South East London
Integrated Care System

Background document

Integrated Care Strategic Priorities for 2023-28

Our cross-system priorities for improving health and care

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Clarity approved by
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Appendix A: The development process for our cross-system priorities

Overall approach	Early summer 2022	We agreed our overall objectives for our strategy, including identifying a small number of priorities for cross-system action focused directly on definite opportunities to improve people's care. We also agreed criteria for assessing priorities.
Initial research and engagement	June to July 2022	We reviewed information on previous public engagement, the health of people in South East London, the performance of our system and the themes from other strategies, and invited comments from the public on potential areas of action. This led to seven initial areas for discussion.
Engagement on seven strategic areas	July to August 2022	We engaged leaders, our staff, partners and the public on broad strategic areas, asking which specific problems and opportunities we should focus on. We also asked people to tell us what was missing from our seven initial areas.
Shortlist potential priorities	August to September 2022	This engagement provided a list of potential strategic priorities. To produce a shortlist we analysed each against agreed criteria for a good priority. Is it a large-scale opportunity? Will it require joint working? Can it deliver results within three to five years? Do the priorities work well together strategically?
Five priorities and conditions for change	September to December 2022	Based on this analysis, we identified five priorities for our strategy. We have held further engagement with the public and system leaders, and are beginning a process of further defining each priority.

Overall approach

Initial research and engagement

Sources reviewed

Engagement on seven strategic areas

Shortlist potential priorities

Five priorities and conditions for change

We gathered feedback from a variety of existing sources.

People's stories throughout their life
Based on experiences from ongoing projects and engagement.

Population health data
As available, recognising that Joint Strategic Needs Assessments are in the process of being updated.

'Seldom listened to' communities
Targeted engagement work with communities that are not usually listened to by public sector organisations. Engaged on what is important to them and barriers, delivered by VCSE organisations.

Early engagement on this strategy
Input from partners and the public on what themes they wanted to focus on in our initial online events.

Themes from working with people and communities
Themes from engagement across the Integrated Care System since April 2020.

Themes from other strategies
Strategies, including health and wellbeing and NHS trust strategies.

System performance data
The current system performance position as viewed by the Integrated Care Board.

From our initial research we developed seven areas for discussion. In summer 2022, we organised a series of events and other engagement work.

Engagement work	Target group	Timescales	Outputs
Two online events for local people and VCSE organisations	Open events for all interested stakeholders	July 2022	Input into prioritisation process
Face-to-face engagement event for the South East London system	100 system leaders – Healthwatch and health and care leaders and VCSE leaders from across South East London	Second half of July 2022	Input into prioritisation process
Discussions with local care partnerships and providers	Leaders and staff in local care partnerships and providers	July to August 2022	Input into prioritisation process
First phase of discussions on the South East London 'Let's Talk Health and Care' online platform	All staff and public	July to August 2022	Input into prioritisation process
Review of Citizens UK literature on feedback from communities that are not usually listened to	Specific communities we need to work more closely with	August and Autumn 2022	Input into prioritisation and strategy development

Overall approach

Initial research and engagement

Engagement on seven strategic areas

Shortlist potential priorities

Priority criteria

Five priorities and conditions for change
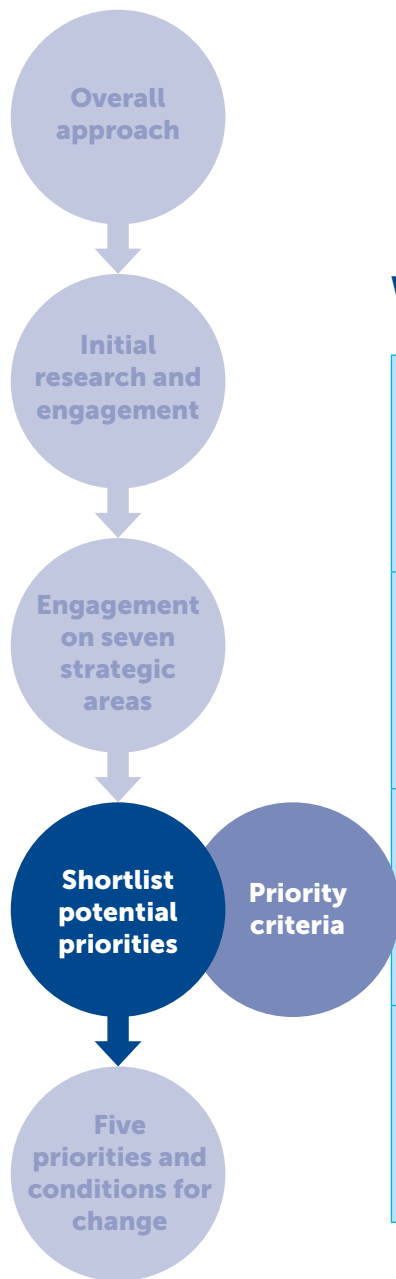
We used four tests to assess the strengths of potential strategic priorities for the system.

Test 1: How big is the opportunity?	Would dealing with this problem or focusing on this opportunity lead to significant improvements in health and care for our communities?	For example, could we significantly improve outcomes and efficiency, and reduce inequalities?
Test 2: Will it require joint working?	Is this a problem or opportunity where different parts of our system would really benefit from working together?	For example, are there significant benefits in sharing knowledge and expertise, and joint working? Do different parts of our system need to redesign care together? Do we need to build some shared infrastructure?
Test 3: Can it be achieved?	Is it realistic to believe we could make real progress on this area within the next three to five years?	For example, can we think of a strategic approach that would allow us to make significant progress? Could we find the will, capabilities and resources put it into practice?
Test 4: Will the priorities work well together strategically?	Put together, do the priorities we have chosen provide a logical, consistent and co-ordinated approach?	For example, does one priority support another? Will they be more effective together than they would be individually?

We consulted system leaders and the public on the proposed mission, vision and strategic priorities.

Engagement work	Target group	Timescales	Outputs
Two online events for local people and VCSE organisations	Open events for all interested stakeholders	November 2022	Input into strategy development and problem-solving process
Face-to-face strategy development workshops	SEL-wide health and care leaders, VCSE leaders, Healthwatch	November 2022	Input into strategy development and problem-solving process
Second phase of discussions on the South East London 'Let's Talk Health and Care' online platform	All staff and public	November to December 2022	Input into strategy development and problem-solving process
Conversations with trusted local VCSE organisations representing communities that are not usually listened to	Specific communities we need to engage more closely with	October to December 2022	Input into strategy development and problem-solving process
Health and Wellbeing Boards	Members of the Health and Wellbeing Boards and the public	November to December 2022	Input into strategy development and problem-solving process

We have agreed five strategic priorities.

Overall approach → Initial research and engagement → Engagement on seven strategic areas → Shortlist potential priorities → Five priorities and conditions for change

Area for discussion		Strategic priority
Prevention and wellbeing	How can we become better at preventing ill health and helping people to live healthy lives?	**Prevention and wellbeing** Improving prevention of ill health and helping people in South East London to stay healthy and well.
Children and young people	How can we make sure that children and young people in South East London get the best possible start in life?	**Early years** Making sure that children get a good start in life and there is effective support for mothers, babies and families before birth and in the early years of life.
Children and young people	How can we make sure that children and young people in South East London get the best possible start in life?	**Children's and young people's mental health** Improving children's and young people's mental health, making sure they have quick access to effective support for common mental health challenges.
Adults' mental health	How can we make sure that adults across South East London can access effective support to maintain good mental health and wellbeing?	**Adults' mental health** Making sure adults have quick access to early support, to prevent mental health challenges from worsening.
Primary care, long-term conditions, complex needs	How can we provide convenient primary care and co-ordinated, joined-up and whole-person care for older people and others with long-term conditions and complex needs?	**Primary care and people with long-term conditions** Making sure that people can conveniently access high-quality primary care services and proactive, joined-up care for continuing health needs.

Appendix B:
A summary of engagement already carried out to develop our strategic priorities

Initial research and engagement

Feedback from previous engagement work

- **Trust and cultural sensitivity:** Trust in public services is low, especially in people from Black and minority ethnic and other marginalised communities. Some people in South East London face stigma due to their lifestyle and culture (for example, Gypsy and Roma Traveller communities, the Rastafari community, people living with or affected by HIV and people who use drugs and alcohol). A lack of awareness of different cultures leads to stigma resulting in poorer health outcomes for Black African and Black Caribbean communities, including during pregnancy and when giving birth.

- **Access issues:** People have told us that they don't know how to access services or where to go for support, and that getting a GP or dentist appointment is particularly difficult. The move to online services since the pandemic is welcomed by some but has created access issues for others. For example, those with language difficulties, people who are disabled and people from migrant backgrounds tell us this is a significant barrier to accessing health and care services. Migrant communities tell us that a lack of information and confusion about paying for health and care services means many people do not get support when they need it, allowing health issues to worsen. More services should be provided in the community.

- **Mental health:** People have told us they struggle to access mental health services, sometimes because people don't know how to or because there is a lack of suitable mental health support for them (for example, services do not always understand different cultures or the trauma some people have faced), and often people become acutely unwell before being able to access services. There are widespread health inequalities in access to mental health services and some communities in South East London experience worse outcomes than others.

- **Long-term conditions and complex needs:** People have told us they are not being seen as a person, but instead as individual conditions. We heard how important peer support (support from others with similar conditions or needs) is in improving outcomes for people with long-term conditions.

- **Partnership working:** A lack of partnership working and communication between services creates issues and barriers for people, particularly those with long-term conditions. We heard that we need to work with local people to provide services that meet their needs, and we should work with local trusted voluntary and community organisations to form partnerships with communities that are not usually listened to by public sector organisations. No communities are 'hard to reach', and we need to change how we involve them in our services.

- **Wider causes of health and social issues:** Wider causes of health and social issues can make it difficult for people to take up services, particularly prevention services, but are often underestimated by health and care services. What are often viewed as basic needs such as feeling safe, having somewhere to live and secure employment have a significant effect on people's health and wellbeing.

Engagement on vision and seven areas

Local people and VCSE — July 2022

- In terms of future ambitions for the health and care system, we heard that people want joined-up, responsive and proactive services.
- People told us that they currently experience significant issues accessing health and care services, particularly primary care, mental health services and community services.
- We heard that people want to see an increased focus on prevention, the 'whole person' and outcomes that matter to local people. We heard that we should also consider a person's wellbeing and other wider causes of health issues.
- People want high-quality care for all. As one person told us, "services should be equitable, no matter who you are or where you live".
- People also want to receive care and treatment in the most suitable environment and close to where they live. We were told, "You cannot underestimate the privilege of being able to travel for an hour to get to a service".
- The importance of a happy, well-trained workforce was also raised, and using our workforce more flexibly. We also need to recognise the vital role carers play and provide better support for them.
- We heard that, as well as the areas we have discussed with local people, other priorities include improving maternity and women's services, joining up health and social care, improving end-of-life care, and reducing and removing systemic racism and racial inequalities.

Engagement on vision and seven areas

'100 leaders' sessions — July 2022

- In terms of future ambitions for the health and care system, partners felt services must be fair, responsive and joined up so that "no one gets left behind or lost in the system". We also need to focus on the whole person and their family, service users and carers, and work with them as partners, giving local people the power to make decisions about the services they receive. We should focus on prevention, wellbeing and the wider causes of health issues, responding to issues such as poverty and deprivation.
- Across all seven areas, people acknowledged that we need to improve access to key services, including primary care and mental health, particularly for children and young people. Our system is complicated and difficult to navigate.
- Local people do not trust public sector organisations, and we need to work with organisations from the VCSE sector to build trust and look at what matters most to people.
- We need to develop proactive, early support to prevent ill health from getting worse, particularly for mental health issues.
- We need to follow an asset-based community-development approach, and spread best practice across South East London. We need to develop more services in our communities that are culturally sensitive and informed about the trauma people may have faced. We should build on and improve social prescribing (referring people to local, non-clinical services, such as volunteering, gardening or sports activities).
- Our workforce is currently stretched, and we need to give staff the power to work differently. Innovation and new workforce models are an important part of this. We need to be clear about funding and resources, and allocate them differently. We also need to improve access to, and the quality of, information about this.
- As well as the seven areas we have discussed with local people, other priorities include improving maternity and women's services, joining up health and social care, improving end-of-life care, dealing with systemic racism and racial inequalities, and developing our ways of working.

Five priorities and conditions for change

Local people and VCSE – November 2022

- People have told us that the five strategic priorities are the correct ones for us to deliver. They welcomed our decision to focus on early action, health and wellbeing, and mental health.

- Some people raised concerns about how we will deliver these priorities given the challenges we face, such as limits on funding. We also heard that we must improve our IT systems so they can exchange and use information and make it easier for health and care partners to share people's digital records. We were told, "accurate and up-to-date information needs to be shared between services and information about service users needs to be easily accessible to services". We also need to improve communication between services and with people.

- We heard that we need to work more closely with schools and other public services (such as the police), as well as local people themselves. We were told, "people in the community are looking out for each other, so let's make the most of this". We heard that we need to better understand and make use of our assets in our communities and make the changes needed to do this. We also heard that we need to work in partnership better with VCSE organisations, especially specialist providers who support marginalised communities, to help build trust and support people to take up services. We were told, "there needs to be a 'no wrong door' approach".

- We heard the importance of understanding what matters to people, having a trauma-informed approach that takes account of culture and gender issues, and the importance of peer mentors to support people from our most marginalised communities.

- Our delivery plan must recognise and reduce the inequalities experienced by some communities living in South East London, and we must understand social issues and barriers which make it difficult for people to access services, such as the cost-of-living crisis and systemic racism.

- There are areas of good practice which could be rolled out across South East London, including safe surgeries, pride in practice and inclusion health tools to help some of our most marginalised communities to access services.

Five priorities and conditions for change

Strategy development workshops – November 2022

- We have support for the five priorities, but we need to find new solutions to deliver them. We need to continue to refine the priorities so we can achieve them over the next five years.

- Action on the priorities will be led by different parts of the system, and often within our places. Bureaucracy and services or organisations that work in isolation from others are a significant barrier to our progress, and system partners need to take responsibility for reducing these.

- We will need to work in partnership with local people, with other partners (such as education providers and the police), and with the VCSE sector, to develop effective solutions and deliver on these priorities. We know access issues aren't just due to a lack of capacity.

- We must fund the VCSE sector appropriately to work with us and review how we commission services to bring about the necessary changes.

- We must use our assets more effectively (including our facilities), adopt a strengths-based approach and make it easier to share learning.

- We must also improve how we use and share information across our system. Communication is a key issue, and we often don't know what is available for local people, service users, patients and carers.

- Partners need to take responsibility for individuals and not pass people around the system. We have been told we must "make every contact count" and "we need a more responsive front door".

- Our workforce is already stretched so we need to think about how we will deliver the priorities.

- We must consider the social context in which we work, and keep to a social justice framework. We should prioritise reducing inequalities across the priorities.