

Health and Adult Social Care Overview and Scrutiny Committee

18 June 2024

Integrated Care Strategy Update

Report from / author: David Whiting, Acting Director of Public Health

Summary

This update report presents the Kent and Medway Integrated Care Strategy Delivery Plan which sets out key strategies and activities that partners across Kent and Medway will lead that will contribute to delivering the Integrated Care Strategy. The report also includes the framework that will be used by the Integrated Care Partnership to monitor progress on delivery of the six outcomes of the integrated care strategy.

1. Recommendation

1.1. The Committee is asked to note and comment on the Kent and Medway Integrated Care Strategy Delivery Plan.

2. Budget and policy framework

2.1. On 29 July 2022, the Department of Health and Social Care (DHSC) published guidance setting out how integrated care systems (ICS) should create an integrated care strategy.

2.2. Upper tier local authorities are still required to produce a place-focussed Joint Local Health and Wellbeing Strategy (JLHWS) and Medway has recently published its JLHWS. The two strategies are required to take note of each other.

2.3. The NHS organisations and upper-tier local authorities in each ICS run a joint committee called the integrated care partnership (ICP). This is a broad alliance of partners who all have a role in improving local health, care and wellbeing.

2.4. The Integrated Care Strategy Delivery Plan will be taken to the Integrated Care Partnership for approval in July 2024.

3. Background

- 3.1. The Inequalities Prevention and Population Health Committee (IPPHC) of the Kent and Medway Integrated Care Board (ICB) was tasked with developing the Integrated Care Strategy. It formed a steering group to develop the strategy, led by colleagues from the NHS, with representation from Public Health in Medway Council and Kent County Council.
- 3.2. The Integrated Care Strategy was brought to this committee in December 2023. The Shared Delivery Plan presented here sets out key strategies and activities that partners will lead that will contribute to delivering the Integrated Care Strategy. The plan incorporates the requirements of the NHS Joint Forward Plan.
- 3.3. The Shared Delivery Plan spans two years (2024-26), after which it will be refreshed to take account of progress and any national or local changes.
- 3.4. The plan follows the format of the Integrated Care Strategy. For each outcome it highlights key areas of joint working and then signposts to existing or developing strategies and plans and who is leading them, which will deliver the commitments made in the strategy. This is not an exhaustive list but aims to include significant or appropriate areas of work.
- 3.5. Ensuring delivery of these plans, and monitoring of progress towards this, will remain with the identified lead partners.
- 3.6. The final section of the plan focuses on the conditions for successful delivery of the strategy, such as partnership working, commissioning infrastructure, governance and system led oversight, and states our ongoing commitment to financial sustainability.
- 3.7. To support monitoring of whether the high-level outcomes of the Integrated Care Strategy are delivered, a logical framework (“logframe”) matrix has been developed and is found at appendix 2. Monitoring progress against the measures in the logframe matrix will allow partners to understand overall system success in delivering our shared outcomes.
- 3.8. The Integrated Care Strategy is a joint strategy across Kent and Medway and the Shared Delivery Plan represents the joint work across Kent and Medway. Medway also has its Joint Local Health and Wellbeing Strategy that complements the Integrated Care Strategy and is the primary mechanism for delivery in Medway.

4. Advice and analysis

- 4.1. For each outcome of the Integrated Care Strategy the Shared Delivery Plan highlights key areas of joint working and then signposts to existing or developing strategies and plans, and who is leading them, which will deliver the commitments made in the strategy. Due to the scale and complexity of the Integrated Care System, this is not an exhaustive list but aims to include

significant or appropriate areas of work. In this way the Shared Delivery Plan is a framework, with the detail in the plans that underpin it.

- 4.2. Guidance on Integrated Care Partnerships (ICPs) state that they will create a forum in which partners should hold each other mutually to account for delivering the priorities set out in its integrated care strategy, including over the longer term. A number of mechanisms are being set up to support the ICP in this role, outlined below.
- 4.3. The ICP will receive updates on the strategic indicators developed through the logframe matrix; this is likely to be annually.
- 4.4. The ICP will receive regular updates from the Inequalities, Prevention and Population Health sub-committee of the ICP, which will cover a significant amount of the activity across the system to deliver the shared outcomes.
- 4.5. Thematic discussions on particular areas of interest within the shared outcomes are being proposed as part of the new approach for ICP meetings.
- 4.6. The Shared Delivery Plan will be a useful tool for the ICP to coordinate and provide oversight and assurance of delivery across the system. However, in a large and complex system, there is a balance to be struck between providing information to demonstrate progress and having capacity to meaningfully discuss and add value to an area of the strategy delivery. Each organisation will wish to monitor the delivery of their contributing strategies and activities set out in the Shared Delivery Plan through their own established governance routes.
- 4.7. As noted above, the Shared Delivery Plan aims to include significant and appropriate areas of joint working, rather than an exhaustive list of activities. It is intended to provide assurance on progress alongside the logframe matrix.
- 4.8. It should be noted that the indicators in the logframe matrix are strategic indicators of success for each of the outcomes and the goal, they are not targets and are not operational measures for in-year performance monitoring. Each of the plans and strategies that sit within the Integrated Care Strategy will have their own metrics that will be used to monitor performance.

5. Risk management

- 5.1. See table below.

Risk	Description	Action to avoid or mitigate risk	Risk rating
Partnership failure	The ICP partners fail to work together to deliver the outcomes	Regular leadership meetings are held between the leaders of the three statutory	CII

Risk	Description	Action to avoid or mitigate risk	Risk rating
		partners to ensure alignment	
Financial risk	The partners in the ICP are all under significant financial pressures which may limit the ability to deliver the outcomes in the strategy	One of the aims of the Integrated Care Partnership is to enhance productivity and value for money	BII

For risk rating, please refer to the following table:

Likelihood	Impact:
A Very likely B Likely C Unlikely D Rare	I Catastrophic II Major III Moderate IV Minor

6. Consultation

6.1. The Integrated Care Strategy delivery plan brings together strategies and plans that will contribute to delivering the IC strategy and therefore consultation was with groups and organisations that have relevant strategies and plans.

6.2. Those consulted included:

- Voluntary sector organisations
- Health and Care Partnerships
- Medway Health and Wellbeing Board
- NHS trusts
- Leadership at Medway Council and Kent County Council
- Healthwatch
- The Office of the Police and Crime Commissioner
- Kent Housing Group
- NHS England

- Representatives from Medway Council's People Directorate (Children and Adults' services, Public Health)
- Views were sought from the Regeneration, Culture, Environment and Transformation Directorate
- Kent districts
- Relevant Kent County Council departments

7. Climate change implications

- 7.1. There are no direct climate change implications from this report, however, part of the approach of the strategy includes normalising sustainable ways of working, developing active and sustainable travel, and one of the three enablers says that the Kent and Medway Integrated Care System will embed sustainability in everything it does through its green plan.

8. Financial implications

- 8.1. There are no direct financial implications arising from the Integrated Care strategy delivery plan. There may, however, be potential benefits or costs arising from future commissioning or place-based service decisions that could impact on Medway. The financial impact of any such decisions will be taken through the appropriate governance route.

9. Legal implications

- 9.1. Under the Health and Social Care Act, 2022:

- 9.1.1. An integrated care partnership must prepare a strategy (an "integrated care strategy") setting out how the assessed needs in relation to its area are to be met by the exercise of functions of— (a) the integrated care board for its area, (b) NHS England, or (c) the responsible local authorities whose areas coincide with or fall wholly or partly within its area.

- 9.1.2. The responsible local authority and each of its partner integrated care boards, must prepare a strategy ("a joint local health and wellbeing strategy") setting out how the assessed needs in relation to the responsible local authority's area are to be met by the exercise of functions of— (a) the responsible local authority, (b) its partner integrated care boards, or (c) NHS England.

Lead officer contact

David Whiting, Acting Director of Public Health, Medway Council, Gun Wharf, Dock Road, Chatham. 01634 332636. david.whiting@medway.gov.uk

Appendices

Appendix 1 - Integrated Care Strategy delivery plan

Appendix 2 - Logical Framework (“logfame”) Matrix

Background papers

[Integrated Care Strategy](#)