



**FOR PUBLICATION**

**DERBYSHIRE COUNTY COUNCIL**

**IMPROVEMENT AND SCRUTINY COMMITTEE – HEALTH**

**6<sup>th</sup> March 2023**

**Derby and Derbyshire Integrated Care Strategy**

## **1. Purpose**

- 1.1 The draft strategy is being shared with the Committee for information. It was supported by the Integrated Care Partnership on 8<sup>th</sup> February and a final version of the strategy will be produced for consideration by the ICP in April 2023.
- 1.2 The purpose of the Derby and Derbyshire Integrated Care Strategy is to set out how Local Authority, NHS, Healthwatch, and Voluntary Sector organisations will work together to improve the health of Derby and Derbyshire citizens, and further the transformative change needed to tackle system health and care challenges.

## **2. Information and Analysis**

- 2.1 The Draft Strategy has been compiled in line with the guidance available on the Gov.UK website - [Guidance on the preparation of integrated care strategies](#). The approach to addressing the legal requirements included within this guidance is summarised in the Draft Strategy.
- 2.2 The Strategy is informed by and will complement joint strategic needs assessments (JSNAs) and joint local health and wellbeing strategies. The Health and Wellbeing Boards remain responsible for producing these and will continue to have a vital role at Place.

- 2.3 A range of senior colleagues from the NHS, local authorities, Healthwatch and the VCSE sector have been part of working groups to develop the brief, framework, and approach for the Draft Strategy. This broad involvement has been very helpful in testing the proposed content and whether it is framed in a way that aligns with other system strategies and plans.
- 2.4 The Draft Strategy recognises that the current environment is challenging, and that we cannot expect key constraints to diminish in the near future. However it notes that there is much more that can be done within these constraints, by working differently, and that this Strategy will seek to identify how we can exploit these opportunities, building on examples of where we do things really well in Derby and Derbyshire and to understand how actions, partnerships and behaviours that have led to successful outcomes, can accelerate our plans for integrated care.
- 2.5 Four strategic aims for integrated care in Derby and Derbyshire were approved by the ICP Board in December 2022. These are pivotal to the development of the Strategy:
- Prioritise prevention and early intervention to avoid ill health and improve outcomes
  - Reduce inequalities in outcomes, experience, and access
  - Develop care that is strengths based and personalised
  - Improve connectivity and alignment across Derby and Derbyshire, to ensure people experience joined up care, and to create a sustainable health and care system.
- 2.6 The population health and care needs of Derby and Derbyshire are a fundamental driver for the Strategy. The Draft Strategy includes a summary of Joined Up Care Derbyshire (JUCCD) priority outcomes and indicators, which focus on increasing life expectancy, increasing healthy life expectancy, and reducing inequalities. These are based upon development work within the system, our JSNAs and Health and Wellbeing Strategies and align with outcomes included in Local Authority plans. A section is also included on proposals relating to health protection arrangements.
- 2.7 A main thrust of the Draft Strategy is the need to focus on enabling actions that are critical to the development of high quality and sustainable integrated care and our response to the stated population health and care needs. These actions are summarised in the document under enabling functions such as workforce, digital and data, and

population health management, as well as broader themes including governance and system-wide organisational development.

### **3. Alternative Options Considered**

- 3.1 Senior Responsible Owners covering the Start Well, Stay Well, and Age/ Die Well domains considered other options for inclusion as key areas of focus for the Strategy. The three proposals included in the Draft Strategy have been collated following these considerations.

### **4. Implications**

- 4.1 There are three key areas of focus proposed in the Draft Strategy that span prevention, early intervention and service delivery. They are not framed as priorities, as they are not necessarily regarded as being more important than other topics. Instead they have been chosen by senior responsible owners from across the System as ideal areas to test our strategic aims and ambitions for integrated care, in response to population health and care needs. They are categorised under the headings of Start Well, Stay Well, and Age/ Die Well:
- Start Well – To improve outcomes and reduce inequalities in health, social, emotional, and physical development of children in the early years (0-5) via school readiness.
  - Stay Well - To improve prevention and early intervention of the three main clinical causes of ill health and early death in the JUCD population - Circulatory disease, respiratory disease and cancer.
  - Age/ Die Well - To enable older people to live healthy, independent lives at their normal place of residence for as long as possible. Integrated and strength based services will prioritise health and wellbeing, help people in a crisis to remain at home where possible, and maximise a return to independence following escalations.

### **5. Consultation**

- 5.1 The methodology for developing community insight is summarised in the Draft Strategy, along with a commitment to develop standard processes to ensure that when JUCD strategies, developments and change programmes are being formulated leaders demonstrate how they have used both JUCD data on population outcomes/ indicators and insights to shape their objectives, engagement approach and expected benefits.
- 5.2 A “System Insights Group” and an “Engagement Workstream for the ICS Strategy” are in place with representation from health, local authorities, Healthwatch and the VCSE Alliance. Under the workstream

an Insights document has been produced to collate high-level themes drawn from existing engagement and insights. This forms part of the JUCD insight's library.

- 5.3 These themes and the insights included were considered by Senior Responsible Officers and teams when they selected their key areas of focus for this Strategy under the headings - Start Well, Stay Well and Age Well.
- 5.4 The Draft Strategy was presented with information on the three key areas of focus with the wider public via the Derbyshire Dialogue Forum (15 February 2023) and will be shared with local organisations and forums through a series of presentations February – March.
- 5.5 The proposed next steps are summarised as follows:
- Co-produce I/ we statements with people with lived experience to help communicate the ambitions of the Strategy and the key areas of focus, ready for the final strategy in April.
  - Hold online engagement events for each of the 3 areas allowing leads to present information in an accessible way and invite comments about what actions are needed to achieve the ambitions set out and capture these to inform plans.
  - Support these conversations through our Online Engagement Platform, with opportunities to continue to ask questions and make suggestions.
  - If appropriate create surveys for each area to gather feedback from a wider cohort of people targeted as required.
  - Facilitate and support conversations between programme leads and local community groups who express interest in the key areas of focus, helping to ensure we do not just rely solely on people having digital access, using existing groups and forums where possible, with support from the VCSE sector.
  - Ensure feedback/ insight from these conversations is listened to, considered, and actioned through the implementation plans for the three key areas of focus.

## **6. Background Papers**

- 6.1 None.

## **7. Appendices**

7.1 Draft Derby and Derbyshire Integrated Care Strategy.

## **8. Recommendation(s)**

That the Committee:

1) Note the Draft strategy and the actions underway to produce a final version; and

b) Provide any feedback on the approach.

## **9. Reasons for Recommendation(s)**

9.1 To ensure the Scrutiny Committee is aware of and has the opportunity to comment on the Integrated Care System Strategy development.

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