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To: **Coventry Health and Wellbeing Board**

Date: **3 October 2022**

Subject: **Coventry and Warwickshire Integrated Care Strategy Update**

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## 1 Purpose

- 1.1 The paper describes the development and work to date on the Integrated Care Strategy, which will set the strategic direction and priorities for health and care services across the system and provide a vision for integration to meet the needs of the local population.

## 2 Recommendations

The Health and Wellbeing Board is asked to note for information:

- the requirement for the Integrated Care Partnership to develop an Integrated Care Strategy, informed by the Joint Strategic Needs Assessments and Health and Wellbeing Strategies, by December 2022; and
- the approach to development of the Strategy in Coventry and Warwickshire, and progress to date.

## 3 Background

- 3.1 The Integrated Care Strategy is a crucial system document which establishes a vision of integration and collaboration for the system and sets the strategic direction and priorities for the provision of health and care services to achieve the ICS aims. The ICB priorities and 5-year plan must pay due regard to it.
- 3.2 National guidance on development of the Integrated Care Strategies was published on 29 July 2022 and is available at: <https://www.gov.uk/government/publications/guidance-on-the-preparation-of-integrated-care-strategies/guidance-on-the-preparation-of-integrated-care-strategies>. This made clear that the integrated care strategy should complement the production of local Health and Wellbeing Strategies.

## 4 Purpose, content, structure of the Integrated Care Strategy

### 4.1 Purpose of the Integrated Care Strategy

4.1.2 The purpose of the Integrated Care Strategy is to:

- set the strategic direction and priorities for the health and care services across the system
- provide a vision for integration across the system to achieve the four key aims of integrated care
- leverage the benefits of the system and greater collaboration between system partners
- establish how the assessed needs of the people and communities will be addressed.

### 4.2 Contents

4.2.1 The strategy must include the following content components as per [NHSE guidance](#):

- shared vision and purpose
- integrated provision
- integrated records
- integrated strategic plans
- integrated commissioning of services
- integrated budgets
- integrated data sets.

### 4.3 Responsibilities and requirements

4.3.1 Developing the Integrated Care Strategy is the responsibility of the Integrated Care Partnership.

4.3.2 The strategy must:

- be developed from the Joint Strategic Needs Assessments and Health and Wellbeing strategies
- be shaped by consultation of Healthwatch and people who live and work in the system
- show regard for the mandate published by the Secretary of State and relevant NHS guidance.

4.3.3 The Integrated Care Board must pay due regard to the strategy in developing the 5-year plan for the system.

4.3.4 These requirements have been built into the strategy development plan.

## 5 Development timeline

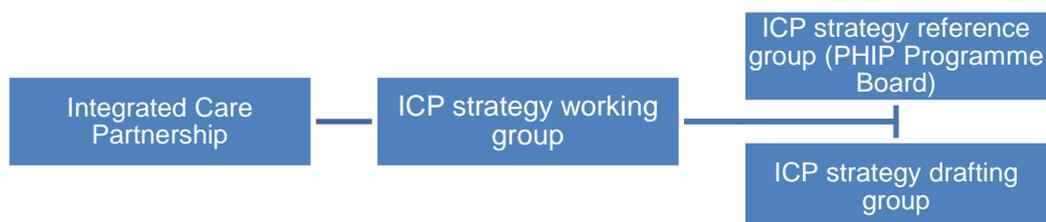
5.1 The timeline for the development of the Integrated Care Strategy is challenging, especially given the expectations around engagement and its interfaces with other system work, like the development of the clinical strategy and the various other public and community engagements around system strategies. It therefore needs to be carefully planned and managed.

5.2 The outline overarching timeline for the development of the strategy agreed by the Integrated Care Partnership is below. This continues to evolve over time.

Timeline	Requirements
July - August 2022	<ul style="list-style-type: none"> <li>• Establish Integrated Care Strategy working and reference groups and hold first meetings</li> <li>• Map out strategy development process, key stakeholders to engage and develop an approach</li> <li>• Conduct and finish mapping and analysis (incl. interfaces with) key system and system partner strategies</li> <li>• Produce the Integrated Care Strategy development and engagement plans</li> <li>• Produce a draft frame of the strategy</li> <li>• Take proposed approach and outline development and engagement plans to ICP for sign off</li> <li>• Begin engaging key stakeholder across the system on the development of the Integrated Care strategy (including HWBs, Healthwatch and service users)</li> <li>• Begin strategy development workshops with key stakeholders to establish strategy vision, key priorities and around core content areas</li> </ul>
September - October 2022	<ul style="list-style-type: none"> <li>• Hold working, reference and drafting group meetings</li> <li>• Hold strategy development workshops and stakeholder engagement sessions</li> <li>• Provide update on progress to ICP, ICB and HWBs and other key stakeholders</li> <li>• Have first draft of ICS strategy in place by late Sept to share with ICP for review</li> <li>• Engage and consult with stakeholders (incl. Healthwatch and system workers and service users) on draft outline strategy</li> <li>• Present and get feedback on the draft strategy with key groups (ICB, Integrated Health and Care Forum, HWBs)</li> <li>• Discuss draft strategy with NHSE and benchmark against other ICSs</li> </ul>
November - December 2022	<ul style="list-style-type: none"> <li>• Final working, reference and drafting group meetings</li> <li>• Final workshop to review strategy following updates from engagement and consultation</li> <li>• Final engagement and progress updates to key stakeholders</li> <li>• ICP sign off of the strategy</li> <li>• Submission to NHSE 14 December</li> </ul>

## 6 Drafting approach

6.1 To ensure the strategy in the most effective way, the following structure has been established:



6.2 Alongside this, an engagement task and finish group has been established to coordinate the process of engaging on and co-producing the content of the strategy. Details of these groups are outlined below.

Reference group	Working group	Engagement task & finish group	Drafting group
<p>The PHIP Programme Board is serving as the reference group for this Strategy, and includes amongst others:</p> <ul style="list-style-type: none"> <li>Rachael Danter, Chief System Transformation Officer, Coventry &amp; Warwickshire ICB</li> <li>Allison Duggal, Director of Public Health, Coventry City Council</li> <li>Shade Agboola, Director of Public Health, Warwickshire County Council</li> <li>Pete Fahy, Director of Adult Services, Coventry City Council &amp; Care Collaborative Chair</li> <li>Anne Coyle, Managing Director, South Warwickshire NHS FT &amp; Care Collaborative Chair</li> <li>Angela Brady, Chief Medical Officer, Coventry &amp; Warwickshire ICB</li> <li>Liz Flavell-Smith, Director of Finance, Coventry and Warwickshire ICB</li> </ul>	<ul style="list-style-type: none"> <li><b>Chair:</b> Liz Gaulton, Chief Officer Population Health and Inequalities, Coventry &amp; Warwickshire ICB</li> <li><b>Deputy Chair:</b> Anita Wilson, Director of Corporate Affairs, Coventry &amp; Warwickshire ICB</li> <li>Debbie Dawson, Population Health Transformation Officer, Coventry &amp; Warwickshire ICS</li> <li>Daniel Taylor, Engagement Consultant, Good Governance Institute</li> <li>Mason Fitzgerald, Senior Consultant, Good Governance Institute</li> <li>Steve Jarman-Davies, Director of Intelligence, Planning and Performance, Coventry &amp; Warwickshire ICB</li> <li>Rose Uwins, Communications &amp; Engagement Lead, Coventry &amp; Warwickshire ICS</li> <li>Amy Parker, Public Health Registrar</li> <li>Hannah Willetts, Director of Primary Care, Coventry &amp; Warwickshire ICB</li> <li>Si Chun Lam, Insight Manager, Coventry City Council</li> <li>Michelle McGinty, Strategic Lead for Transformation and Change, Coventry City Council</li> <li>Gereint Stoneman, Corporate Policy &amp; Commissioning Manager, Warwickshire County Council</li> <li>Paula Jackson, Public Health Consultant, Coventry &amp; Warwickshire ICS</li> </ul>	<ul style="list-style-type: none"> <li><b>Chair:</b> Anita Wilson, Director of Corporate Affairs, Coventry &amp; Warwickshire ICB</li> <li><b>Deputy Chair:</b> Rose Uwins, Communications &amp; Engagement Lead, C&amp;W ICS</li> <li>Ruth Light, Healthwatch Coventry</li> <li>Chris Bain, Healthwatch Warwickshire</li> <li>Michelle McGinty (One Coventry) Coventry City Council</li> <li>Valerie de Souza (Insight), Coventry City Council</li> <li>Charles Barlow, Warwickshire County Council</li> <li>Simon Lieberman, Orbit Housing</li> <li>Steven Hill, CW Mind</li> <li>Karen Winchcombe, Warks CAVA</li> <li>Helen Mosley and Lynda Scott, UHCW</li> <li>Mary Powell, SWFT</li> <li>Beth Osborne, CWPT</li> <li>James Turner, GEH</li> <li>Farhana Ahmedabadi-Patel, Workforce and equalities, ICB</li> <li>Ghulam Vohra, Coventry Muslim Forum (Faith representative)</li> <li>Simon Betteridge, UHCW (Faith representative)</li> </ul>	<ul style="list-style-type: none"> <li><b>Chair:</b> Liz Gaulton, Chief Officer Population Health and Inequalities, Coventry &amp; Warwickshire ICB</li> <li>Debbie Dawson, Population Health Transformation Officer, Coventry &amp; Warwickshire ICS</li> <li>Daniel Taylor, Engagement Consultant, Good Governance Institute</li> <li>Rose Uwins, Communications &amp; Engagement Lead, Coventry &amp; Warwickshire ICS</li> <li>Amy Parker, Public Health Registrar</li> </ul>

## 7 Progress to date

7.1 Progress to date in the development of the strategy includes:

- System and partner strategy mapping
- Developed the Integrated Care Strategy content structure
- Developed proposed priority areas for the strategy (based on HWB priorities, Shadow ICP prioritisation exercise & guidance)
- Collated needs data from across the system to inform strategy
- Developed an approach and plan for the strategy development based on content leads and identified leads for each of the priority areas for the strategy
- Developing engagement plans
- Starting to draft the introduction & context strategy areas

7.2 A thorough analysis of the existing Coventry and Warwickshire Health and Wellbeing Strategies has been conducted to understand the existing alignment of the strategies,

especially around their priorities, and the foundations in the strategies against the key content components set out for the Integrated Care Strategy as a basis to develop from:

ICP strategy requirements	C&W ICS HWB's strategy alignment to each other	HWB strategy as basis for ICP strategy	Comments
1. Shared vision and purpose	4	4	<ul style="list-style-type: none"> <li>• Good alignment</li> <li>• <u>Fulfill</u> ICP requirements</li> </ul>
2. Integrated health and care services	2	2	<ul style="list-style-type: none"> <li>• Varied level of info &amp; intent</li> <li>• Neither strategies fulfil ICP requirements</li> </ul>
3. Integrated health and care records	1	1	<ul style="list-style-type: none"> <li>• Insufficient information in all HWB strategies</li> </ul>
4. Integrated strategic plans	1	2	<ul style="list-style-type: none"> <li>• Variation across HWB plans</li> <li>• Neither strategies fulfil ICP requirements</li> </ul>
5. Integrated commissioning	1	2	<ul style="list-style-type: none"> <li>• Insufficient information in all HWB strategies to fulfill ICP requirements</li> </ul>
6. Integrated budgets	1	0	<ul style="list-style-type: none"> <li>• Insufficient information in all HWB strategies to fulfill ICP requirements</li> </ul>
7. Integrated data sets	1	1	<ul style="list-style-type: none"> <li>• Insufficient information in all HWB strategies to fulfill ICP requirements</li> </ul>

7.3 Further work has been completed to map out and conduct similar analysis of other key system and system partner strategies.

## 8 Next steps

- 8.1 The Integrated Health and Wellbeing Forum meeting on 13 October will be an important opportunity for members of the Health and Wellbeing Boards (and other system leaders) to inform the development of the Strategy. It is intended to share further documentation ahead of this meeting, to enable meaningful engagement at the meeting on the content of the Strategy.
- 8.2 The outcomes of that meeting will inform recommendations to the Integrated Care Partnership meeting on 31 October about the overall priorities and core content of the Strategy. Further drafting will be completed in November ahead of consideration of a final draft by the ICP for submission to NHSE in December.

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