

Overview

Suffolk and North East Essex ICS has taken an innovative and agile approach to tackling health inequalities as a whole system, adopting an outcome-based approach to ICS programmes that has set them in good stead to support communities affected by COVID-19.

What the partnership faced

The ICS footprint includes some areas in Suffolk and North East Essex where people experience significant health inequalities. In addition, data shows that outcomes for some people are getting worse. It was agreed that the approach to service planning and delivery across the whole system should be more focused on achieving better outcomes for the population.

What the partnership did

The result was the development of a five-year plan with an overarching primary higher ambition of reducing health inequalities, supported by seven other higher ambitions co-produced with partners and agreed across the whole of the ICS.

These higher ambitions were closely linked to the priorities developed by Essex and Suffolk's health and wellbeing boards. For every identified outcome, the benefit that the population needs to drive that outcome, and the enablers to be delivered by the ICS partners, were identified.

Effective governance

The ICS works across multiple complimentary governance structures in order to embrace the complexity of system working necessary to deliver the plan.

- Three local alliances have formed, each bringing together local health and care partners in a local geography. The alliances provide the focus for planning and delivering meaningful integrated care and services to the local population, working closely with local communities.
- Two joint (NHS and local government) health and wellbeing boards to whom the ICS and neighbouring systems relate.
- Integrated neighbourhood and care closer to home teams, which bring together physical and mental health and social care practitioners, working closely with GPs and primary care networks, within a locality to provide a single coordinated response.

'Thinking Differently' approach

Key to the ICS's working is a mindset that encourages stakeholders to consider new opportunities and identify the right action to achieve the ambitions set out in the strategic plan. The intention is to embed this ethos into the plan. It consists of four key elements:

- From closed to open – relating to data, information and access.
- From services to relationships – moving from 'what is the matter with you?' to 'what matters to you?'
- From organisations to networks – embodied in the structures above and promoted in integrated working.
- From problems to assets – looking more widely and creatively to identify resources, connections and opportunities.

Realising Ambition initiative

An example of the Thinking Differently approach in action is the Realising Ambition programme and grants. In 2018, Suffolk and North East Essex awarded £2 million in grants through Essex and Suffolk's Community Foundations to support local neighbourhood action on health inequalities and other system ambitions. This programme supports 80 small voluntary, community and social enterprise (VCSE) groups that are making a real difference to local communities. The Community Foundations are currently collecting evidence of the outcomes and impact of the grants made to embed learning within the ICS and alliances. The initiative has already supported almost 23,000 people.

The Realising Ambition initiative has also helped foster a vibrant and active voluntary sector across the ICS, including in Tendring, the most deprived locality in the country. Despite no large charities being registered in the area, a radical volunteering approach taken by CVS Tendring has led to numerous pop-up voluntary groups being established, working through volunteers in the community.

The Clacton Health Campus is an example of joined-up thinking on health inequalities. Plans are being developed to build a Workforce Academy in one of the most deprived areas of the ICS, which will provide training and careers for young people, support recruitment for the local health and care workforce and help regenerate the community.

Tackling inequalities during the COVID-19 pandemic

According to the ICS, COVID-19 'only amplifies existing inequalities still further.' Opportunities including co-delivery with the active VCSE sector and the Thinking Differently approach have established a solid foundation from which to tackle the growing inequalities that are emerging from COVID-19.

- Examples of partnership work with community stakeholders include holiday clubs that have been set up to support local schoolchildren, and downloadable art activity packs produced by local gallery Firstsite, working with artists including Anthony Gormley and Grayson Perry.
- The ICS has used the Thinking Differently approach to better connect people in care homes and hospitals with their carers, families and friends. Examples include facilitating the use of technology (Alcove, Zoom, Facebook, Skype, smart phones) and also letters to allow care home residents to stay in touch with their loved ones.
- A series of Thinking Differently Together online events have been held to highlight inequalities, which have included a focus on the impact of COVID-19 on local people. There have been events focusing on carers, BAME communities and health inequalities, and the potential for local public sector organisations to act as anchors to help tackle deprivation locally. These events have been well attended by a wide range of local partners and will continue to be held regularly in the coming months.

Useful learning for other organisations

- Equal partnership is at the heart of the ICS, reflected in the approach to developing the plan, the nature of governance structures and delivery of key objectives. The 'golden triangle' of the NHS, local government and the VCSE sector genuinely have an equal role in leading the whole system.
- The very different cultures and ways of working that the NHS, local government and the VCSE bring to the table has raised challenges, for example, in the awarding of transformation funds to local voluntary sector. However, the breadth and diversity that the partnership contains enables them to think and act very differently on health inequalities.



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