



Our Finance Strategy for Health and Care

Why we need to change?

We have a huge amount of resources already at our disposal to try and support our population, but if we do nothing now, within the next 5 years we won't have the resources to support everyone we need to.

Our current position:



professionals in our workforce who deliver care and health to our population

44.000

£3.2bn

is spent supporting our population with their health and care needs, which is already £300m above our allocation



live in Mid and South Essex and last year we supported them through 1.5 million outpatient & inpatient activity, meeting 100,000 new requests for care and over 6 million GP appointments

Where will we be in 5 years time if we do nothing?

People are living longer increasing the demand of our resources, with the number of over 60s expected to grow by 6% in the next 5 years, and the number aged 80+ growing by 25%

We know the best place to receive support is in the community but

1 in 2 GPS plan to retire in the next 5 years and

2 in 5 nurses in the next **10 years** reducing our primary care capacity and resulting in people attending other services



If we do nothing, our could deficit could grow by

£400m due to changes in national

funding, increased demand and workforce challenges

Our vision

As the MSE system we are committed to achieving the triple aim:

- Better population health;
- Better quality of care; and
- Financially sustainable services

Our Ambition

- As a system we have the ambition to prioritise the prevention of ill health through evidence-based investment.
- We have the ambition to develop systems and resources to support people to proactively take control of their health through self-help resource to prevent further ill health.
- Using innovation and continuous improvement we have the ambition to maximise the benefit our partnership pound can offer in care for our residents across Mid & South Essex.
- We have the ambition to align future resources to the system priorities and will only invest where there is no resource improvement potential.
- Over the next 3 financial years we have the ambition to recurrently release more than £100m through efficiency.
- We have the ambition to **maintain financial balance** through a healthy combination of cash release and productivity efficiency measures.





Stewardship



Financial leadership



Financial framework /strategy



Reporting and accountability



Stewardship is a model being initiated across MSE which focusses on Multi-professional, crossorganisational frontline teams, working together to get the best out of health and care resources.

We will pool our resources and take a collective responsibility on how this resource is used. We will integrate our data combining it with intelligent analysis and clear visualisation to ensure everyone has the right information in front of them to make the best decisions for our population

The sources of the so

Intelligence

- Population health management using integrated data to improve health and wellbeing
- Evidence based practice

Stewardship

Financial leadership





Reporting and accountability



The finance leaders work together inclusively and have done so across MSE for many years. They are uniquely placed to model behaviours essential to the core principles required to make stewardship a success.

We have agreed to align relevant planning, investment and performance improvement in order to most effectively benefit our local population and align them to our stewardship teams

Using the specialist skills of our thriving community of professionals from across the system; expert in areas such as finance, analytics, digital, legal, commercial and estate, we will develop the skills across our workforce to support the effectiveness of resource management.

Stewardship

Financial leadership





Reporting and accountability



In order to achieve the triple aim and address the growing deficit across the system, the delivery of substantial transformational savings is required. The core strands to deliver our sustainable finance strategy are:

- Year on year 'Business as usual' improvements through realising ways our teams and organisations could be more efficient and eliminate waste;

- Delivering transformation savings by changing how we work individually and collectively as a system, based on opportunities identified

- Continue to align system funding to the target allocations as previous and current funding levels have differed, particularly due to COVID over the past few years.





Financial framework /strategy



Reporting and accountability



The principles supporting joint accountability arrangements are underpinned by effective collaboration, transparency and trust between all partners, and between the ICS and its residents.

Each part of the ICS (system, alliance and neighbourhood) and each statutory organisation will have its own arrangements for gaining assurance regarding the management of resources as approved through the ICS planning process.

As the stewardship programme matures, accountability for delivery across a service area, underpinned by a data driven evidence base will be overseen by a system oversight group of clinical, finance and operational leaders from the system



Financial leadership





Reporting and accountability



We have the ambition to align future resources to the system priorities and will only invest where there is no resource improvement potential.

Our estates, infrastructure and digital offering needs to be modernised and we need to be innovative in how we invest to do this given our constraints.

New investments will have an investment case, be coordinated through the system and will be in line with the system priorities.

The System 'Finance & Investment Committee' will provide assurance to the Integrated Care Partnership Board regarding investment decisions and review benefits realisation.





leadership



Reporting and accountability



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The principles underpinning our ambition



Transparency

We will take an open book approach, simplify processes and make information accessible. New investments will be coordinated through the system and will be in line with the system priorities and decisions regarding investment will be open and shared with everyone.



Acting as one

We are collectively 'in it together' and will work as a single system, managing opportunities, resources and risks as one



Clinically led

Through the development of the stewardship programme we will support our stewards to manage the resources available to deliver care in a way that will improve population health, optimise response and ultimately reduce inequalities.



Impactful

We will use our resources in a way which maximises the impact we have on our population



Ambitious

We will develop our staff to achieve their ambitions and the ambitions of the system

What risks will we face and what opportunities are there?

We recognise that to achieve this vision, there will be a number of risks and opportunities along the journey. We will need to prioritise and make the best use of existing resources and prioritising any investment into future resources.

Workforce

The frontline workforce who deliver heath and care to our citizens has been stretched and fatigued over the past 2 years. We know that we need to attract and retain our staff, provide excellent development and career pathways matching the ambition of our workforce to ensure we have a stable, motivated and highly skilled workforce

Infrastructure and estates

Our infrastructure and estates are old and investment is required to consolidate modernise our estate. We know the older the estate the greater the financial burden, and so we must innovate and work with third parties to find the resources and solutions needed to invest now for the future whilst balancing the need to prioritise investments across the system

Digital Transformation

The digital services on offer across the health and care system are not in-line with the digital offering across the private sector. We know that we need to invest in digital transformation to be accessible for our citizens of all ages but with the limited resources we have, we need to be smart and innovative on how we transform our digital services

COVID impact on delivery of our services

It's harder to work effectively and efficiently across and within service areas due to the pandemic and our limited resources now have to be more targeted then ever. The gap between health inequalities has grown and we know that we must implement our stewardship model and review how we deliver all our services immediately to ensure we are using our resources now and in the future as effectively as possible for our citizens.

Market constraints cost of living impact

With the introduction of new legislation, increasing cost of care and national inflationary pressures, the provider care market and workforce to support our population, are stretched with capacity but also financially. We need to work with the market to find solutions to deliver the right care at the right time that is sustainable for everyone

Capacity in the right settings

Expansion of Primary care capacity has been limited with growth in population and demand. Capacity in the right setting is essential as well as development greater opportunities to facilitate self care, reducing the demand down stream in more resource heavy settings



The information contained in this document can be translated, and/or made available in alternative formats, on request.