

Appendix

- **Statutory requirements of plans - checklist**
- **Glossary**

Statutory requirements of plans- checklist (1) South East London

| Legislative requirement | Description | SEL ICB Response |
|--|---|---|
| Describing the health services for which the ICB proposes to make arrangements | The plan must describe the health services for which the ICB proposes to make arrangements in the exercise of its functions. | Our Joint Forward Plan sets out how SEL ICB will meet the health needs of our population, across key pathway and population groups, reflecting work done at a system level and within our boroughs driven by our understanding of population health need, patient/public feedback and service challenges and opportunities. Our plans focus on all areas of ICB commissioned services with an integrated borough and end to end care pathway focus. |
| Duty to improve quality of services | Each ICB must exercise its functions with a view to securing continuous improvement in: <ul style="list-style-type: none"> the quality of services provided to individuals for or in connection with the prevention, diagnosis or treatment of illness outcomes including safety and patient experience. | Please see Quality section of our Joint Forward Plan. More work is needed to develop health outcome related metrics and this is part of our workplan for the next year for the two SEL ICB quality committees and will be reflected in future refreshes of our Joint Forward Plan alongside work to improve quality, safety and patient experience. |
| Duty to reduce inequalities | Each ICB must have regard to the need to (a) reduce inequalities between persons with respect to their ability to access health services and (b) reduce inequalities between patients with respect to the outcomes achieved for them by the provision of health services. There is also a duty to have regard to the wider effects of decisions on inequalities. The duty to promote integration requires consideration of securing integrated provision across health, health-related and social services where this would reduce inequalities in access to services or outcomes achieved. | SEL ICB is committed to delivering high-quality healthcare for all, through equitable access, excellent experience and optimal outcomes. Reducing inequalities is a golden thread throughout our JFP and contains specific objectives and priority actions to achieve this. Our plans set out our focus on the delivery and further development of integrated, holistic and personalised care. In addition our medium term financial strategy sets out an approach through which we will secure dedicated additional investment to target our work on reducing inequalities. SEL ICB complies with the requirements of the Public Sector Equality Duty, section 149 of the Equality Act 2010. |
| Duty to promote involvement of each patient | Each ICB must promote the involvement of patients, and their carers and representatives (if any), in decisions that relate to (a) the prevention or diagnosis of illness in the patients or (b) their care or treatment. | SEL ICB has a programme of work to implement the Comprehensive Model for Personalised Care which promotes the involvement of each patient in decisions about prevention, diagnosis and their care or treatment. |

| Legislative requirement | Description | SEL ICB Response |
|--|---|--|
| Duty as to patient choice | Each ICB must act with a view to enabling patients to make choices with respect to aspects of health services provided to them. | SEL ICB is committed to enabling patient choice and has a patient choice policy to underpin this commitment. All work and decisions around commissioning plans, contracting arrangements and delivery of services are completed within this framework, with a wide ranging portfolio of contracted providers to embed choice for patients. Engagement insights and coproduction are embedded into service development processes and we have a Working With People and Committees Strategy recently developed which provides a framework for how we engage, work with and coproduce plans with partners. |
| Duty to obtain appropriate advice | Each ICB must obtain appropriate advice to enable it to effectively discharge its functions from persons who (taken together) have a broad range of professional expertise in (a) the prevention, diagnosis or treatment of illness and (b) the protection or improvement of public health. | The ICB has a range of structure for engagement and obtaining advice from partners e.g. Healthwatch and voluntary, community and social enterprise sector (VCSE). The formal governance forums also include a wide range of perspectives including clinical and care professionals to ensure appropriate advice is sought and considered in decision making processes. |
| Duty to promote innovation | Each ICB must promote innovation in the provision of health services (including in the arrangements made for their provision). | SEL ICB works closely with a range of partners to promote local innovation. This includes work with Kings Health Partners and our AHSN, to support adoption and spread, with further work to develop our ICB approach to research and innovation. |
| Duty in respect of research | Each ICB must facilitate or otherwise promote (a) research on matters relevant to the health service and (b) the use in the health service of evidence obtained from research | SEL has a number of large provider organisations that are heavily involved in research and adoption of practice based on evidence generated through research, with clear links to our service planning and delivery to ensure we are optimising the opportunities to embed evidence based practice. |
| Duty to promote education and training | Each ICB must have regard to the need to promote education and training so as to assist the Secretary of State and Health Education England (HEE) in the discharge of the duty under that section. | Education and training is an essential lever of SEL's integrated workforce strategy. A summary of the workforce strategy and how it supports delivery of services in the short, medium and long term is set out in our JFP. |
| Duty to promote integration | Each ICB must exercise its functions with a view to ensuring that health services are delivered in an integrated way and that their provision is integrated with that of health related or social care services, where this would: <ul style="list-style-type: none"> • improve quality of those services • reduce inequalities in access and outcomes. | SEL ICB is committed to integrating health services, social care and health-related services to improve quality and reduce inequalities. Our JFP sets out actions to progress local integration through local care partnerships, building on our ICS strategy and JLHWS ambitions. We have a range of provider collaboratives to support horizontal collaboration and integrated approaches. Our care pathway programmes seek to ensure integrated end to end care pathways and our enabler board joined up approaches to enabling infrastructure, recognising there are further opportunities across all these areas. |

Statutory requirements of plans- checklist (3) South East London

| Legislative requirement | Description | SEL ICB Response |
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| Duty to have regard to wider effect of decisions | In making decisions about the provision of healthcare, an ICB must consider the wider effects of its decisions, also known as the ‘triple aim’ of (a) health and wellbeing of the people of England (including by reducing inequalities with respect to health and wellbeing), (b) quality of healthcare services for the purposes of the NHS (including by reducing inequalities with respect to the benefits obtained by individuals from those services) and (c) sustainable and efficient use of resources by NHS bodies. | SEL ICB is committed to the “triple aim” and our JFP includes sections covering our plans to reduce inequalities with respect to health and wellbeing, improve quality of services and ensure sustainable and efficient use of resources by NHS bodies. |
| Duty as to climate change etc | Each ICB must have regard to the need to (a) contribute towards compliance with (i) section 1 of the Climate Change Act 2008 (UK net zero emissions target) and (ii) section 5 of the Environment Act 2021 (environmental targets), and (b) adapt to any current or predicted impacts of climate change identified in the most recent report under section 56 of the Climate Change Act 2008. | SEL ICB is committed to the green agenda, minimising our environmental impact and achieving net zero. The sustainability section of our plan sets out the key actions as part of our plan. |
| Duty to involve the public | ICBs and partner trusts have a duty to involve people and communities in decisions about the planning, development and operation of services commissioned and provided. | SEL ICB has undertaken significant public engagement through the development of our ICS strategy and ICB JFP, as set out in the engagement section of our plan. The ICB has policies which guide our work on public engagement and building effective partnerships with people and communities, including the Working With People and Communities Strategy |
| Addressing the particular needs of children and young persons | The plan must set out any steps that the ICB proposes to take to address the particular needs of children and young persons under the age of 25. | Our JFP includes a section on our plans related to Children and Young People (CYP). |
| Addressing the particular needs of victims of abuse | The plan must set out any steps that the ICB proposes to take to address the particular needs of victims of abuse (including domestic and sexual abuse, whether children or adults). It must have due regard to the provisions of the Domestic Abuse Act 2021 and accompanying statutory guidance, and relevant safeguarding provisions. | Addressing the needs of victims of abuse is covered within the CYP section of our JFP. SEL ICB safeguarding policy covers the provisions of the Domestic Abuse Act 2021 and accompanying statutory guidance, and relevant safeguarding provisions. As part of our statutory duties the ICB is committed to delivery of the Safeguarding Accountability and Assurance Framework and the following safeguarding programmes; Child Protection Information Systems, Female Genital Mutilation, Prevent, Working Together, Modern Slavery and Human Trafficking, Domestic Abuse and Liberty Protection Safeguards |

Statutory requirements of plans- checklist (4)

| Legislative requirement | Description | SEL ICB Response |
|--|---|---|
| Implementing any joint local health and wellbeing strategy | The plan must set out the steps that the ICB proposes to take to implement any JLHWSs to which it is required to have regard under section 116B(1) of the Local Government and Public Involvement in Health Act 2007. | The local care partnership sections of our JFP set out the steps that local areas propose to take to implement through their JLHWS. |
| Financial duties | The plan must explain how the ICB intends to discharge its financial duties | Our JFP includes a section on our medium term financial strategy. SEL ICB is committed to complying with the NHS England financial objectives, directions and expenditure limits, and progressing work to enhance productivity and value for money to ensure a sustainable cost base within the SEL NHS system. Our medium term financial strategy is focussed on our strategic approach to the allocation of the ICB's resources to support the delivery of our integrated care strategy and JFP objectives, plus an ambition around securing financial sustainability over this same period. We have further work to do to secure agreed productivity and efficiency plans to support this objective building from our 2023/24 plans. |

Glossary (1)

| Abbrev | Description | Abbrev | Description | Abbrev | Description |
|--------------|--|--------|--|--------|--|
| A&E | Accident and Emergency Department | BCF | Better Care Fund | CQC | Care Quality Commission |
| ACP | Advanced Care Practitioners | BFI | Baby Friendly Initiative | CVD | Cardiovascular Disease |
| AHC | Adult Health Check | BP | Blood pressure | CYP | Children and Young People |
| AHSN | Academic Health Science Network | CAMHS | Children and Adolescent Mental Health Services | DASS | Director of Adult Social Services |
| AI | Artificial Intelligence | CDC | Community diagnostic centre | DES | Directory of Enhanced Services |
| ALD | Adult Learning Disability | CETR | Care Education Treatment Review | DSR | Dynamic Support Register |
| AHP | Allied Health Professional | CESEL | Clinical Effectiveness South East London | ECH | Eltham Community Hospital |
| APC | Acute Provider Collaborative | CHC | Continuing Health Care | ED | Emergency Department |
| ARI | Acute Respiratory Infections | CHD | Coronary Heart Disease | EDI | Equality Diversity and Inclusion |
| ARRS | Additional role reimbursement scheme | CKD | Chronic Kidney Disease | EHCNA | Education Health Care Needs Assessment |
| ASC | Adult Social Care | CMHS | Community Mental Health Services | ENT | Ears Nose and Throat |
| ASD/A DHD | Autistic Spectrum Disorder / Attention deficit hyperactivity disorder | COPD | Chronic Obstructive Pulmonary Disease | EPEC | Empowering Patients Empowering Communities |
| BAU | Business As Usual | CPES | Cancer patient experience survey | FIT | Faecal Immunochemical Testing |

Glossary (2)

| Abbrev | Description | Abbrev | Description | Abbrev | Description |
|--------|---|--------|---|--------|---|
| G&A | General and Acute hospital beds | ICS | Integrated Care System | LCP | Local Care Partnership |
| GIRFT | Getting it right first time | INT | Integrated neighbourhood teams | LDA | Learning Disability and Autism |
| GLA | Greater London Authority | IPC | Infection prevention and control | LeDeR | Learning from the lives and deaths of people with learning disability and autistic people |
| GSTT | Guys and St Thomas' NHS Foundation Trust | IUC | Integrated Urgent Care | LFPSE | Learn From Patient Safety Events |
| HCAI | Healthcare associated infections | JFP | Joint Forward Plan | LGA | Local Government Association |
| HGP | Healthier Greenwich Partnership | JLHWS | Joint Local Health and Wellbeing Strategy | LGBTQ+ | Lesbian, Gay, Bisexual, Transgender, Queer and other sexual identities |
| HVLC | High volume low complexity | JSNA | Joint Strategic Needs Assessment | LGT | Lewisham and Greenwich NHS Trust |
| HWB | Health and Wellbeing | JWA | Joint Working Agreement | LHCP | Lewisham Health and Care Partnership |
| HWS | Health and Wellbeing Strategy | KCH | Kings College Hospital NHS Foundation Trust | LIP | Local Implementation Plan |
| IAPT | Improving Access to Psychological Therapies | KCL | Kings College London | LMHS | Local maternity and neonatal system |
| ICB | Integrated Care Board | LA | Local Authority | LOS | Length of Stay |
| ICHM | Integrated Child Health Model | LARC | Long Acting Reversible Contraception | LTC | Long Term Condition |
| ICP | Integrated Care Partnership | LBL | London Borough of Lambeth | LWNA | Living Well Network Alliance |

Glossary (3)

| Abbrev | Description | Abbrev | Description | Abbrev | Description |
|--------|---|--------|---|--------|--|
| MH | Mental Health | OD | Organisational Design | PTL | Patient tracking list |
| MDT | Multi-disciplinary Teams | PCN | Primary Care Network | PTSD | Post Traumatic Stress Disorder |
| MHMD S | Mental health minimum dataset | PEOLC | Palliative and end of life care | QEH | Queen Elizabeth Hospital |
| MMN | Maternal medicines network | PHB | Personal Health Budget | QMS | Queen Mary's Sidcup |
| MSP | Market Sustainability Plan | PHC | Physical Healthcare Check | QOF | Quality Outcomes Framework |
| MSK | Musculo Skeletal | PIFU | Patient Initiated Follow Up | SACT | Systemic anti-cancer therapy |
| MSW | Maternity support worker | PHM | Population Health Management | SDEC | Same Day Emergency Care |
| MTFS | Medium Term Financial Strategy | PMO | Programme Management Office | SEL | South East London |
| MVP | Maternity voice partnership | PODs | Pharmaceutical, general optometry and dental services | SELCA | South East London Cancer Alliance |
| NAPC | National Association for Primary Care | PReP | Pre-exposure prophylaxis | SEND | Special Educational Needs and Disabilities |
| NICE | National Institute for Health and Care Excellence | PROMs | Patient reported outcome measures | SLAM | South London and Maudsley NHS Foundation Trust |
| NVQ | National Vocational Qualification | PRS | Private Rented Sector | SLP | South London Partnership |
| NWL | North West London | PSIRF | Patient Safety Incident Response Framework | SMI | Serious Mental Illness |

Glossary (4)

| Abbrev | Description | Abbrev | Description | Abbrev | Description |
|--------|---|--------|-------------|--------|-------------|
| STI | Sexually Transmitted Infection | | | | |
| SWL | South West London | | | | |
| TBC/D | To be confirmed / determined | | | | |
| TLHC | Targeted lung health check | | | | |
| UCR | Urgent Community Response | | | | |
| UEC | Urgent and Emergency Care | | | | |
| UKHSA | UK Health Security Agency | | | | |
| UTC | Urgent Treatment Centre | | | | |
| UTI | Urinary tract infection | | | | |
| VCSE | Voluntary, community and social enterprise sector | | | | |
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