

MSE Integrated Care Partnership, 28th June

Agenda Number: 5

Approved Committee Minutes

Summary Report

1. Purpose of Report

To reassure the Integrated Care Partnership (ICP) of the work ongoing for its subcommittees:

- i. Population Health Improvement Board (PHIB)
- ii. Community Assembly Co-Production Group

2. Executive Lead

- Name: Jeff Banks
- Job Title: Director of Strategic Partnerships
- Organisation: NHS Mid & South Essex

3. Report Author

- Name: Tegan Gardiner
- Job Title: Business Manager
- Organisation: NHS Mid & South Essex

4. Responsible Committees

Minutes were approved at their relevant meetings

5. Financial Implications

N/A

6. Details of patient or public engagement or consultation

N/A

7. Conflicts of Interest

None identified.

8. Recommendation/s

- i. To note the minutes of meetings for the Population Health Improvement Board
- ii. To not the minutes of meetings for the Community Assembly Co-Production Group





DRAFT MINUTES

Meeting of the Population Health Improvement Board Date: 24th May 2023 Time: 10.30am-12.00pm Venue: Microsoft Teams Meeting Chair: Sophia Morris- System Clinical Lead for Health and Inequalities, MSE ICB

Attendance

Sophia Morris (SM) – System Clinical Lead for Health and Inequalities. MSE ICB (Chair) Lucy Wightman (LW) – Director, Wellbeing Public Health & Communities, Essex County Council Jo Cripps (JC) – Director, Strategy and Partnerships, Mid & South Essex ICB. Emma Timpson (ET) - Associate Director for Health Inequalities and Prevention, MSE ICB Jeff Banks (JB) – Director, Strategic Partnerships, MSE ICB Anita Pereira (AP) - System Clinical Lead, Health Inequalities and Personalised Care, MSE ICB Pete Scolding (PS) - Assistant Medical Director and Senior Responsible Officer for Prevention, MSE ICB Lily Rymill-Smith (LR) – Personal Assistant and Senior Administrator Dan Doherty (DD) - Alliance Director, MSE ICB Owen Richards (OR) - Chief Officer, Healthwatch Southend Claire Hankey (CH) – Director Communications and Engagement, MSE ICB Josie Harding (JH) -Dr Margaret Eni-Olotu (MO) - Public Health Consultant Emma Sandford (ES) - Strategic Lead for Public Health at Thurrock Council Jo Broadbent (JoB) – Director Public Health, Thurrock Council, and Lead for the ICS Sarah Hurst (SH) -

Apologies

Barry Frostick (BF) – Chief Digital Information Officer, MSE ICB.

Kirsty O'Callaghan (KC)- Director of Community Resilience, Mobilisation & Transformation Krishna Ramkhelawon (KR) – Dr, Public Health, Southend Council

Preeti Sud (PS) – Head of Strategy Unit, Mid & South Essex NHS Foundation Trust Chris Martin (CM) - Director for Strategic Commissioning (Children and Families, Essex County Council

Ronan Fenton (RF) - Medical Director, MSE ICB.





Peter Fairley (PF) - Director for Strategy and Integration, Adult Social Care, Essex County Council

Jen Kearton (JK) – Chief Finance Officer, MSE ICB

Ruth Jackson (RJ) – Executive Chief People Officer, MSE ICB

Natarajan Sooraj (NS) - System Clinical Lead for Children and Young People, MSE ICB Ashley King (AK) - Director of Finance Primary Care & Strategic Programmes, MSE ICB Kevin Garrod (KG) - Anchor Programme Manager, MSEFT Stephen Gallagher (SG) - ICS Director of Data, MSE ICB





1. Welcome and Apologies (presented by Sophia Morris)

SM welcomed all members to the meeting, with apologies noted as above.

RESOLVED – The Board NOTED apologies.

2. **Minutes and Action Log** (presented by Sophia Morris)

All members agreed the minutes of the previous meeting.

RESOLVED – The Board APPROVED minutes of the last meeting as an accurate record.

RESOLVED – The Board NOTED the action log, and progress to date.

3. Digital inclusion framework (presented by Sophia Morris)

Over the last year there has been some work around digital inclusion, bringing partners together and understanding what will be happening as a system. A draft principles framework has been set up and SM and BF wants to ask PHIB if this is something the board will endorse.

Digital Inclusion focused planning to date:

- ICS Digital Inclusion Roundtable: Gather partners to discuss digital inclusion and begin to align
- ICS Digital Inclusion Steering Group: Facilitate a collaborative approach to addressing digital inclusion across MSE

Key Areas:

- Collaboration
- Understand where the disparities are
- Signposting- Supporting residents
- Community Assets
- Digital Systems
- Workforce

Logic model has been used over the course of a few month to look at what the wider issues are and what the impact was.

3 Priorities:

- Digital Inclusion Framework- Guiding principles
- Mapping of Digital Solutions i.e. free wifi
- Community Engagement



Our community and commercial assets are being supported for increasing digital access and supporting the workforce. Working together with Barclays Eagles and to support staff with their digital literacy skills and also the Duke of Edinburgh to set up the trainer model system in communities and identifying/ mapping community assets and thinking about keeping digital solutions simple in their approach.

SM shows an example from Surrey and Heartlands and its shows that what is already in this strategy is our within MSE principles as well.

Discussion for the board is:

- How can some of the priority areas be identified in regards to digital inclusion
- Endorsing the above principles
- System Led workplan vs Place led agenda with key objectives.

JC explains there is a big push around the NHS app and also the shared care records and making them accessible to patients. JC asks SM are there any plans to support people in these areas?

SM explains some work is being done on the above. ECC is running a programme about digital health literacy champions and there working in the libraries to support residents. Work is being done on 'how do you access your health records' and also using those champions and train the trainer model to make is widespread across all areas.

Key Points to note from OR:

- Choice- not all residents want to use a phone or have access to one
- Cost- not everyone has free wifi
- Community engagement- Important!

JB ask SM:

- National Research: is it being tapped into and looked at enough
- Equality Impact Assessments
- Community

ET asks how digital can be taken forward. Would it sit under the remit of the digital board where all partners would be involved or lean towards one of the local authorities so they can lead and champion on this piece of work.





4. Integrated Weight Management Services (presented by Dr Peter Scolding)

PS gives an oversight if the work being undertaken on the weight management services. Obesity and overweight is linked to a whole array of important health conditions. PS wants to make it simpler for patients and referrers to navigate and make sense of what they should be doing. PS explains about taking a longer term approach to understanding the value that people get from weight management services.

An agreed partnership is with Novo Nordisk to work together and how we develop any proposals for change and can help link into national expertise.

SH explains how they are looking at the governance around this project. The steering group has three local authorities from each four alliances that are representing and providing support. Any decisions or recommendations would come via PHIB and be ratified before going to local authorities in the ICB for formal decision making. 12 month is being given to develop the future weight management pathway. The group is doing a service mapping piece of work and then the first workshop will start. A tiered map is shown and SH goes through meanings of each tier.

Progress:

- Resources in post from mid-march
- First steering group established with representation from Local Authorities and Alliances.
- Weight Management dashboard developed
- Service mapping commenced

Next Steps:

- First Workshop to take place late June/Early July
- Complete Service Mapping and Establish baseline data
- Consider options for current capacity issues in existing services (tier 3)

JoB would like more detail around the project and proposals so not to clash with whats already being done.

Action – The Board with need to sign off on terms of reference and also approval that the steering group will report to PHIB to make any recommendations. The Board approves the approach the weight management team is taking.





5. **HI Funding Framework 2023/2024** (presented by Emma Timpson)

ET explains there have been a few discussions in regards health and inequalities funding for 23/24 and feedback was taken from previous discussions that with regards to the allocation of the funding, there have been some adjustments made. There will be continued investment in the infrastructure which represents the support that the PHM team provides. These sit within PHIB allocation and a system wide approach to investing health inequalities funding into a small number of priorities.

ET explains about the governance process and it is suggested that we look to invest the PHIB priority funding of that 1.4 million in a small number of schemes. ET shows through a presentation, the potential areas to focus on and to prioritise i.e. cardiovascular disease with particular focus around hypertension. A multiyear approach is being adopted. Alliances have fed back that they may wish to continue funding existing projects that they prioritise in 2023 so an impact could be shown over a longer period of time.

JB explains in regards to a principle piece and wants to explain about long term investment. JB would like to collaborate in terms of funding i.e. national lottery trusts.

Timelines:

- PHIB to sign of priorities at 24th May meeting
- Approach agreed for management of funding
- PHIB approves in principle priority system projects and funding at 21st June meeting.
- Management arrangements in place by end of June
- HI funding panel ensuring contracts and funding transfer completed by end of July
- Projects commence mobilisation by August.

Action – THE Board to give feedback around priorities for the 1.4 million PHIB allocated funding.

Action – Proposals to be signed of in next meeting. Ask GWB to work up a proposal to come back to PHIB.

6. **Programme Updates**

No programme updates

Any other Business

No other business was raised.

7. Date of Next Meeting

Wednesday 21st June 2023, 10:30am -12:30pm



Minutes of Community Assembly Group Committee Meeting

Held on 7.6.23 / 10:30 am

via MS Teams

Attendees

Members

- Kirsty O'Callaghan, Mid & South Essex ICS
- Simon Prestney, Mid & South Essex ICS
- Ru Watkins, Hamelin Trust (Vice-Chair)
- Nic O'Brien, Home Start, Essex (Vice-Chair)
- Peter Blackman, South Woodham Ferrers Health & Social Care group
- Joanne Webb, resident
- Steve Smith, Havens Hospice
- Jeff Banks, Mid & South Essex ICS
- Rachel Brett, ECVYS
- Carla Andrews, Motivated Minds
- Simon Harris, Blaireau
- Emma Branch, Basildon Alliance
- Natalie Smith, Thurrock Council
- Matthew King, Mid & South Essex
- Sam Ball, South East Essex Alliance
- Neave Beard, Strengthening Communities, ECC
- Simon Harniess, Essex Care Association
- Mike Eldred, Essex Association of Local Councils
- Romi Bose, NHS Mid & South Essex ICB & Thurrock Alliance
- Paul Gilham, Mid & South Essex ICB
- Sue Handscombe, MACE
- Charlotte Britton, Essex

Other attendees (Guests)

- Janet Smith, note taker
- Amy Rowson, Frontline

Apologies

- Kim James, Healthwatch, Thurrock
- Charlene Slade, Essex Association of Local Councils
- Anthony Quinn, SAVs
- Tracey Harris, Southend
- Emily Lawrence, Thurrock Alliance
- Simon Johnson, BBW CVS



1. Welcome

The Chair welcomed everyone to the meeting. Apologies were noted as listed above. Attendees were informed that the meeting would be recorded for the purpose of minute taking.

2. Declarations of Interest

The Vice-Chair asked members to note the Register of Interests and reminded everyone of their obligation to declare any interests in relation to the issues discussed at the beginning of the meeting, at the start of each relevant agenda item, or should a relevant interest become apparent during an item under discussion, in order that these interests could be managed.

Declarations made by ICB Board and committee members are also listed in the Register of Interests available on the ICB website.

The following declarations of interest were raised / There were no declarations raised.

3. Minutes/welcome

The minutes of the last meeting on 10th May 2023 were received.

Outcome: The minutes of the meeting held on 10th May 2023 were approved as an accurate record.

RW welcomed all to the meeting and reminded everyone of the huge steps the assembly has already made. Changes are happening and change brings opportunities.

4. Frontline

Amy Rowson from Frontline joined the meeting to give a presentation about frontline, a digital referral and information signposting system.

5. Comms Update

JW ran through the comms presentation





We have talked about the who, we have now moved to the why. One of the slides has some draft logos, if you could give feedback on which logo you think represents coproduction and the assembly the best to Simon Harris and there is also a Facebook page set up for members of the community assembly,

<u>https://www.facebook.com/groups/642684040669695/</u> please join if you can and you can also comment on there.

ME offered to join the comms group.

6. CRM Update

We have already had a presentation of the CRM system, hopefully everyone has signed up on fresh works, if not you can sign up <u>https://midandsouthessexicb-</u> <u>org.myfreshworks.com/crm/sales/web_forms/e55266518d8a769dd5bb6d444c7b7dbc082ac</u> <u>912e1613d71ebee40cba787b500/form.html?1683662567110</u> if you do sign up, please let SP know. Co-producing with LA partners. There are no IG issues, can use across sectors.

7. Maturity Matrix

SP ran through the maturity matrix slides



Discussed language, needs to be understood and need to stop using acronyms.

8. Forward Date Planning (ICB meetings etc.)

Next ICP committee meeting, need to speak about our success, KOC will ensure that happens. Links for the Board and Partnership dates below:-

Board dates are here Events - Mid and South Essex Integrated Care System (ics.nhs.uk)

Partnership dates are here Events - Mid and South Essex Integrated Care System (ics.nhs.uk)

9. Any other business

Restructure: - you have all received a letter from Anthony Mckeever informing people of the restructure. It is a phased restructure following a national mandate to reduce running costs, which unfortunately means people as well as estate. We are now in consultation period and have had draft structures released to us. With change comes the opportunity to fed into



that process, comment and ask questions.

ICB commitment to working with the voluntary sector and partners doesn't change.

Can feed any questions/concerns to KOC who will send up to the executive. RW sent holding questions yesterday. A combined response from the assembly will be more powerful seeking reassurance the assembly will continue. We want to safeguard the work for our communities, send questions to JS who will hold centrally and RW will pull together and send a central response within the next 10 days.

JS will send the letter from Anthony Mckeever to all along with the holding questions RW sent last night.

Chair Recruitment – KOC is pushing through the required governance around the Chair role, looking to go out to external advert in the next couple of weeks. It is a paid role.

10. Date of Next Meeting

Wednesday 5th July 10:30 am via Teams.





VCFSE Community Assembly Comms Assembly Discussion

Reminder of what was presented by the Assembly to the ICP and is agreed by us as our Vision, Mission and Approach



Vision

"To empower people and communities to drive positive change that improves health and wellbeing for all."

Mission

"To engage with communities, understand their needs and, together with partners, act to improve the health and wellbeing of people in Mid and South Essex."

Approach

We will be action and outcomes-driven in everything that we do.

We will organise ourselves to represent the VCSE at an ICS and Alliance level effectively.





MSE Colour Schemes usage – comms team advice & support

Mid and South Essex

Our colours

Primary colour

The ICS logo type uses an accent colour called 'ICS Purple'.

The ICS Purple colour is our primary colour. Using this consistently builds brand recognition, helpling our residents identify our communications as coming from Mid and South Essex Integrated Care System.

Accent colours

The accent colours are taken from the ICS logo colour wheel.

These accent colours should be used alongside the primary ICS Purple colour. As a general rule, accent colours should not exceed 20% of total colour usage.

For more guidance on how to use these colours in an accessible way, please see section 10.



ICS PURPLE C:73 M:100 Y:0 K:0 R:106 G:35 B:131 HEX: #6a2383







Active Communities

 \odot Communities Driving Change

 \circ Distinctive

- O Influencing Health Improvements
- O Communities Improving Health
- Communities Improving Wellbeing
- Communities Improving Local Health Outcomes
 More ideas?





- \odot Landing point for comms
- Invite assembly in link here <u>https://www.facebook.com/groups/642684040669695/</u>
- \odot Share via link to widen the net
- \odot Poll for logo refined options
- \odot Poll for strapline
- Early stage sharing of purpose of assembly
- Campaign management for digital route
- Hook for joining the Fresh CRM database and being drawn in to assembly at system, place, neighbourhood





Audience - Citizens and intersection with the VCFSE

Campaign title - "Citizens and the Voluntary, Community, Faith and Social Enterprise sector are coming together to improve health, wellbeing and welfare working closely with the NHS and Local Authorities."

If in agreement a comms session will be surfacing to **develop this theme** from strawman **to campaign**.

Work with MSE ICB comms for consistency and developing a packet for distribution across the VCFSE to gain momentum for different types of social media and connection to the call to action which will consistently be the Fresh CRM system.







VCFSE Community Assembly "Maturity Matrix Action Plan Condensed"

1.1The VCSE sector as a key strategic partner and decision maker

- 1.Progress the system for signing up to the assembly
- 2.Map available ICB meetings and assess where the most impact will be
- 3.Review areas of system weakness where the VCFSE can have an impact in "strategic commissioning"

1.2 Building and strengthening VCSE infrastructure for collaborative working

- 1.Map existing partnerships & develop a mechanism to gather feedback and share information regularly
- 2.Progress the CRM to identify thematic networks and communities of practice. Tailor comms to different cohorts.
- 3.Develop system and Alliance assemblies to operate cohesively



1.3 Embedding the VCSE as an equal partner in ICS governance and decision-making.

- 1.Map ICS governance, align reps to meetings, influence based on moving the sector forwards not agency.
- 2.An ICS VCSE strategy is co-developed and comms are developed across sector.
- 3.New member application form used to align to vision, mission and values.



2. Sustainable investment for VCSE Alliances,

- 1.CRM system enables a state of the sector report to strengthen investment case post-restructure.
- 2.Maturity in this area involves a commitment to long-term funding for the development of the Alliance.



3. Designing and Commissioning effective, innovative, and sustainable service.

- 1.Current status of VCFSE contracts is required initially versus future state.
- 2.End-to end coproduction is then required to rework commissioning approach.
- 3.The CRM acts as an enabler to segment the market and allow strengthening.
- 4.Thematic groups will strengthen coproduction approaches "VCSE Collaboratives"

4. Data, insight and intelligence.

- 1.Quantitative and qualitative data in the VCFSE needs recognition in the ICB
- 2.Social value needs a central portal for use to deploy in grants and contracts
- 3. This forms an essential element of value and impact evidence for the sector.
- 4. Digital Directorate support is required
- 5.Review of neighbouring systems to learn best practice
- 6.Codesign / Coproduction as standard



5. Investing in leadership and relationship development

- 1. The wider assembly at system level is needed for flow of ideas & engagement
- 2.Culture shift is needed for high-level VCFSE / ICB relationships to develop
- 3.Inclusion in People Board, Digital, Estates, Inequalities etc
- 4. Coaching and secondments developed
- 5.ICB recognition of VCFSE in leadership and workforce



6. Working with the VCSE sector to address the wider determinants of health

- 1.The VCFSE to identified priority groups and the social determinants affecting health and wellbeing.
- 2.VCFSE embedded across relevant workstreams for equal partnership.
- 3.Thematic collaboratives ICB/P and VCFSE.
- 4.Baseline improvement approach to investment

