



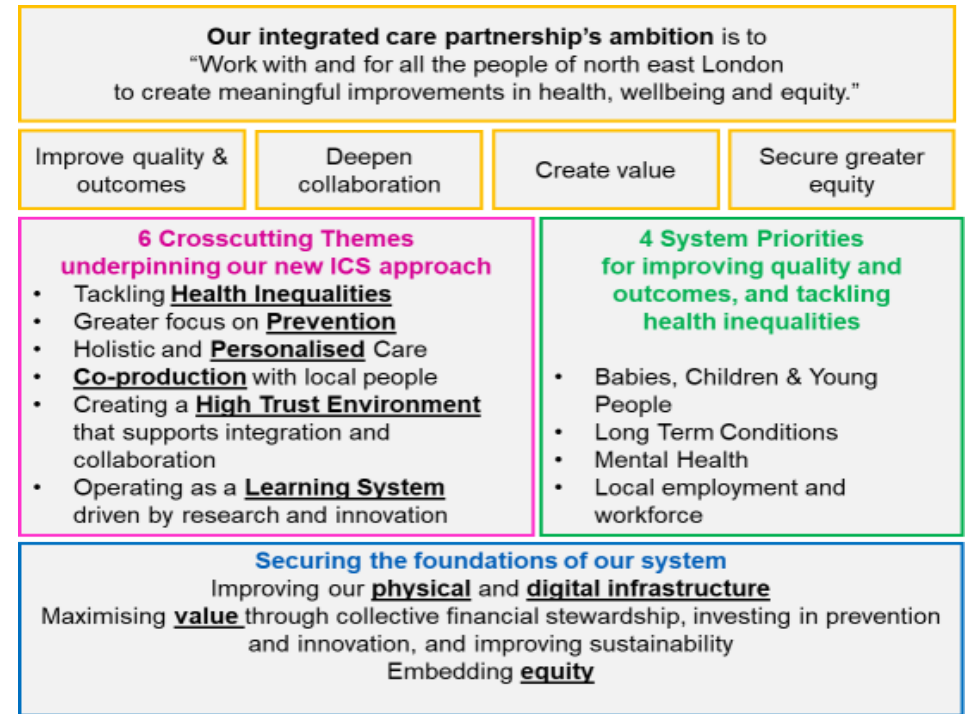
North East London

NEL ICS Joint Forward Plan Summary update

May 2023

Our plan and its key elements

- This Joint Forward Plan is north east London’s first five-year plan since the establishment of NHS NEL. We see this as our delivery plan for our **interim ICS strategy**, which is summarised in the diagram to the right.
- In this plan, we set out the **three strategic challenges** beyond our direct control (box below), and we describe **the challenges** that we face as a system in meeting the health and care needs of our local people, but also **the assets** we hold within our partnership.
- We know that the current model of health and care provision in north east London needs to adapt and improve to meet the needs of our growing and changing population and we describe the substantial portfolio of **transformation programmes** that are seeking to do just that.



Highlighting the distinct challenges we face as we seek to create a sustainable health and care system serving the people of north east London

In submitting our Joint Forward Plan, we are asking for greater recognition of three key strategic challenges that are beyond our direct control. The impact of these challenges is increasing, affecting our ability to improve population health and inequalities, and to sustain core services and our system over the coming years.

- **Poverty and deprivation** – which is more severe and widely spread compared with other parts of London and England, and further exacerbated by the pandemic and cost of living which have disproportionately impacted communities in north east London.
- **Population growth** – significantly greater compared with London and England as well as being concentrated in some of our most deprived and ‘underserved’ areas
- **Inadequate investment** available for the growth needed in both clinical and care capacity and capital development to meet the needs of our growing population

We have significant assets to draw from

North east London (NEL) has a growing population of over 2 million people and is a vibrant, diverse and distinctive area of London steeped in history and culture. The 2012 Olympics were a catalyst for regeneration across Stratford and the surrounding area, bringing a new lease of life and enhancing the reputation of this exciting part of London. This has brought with it an increase in new housing developments and improved transport infrastructure and amenities. Additionally the area is benefiting from investment in health and care facilities with a world class life sciences centre in development at Whitechapel and confirmed funding for the Whipp's Cross Hospital redevelopment. There are also plans for a new health and wellbeing hub on the site of St George's Hospital in Havering, making it an exciting time to live and work in north east London.

Our assets

- **The people of north east London** – who bring vibrancy and diversity, form the bedrock of our partnership, participating in our decisions and co-producing our work, they are also our workforce, provide billions of hours of care and support to each other and know best how to deliver services in ways which work for them.
- **Research and innovation** – Continuously improving, learning from international best practice and undertaking from our own research and pilots to evidence what works for our diverse communities/groups. We want to build on our work, strengthen what we have learnt to provide world-class services that will enhance our communities for the future.
- **Leadership** – our system benefits from a diverse and talented group of clinical and professional leaders who ensure we learn from and implement the best examples of how to do things, innovate and use data and evidence in order to continually improve. Strong clinical leadership is essential to lead communities, support us in considering the difficult decisions we need to make about how we use our limited resources and help set priorities that everyone in NEL is aligned to. Overall our ICS will benefit from integrated leadership spanning senior leaders to front line staff who know how to make things happen, the CVS who bring invaluable perspectives from ground level, and residents who know best how to do things in a way which will have real impact on people.
- **Financial resources** – we spend nearly £4bn on health services in NEL, and across our public sector partners in north east London, including local authorities, schools and the police, there are around £3bn more. By thinking about how we use these resources together, in ways which most effectively support the objectives we want to achieve at all levels of the system, we can ensure they are spent more effectively and in particular in ways which improve outcomes and reduce inequality in a sustainable way.
- **Primary care** - is the bedrock of our health system and we will support primary care leaders to ensure we have a multi-disciplinary workforce, which is responsive and proactive to local population needs and focused on increasing quality as well as supported by our partners to improve outcomes for local residents.

Our health and care workforce is our greatest asset

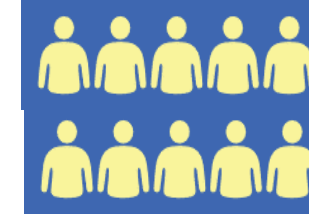
To be updated during April-June in line with People Strategy currently under development

Our health and care workforce is the linchpin of our system and central to every aspect of our new Integrated Care Strategy and Joint Forward Plan. We want them to work more closely across organisations, collaborating and learning from each other so that all of our practice can meet the standards of the best, working in multi-disciplinary teams so that the needs of residents, not the way organisations work, are central and where necessary stepping outside organisational boundaries to deliver services closer to communities.

Our staff will be able to serve the population of NEL most effectively if they are treated fairly, and representative of our local communities at all levels of our organisations. Many of our staff come from our places already and we want to increase this further.

Our workforce is critical to transforming and delivering the new models of care we will need to meet rising demand from a population that is growing rapidly with ever more complex health and care needs. We must ensure that our workforce has access to the right support to develop the skills needed to deliver the health and care services of the future, the skills to adapt to new ways of working, and potentially new roles.

Our ICS People Strategy will ensure there is a system wide plan underpinning the delivery of our new Integrated Care Strategy and Joint Forward Plan focused on increasing support for our current workforce, strengthening the behaviours and values that support greater integration, and collaboration across teams, organisations and sectors and contributing to the social and economic development of our local population through upskilling and employing more local people.



There are almost one hundred thousand staff working in health and care in NEL; and our employed workforce has grown by 1,840 in the last year.

Our workforce includes -

- Over 4,000 people working in general practice with 3.7% growth in our workforce over the last year
- 46,000 people working in social care
- 49,000 people working in our trusts

There are opportunities to realise from closer working between health, social care and the voluntary and community sector

Voluntary, Community, and Social Enterprise (VCSE) organisations are essential to the planning of care and supporting a greater shift towards prevention and self-care. They work closely with local communities and are key system transformation, innovation and integration partners.

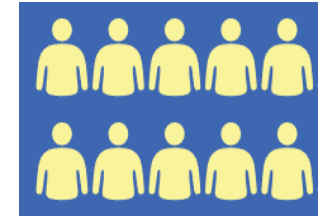
In NEL we are supporting the development of a VCSE Collaborative to create the enabling infrastructure and support sustainability of our rich and diverse VCSE in NEL, also ensuring that the contribution of the VCSE is valued equally.

Social care also plays a crucial role in improving the overall health and well-being of local people including those who are service users and patients in north east London. Social care involves the provision of support and assistance to individuals who have difficulty carrying out their day-to-day activities due to physical, mental, or social limitations. It can therefore help to prevent hospital admissions and reduce the length of hospital stays. This is particularly important for elderly patients or those with chronic conditions, who may require long-term social care support to maintain their independence and quality of life.

In north east London 75% of elective patients discharged to a care home have a length of stay that is over 20 days (this compares to 33% for the median London ICS).

The **work of local authorities more broadly including their public health teams** as well as education, housing and economic development work to address the wider determinants of health such as poverty, social isolation and poor housing conditions, which as described above are significant challenges in north east London, is critical in addressing health and wellbeing outcomes and inequalities.

In our strategy engagement we heard of the desire to accelerate integration across all parts of our system to support better access, experience and outcomes for local people. We heard about the opportunities to support greater multidisciplinary working and training, the practical arrangements that need to be in place to support greater integration including access to shared data, and the importance of creating a high trust and value-based environment which encourages and supports collaboration and integration.



There are **more than 1,300 charities operating across north east London**, many either directly involved in health and care or in areas we know have a significant impact on the health and wellbeing of our local people, such as reducing social isolation and loneliness, which is particularly important for people who are vulnerable and/or elderly.

Thousands of informal carers play a pivotal role in our communities across NEL supporting family and friends in their care, including enabling them to live independently.

The key challenges facing our health and care services

Partners in NEL are clear that we need a **radical new approach to how we work as an integrated care system** to tackle the challenges we are facing today as well as securing our sustainability for the future. Our Integrated Care Strategy highlights that a shift in focus upstream will be critical for improving the health of our population and tackling inequalities. The health of our population is at risk of worsening over time without more effective **prevention** and **closer working with partners** who directly or indirectly have a significant impact on healthcare and the health and wellbeing of our local people, such as local authority partners and VCSE organisations.

Two of the most pressing and visible challenges our system faces today which we must continue to focus on are the long waits for accessing **same day urgent care**; and a large backlog of patients waiting for **planned care**. Provision of urgent care in NEL is more resource intensive and expensive than it needs to be and the backlog for planned care, which grew substantially during Covid, is not yet coming down, as productivity levels are only just returning to pre-pandemic levels. Both areas reflect pressures in other parts of the system, and themselves have knock-on impacts.

We currently have a **blend of health and care provision for our population that is unaffordable**, with a significant underlying deficit across health and care providers (in excess of £100m going into 23/24). If we simply do more of the same as our population grows our financial position will worsen further and we will not be able to invest in the prevention we need to support sustainability of our system.

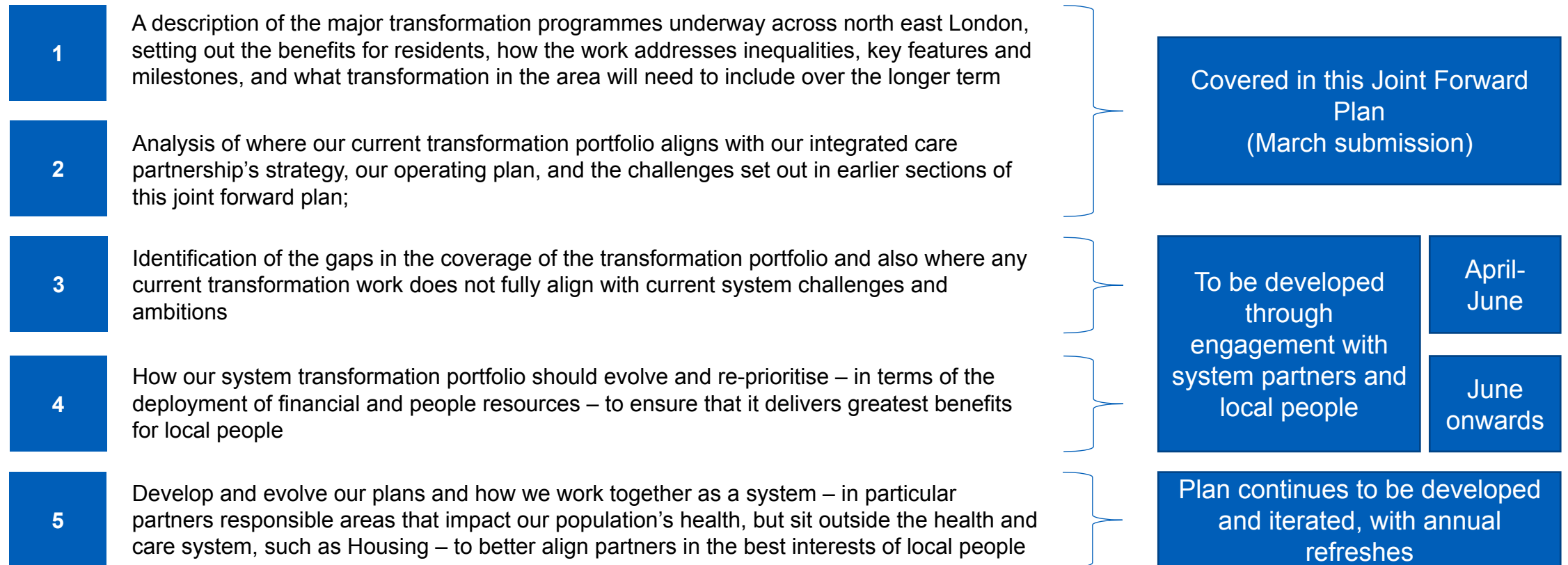
To address these challenges and enable a greater focus upstream, it is necessary to focus on **improving primary and community care services**, as these are the first points of contact for patients and can help to prevent hospital admissions and reduce the burden on acute care services. This means investing in resources and infrastructure to support primary care providers, including better technology, training and development for healthcare professionals, and better integration of primary care with community services. In addition, there is a need for better management and **support for those with long-term conditions** (almost a third of our population in NEL). People with LTCs are often high users of healthcare services and may require complex and ongoing care. This can include initiatives such as care coordination, case management, and self-management support, which can help to improve the quality of care, prevent acute exacerbation of a condition and reduce costs.

Achieving this will require our workforce to grow, which will be a key challenge, with high numbers of vacancies across NEL, staff turnover of around 23% and staff reporting burnout, particularly since the COVID-19 pandemic.

Our transformation programme sets out how partners across north east London are responding to the challenges described above. It describes how they are contributing to our system priorities by considering four categories of improvement: **1) our core objectives of high-quality care and a sustainable system; 2) our NEL strategic priorities; 3) our supporting infrastructure; and 4) local priorities within NEL.**

Current plans are a first step towards building a sustainable, high quality health and care system, but we know there is more to do

We recognise that existing programmes will not be sufficient to meet all the challenges we face as a system, we therefore intend to use this plan to identify the gaps and to engage system partners and our local people on how best to redirect limited resources to have greatest impact



What we will do over the coming three months

- We have involved an extensive range of people in the development of our Joint Forward Plan and have been guided by our ICS Strategy Task & Finish Group to ensure partnership co-design.
- We now embark on a wider engagement with all our partners across the health and care landscape in north east London. This will involve all our Place-based Partnerships, our Provider Collaboratives and the Health and Well-being Boards. Furthermore, we will also engage with other key stakeholders such as our voluntary and community sector, our care providers as well as local residents through our Big Conversation.
- Part of the conversation will be focussed on this year's Joint Forward Plan to ensure it represent our whole system plan. In addition, we want to explore how we learn from this year's process to enable our joint planning to evolve over the year and informs how we develop the next year's Joint Forward Plan. This will be the start of a continuous dialogue and process across our partnership towards operating fully as a learning system.
- We will use this engagement to test the draft Joint Forward Plan, identify if there are any gaps and ensure it is aligned with the priorities in our Places and our wider system.
- We are looking to refine the Joint Forward Plan further by elaborating more on our emerging operating model across the ICS and co-design our future strategic planning approach.
- We will publish our Joint Forward Plan in June 2023 and share it with NHS England.

The transformation portfolio: Tower Hamlets place programmes

Tower Hamlets place programmes				
	Area	Programme	Lead system partner	Reference pack page numbers
Recovering our core services and improving productivity	Urgent and emergency care	Out of hospital - Unplanned Care, Admission Avoidance	Tower Hamlets Place Partnership	14
		Out of hospital - Unplanned Care (Demand & Capacity)	Tower Hamlets Place Partnership	17
	Community health services	Out of Hospital Unplanned Care Specialist Pathway Programme (Stroke, Neuro and EOLC)	Tower Hamlets Place Partnership	26
ICS flagship priorities	Babies, children and young people – to make north east London the best place to grow up, through early support when it is needed and the delivery of accessible and responsive services	Born well, grow well	Tower Hamlets place partnership	49
	Mental health – to transform accessibility to, experience of and outcomes from mental health services and well-being support for the people of north east London	Mental health	Tower Hamlets place partnership	77
Additional work led by the place partnership	Tower Hamlets	Living well	Tower Hamlets place partnership	112
		Promoting independence	Tower Hamlets place partnership	113
Lead across Tower Hamlets, Newham and Waltham Forest	Long-term conditions – to support everyone living with a long-term condition in north east London to live a longer, healthier life and to work to prevent conditions occurring for other members of our community	Diabetes	Tower Hamlets, Newham and Waltham Forest place partnerships	62
		Cardiology	Tower Hamlets, Newham and Waltham Forest place partnerships	63
		Respiratory	Tower Hamlets, Newham and Waltham Forest place partnerships	64

The transformation portfolio: System programmes impacting on Tower Hamlets

NEL and Collaborative programmes affecting Tower Hamlets				
	Area	Programme	Lead system partner	Reference pack page numbers
Recovering our core services and improving productivity	Urgent and emergency care	Urgent and emergency care	Acute provider collaborative	8
		Enhanced health in care homes	Community collaborative	9
		Ageing Well (focus on urgent community response)	Community collaborative	10
	Community health services	Digital community services	Community collaborative	19
		End-of-life care	Community collaborative	20
		Post-covid care	Community collaborative	21
		Proactive care / Anticipatory care	Community collaborative	22
		Virtual wards	Community collaborative	23
		Community Health Service Transformation	Community collaborative	24
	Primary Care	Digital First	Primary care collaborative	28
		Same-day access	Primary care collaborative	29
		Tackling unwarranted variation, levelling up, and addressing inequalities	Primary care collaborative	30
	Planned care and diagnostics	Planned care	Acute provider collaborative	31
	Cancer	Cancer	Acute provider collaborative	32
	Maternity	Maternity	Acute provider collaborative	33
		Maternity	NHS NEL	34
Maternity safety and quality assurance programme		NHS NEL	35	

The mapping of these programmes are based on the implied understanding that system wide programmes (collaborative or NEL) impact on all places across NEL

The transformation portfolio: System programmes impacting on Tower Hamlets

NEL and Collaborative programmes affecting Tower Hamlets				
ICS flagship priorities	Area	Programme	Lead system partner	Reference pack page numbers
	Babies, children and young people – to make north east London the best place to grow up, through early support when it is needed and the delivery of accessible and responsive services	Developing clearly defined prevention priorities for BCYP	NHS NEL	36
		Community-based care	NHS NEL	37
		Vulnerable babies, children and young people	NHS NEL	38
		Babies, children and young people	Community collaborative	39
	Long-term conditions – to support everyone living with a long-term condition in north east London to live a longer, healthier life and to work to prevent conditions occurring for other members of our community	CVD	NHS NEL	51
		Diabetes	NHS NEL	52
		Neurosciences	NHS NEL	53
		Renal	NHS NEL	54
		Respiratory	NHS NEL	55
		HIV	NHS NEL	56
		Hepatitis and liver	NHS NEL	57
		Haemoglobinopathy	NHS NEL	58
	Mental health – to transform accessibility to, experience of and outcomes from mental health services and well-being support for the people of north east London	Perinatal mental health improvement network	Mental health, learning disabilities, and autism collaborative	68
		IAPT improvement network	Mental health, learning disabilities, and autism collaborative	69
		Improving health outcomes and choice for people with severe mental illness	Mental health, learning disabilities, and autism collaborative	70

The mapping of these programmes are based on the implied understanding that system wide programmes (collaborative or NEL) impact on all places across NEL

The transformation portfolio: System programmes impacting on Tower Hamlets

NEL and Collaborative programmes affecting Tower Hamlets					
ICS flagship priorities	Area	Programme	Lead system partner	Reference pack page numbers	
ICS flagship priorities	Mental health – to transform accessibility to, experience of and outcomes from mental health services and well-being support for the people of north east London	Improving outcomes and experience for people with dementia and their carers	Mental health, learning disabilities, and autism collaborative	71	
		Crisis improvement network	Mental health, learning disabilities, and autism collaborative	72	
		Children and young people’s mental health improvement network	Mental health, learning disabilities, and autism collaborative	73	
	Employment and workforce – to work together to create meaningful work opportunities and employment for people in north east London now and in the future	Workforce transformation	NHS NEL	79	
		Infrastructure	Digital Infrastructure	NHS NEL	81 - 84
		Physical infrastructure	NHS NEL	85	
Additional work led by provider collaboratives	Acute provider collaborative	Critical care	Acute provider collaborative	86	
		Research and clinical trials	Acute provider collaborative	87	
		Specialist services	Acute provider collaborative	88	
	Mental health, learning disabilities, and autism collaborative	Learning disabilities and autism improvement programme	Mental health, learning disabilities, and autism collaborative	89	
		Lived experience leadership programme	Mental health, learning disabilities, and autism collaborative	90	
Additional work led by NHS NEL on behalf of the system	Prevention and health inequalities	Tobacco dependence treatment programme	NHS NEL	119	
		NEL homelessness programme	NHS NEL	120	
		Anchors programme	NHS NEL	121	
		Net zero (ICS Green Plan)	NHS NEL	122	
		NEL refugees and asylum seeker working group	NHS NEL	123	
	Unplanned care	Discharge pathways programme	NHS NEL	124	
	Pharmacy and Medicine Optimisation	Pharmacy and Medicine Optimisation	NHS NEL	125	

The mapping of these programmes are based on the implied understanding that system wide programmes (collaborative or NEL) impact on all places across NEL