

Tees Valley Places Plan

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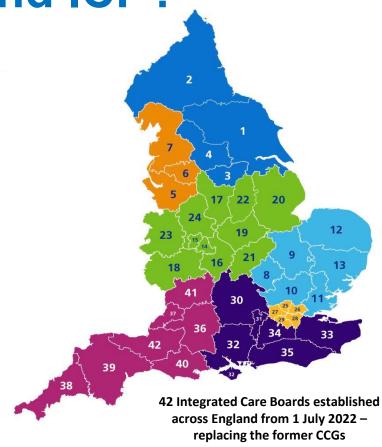
What's an ICS, ICB and ICP?

Integrated Care System (ICS) – includes all of the organisations responsible for health and wellbeing working together across a region to plan and deliver services for our communities.

It is not an organisation but works through the following bodies:

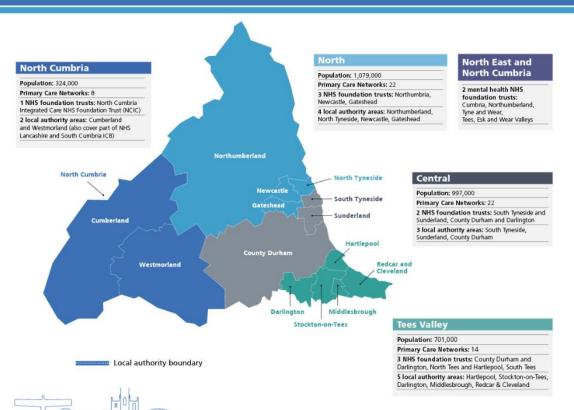
Integrated Care Board (ICB) – a statutory NHS organisation that took on the responsibilities of the former CCGs and some of the functions held by NHS England. The ICB will also work with a range of partners at 'place level' in each of the 14 local authority areas in our region.

Integrated Care Partnership (ICP) – a joint committee of the ICB and the 14 local authorities in the ICS area – plus other invited partners - responsible for developing an integrated care strategy for the ICS.



NHS North East and North Cumbria Integrated Care Board (ICB)





Our area

We are the largest of the 42 Integrated Care Boards in England. Since July 2022 we have reorganised eight clinical commissioning organisations and their Governing Bodies into a single organisation. Our new multi-professional and clinical structures reflect the size of our geography and our responsibilities.

Our role is to:

- Improve health and wellbeing and reduce health inequalities for the 3.1 million people who live in this area
- · Plan and oversee how NHS money is spent our total budget is £6.6 billion
- Make sure health and care services work well, together and are of high quality

Most of our work happens at place where we work with:

- · 13 local authorities a director post for each unitary tier local authority
- 11 NHS foundation trusts and 64 primary care networks place based teams working with local GP practices, social care teams and community-based providers

As part of an integrated care system we work with all partners to tackle regional issues at scale and pace to deliver our shared priorities.

Our Integrated Care Partnership is an alliance of organisations brought together by the NHS and local authorities which sets the strategy for improving the health of our communities in the North East and North Cumbria. See our integrated care strategy which sets out our vision and long term goals and a high level approach to achieving them.

Strategic aims of ICBs set by government



1 Improve outcomes in population health and healthcare

Continue to raise standards so services are high quality and delivered effectively making sure everyone has access to safe quality care whether in the community or in another setting.



2 Tackle inequalities in outcomes, experience and access

Maximise the use of evidence-based tools, research, digital solutions and techniques to support our ambition to deliver better health and wellbeing outcomes in a way that meets the different needs of local people.



3 Enhance productivity and value for money

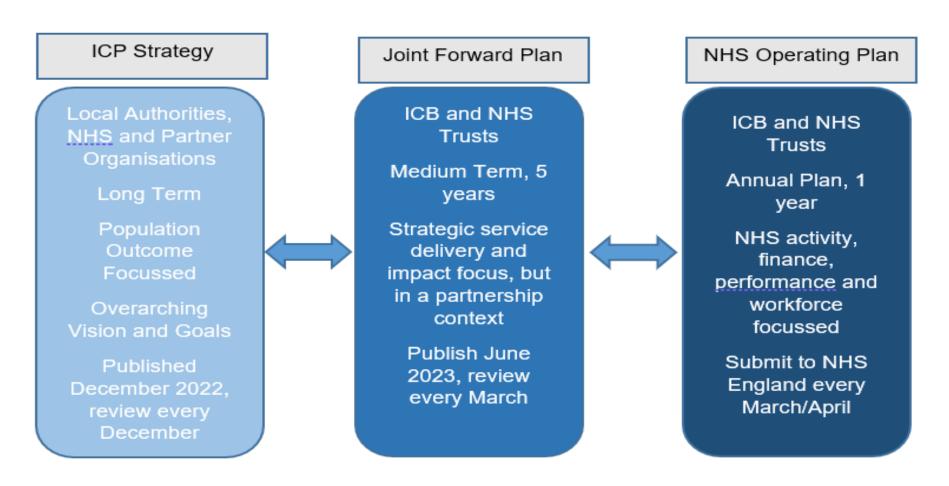
Working with partners in NHS, Social Care, and Voluntary and Community Sector organisations at scale on key strategic initiatives where it makes sense to do so. Harnessing our collective resources and expertise to invest wisely and make faster progress on improving health outcomes.



4. Help the NHS support broader social and economic development

Focus on improving population health and well-being through tackling the wider socio-economic determinants of health that have an impact on the communities we serve.

How the plans fit together



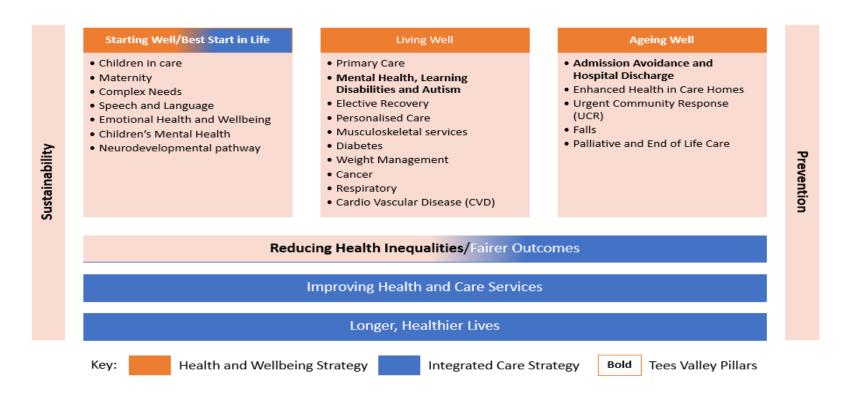
Tees Valley Places Plan

Tees Valley Priorities

- We worked together across the Tees Valley with all partners across health, councils, voluntary sector and primary care to develop a collective understanding of our plans and planning priorities
- The Tees Valley places plan has been developed in partnership and it belongs to all of us and is reflective of the work across the system and all the pre-existing plans and strategies that were shared
- We collectively identified a number of key areas (pillars) that supported delivery of our organisational, place and system plans and aligned these to the core common elements of our collective Health and Wellbeing Strategies; Start Well, Live Well, Age Well
- The next slide shows how the plans and strategies align

Tees Valley Strategic Context

 This slide shows the how all the national and Tees Valley priorities map to HWB strategies in each place and the NENC Integrated Care Strategy



Overview of Tees Valley Places Plan

- The Tees Valley Places Plan includes:
 - Summary statement
 - Demographic information
 - Our places
 - Governance
 - Key stakeholders
 - Priority 1 Starting Well Summary narrative, Objectives, Goals and Initiatives
 - Priority 2 Living Well Summary narrative, Objectives, Goals and Initiatives
 - Priority 3 Ageing Well Summary narrative, Objectives, Goals and Initiatives
 - Enablers
 - Risks

Starting Well

Starting Well/Best Start in Life

- Children in care
- Maternity
- Complex Needs
- Speech and Language
- Emotional Health and Wellbeing
- Children's Mental Health
- Neurodevelopmental pathway

Example – Neurodevelopmental Pathway

Objective - To further develop the neuro-developmental pathway

Goal - Reduce waiting times for neurodevelopmental diagnostic assessment.

Initiatives:

- Review implemented neurodevelopmental pathways collaboratively with local authority partners in each area and other stakeholders
- Develop a business case to meet the complex needs of children and young people in Tees Valley in conjunction with the local authorities
- Review and jointly commission Family Support Services for families that have CYP with neurodevelopmental needs across Tees Valley

Living Well

Living Well

- Primary Care
- Mental Health, Learning Disabilities and Autism
- Elective Recovery
- Personalised Care
- Musculoskeletal services
- Diabetes
- Weight Management
- Cancer
- Respiratory
- Cardio Vascular Disease (CVD)

Example – Elective Recovery

Objective - Improving both waiting times and patients' experience of waiting for first outpatient appointments.

Goal - Eliminate waits of over 52 weeks for elective care

Initiatives:

- Maintain, monitor and further develop a programme of joint work to deliver a clinically led strategy for recovery and transformation
- Working with Clinical Networks and clinical leads to develop and implement standardised pathways that deliver high quality outcomes to patients
- Develop dedicated 'hubs' to provide additional elective capacity
- Undertake capacity and demand reviews with a particular focus on day case and theatre utilisation alongside waiting list validation and prioritisation.

Ageing Well

Ageing Well

- Admission Avoidance and Hospital Discharge
- Enhanced Health in Care Homes
- Urgent Community Response (UCR)
- Falls
- Palliative and End of Life Care

Example – Enhanced Health in Care Homes

Objective - People living in care homes have access to enhanced primary care and to specialist services and maintain their independence as far as possible by reducing, delaying or preventing the need for additional health and social care services.

Goal - Increase the number of care home workers who attend the commissioned education and training schemes.

Initiatives:

- Ensure there are effective forums in each of the localities where partners can discuss the services which will support care for people living in a care home.
- Co-produce a vision with care home providers and stakeholders for equitable access to education and training opportunities for the adult care home workforce to support delivery against national priorities including virtual wards (Hospital @ Home), discharge to assess and urgent community response (UCR).
- Co-produce a revised service specification with partners with key performance indicators and clear outcomes

Next steps for TV places plan

- The first TV places plan was produced in draft in June 2023 and following partner feedback was finalised in October 2023
- Working with system partners the TV places plan will be refreshed each year
- The refresh the plan for 24/25 will take place from April, following the submission of annual NHS plans
- The annual NHS plans will be driven by NHS planning guidance which as of 20th February 2024 has not yet been released
- NHS 24/25 priorities are likely to be in line with those identified in the 23/24 planning guidance:
 - improve ambulance response and A&E waiting times
 - reduce elective long waits and cancer backlogs, and improve performance against the core diagnostic standard
 - make it easier for people to access primary care services, particularly general practice



Involvement & Engagement

Our vision for involvement

- Our Communities and People Involvement and Engagement Framework sets out our ambition, which includes:
 - Valuing local relationships
 - Going to where people are
 - Supporting people to be meaningfully involved
 - Ensuring lived experience helps to inform service change and improvement
 - Using a range of involvement approaches, and taking opportunities to innovate



A listening organisation



Attending groups to hear what is important to people

Reaching out to seldom-heard groups and those who often have worse health outcomes, by working with the voluntary sector

Involving people when we plan, review or change services, listening to thoughts and experiences on what works well and what would make them better



Understanding what people are saying about our services by working with Healthwatch, complaints, queries raised through MPs, listening exercises (surveys, events etc.)

Patient Voice Committee

Involvement and Engagement Report

A new forum to:

- Champion robust and meaningful patient and public involvement
- Oversee involvement
- Monitor and review the ICB's fulfilment of its duties to involve
- Provide a forum to enable a focus on emerging feedback trends
- Coordinate the engagement of bespoke public perception research

Provides insight into the key patient and community engagement activities of the year.

Demonstrates how the involvement of patients and public has influenced decision making.

Covers topics such as shaping services, collaborative listening and working with our communities.

Available on the ICB's website, in the 'Get Involved' section.

Any Questions?