

Day 2

Welcome back !!!!!!!!!!!!!!!



# Check in Reflections





The background features several thick, curved, overlapping lines in shades of light blue and green. A large, light blue watermark with the text "Active Essex" is oriented diagonally across the center of the image.

Yvonne Lees  
CEO  
Harlow Council





Hertfordshire and  
West Essex Integrated  
Care System

## Understanding the Health Landscape

Amy Jackson, Deputy Director of Transformation  
and Integration West Essex Place

Presentation to: Sport England and Active Essex  
Place-Based Leadership Course - Harlow

Wednesday 3<sup>rd</sup> July 2024

**Working together**  
for a healthier future





# Content

An overview of the Hertfordshire and West Essex Health and Care Landscape:

- Integrated Care System (ICS)
- Integrated Care Board (ICB)
- Integrated Care Partnership (ICP)
- Health Care Partnerships (HCP's)

Our strategic challenges, vision and priorities

Active Essex



Hertfordshire and  
West Essex Integrated  
Care System





# Integrated Care System (ICS)

- ICSs were established in July 2022 through The Health and Care Act 2022
- ICSs are partnerships that bring together NHS organisations, local authorities and others to take collective responsibility for planning services, improving health and reducing inequalities across geographical areas.
- There are 42 ICSs across England, covering populations of around 500,000 to 3 million
- ICSs consist of two statutory bodies - the NHS Integrated Care Board (ICB) and Integrated Care Partnership (ICP)



Hertfordshire and  
West Essex Integrated  
Care System





# Snapshot of the Hertfordshire & West Essex ICS



## Hertfordshire

Population: 1,198,800\*

Hertfordshire Health & Wellbeing Board

Hertfordshire County Council

10 District and Borough Councils

3 Health and Care Partnerships

- East & North Herts
- South & West Herts
- Mental Health Learning Disabilities & Autism

2 Acute Hospital Trusts

4 Community, Mental Health & Ambulance Trusts

35 Primary Care Networks

Hertfordshire Healthwatch

Growth Board

Local Enterprise Partnership

One university

Combined population of 1.52m



## West Essex

Population: 319,300\*

Essex Health & Wellbeing Board

Essex County Council

3 District Councils

Health and Care Partnerships

- West Essex
- Mental health collab in progress

1 Acute Hospital Trust

2 Community, Mental Health and Ambulance Trusts

6 Primary Care Networks

Essex Healthwatch



VCSFE Alliance

\* Source: Census 2021



# Integrated Care Board (ICB)

- The ICB is a commissioning body within the ICS that has responsibility for NHS budgets for its residents.
- The ICB holds budgets for those NHS services and makes sure that care is high quality and that people get access to the services they need.
- The ICBs is responsible for coordinating strategic planning across the system
- The Clinical Commissioning Groups across Herts and West Essex came together in 2022 to become Hertfordshire and West Essex ICB (HWEICB).
- HWEICB has specific aims to join up health and care services, improve health and wellbeing of local people and reduce health inequalities across our area.
- HWEICB is responsible for gaining assurance on the performance of the Health Care Partnerships within its ICS.





# Integrated Care Partnership (ICP)

- The ICP is a statutory committee.
- The ICP develops and leads the 10-year Integrated Care Strategy (2022) but does not commission services.
- The ICP aligns purpose and ambitions across its member organisations to integrate care and improve health and wellbeing outcomes for their population
- The ICP facilitates joint action to improve health and care services and to influence the wider determinants of health and broader social and economic development - Effectively areas that cant be tackled by one organisation alone.
- HWE ICP was established jointly by Hertfordshire County Council, Essex County Council and the Integrated Care Board as equal partners.





## Health Care Partnerships (HCP)

- We have 4 Health Care Partnership (HCP's) in the HWEICS which bring together health, social care and voluntary sector organisations across smaller areas of our system to work as one
- We have 2 geographical HCPs in Hertfordshire covering ENH, SWH as well as 1 HCP supporting Mental Health, Learning Disability and Autism.
- We 1 geographical HCP in West Essex
- HCP's play a fundamental role in the way health and care is provided for people in their areas, linking services to ensure people can get the care they need in the right place and at the right time.



East and North Herts  
Health and Care  
Partnership



West Essex  
Health and Care  
Partnership



Herts Mental Health,  
Learning Disability and  
Autism Health and Care  
Partnership



South and West Herts  
Health and Care  
Partnership



Hertfordshire and  
West Essex Integrated  
Care System





## From April 2024

### **In April 2024 our Health and Care partnerships became a more formal part of our system:**

- The role and ways of working of the partnerships are underpinned by a memorandum of understanding (MOU)
- HCPs have become part of the ICB governance
- Financial, performance, quality, and workforce data is being developed and aligned to support HCP decision-making- this will be a priority for the ICB
- A provider CEO is taking formal responsibility for the leadership of the HCP and developing and maintaining the relationships and ways of working critical to its success
- All of the work of the HCPs is being underpinned by a Population Health Management Approach enabled by the new data platform (going live in August).
- Throughout 24/25 the main task of our HCPs will be to implement delivery plans around our five 24/25 priorities



Hertfordshire and  
West Essex Integrated  
Care System





# Integrated care systems (ICSs)

Key planning and partnership bodies from July 2022

## NHS England

Performance manages and supports the NHS bodies working with and through the ICS

## Care Quality Commission

Independently reviews and rates the ICS

## Statutory ICS

### Integrated care board (ICB)

**Membership:** independent chair; non-executive directors; members selected from nominations made by NHS trusts/foundation trusts, local authorities, general practice; an individual with expertise and knowledge of mental illness

**Role:** allocates NHS budget and commissions services; produces five-year system plan for health services

### Integrated care partnership (ICP)

**Membership:** representatives from local authorities, ICB, Healthwatch and other partners

**Role:** planning to meet wider health, public health and social care needs; develops and leads integrated care strategy but does not commission services

Cross-body membership, influence and alignment

Influence

Influence

## Partnership and delivery structures

### Geographical footprint

#### System

Usually covers a population of 1-2 million

#### Place

Usually covers a population of 250-500,000

#### Neighbourhood

Usually covers a population of 30-50,000

### Name

### Participating organisations

#### Provider collaboratives

NHS trusts (including acute, specialist and mental health) and as appropriate voluntary, community and social enterprise (VCSE) organisations and the independent sector; can also operate at place level

#### Health and wellbeing boards

ICS, Healthwatch, local authorities, and wider membership as appropriate; can also operate at system level

#### Place-based partnerships

Can include ICB members, local authorities, VCSE organisations, NHS trusts (including acute, mental health and community services), Healthwatch and primary care

#### Primary care networks

General practice, community pharmacy, dentistry, opticians



# Our Challenges

The combination of health inequalities and an ageing population mean that demand faced by our health and care services outstrips their capacity, and this will only worsen without action.

## Changing Demographics

Demographic changes mean that our older population will be growing rapidly over the coming 15 years or so, and it is this section of the population who are the most intensive user of health and care services

We also predict seeing continuing levels of demand for support relating to mental health/wellbeing and in relation to childhood development (higher than pre-pandemic)

## Patient Experience

Repeated episodic care does less to enhance patient experience and outcomes, in some instances accelerating loss of self-confidence and increasing dependency

Whilst specialisation of care brings advantages, it can make caring for people with multiple conditions more costly and less joined up resulting in a lack of continuity of care and a poor experience for patients and carers.

## Inequality

Whilst the population in HWE is generally less deprived than the national average, there are communities in our three HCP areas with much more significant deprivation than other communities within our ICS.

Partners across the system recognise that the main factors affecting deprivation sit outside direct health & social care provision and health and care services need to do more together to better support our deprived populations.

## Financial sustainability

A combination of increased demand, greater acuity, demographic changes and broader economic challenges mean that the system has a recurrent, underlying financial deficit

Unless tackled, this will prevent the system from moving to the new model of care that is required for the future and will negatively impact on our residents.



Hertfordshire and  
West Essex Integrated  
Care System





# Achieving our vision - ICB

*Hertfordshire and West Essex ICB exists to work with others to build a future in which all our residents can live better, healthier and longer lives.*

**To achieve our vision, we will focus on five ambitions**

Increasing healthy life expectancy, and reduce inequality

Giving every child the best start in life

Improving access to health and care services

Increasing the numbers of citizens taking steps to improve their wellbeing

Successfully delivering our financial plan each year

**Which will support 3 shifts in our model of care**

From reactive acute care to preventive, anticipatory & community-based care

From a siloed and poorly coordinated model to continuous, integrated care

From a model based on providing care to one where active patients are engaged in self-management and collaborative care planning

**In our first year we will prioritise**

CVD and Hypertension

Reducing waiting times in targeted children services

Reducing UEC demand by delivering more anticipatory/ same day care

Provide better care to people in mental Health Crises

Continue our elective care recovery



Hertfordshire and  
West Essex Integrated  
Care System





# The West Essex HCP Delivery Plan 24/25

This Delivery Plan identifies the contributions the WEHCP will make to deliver the ICB strategic priorities. These plans focus on those priorities that benefit from a partnership approach, that creates opportunities to maximise use of our collective resources and enables us to focus on those initial priorities that will have the greatest impact to address the variation in outcomes and experience of our population in accessing the right services, with a particular focus on Harlow. This plan focuses on three priorities:

## Priority 1: Prevention

Through a “Healthy Places” approach led by our District Councils our plans will address the prevalence of obesity, wellbeing and resilience of children and young people. We will also focus on adults at risk of worsening mental wellbeing.

We will also focus on cardiovascular disease by supporting people to manage their long-term condition and reduce acute inpatient episodes, increasing case finding for hypertension, education and the development of our integrated Heart Failure pathway.

## Priority 2: Frail population, those living with multiple long-term conditions or at end of life

To develop a proactive and preventative model of care that will meet the individuals needs in the community, to maintain their independence and when there is an escalation of need this too managed in the community to prevent ED attendances and inpatient episodes.

## Priority 3: Community Urgent and Emergency Care

Improving access to emergency care in the community through the development of our urgent care pathways including urgent community response and falls pathways, the increased utilisation of our virtual ward and the continued development of the primary care led Integrated Urgent Assessment and Treatment Centre. This will also protect our emergency departments for those people that need access to the specialist urgent and emergency response of our acute hospitals.

We will also continue the development of our enabler programmes bringing partners together to address workforce challenges, improve utilisation of our collective estate and support planning for growth and digital innovation.

## West Essex Health and Care Partnership

Bringing together provider and commissioning organisations with a common purpose of improving health outcomes for the population of west Essex and parts of East and North Hertfordshire. It will work together to take joint action to improve and integrate services, to influence the wider determinants of health and to improve the sustainability of our health and care system

**“To help everyone in our area live long and healthy lives by supporting independence and providing seamless care”**

Core partners include PAHT, H&WE ICB, Essex Partnership University NHS Foundation Trust (EPUT), Essex County Council, Hertfordshire Community Trust (HCT), Primary Care Networks, Epping Forest, Harlow and Uttlesford District Councils and our Voluntary Sector.





# Place based asset mapping exercise

In groups 3 or 4 we are going to go exploring for 30 mins and with your smart phone you're going to take pictures of everything you see that either:

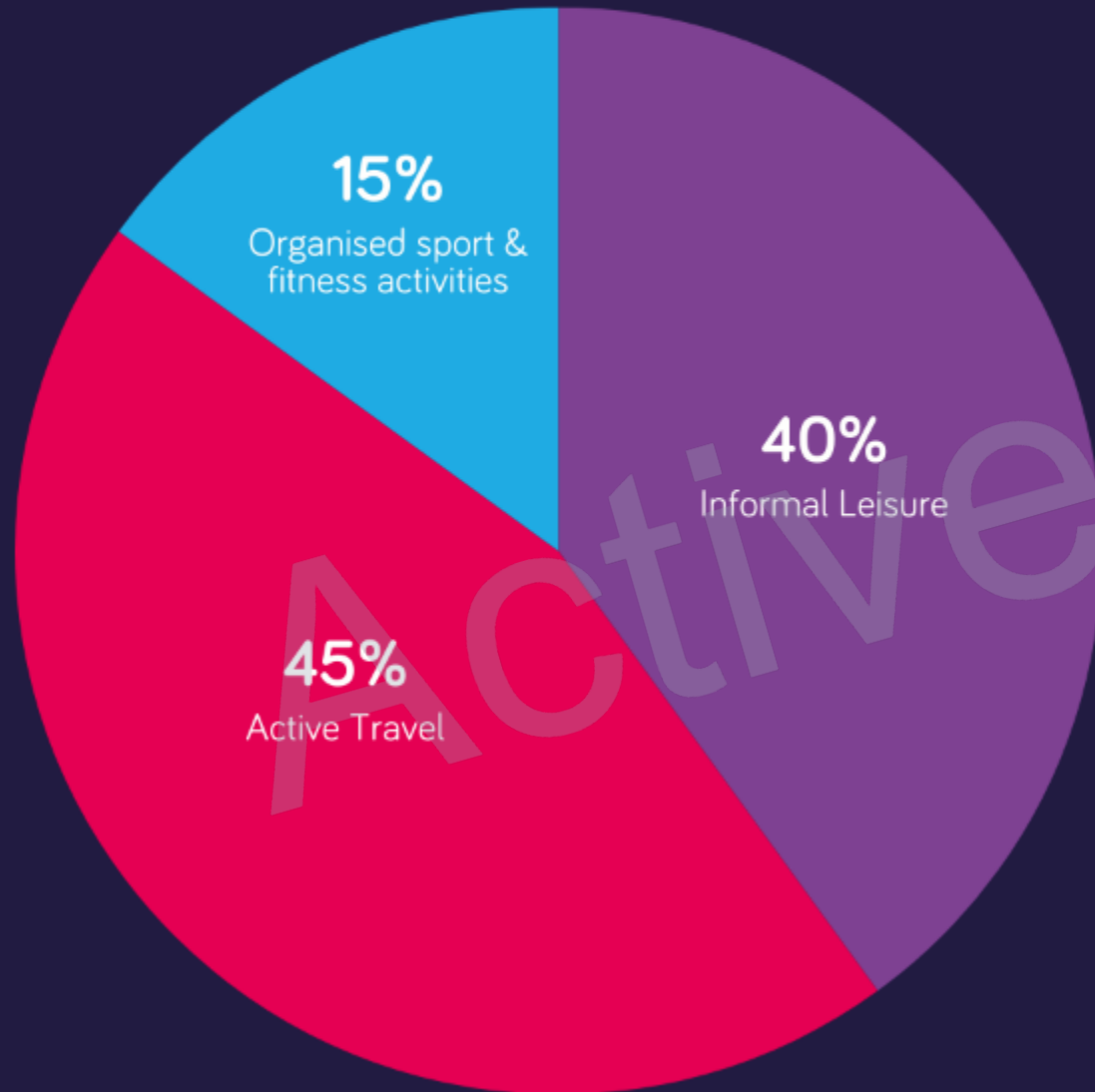
encourages physical activity  
or is a  
barrier to physical activity

post it on our What's App group so we can all see what each group finds





# How are people physically active in the UK?



**Opportunities to  
be more active**

Source: Intelligent Health



PCN Social prescribing link workers  
Ageing Well practitioners  
Adult social care Long Term Support community team  
Community mental health & wellbeing workers  
Better living team

## VOLUNTARY & COMMUNITY ORGANISATIONS/SERVICES

## BUILT ENVIRONMENT

✓ **Services/organisations re-designed**

- ✓ **Community assets - working collaboratively**

## WORKPLACES

**North Halifax Partnership – community anchor organisation:** PA integrated as part of their culture

**Ash Green Children's centre** – staff activities and challenges

**Adult social care** – staff activities and challenges

## PARKS & GREEN SPACES

Areas of **green space un-maintained** for 5 years, **cut, improved and made useable** to the community

**Active Park improvement plan** being co-designed with the community

## AN ACTIVE PLACE

- ✓ Promoted by organisations and services

## EDUCATIONAL SETTINGS

Ash Green Primary school  
**Active school** – multiple interventions  
 adopted and implemented  
**Ash green children's centre** – developing  
 walking trails for families

## WALKING & CYCLING INFRASTRUCTURE

- **Active Travel neighbourhood**
- Co-designed with the community and being delivered

## School street delivered

## SPORT/LEISURE/PA OPPPORTUNITIES

**Buggy for fitness walks and activities** – codesigned with families through children's centres

**Positive impact sport** healthy holidays

**Mixy Marchers:**

Social netball sessions established

Walking group set up





Influencing- creating a  
*coalition* of the willing



The background features several thick, curved, overlapping lines in shades of light green and blue. A large, light grey watermark with the text "Active Essex" is oriented diagonally across the center of the image.

# Understanding the Political dynamics !



# Pay attention to the politics

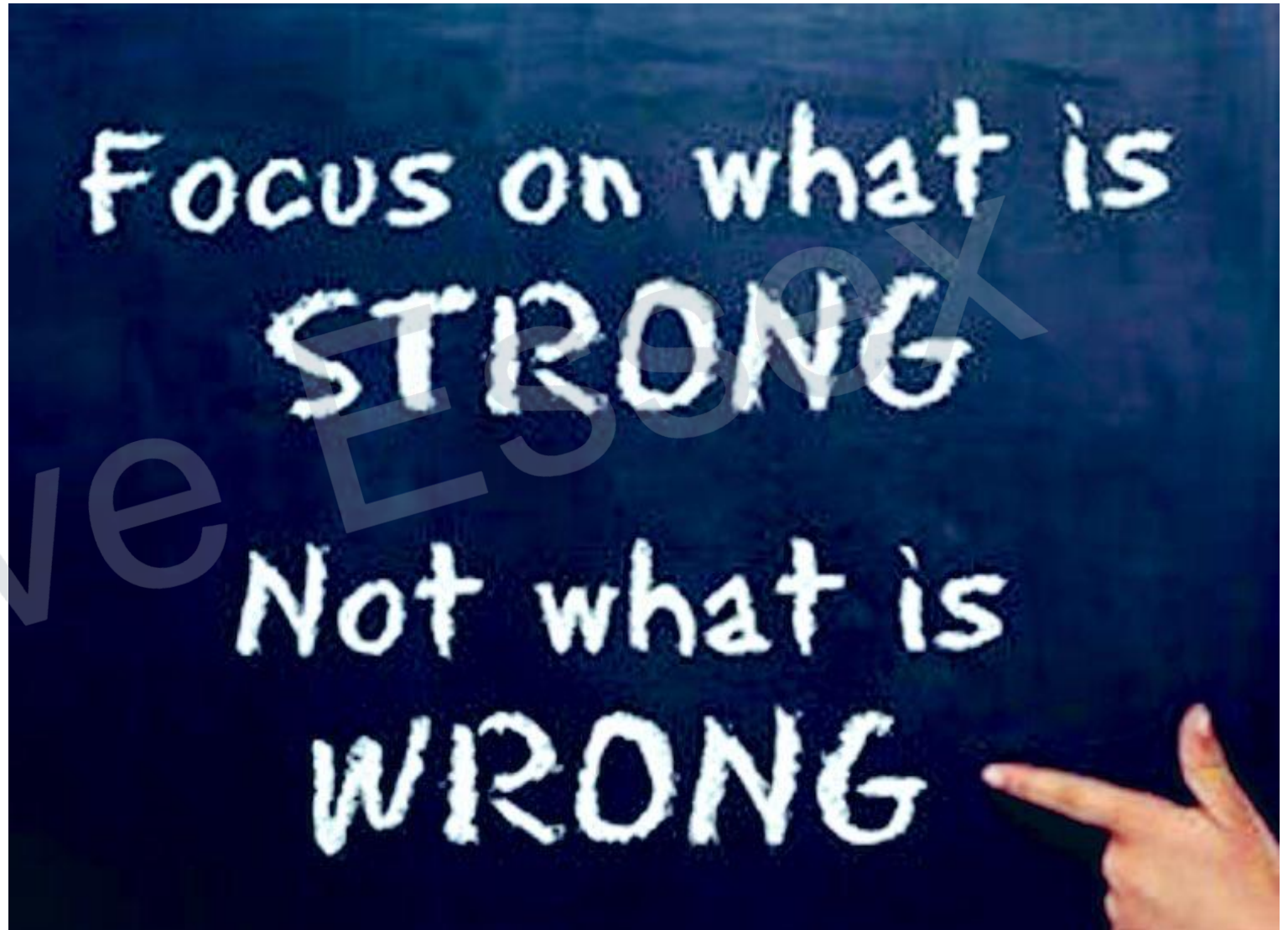
One model: owl, fox, donkey, sheep: what happens in your place?





# Asset Based Community Development

---





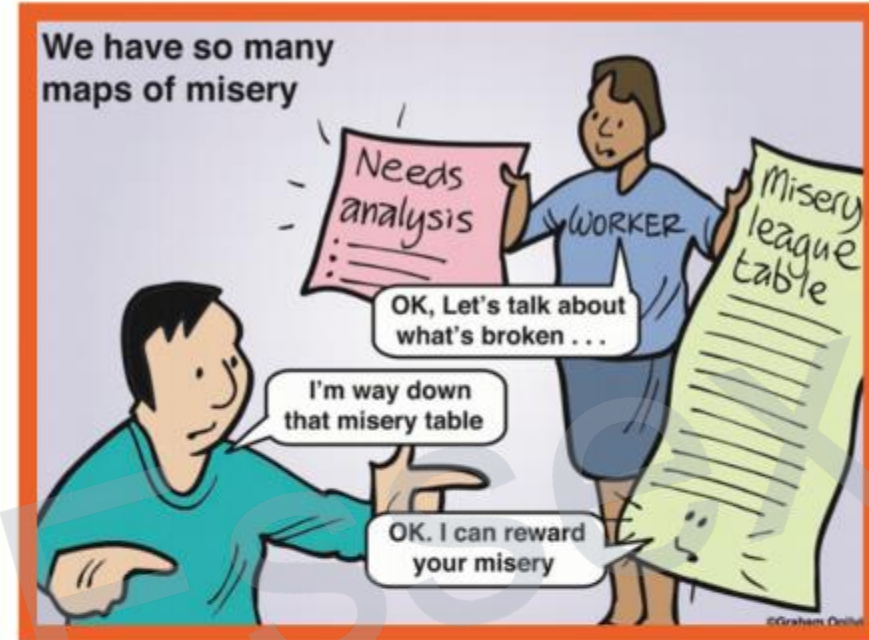
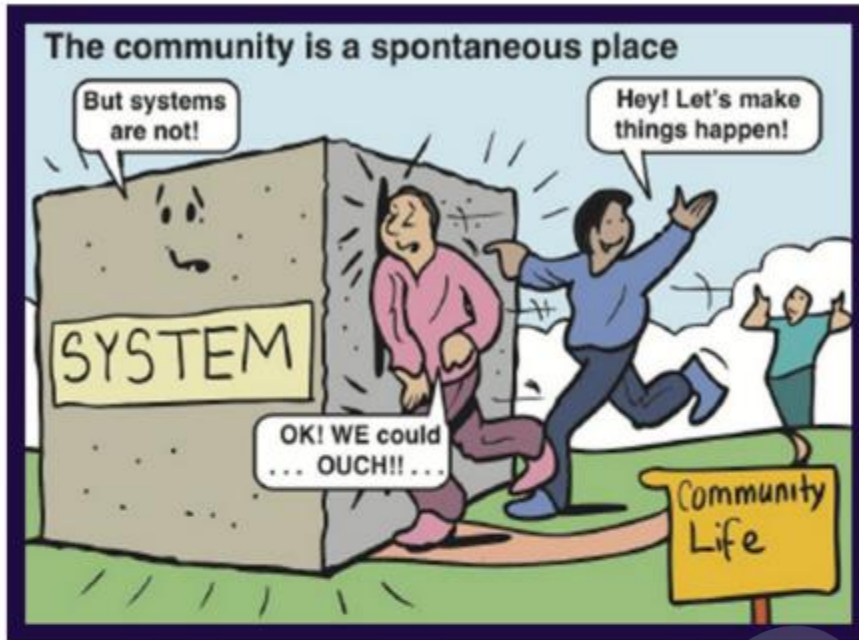
## Delivering Asset Based Community Development

### ABCD Key Principles:

- Having friends and valued relationships is key to people leading the life they choose
- People are supported to connect and share their gifts, passions and interests where they live
- Reciprocity is vital for community and individual well-being.
- Everybody has a valuable contribution to make
- The assets of an area (as defined by the people who live there) are recognised and celebrated
- Communities are best placed to know what needs changing and make the changes









# How we support communities



## Question

In your team where do you currently sit on the helper's journey and where do you want to be?

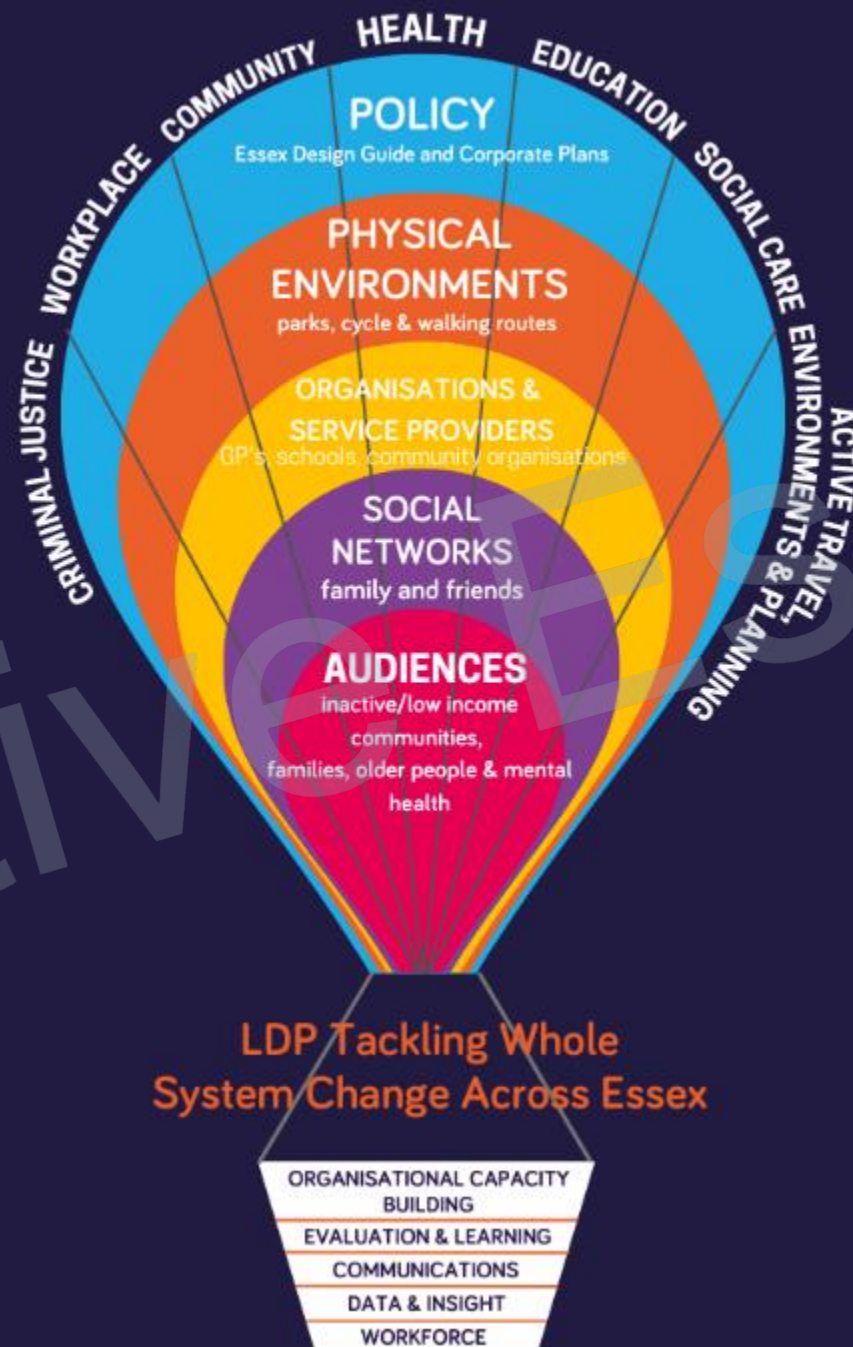




Stakeholder/system  
mapping



# Focus on System Change





## Exercise on tables

Pick a system setting along the top of the hot air balloon and go through the middle headings POLICY etc and start to map what you would need who the stakeholders are we need to influence/work with to hardwire physical activity within the setting



# Practical Tips for Leading Change

**Find time to think.**

Be Thoughtful.

**Build Bridges not Tunnels.**

Be Open.

**Planning not plans.**

Be intentional.

**Embrace Your You.**

Be Authentic.

**Focus where the system and lives collide.**

Be People Focused.

**Changing people, change the system.**

Be Reflective.

**Compliments help distribute power.**

Be Generous.

**Feeling is as important as thinking.**

Have Empathy.

**Appreciation is the currency of change.**

Be Grateful.

**Connection beats control.**

Be Connected.

**Follow with enthusiasm.**

Be Supportive.

**Stay connected to the why.**

Be Grounded.



Enhance  
your  
leadership  
resilience

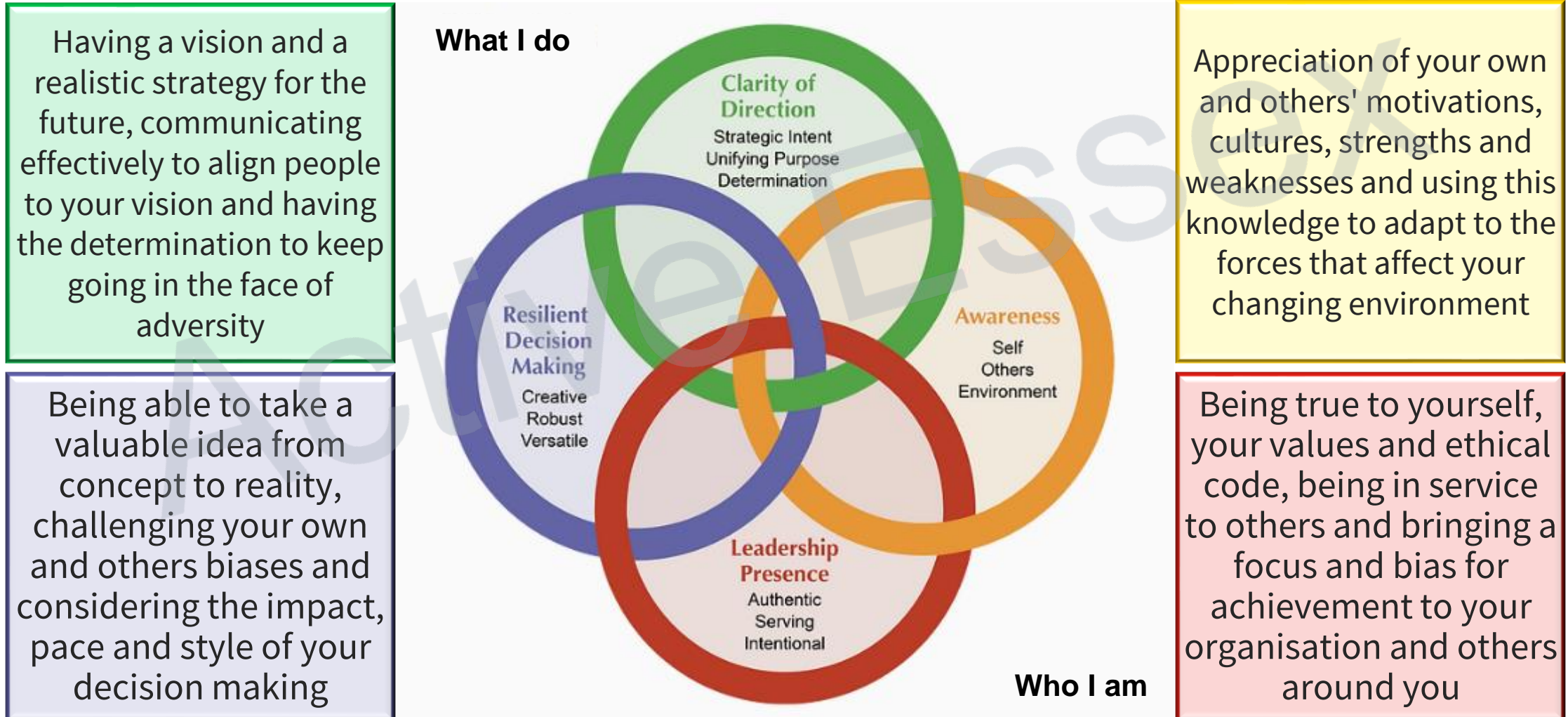


+

o



# What will you do personally to enhance your leadership resilience?







- **Strategic Intent** *Having a vision and realistic strategy for the future and finding ways to achieve them*
- **Unifying Purpose** *Creating alignment, communicating effectively and enrolling people in the Strategic Intent*
- **Determination** *Seeing through the fog of events, being able to adapt without compromising the Strategic Intent*

## Clarity of Direction

### IMPACT

People know where they are going, why they are going there and they know you are determined to succeed.

Each individual can work out what to do for themselves in order to get to the end point.





- **Creative** *The ability to work outside the usual frame of reference and to take a valuable idea from concept to reality*

A large circular graphic with a dark blue border. Inside the circle, the text "Resilient Decision Making" is written in a bold, black, sans-serif font, centered vertically and horizontally. The background of the circle is a light blue gradient. Surrounding the circle are various white line-art icons on a light gray background, including a line graph, a pie chart, a bar chart, a person silhouette, and arrows, suggesting a business or financial context.

# Resilient Decision Making



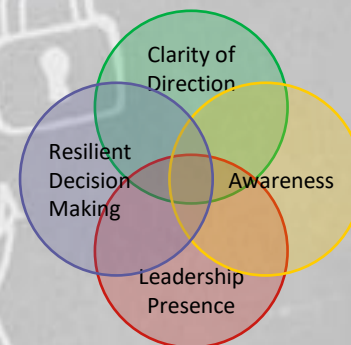
# IMPACT

Great decisions are made at the right time, with the right people, in the right place.

Contingency options are always available so that the unexpected can be dealt with effectively and confidently.

Great decisions are made at the right time, with the right people, in the right place.

Contingency options are always available so that the unexpected can be dealt with effectively and confidently.







# Awareness

- **Self** *Appreciation of your motives, attitude, strengths and weaknesses in a variety of situations*
- **Others** *Appreciation of the different motives, attitudes, cultures, strengths and weaknesses of others (e.g. your customers, your team, your business partners and your family)*
- **Environment** *Understanding your organisation, its systems, processes and culture, at all levels; also the forces that affect your organisation and your workplace*

## Awareness

### IMPACT

Everyone, including you, works at their best, resulting in higher productivity and motivation. Diversity is appreciated and used to the benefit of all.

Systems and processes serve people in achieving their goals.







- **Authentic** *Demonstrating integrity and conviction, operating to your values and ethics, being true to yourself*
- **Serving** *The needs of others (e.g. your customers, your team, your business partners and your family) are the priority; you are committed to the development of people*
- **Intentional** *Remaining focused on the purpose of the organisation, to be positive and appreciative rather than criticising; having personal energy and a bias for achievement*

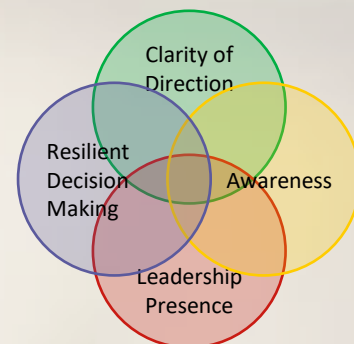
Leadership Presence –  
**being authentic and vulnerable**

## IMPACT

You have “presence” even when you’re not in the room.

The best person takes the lead and is fully supported by all around them, leading to greater effectiveness and better results.

People know each other well enough to anticipate other’s actions and act accordingly.





Building a movement

Active Essex



# Developing Shared Common Purpose





# Developing Shared Purpose

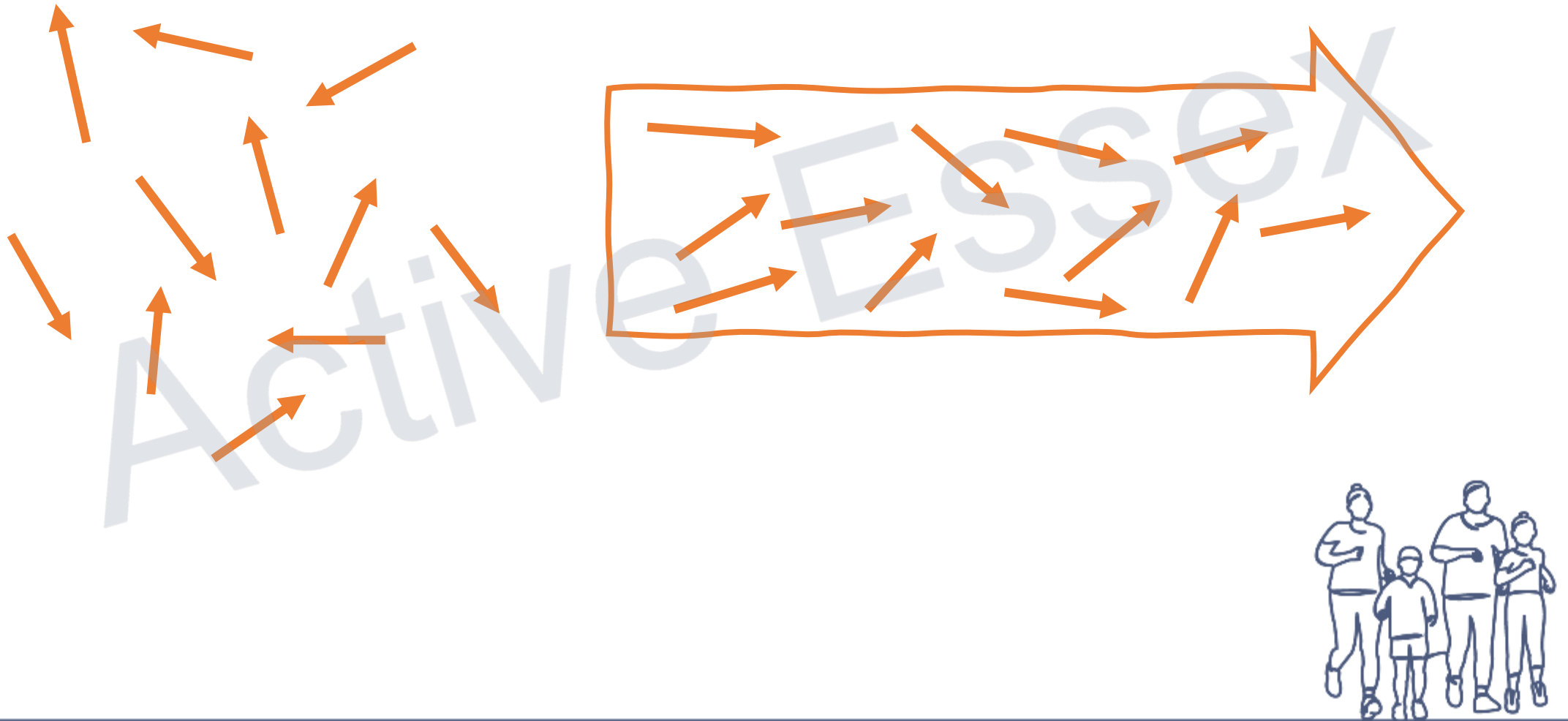




Table exercise: We are going to start consider what the shared purpose is of your Table!!!!

The lens is: *a place-based approach to leading Sport and Physical Activity in local communities through getting people more*

	Individual	Shared	Conflicting
Priorities			
Concerns			





Action  
Planning/What  
next





Your feedback is essential to helping us to run these programmes.



Please make sure you have completed your survey before you leave:





Starting the action planning:



On a Postcard answer  
the 4 questions  
Then in pairs discuss  
Then as a table share