <p>Building on the work on system stewardship in 24/25, we will ensure our East Sussex Health and Care Partnership is operating effectively across our system at Place, with accountability to the HWB for our strategic planning and operational collaboration in our local communities.</p>	March 26	A clear focus and approach across all partners.
<p><b>Summary of plans</b></p> <p>In 25/26 we will deliver the remaining 4 informal HWB development sessions on the publicised JSNA themes, and review progress with improving outcomes, as opportunities to:</p> <ul style="list-style-type: none"> <li>• Grow shared understanding about our population health and care needs</li> <li>• Encourage innovation and ideas</li> <li>• Inform our plan for the refresh of our rolling HWB Strategy in 26/27</li> </ul> <p>We will pilot a way of monitoring outcomes and impacts of system working, and review and redesign how our East Sussex Health and Care Partnership strategically aligns partnerships and collaboration to support our shared priorities for delivering a joined-up offer for health, care and wellbeing, including prevention, across NHS, local government and VCSE sector services in our local communities and neighbourhoods.</p>		

## 3) Children and young people

East Sussex HWB SDP priority	Date	What we will achieve
<p>We will continue to enhance support to parents and carers and families to enable the best start in life and ensure service improvements, including pathway and service redesign, are effectively implemented to improve the health and wellbeing and life chances of children and young people.</p>	March 26	Improved experience and increased opportunities to support our most vulnerable families.
<p><b>Summary of plans</b></p> <p>In 25/26 we will achieve this through delivering key local collaborative projects and work, aligned with our Sussex-wide priorities and programmes for children and young people in the following areas:</p> <ul style="list-style-type: none"> <li>• Neurodevelopmental Pathway (NDP)</li> <li>• Children's Emotional and Mental Health</li> <li>• Special Educational Needs and Disabilities (SEND)</li> <li>• Children in Care and Care Leavers</li> <li>• Physical Health focussed on children and young people in the core20plus5* group covering asthma, diabetes, epilepsy, oral health (noting that mental health would be picked up through the Children's Emotional and Mental Health priority).</li> </ul>		

[\\*NHS England » Core20PLUS5 – An approach to reducing health inequalities for children and young people](#)

#### 4) Mental health

East Sussex HWB SDP priority	Date	What we will achieve
We will implement integrated delivery of community mental health services and a wider range of earlier mental health support for adults of all ages and people with dementia, through delivering functional Neighbourhood Mental Health Teams (NMHTs) and ensuring their alignment with emerging Integrated Community Teams, in line with the Sussex-wide approach, as well as improving access and outcomes in supported accommodation and capitalising on opportunities presented by the planned opening of the new Coombe Valley Hospital.	March 26	Reduced reliance on specialist services and improved population health and wellbeing
<b>Summary of plans</b> In 25/26, working within the Sussex-wide framework we will build on the implementation activity in 24/25 in the following ways: <ul style="list-style-type: none"><li>Continuing to work to improve the local Dementia pathway to improve focus on prevention and reduce admissions.</li><li>Fully deliver Neighbourhood Mental Health Teams (NMHTs) across our five footprints and ensure alignment with ICTs.</li><li>Continuing to deliver against our place based mental health and housing plan to improve supply, quality and integration.</li><li>Developing an Older People's Mental Health Needs Assessment.</li></ul>		

#### 5) Integrated community teams (ICTs)

East Sussex HWB SDP priority	Date	What we will achieve
We will support the move to a neighbourhood health service that delivers more care at or closer to home through our five Integrated Community Teams (ICTs) across East Sussex. In line with ICTs across Sussex, this will focus on providing proactive, joined-up care for people who require support from multiple services and organisations; improved access to local health and care services and, improving the health and wellbeing of our population through an asset-based approach.	March 26	In year plan delivered.
<b>Summary of plans</b> Building on the outcomes from our initial foundation work for ICTs in 24/25 and in line with the Sussex-wide implementation framework in 25/26 we will:		

- Formalise the joint leadership arrangements to support the 'day-to-day' management, planning and coordination for each ICT
- Work with NHS Sussex to agree and finalise a joint ICT framework for core ICT related services and how we can jointly enable system partners to respond to this, including the links to mental health and neighbourhood mental health teams
- Set out the core approach and expectations for MDT-working and proactive, coordinated care for people who require support from multiple services and organisations based on good practice and recommendations from the MDT survey
- Support the wider network of relationships between services and teams to flourish through shared networking and learning events. VCSE led community networks and through digital platforms

We will also continue to capture the learning from the small-scale tests of change to inform model development across the different levels of need.

## 6) Improving hospital discharge

East Sussex HWB SDP priority	Date	What we will achieve
We will continue to embed efficiency and process learning from transformation programmes into 'business as usual' to further strengthen efficient hospital discharge processes, supported by digital automation, with a long-term funding plan for discharge capacity	March 26	More people will be able to be discharged safely to a community setting.
<b>Summary of plans</b> <p>In 25/26 as part of an enhanced oversight approach within the updated Better Care Fund (BCF) framework for 25/26, including regular reporting into ministers on plans and progress, our plans will continue to be focussed on this system priority in the following areas:</p> <ul style="list-style-type: none"> <li>• Ensuring a system-wide single version of the truth on data, building on progress with the Care Transfer Hub dashboards, with regular monitoring of length of delay between a patient's discharge ready date and their date of discharge, by pathway. This would also include: <ul style="list-style-type: none"> <li>○ A clear focus on those patients with the most complex needs, including frailty and dementia, understanding reasons for delay, and planning for increased demand</li> <li>○ Implementing site-level improvement plans and addressing variation across the system</li> </ul> </li> <li>• Accelerating efforts to optimise the Care Transfer Hubs building on progress made, particularly 'describe not prescribe'. This will enable more consistent assessments and tackling the potential overprescription of care, and build on our progress in mental health facilities to agree and embed standards (e.g. for assessment times) to cover acute sites.</li> <li>• Broadening our successful work on mental health housing-related delays into our acute hospital settings, and a focus on improved working with partners on housing.</li> <li>• Agreeing System funding allocations in 2025/26 for Hospital Discharge Schemes and monitoring the use at Place to inform future planning for bed-capacity. The absence of stable long-term funding to sustainably resolve bed-capacity issues within our system will continue to be a compounding factor that will need to be managed by system partners in 25/26.</li> </ul>		

## 7) Housing, health and care

East Sussex HWB SDP priority	Date	What we will achieve
We will finalise, agree and implement our shared vision for the housing sector in East Sussex set out in the East Sussex Housing Partnership Strategy and mobilisation plan, with a strong focus on health, housing and care as part of a strategic partnership framework that complements the borough and district housing authority strategies.	March 26	A clear ambition for all partners
<p><b>Summary of plans</b></p> <p>The East Sussex Housing Partnership is supporting preparations for significant policy changes over the coming year including the national homelessness and rough sleeping strategy, public sector spending review and the introduction of the Renters Rights Bill and Supported Housing Regulations. East Sussex faces acute pressures in relation to a lack of affordable housing and high demand for homelessness services, including temporary accommodation. Ongoing integration across housing, health and care is key to maintaining a focus on prevention and reducing the risk of further health inequalities.</p> <p>In 25/26 plans will set out how we implement the agreed Housing Strategy and will include:</p> <ul style="list-style-type: none"> <li>• Maintaining and strengthening collaboration across housing, health and care during devolution and local government reorganisation</li> <li>• Developing our homelessness prevention activities, including links to shared priorities with the adult social care prevention strategy.</li> <li>• Working to address pressures on temporary accommodation, scoping alternative accommodation options and ensuring households living in temporary accommodation are supported to move on as quickly as possible.</li> <li>• Ensuring strong links between housing and integrated community teams and neighbourhood mental health teams and strengthening joint working arrangements through a new joint hospital discharge protocol for people in housing need.</li> <li>• Supporting the development of refreshed housing and homelessness strategies in district and borough areas</li> <li>• Implementing a system wide approach to supporting people with multiple compound needs*, including sharing insights and recommendations from the needs assessment carried out by Public Health</li> </ul> <p><i>*Multiple compound needs (sometimes also described as severe and multiple disadvantage) describes the experience of having several support needs linked to social exclusion, usually three or more of the following: housing, substance misuse and mental health needs, engagement with the criminal justice system (specifically probation) or experience of domestic abuse, and the multiplying effects of these needs in combination.</i></p>		