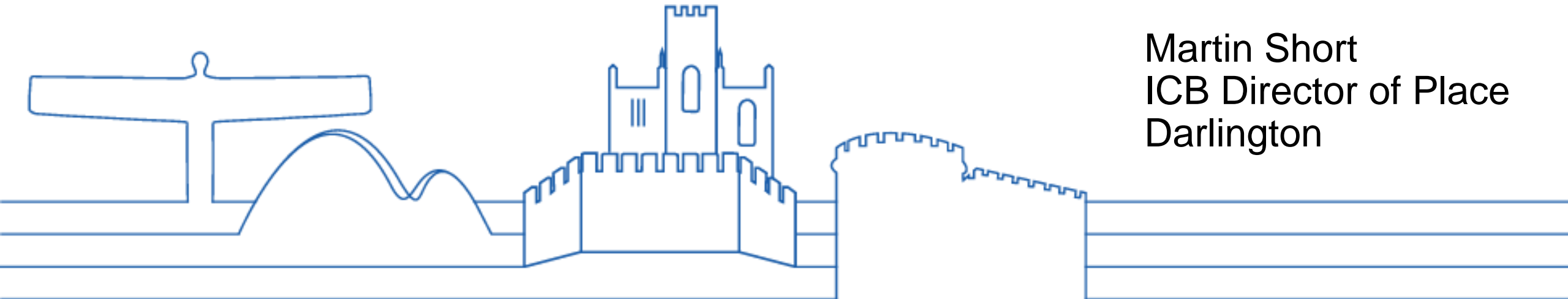


# **NHS Five Year Joint Forward Plan Update**



**Martin Short  
ICB Director of Place  
Darlington**

# Joint Forward Plan: National Guidance

- All Integrated Care Boards and partner NHS Trusts are required to publish a Joint Forward plan **covering 2023/24 – 2028/29**
- Joint Forward Plans will be **reviewed, updated, and published again each year** in March
- Aligned to system ambitions; building on existing plans; delivery focussed.
- Demonstrate how ICBs and NHS Trusts will:
  - arrange and/or provide NHS services to meet the population's physical & mental health needs
  - deliver the NHS Mandate and NHS Long Term Plan in the area
  - meet the legal requirements for ICBs.

# North East and North Cumbria Approach

Aligned to the ICP Better health and wellbeing for all strategy.



Longer &  
healthier  
lives



Fairer  
outcomes  
for all



Better  
health &  
care services



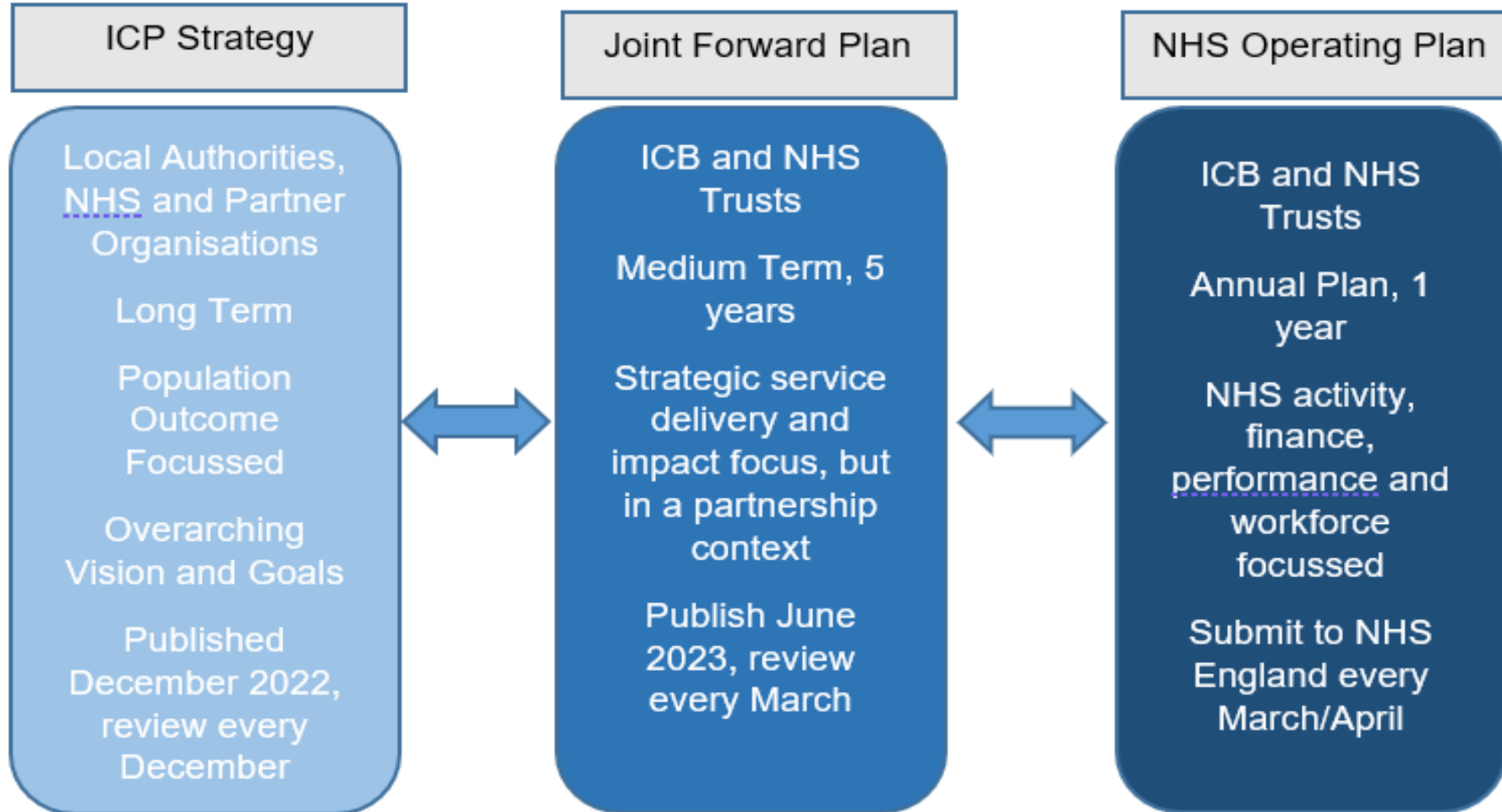
Giving children  
and young people  
the best  
start in life



Overview of action plans for each ICP Strategy Goal, Enabler and Service.

Overview of action plans for Local Authority Place or groups of Places.

# How the Plans fit together



# Operational Planning Requirements

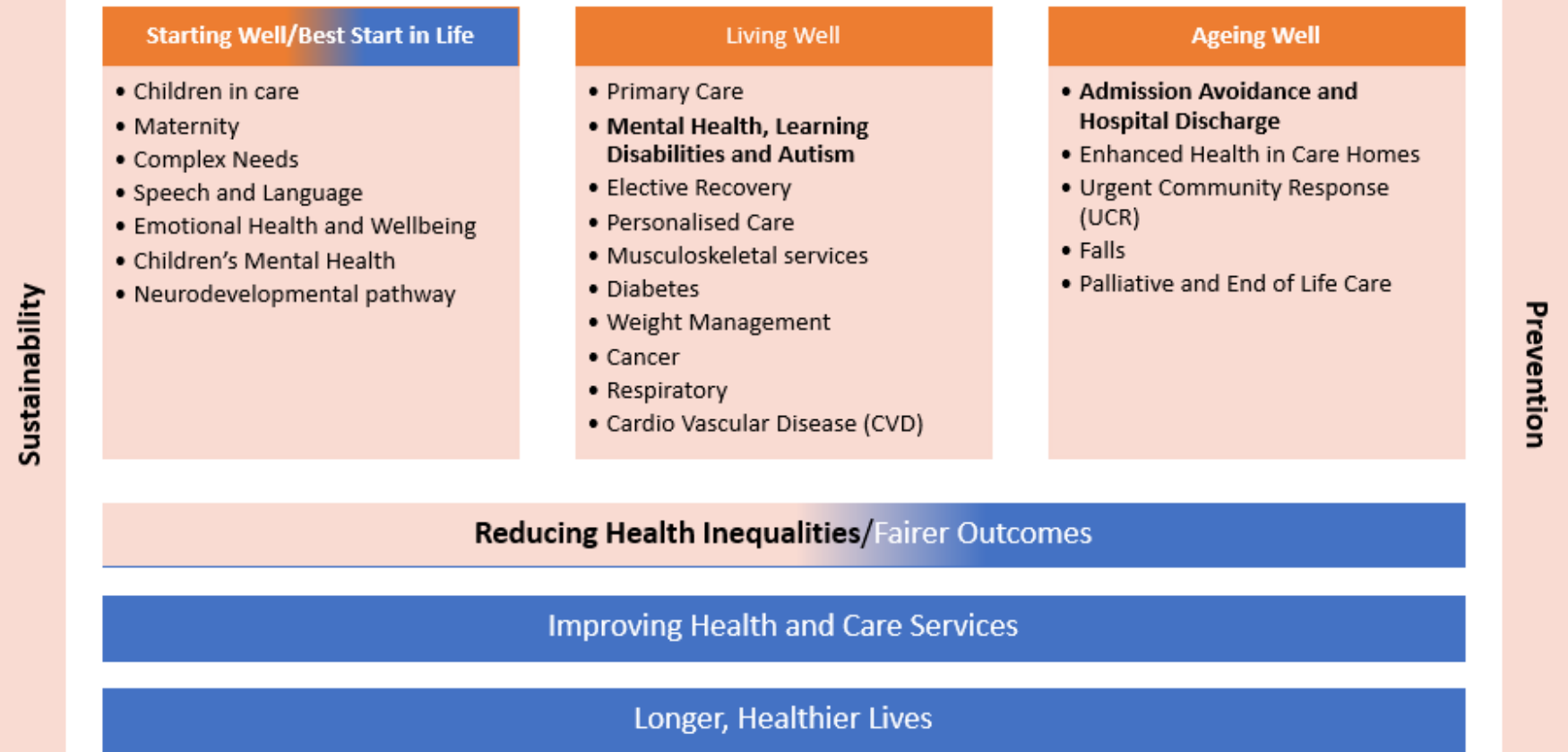
- Urgent and Emergency Care
- Elective Care and Diagnostics
- Cancer
- Mental Health
- People with Learning Disability and/or Autistic People
- Primary Care
- Workforce

# Tees Valley Priorities

- Over the past 18 months we have been working together as a Tees Valley ICP to develop a **collective understanding** of our plans and planning priorities “Planning to be different”
- We have collectively **identified a number of key pillars** that support delivery of our organisational, place and system plans
- Under these pillars we have identified the key programmes, initiatives and ambitions which we are seeking to **deliver as an ICB with our partners**
- Following feedback we have undertaken to more clearly align the pillars and programmes of work, to the core common elements of our collective Health and Wellbeing Strategies;
  - **Start Well**
  - **Live Well**
  - **Age Well**

# Tees Valley Strategic Context

- The Tees Valley Pillars along with the national NHS priorities and place priorities, are mapped to each place’s HWB strategies, and the NENC Integrated Care Strategy below.



Key:   Health and Wellbeing Strategy   Integrated Care Strategy  Tees Valley Pillars

# 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

- Integrated working between midwifery and health visiting
- Develop a jointly commissioned SALT service with performance metrics for Education and Health
- Ensure MHST's are fully operational and integrate well with EHWB services
- Getting Help Engagement
- Develop triage process for the pre-neurodevelopmental pathway
- Family Support Services for families that have CYP with neurodevelopmental needs.



# 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)

- Fuller Report:
  - Addressing the access challenge to deliver the vision of more proactive, anticipatory and preventative care delivered by Multidisciplinary Teams and Integrated Neighbourhood Teams
- Expand Community Mental Health Transformation to support increased number of patients
- Increase uptake of health checks for people with SMI and LD
- All aged crisis and liaison services
- Prevent and detect health conditions, and upon diagnosis ensure that conditions are managed and optimised effectively;
  - Atrial Fibrillation
  - heart failure
  - NHS Diabetes Prevention Programme
  - Develop the workforce to ensure accreditation to improve diagnostic spirometry reporting and management of patients
- Recovery from the effects of the pandemic in relation to Elective and Cancer care.
  - Eliminating long waits for elective care (over 65 weeks) by March 2024
  - Reducing the number of patients waiting over 62 days for cancer treatment
  - Increasing the numbers of patients who have a faster cancer diagnosis

# 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

- PEOLC
  - Reducing avoidable emergency admissions for people in the last year of life
  - Ensuring patients in the last year of life are identified to ensure is coordinated and personalised
- Comprehensive and coordinated community-based falls pathway
- Fuller recommendations for out of hospital care
  - Increasing effective reablement
  - Increase 2 hours response for UCR referrals
- Increasing Dementia diagnosis rates
  - Awareness

# Cross cutting themes

## Reducing Health Inequalities

- Understanding our communities
- Equity of access also equity of outcomes

## Prevention

- Primary
- Detection & Early intervention
- Management

## Sustainability

- Integration/system thinking
- Community assets
- Workforce

## Improving quality of services

- Experience
- Effectiveness
- Safety

# Timetable and Stakeholder Engagement

- Draft for stakeholder feedback: July
- Including: Integrated Care Partnership, NHS Foundation Trusts, Local Authorities, Health and Wellbeing Boards, Health Watch and the Voluntary, Community and Social Enterprise Sector.
- Revised final version: September 2023.
- Annual update published: each March beginning 2024.



**North East and  
North Cumbria**

**Any Questions?**