



East Sussex Health and Care Partnership Plan 2021/22 Summary

Our ambition

Our aim is to improve the health and wellbeing of local people and reduce the health inequalities across East Sussex. We want people to live healthier lives for longer and have access to the best possible services and support.

This can only be achieved by health and care organisations working closer together alongside our local communities, the Voluntary, Community and Social Enterprise (VSCE) sector, and wider stakeholders to deliver more joined-up 'integrated' and personalised care, and a greater focus on preventing people from becoming unwell, early intervention and better support after ill-health.

The East Sussex health and social care system has a long history and commitment to integrated working and we need to maintain and build on this during 2021-22 and beyond to ensure better outcomes for local people and we are able to make best use of our collective resources.

Our East Sussex Health and Care Partnership Plan sets out the vision, outcomes, priorities and actions that we will be taking during the year to strengthen the way we work together for our populations. It includes the agreed shared local priority areas we will be focusing on for the East Sussex population, as well as the wider Sussex-wide system priorities we will be delivering locally. This summary provides an overview of the full detailed plan, which has been published in the public domain.

Working together for our population

Health and care organisations and partners across East Sussex are working together as a partnership for our local population. Our East Sussex Health and Care Executive is an informal place-based partnership arrangement, bringing together East Sussex Clinical Commissioning Group, East Sussex County Council, East Sussex Healthcare NHS Trust, Sussex Community NHS Foundation Trust and Sussex Partnership NHS Foundation Trust.

Our partnership includes the East Sussex Health and Social Care Executive Group and supporting Oversight Boards, and we are working with our Primary Care Networks to ensure they have a collective voice. Our Health and Social Care System Partnership Board brings together our health and social care system with our District and Borough Council and Voluntary, Community and Social Enterprise (VCSE) partners, with a relationship to our East Sussex Health and Wellbeing Board.

Our Partnership supports greater levels of collaboration between our organisations to enable better planning and use of our collective resources. It provides the framework for all commissioners and providers of health, care and support in East Sussex to come together to plan, organise and deliver services in the best way to improve health and wellbeing, and quality and experience of care, in the most sustainable way.

We have agreed a set of shared outcomes, based on what local people have told us is important about their health and care, that we are collectively working towards within this plan and support our shared Sussex vision. These are set out below:

Population health and wellbeing

The impact of services on the health of the population such as preventing premature death and overall prevalence of disease.

Ambition	Outcome
Improve and protect mental and physical health and wellbeing for local people	<ul style="list-style-type: none"> Children have a good start in life People are able to live well People age well People have a good end of life
Reduce health inequalities for local people	<ul style="list-style-type: none"> The gap in health outcomes is improved

Transforming services for sustainability

The way health, mental health, social care, education, housing and other services and support work together, and how effective they are at impacting positively on the people who use them.

Ambition	Outcome
Prioritise prevention, early intervention, self-care and self-management	<ul style="list-style-type: none"> People get support from their communities to prevent, reduce or delay their need for health, care and support People get help early to prevent situations from getting worse People get help to manage their condition(s)
Deliver an integrated model of care	<ul style="list-style-type: none"> People are supported to be as independent as possible
Demonstrate financial and system sustainability	<ul style="list-style-type: none"> People have access to timely and responsive care, including access to emergency hospital services when they need them Financial balance is achieved across the health and care system Digital services and innovation are used to help make best use of resources

The experience of local people

The experience people have of their health and care services.

Ambition	Outcome
Good communication and access to information for local people	<ul style="list-style-type: none"> Jargon free health and social care information can be found in a range of formats and locations Health and care services talk to each other so that people receive seamless services and people and staff have access to shared and integrated information
Put people in control of their health and care	<ul style="list-style-type: none"> People feel respected and able to make informed choices about services People have choice and control over services and how they are delivered

Quality care and support

Making sure we have safe and effective care and support.

Ambition	Outcome
Provide safe, effective and high-quality care and support	<ul style="list-style-type: none"> People receive high quality care and support People are kept safe and free from avoidable harm
Deliver personalised care through integrated and skilled service provision	<ul style="list-style-type: none"> People are supported by skilled staff, delivering holistic and personalised care

Working across the wider system

We work as part of the Sussex Health and Care Partnership Integrated Care System (ICS) which is a partnership of health and care organisations working together across Sussex. Working as part of the ICS, allows health and care services to be planned and co-ordinated at a larger 'system' level at scale, while our Partnership allows us to work at a more local 'Place' level to ensure there is focus on the needs of our population.

The Sussex Health and Care Partnership has made huge strides to improve and transform health and care over the last few years, with a significant amount of work taking place behind the day-to-day frontline delivery of services to focus on how we can develop a system that enables our organisations to work in a more joined-up and collaborative way for the benefit of our populations.

We have agreed a vision for Sussex that sets out where we want to be as a health and care system in the future. It is a vision where people live for longer in good health; where the gap in healthy life expectancy between people living in the most and least disadvantaged communities will be reduced; where people's experiences of using services will be better and where staff feel supported and work in a way that makes the most of their dedication, skills and professionalism. It is a vision where the cost of health and care will be affordable and sustainable in the long term.

This vision will enable every individual living in Sussex to have access to the best health and care from the moment they are born and throughout their lives. Our place-based plan supports and enables this vision to become a reality for our local population.

Our challenges

Impact of COVID-19

COVID-19 is the greatest challenge the health and care system has faced in living memory, which has made significant impacts on demand, capacity and the performance of services. In addition, the pandemic has contributed to increased disparities and health inequalities, with large sections of the community facing increased deprivation and challenges due to various personal and economic circumstances. Our partnership working has been stress tested significantly by COVID-19 and proved crucial as the system collectively came together to respond to the unprecedented challenge.

Thanks to the vaccination rollout, we are moving to restore services while remaining prepared for any future waves of the virus. We aim to build on what we learned to bring about positive change and renewal so that we can deliver improvements in health and wellbeing for our population.

NHS performance

The NHS is required to meet a number of constitutional standards on the performance of services. Despite an extremely difficult year due to the pandemic, locally we delivered a number of the required targets over 2020/21. However, there are a number of standards we have not been able to meet due to the increased and rising demand on pressure on services we are working collectively across the system to manage and improve performance.

Rising demand and complexity

There is increasing demand and pressure on services, due to a number of factors outlined below:

- East Sussex is a county with a **growing and ageing population**. By 2024 we predict that 23.3% of our population will be aged 65-84 (compared to 16.8% for England), and a further 4.3% will be over 85 (2.7% England).
- The number of **children in need of help and protection** is rising locally and nationally, linked to the increase in families experiencing financial difficulties, and there is a growth in the numbers of children with special educational needs and disability, some of whom will have complex medical and care needs.
- Although on average our population health is similar to England, **more older people and the complexity of their needs with increasing longevity, frailty and people with multiple conditions**, means that health and care needs in East Sussex are likely to be higher than other similarly sized areas in England.
- There are **significant gaps in life expectancy and healthy life expectancy** within the county associated with deprivation.
- The biggest causes of **inequality in life expectancy** in East Sussex are circulatory disease, cancer, respiratory disease and digestive disease.
- The county is **rural and urban in nature** with the inevitable challenges that this brings for ensuring appropriate access to services.

Our population

- Our population of approximately 560,000 people is predicted to grow by around 19,000 people between 2020 and 2024.
- 20,136 births to East Sussex residents are expected in that period, over 4,000 per year.
- Over half the increase in population is in people aged 65 and older.
- 25,944 deaths are predicted between 2020 and 2024, with many of these people will require end of life care.
- 91.7% of our population describe themselves as White British or Northern Irish (2011 census).
- 8% describe themselves as being from a Black, Asian or minority ethnic (BAME) group
- Only 6% of the BAME population were over 65 years old compared to 23% of the White British population (2011 census)
- Life expectancy for both men and women in East Sussex is 0.7 years longer than the England average of 79.6 for men and 83.1 for women.
- There is greater variation in male life expectancy than female within East Sussex (12 years vs 6 years gap between Hastings' most deprived quintile and Rother's least deprived quintile).

Our priorities

We have a number of priority areas where we are collectively working together to improve and transform services. These six agreed 'place-based' priorities are based on the needs of the East Sussex population, and there are a number of Sussex-wide priorities that will also be delivered locally to meet the national commitments of the NHS.

Our Place-based priorities

Our agreed place-based East Sussex shared priorities and actions we are taking in 2021/22 are:

- **Addressing Health Inequalities**

We will be building on our existing progress to enhance prevention, personalisation and reduce health inequalities and reduce the gap in life expectancy and healthy life expectancy in the county. We will do this through coordinated action across all services that impact on the wider determinants of health such as housing, employment and leisure, as well as extending targeted approaches to empower people to make healthy choices to improve outcomes.

During 2021/22 we are:

- Agreeing our vision and next steps for a sustainable model for community hubs with our District and Borough Councils and VCSE partners.
- Developing a system approach to tackling loneliness and social isolation.

- Supporting the growth of Population Health Management capability, and linking this with anticipatory care, multi-disciplinary team working and care coordination where helpful
- Further developing the East Sussex social prescribing model.
- Ensuring all local plans and programmes have a focus on health inequalities and will have specific health inequalities priorities developed.
- Agreeing our understanding of population health and health inequalities at a local level within our communities, to enable support to be more targeted and baselines to be set for reducing gaps in life expectancy and healthy life expectancy.
- Ensuring personalised care and support approaches are embedded in all transformation and development as appropriate across specific conditions and care pathways.
- Exploring ways to join up our approach as employers and service providers for the benefit of the broader social and economic wellbeing of our communities.

- **Community Health and Social Care Integration**

Within our community services, we will continue to integrate health and social care services and work with our Primary Care Networks to embed proactive anticipatory care, and seamless wrap around care to people with long term care needs and conditions and those in care homes, including where people are at the end of their lives.

During 2021/22 we are:

- Building on our target operating model and shared approach to the leadership and management of services across acute and community health and adult social care, to support the deployment of our resources and our teams to work together more effectively across services for the frail elderly and others with complex and long term care needs.
- Implementing an integrated urgent response team approach aimed at enabling hospital admissions to be avoided where an alternative service can be provided, as well as supporting rapid discharge from hospital when people are medically ready to leave.
- Working with primary care and the VCSE to support the multi-disciplinary team (MDT) working and care coordination developments in primary care, and the implementation of anticipatory care.
- Implementing our approach and model for planning and delivering services in a locally sensitive way to ensure strong links are made between core community health and social care services, primary care, mental health and other services that support people's needs.

- **Integrated Children and Young People's services**

We will improve existing support to children and young people focusing on improving mental health and emotional wellbeing and Autism, ADHD and other neurodevelopmental disorders pathways; support for vulnerable young people at risk and looked after children; support for children and young people with disabilities; and through health promotion activities.

During 2021/22 we are:

- Continuing a joint approach to pathways and commissioning for Tier 4, secure, and specialist placements.
- Improving access for children and young people to emotional wellbeing and mental health services.

- Enhancing autism, ADHD and other neurodevelopmental disorders pathways to improve outcomes for vulnerable and disadvantaged children with special educational needs and disability.
 - Developing new free special schools focussing on expanding Children's Integrated Therapies and Equipment Service provision to cover new schools' provision, and improving outcomes for children with special education needs and disabilities.
- **Mental Health Community Transformation**

We will expand our support for people with mental health needs by ensuring access to a full range of services that support emotional wellbeing in primary care; enhanced support in the community to help avoid unnecessary admissions and support recovery; and working with housing teams and providers to support those people who also have housing and accommodation related support needs.

During 2021/22 we are:

- Working to increase the range of emotional wellbeing services accessible in primary care, wrapped around Primary Care Networks, including effective triage arrangements and implementation of the Mental Health Practitioner in primary care.
- Enhancing specialist community based services for eating disorders, personality disorders and support with rehabilitation needs.
- Developing more integrated pathways for mental health and accommodation and housing related support.
- Focusing on prevention, including suicide prevention.
- Implementing of the Mental Health investment standard for Dementia to ensure recovery of diagnosis rates, increased provision of community support and enhanced support to care homes.

- **Urgent care**

As part of our wider Sussex ICS work, In East Sussex we will continue to improve support for people with urgent care needs, including: targeted support for vulnerable people; improvements in urgent care processes and systems to deliver more streamlined urgent response; support people in care homes with urgent care needs; and building on the introduction of our Integrated Urgent Care model, and the Urgent Treatment Centres.

During 2021/22 we are:

- Further developing the Integrated Urgent Care Model, including next steps with the Hastings Station Plaza and the strategic framework for Minor Injury Units at Crowborough and Uckfield community hospitals.
- Improving the join-up of urgent care with the work on increased demand, discharge improvements and implementation of the new waiting times standards.

- **Planned care**

As part of our wider Sussex ICS work, in East Sussex we will further improve services that deliver planned care for local people including: more innovative outpatient care through new technology and better organisation of services; review existing services to ensure evidence-based

interventions are in place; action to improve waits for treatment where this is too long; and continue to support best practice with prescribing and medicines.

During 2021/22 we are:

- Maximising elective capacity including use of the independent sector.
- Prioritising patients who are most clinically urgent and those waiting over 52 weeks.
- Ensuring effective prioritisation and management of clinical risk.
- Ensuring effective communication with patients and advice and support for those who are waiting for treatment.
- Addressing health inequalities particularly where patient cohorts may have been disproportionately impacted as a consequence of waiting longer for treatment or not seeking treatment in the first place.
- Redesigning system pathways to reduce variation in access and outcomes.
- Embedding outpatient transformation to avoid activity of low clinical value that could be redeployed to where it is needed.
- Recovering diagnostic services and delivery of Community Diagnostic Hubs.
- Working with Healthwatch, patient ambassadors and other key stakeholders to ensure their insights inform our transformation and we effectively communicate with the local public.

Our wider system priorities

In addition to the local place-based priorities, our Sussex-system priorities we need to deliver at place are set out below.

- **Primary and Community Care**

We will continue to ensure patients can access to safe, high quality and effective primary care services. This will include restoring and recovering primary and community care, maintaining the delivery of the COVID-19 vaccination programme, and supporting the continued development of Primary Care Networks. In addition, we will continue to embed personalised care and support planning into our health and care.

- **Long Term Conditions**

We will be establishing a Long-Term Conditions programme which includes supporting those with multiple long-term conditions relating to diabetes, respiratory, stroke, cardiovascular disease (CVD) and CVD prevention.

- **Supporting hospital discharge**

We will further improve hospital discharge processes and embedding the hospital discharge hubs in our hospitals, which were successfully deployed in response to the pandemic. We will also develop a multi-disciplinary, integrated urgent care community team to enable hospital discharges to people's homes with a package of support.

- **Cancer**

We will be focusing on improving experience and outcomes of cancer patients through earlier and faster diagnosis, easier access to services, and restoring performance of services following the impact of COVID-19, with priority given to long waiters and those at most clinical risk. We will also

increase awareness of the signs and symptoms of concern and increase patient confidence regarding safety of services.

- **Mental Health**

We will be focusing on improving access to services and patient outcomes, experience and quality of care across a number of areas. Back by significant new investment, we will be looking to expand and improve: perinatal mental health services; children and young people mental health and eating disorders; improved access to psychological therapies; adult urgent care; adult community; Primary Care Network Mental Health roles; acute mental health care; and dementia care. We will also be looking to continue and enhance suicide reduction and bereavement support, staff wellbeing, housing plans, and personalised care.

- **Learning disabilities and autism**

We will focus on reducing health inequalities for individuals with learning disability, autism or both. We will look to reduce reliance on inpatient care and discharge people out of hospital into community settings with the right skills to support their needs.

- **Children and Young People**

We will be continuing to focus on improving services to ensure there are high quality, equitable care for children and young people and their families, and we are able to address inequalities. We will be developing a strategy that builds on work that has already taken place and supports plans to improve children and young people mental health and emotional wellbeing, and learning disabilities and autism.

- **Maternity**

We will be focusing on restoring maternity and neonatal services impacted by the pandemic and the support that is within the community. We will be transforming smoke free pregnancy pathways, and developing a perinatal equity strategy, ensuring continuity of carer and developing of vision for maternity and neonatal services.

Our Workforce

We recognise there are opportunities to look at how the collective workforce for health and care across East Sussex is deployed and developed in support of our integration and transformation plans. We currently have high vacancy rates, high turnover, and an insufficient supply of future staff so we need to take collective action to ensure we have the workforce to continue to deliver high quality care and services. We will be developing a local workforce plan which will help meet the needs of our populations.

Our finances

It is essential that we deliver our health and care priorities in a way that gets best value from the collective resources available to us. This requires effective partnership working, with a collective approach to risk management to deliver our health and care priorities. It is therefore important that the system as a whole continues to work together to develop sustainable underpinning financial

plans, which are also linked to our priorities for transformation, to enable service change and address any increases in activity in urgent and emergency care and recovery activity to sustain performance and quality overall.

To deliver our healthcare priorities, all partners across our ICS have agreed to work to the following principles:

- The ICS will deliver overall balance, with each organisation also in balance at the end of the period.
- As many resources as possible are distributed to providers within the ICS.
- There is a collective approach to risk management.
- All investments and any additional funding agreed as an ICS.
- Any contingency is held at an ICS (system) level.
- Budget setting should be a completely transparent process.
- The financial plan will deliver the baseline activity and any additional costs for any additional activity above the baseline will be funded from the Elective Recovery Fund.

We will be developing place-based sound financial management, including the role of our Place finance leadership group in line with national policy. The local financial governance arrangements, systems and process will be informed by decisions taken around issues including how much financial decision making happens at place level and which resources are delegated to place level.