

South West London Integrated Care System update

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Chief Executive and Place Based Leader
for Health



Croydon is now part of the South West London Integrated Care System



On 1 July 2022, we launched the South West London Integrated Care System as we take on health and care statutory responsibilities

The ICS has four purposes:

1. improving outcomes in population health and healthcare
2. tackling inequalities in outcomes, experience and access
3. enhancing productivity and value for money
4. supporting broader social and economic development

The South West London Integrated Care System brings our health and care partners closer together, to make sure local people receive the best care.

Legislation outlined in the 2022 Health and Social Care Act, makes it easier for GPs, hospitals, mental health, social care, community services, and the voluntary sector to work together more closely.

By working together, we can do more to: support people to live healthier and happier lives; prevent ill-health; keep people independent for longer; and take action together to address the wider-determinants of health. Examples of these wider-determinants of health are jobs, housing, education and our environment. We know these have a big impact on our health.

All over the country, in the poorest areas people have worse health and lower life expectancy than the people living in the richest areas. Our South West London ICS will focus on reducing these health inequalities or unfair differences in health in different groups within our six boroughs.

What is integrated care?

King's Fund animation: how the NHS works and how it is changing



NHS England: Strong Integrated Care Systems Everywhere



What are Integrated Care Systems?

The Health and Care Act 2022 will establish 42 ICSs across England on a statutory basis.

Integrated Care Systems will be made up of two parts:

- **Integrated Care Boards** decide how the NHS budget for their area is spent and develop a plan to improve people's health, deliver higher quality care, and better value for money
- **an Integrated Care Partnerships** bring the NHS together with other key partners, like local authorities, to develop a strategy to enable the Integrated Care System to improve health and wellbeing in its area

Other important ICS features are:

- **Local authorities**, which are responsible for social care and public health functions as well as other vital services for local people and businesses.
- **Place-based partnerships** lead the detailed design and delivery of integrated services across their localities and neighbourhoods. Our place partnerships involve the NHS, local councils, community and voluntary organisations, local residents, people who use services, their carers and representatives and other community partners with a role in supporting the health and wellbeing of the local population.
- **Provider collaboratives** bring NHS providers together to achieve the benefits of working at scale across multiple places and one or more ICSs, to improve quality, efficiency and outcomes and address unwarranted variation and inequalities in access and experience across different providers.



Now **1.5 million**
 By 2031 **1.55 million**

Resident population



£4.7 billion

NHS budget



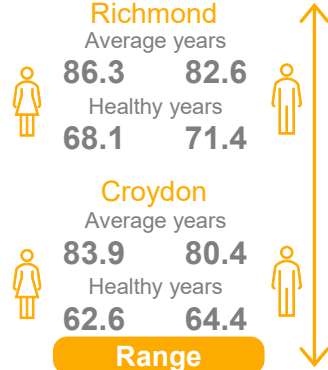
6 London boroughs

Places



296 km²

Total area



Now **13%**
 By 2039 **17%**

21%

Under 16 | Over 65



35%

Black, Asian and minority ethnic



21%

Long-term conditions



Average years **84**
 Healthy years **65**



Average years **81**
 Healthy years **66**

Life expectancy at birth



Social care **36,000**
 NHS **34,000**

Workforce



39

Primary care networks



180*

GP Practices



7

Acute and community providers



2

Mental health providers

* <https://swlondonccg.nhs.uk/wp-content/uploads/2021/09/13996-SWLCCG-Annual-Report-and-Accounts-202021.pdf>

South West London Integrated Care System

Our integrated care system will have two statutory committees:

NHS South West London Integrated Care Board decides how the NHS budget for their area is spent and develop a plan to improve people's health, deliver higher quality care, and better value for money

Our NHS Board is made up of:

- Our Chair
- 4 non-executive members
- Chief Executive
- 4 partner members NHS and Foundation Trusts
- Partner member Primary Medical Services
- Partner member Local Authorities
- Chief Finance Officer
- Medical Director
- Director of Nursing
- 6 Place Members
- Deputy Chief Executive Officer

Both the ICB and the ICP meet in public throughout the year – more information about these meetings in public can be found at

www.southwestlondonicb.nhs.uk

South West London Integrated Care Partnerships bring the NHS together with other key partners, like local authorities, to develop a strategy to enable the Integrated Care System to improve health and wellbeing in its area

Our Partnerships Board is made up of:

- Co-Chairs – the ICB Chair and a Leader of a SWL Council
- Health members
 - ICB Chief Executive
 - ICB Population Health Management Director
 - ICB CFO
 - 5 NHS SWL Provider Chairs
 - Primary care representative
- Local Authority members
 - 6 Chairs of Health and Wellbeing Boards
 - Chief Executive representative
 - Director of Children Services representative
 - Director of Adult Services representative
 - Director of Public Health representative
 - Growth and economy representative
- 6 Place representatives
- SWL Clinical Senate co-chairs
- ICB Deputy Chief Executive Officer
- Healthwatch representative
- Voluntary sector representative

Working together – Acute Provider Collaborative

Bringing acute healthcare providers to improve quality and outcomes, including addressing unwarranted variation and inequalities in care

- A first meeting of the APC Board took place in September and included the Chairs and Chief Executives of Croydon Health Services NHS Trust, Kingston Hospital and St George's Epsom & St Helier Hospital Group.
- The team is looking at structural change across service areas to ensure maximum efficiency, transformation and capacity to ensure the delivery of national targets.
- Three major programmes of work sit within the APC:
 - Diagnostics
 - Outpatients
 - Elective recovery
- The APC had also formed a number of collaboratives hosted by individual trusts including:
 - SWL Recruitment Hub
 - Procurement
 - Pathology
 - South West London Orthopaedic Centre
- The APC has begun work on an elective strategy which will establish core principles for working together to reduce health inequalities and adopt a 'system first' approach to elective care. This will review demand and capacity in six high volume specialities to help assess current models of care
- Next steps: a scoping exercise to identify areas for further collaboration to support deliver of quality clinical outcomes.

Working together - Health and Wellbeing Boards (HWBs)

- Guidance on Health and Wellbeing Boards (HWBs) had not been updated since 2013. The responsibilities outlined in the Health and Social Care Act 2012 are:
 - Assessing the health and wellbeing needs of their local population
 - Publishing a JSNA and joint local health and wellbeing strategy
 - Promoting greater integration and partnership working
- To align the role of HWB with the [Health and Care Act 2022](#), in July 2022, **Health and Wellbeing Boards draft Guidance for Engagement** was published by The Department of Health and Social Care. The document focuses on:
 - The role of HWBs in enabling effective system and place-based working
 - Provides clarification about their role within systems

The guidance suggests five principles for Partners to adopt when developing relationships, including:

- Building from the bottom up
- Following their principles of subsidiarity
- Have clear governance
- Collaborative leadership
- Avoiding duplication of existing governance mechanisms

The guidance recommends that systems build on the work of HWBs to ensure that action at a system-wide level adds value to what is being done at place. The DHSC asked a series of questions of HWBs and we now await final publication.

<https://www.gov.uk/government/publications/health-and-wellbeing-boards-draft-guidance-for-engagement/health-and-wellbeing-boards-draft-guidance-for-engagement-questions-for-engagement>

Working together – continuity

- ICB and ICP leaders within local systems, informed by the people in their local communities, need to build on the work of the HWB
- ICP should build on the existing work by HWB and other place based partnerships to integrate services
- The functions and duties that previously rested with CCGs have moved to ICBs.
- HWBs will continue the relationship and responsibility they had with the CCGs, this includes:
 - Forward plans (previously commissioning plans)
 - Annual reports
 - Performance assessments

Croydon 'Place'

Croydon is one of South West London's six place partnerships alongside Merton, Kingston, Richmond, Sutton and Wandsworth.

Place-based partnerships lead the detailed design and delivery of integrated services across their localities and neighbourhoods. Our place partnerships involve the NHS, local councils, community and voluntary organisations, local residents, people who use services, their carers and representatives and other community partners with a role in supporting the health and wellbeing of the local population.

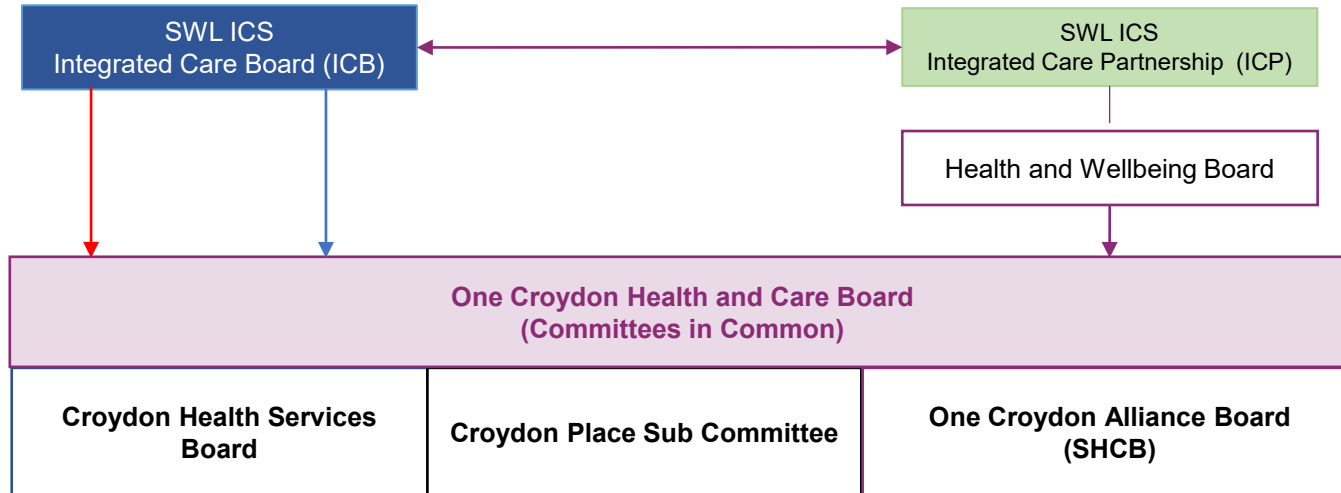
In Croydon, our place-based partnership includes:




- Croydon Council
- Croydon Health Services NHS Trust
- Croydon Healthwatch
- South London and The Maudsley NHS Trust
- Croydon voluntary sector organisations
- NHS South West London



Croydon Place Structure

There is significant overlap between the Shadow Health and Care Board, Place Committee and Health Board resulting in the same people having similar discussions in three places. Partners agreed that bringing these boards together in a committee in common will rationalise decisions and discussion, and further builds on the alignment between the CHS Board and CCG Local Committee.



-  Financial delegation (scope TBC)
-  Health Decision/delegation
-  Wider Remit/whole place health and care

*Croydon Council will be changing from a Leader/Cabinet model to a Mayoral model in May 2022. The key difference being the Mayor is elected by the electorate every four years; decisions can still be delegated to the Cabinet.



Committee in Common: Membership

- The functions and membership of the Place committee are significantly similar to the Alliance Board (SHCB); therefore the aim was simplicity - to have the same membership for both.
- The list below shows membership for both the Place Committee and Alliance Board.
- The total number of members in the Committee in Common will be 28.

CHS Board Leadership	Place Committee/Alliance Board
Chairman of the Trust	Croydon Place Based Leader for Health (for CCG and CHS)
Chief Executive of the Trust (place Based Leader)	Chief Executive, Croydon Council
Joint Chief Financial Officer	Chief Executive, Croydon GP Collaborative
Joint Chief Nurse	Chief Executive, South London and Maudsley NHS Foundation Trust
Medical Director	Chair, Age UK Croydon
Non-Executive Director x7	A nominated Non-Executive Representative from each Alliance Member Organisation
Associate Non-Executive Director x1 (non voting)	VCS Infrastructure Organisation Chief Executive (on rotation basis)
Director of Human Resources and OD (non-voting)	Healthwatch Chief Executive
Director of Public Health, Croydon Council	Director of Public Health, Croydon Council
Chief Executive, Croydon Council	Director of Adult Social Services, Croydon Council
Healthwatch Chief Executive	Chair of Professional Cabinet
COO	Chair of Senior Executive Group
Director of Strategy Planning & Performance (non voting)	NHSE Regulator open invite

One Croydon: our place based partnership

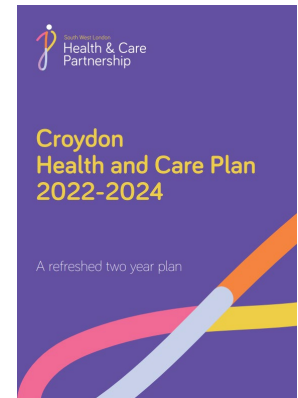
Croydon was one of the first in London to appoint a Place Based Leader for Health, with responsibility for the borough's acute and community services and local primary care.

Our vision

Our vision remains the same – to deliver better care and support tailored to the needs of our communities and available closer to home. We will meet this ambition by bringing together the borough's NHS physical and mental health services, along with GPs, social care and the voluntary sector, joining up services to provide more holistic care.

We are committed to our original aims to:

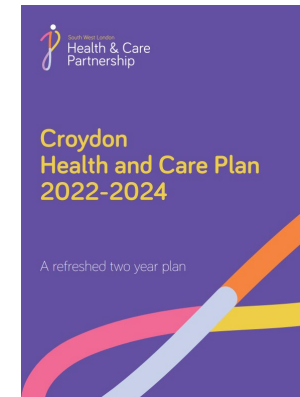
- **Focus on prevention and proactive care:** preventing or identifying and tackling illness and ill-health at the earliest possible opportunity
- **Unlock the power of communities:** connecting local people with each other to help them stay fit, health and happier for longer
- **Put services back in the heart of the community:** providing easier access to local integrated services tailored to the needs of Croydon's communities.



Croydon Health and Care Plan

Following the impact of Covid-19, we have added new aims that set out to:

- **Support people to recover from the effects of the pandemic:** COVID-19 has identified and created new challenges for Croydon's health and care system to address working hand-in-hand with our communities
- **Support our health and care workforce:** recruit, retain and develop our health and care staff so we can provide the high-quality and resilient services our communities deserve
- **Embed a population health management approach:** use data, technology and public health expertise to put in place the right services, investment and approach for Croydon
- **Tackle inequalities:** to drive equality in health, we will also address equality in wider areas that impact health, like housing, employment and education



Croydon Clinical Leadership Priorities

- Delivering Clinical / professional leadership which stems across Primary/ community and secondary care and drives through required pathway changes with all system partners
- Delivery against the Health and Care plan ambitions
- Making inroads into the significant backlog of care since March 2020, for example chronic disease management and case finding
- To meet growing epidemics including areas such as diabetes and hypertension
- Full implementation of the PCN DES with large changes around patient access and anticipatory care for 22/23, e.g. MDTs with care homes and community services
- Embedding digital transformation initiatives ranging from online consultations to patient access to medical records
- Reducing Health Inequalities and addressing the challenges within the CORE20 PLUS 6 for Croydon



Clinical/Professional Lead Portfolios

Programme of work	Clinical/ Professional lead	ICB Management lead
Population Health Management	Emily Symington	Laura Jenner
Quality & Prescribing	Khalid Khan	Helen Goodrum/ Louise Coughlan
Homelessness & Refugees	Nishal Velani	Meeta Kathoria
Digital / IT	Dinush Lankage	Laura Jenner/ Daniele Serdoz
Planned Care 1 General Surgery + ENT, Urology, Diagnostics, Haematology & Anti-coagulation	Farhhan Sami	Kama Balakrishnan
End of Life Care + Frailty	Nishal Velani	Karen Barkway
Personalisation / Social Prescribing	Emily Symington	Laura Jenner
Out of Hospital + Care Home	Anna Clarke	Daniele Serdoz
Long Term Conditions 1 Diabetes, Cardiovascular, Respiratory, Stroke, Dementia	Emily Symington	Meeta Kathoria
Adult Mental Health	Dev Malhotra	Wayland Lousley
Children and Young Persons Mental Health	Sharon Raymond	Shelley Prince
LD / Neurodevelopmental (Children & Adults)	Henk Parmentier	Jennifer Francis
Long Term Conditions (2) MSK/ Rheumatology/Pain, Trauma & Orthopaedics, Dermatology, Digestive Diseases	Bobby Abbott	Kamal Balakrishnan
Urgent Care + Primary Care Access	John French	Sarah Raheem
Children and Young Persons Physical Health	John French	Shelley Prince
Cancer	Jaimin Patel	Daniele Serdoz
Planned Care 2 Maternity/Gynaecology + Women's Health, Infectious Diseases, & Vaccination, Endocrinology, Renal, Neurology.	Judith Mbaire	Kamal Balakrishnan
Adult Mental Health 2	Sharon Raymond	Wayland Lousley
Localities (ICN+) Development	Khateja Malik	Laura Jenner
Safeguarding (Children)	Sharon Raymond	Sally Innes
Elected lead	Mike Simmonds	Matthew Kershaw
Primary Care Development Lead	Dipti Gandhi	Matthew Kershaw

SWL Acute Provider Collaborative

Another important feature of ICS working is SWL's Acute Provider Collaborative

- Bringing NHS providers together to achieve the benefits of working at scale across multiple places and one or more ICSs
- In SWL, the Acute Provider Collaborative comprises of us at CHS, alongside St George's, Epsom and St Helier, and Kingston Hospital NHS Foundation Trust

Working together to continuously improve quality, efficiency and outcomes, including proactively addressing unwarranted variation and inequalities in access and experience

The APC in South West London is helping to reduce duplication and increase efficiency, including sharing recruitment, procurement and pathology teams.



SWL recruitment hub

Time to recruit down in Croydon by 23% in six months, from almost 60 to 45 working days
Analysis of live activity compared to vacancy rates is undertaken for each Trust to ensure recruitment plans are targeted and adjusted as required.

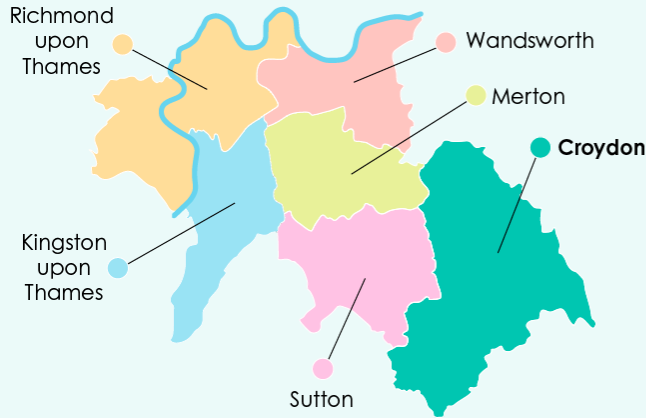
Building on successes for 2022-23

SWL APC now has a vision to develop an elective strategy, maintaining our high performance and delivering a “system first” approach to elective care



Bringing the Croydon health and care plan to life

Croydon's practical solutions



Proud to be working together to create healthier communities

Partners involved

NHS South West London CCG
One Croydon's alliance of Voluntary and Community Sector organisations
Croydon Council

Find out more

Learn more about our work and get involved at www.swlondon.nhs.uk

How we're making a difference

Through the Healthy Communities Together programme, which was developed in partnership between The National Lottery Community Fund and The King's Fund, One Croydon was awarded £500,000 over 4 years to support local partnership working to improve the health and wellbeing of Croydon's local communities.

Six Local Community Partnerships (LCPs) have been implemented covering the whole of Croydon. Chairs from the local community are coming into post in each of these LCPs, bringing greater local ownership, collective voice and leadership.

The programme of LCP events gives the opportunity for local residents, community groups, local charities and health and social care teams to collaboratively develop community action plans

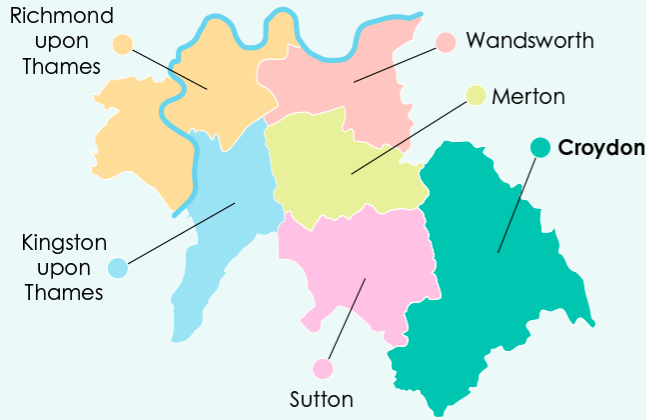


Locality partnership working has improved the connections between our clinical teams, our community assets and community organizations. It's empowered people to improve their quality of life.

Lynda Graham Social Prescribing Link Worker-
Team Leader



Croydon's hospital in a hospital



Proud to be working together to create healthier communities

Partners involved

NHS South West London CCG
Croydon Health Services
Epsom and St Helier University Hospitals
St George's University Hospitals
Kingston Hospital

Find out more

Learn more about our work and get involved at www.swlondon.nhs.uk

How we're making a difference

To make sure that as many people as possible across South West London have their planned operation as soon as possible following the delays caused by the pandemic.

Over 18,500 patients have safely received planned care at the Croydon Elective Centre since it opened in July 2020, despite the pressures of the pandemic. The 'Covid-protected' hospital within a hospital has been dubbed a 'blueprint for the NHS', seeing around 300 patients from across South West London every week for routine surgery or planned care - more than a 10% increase since pre-lockdown levels. The Croydon Elective Centre has its own separate entrance, operating theatres, inpatient wards and a catheter lab, with strict infection prevention and control measures to keep it protected.

Around 2,000 patients have been referred to the centre from neighbouring trusts as part of a coordinate approach to tackle backlogs in South West London.



The Croydon Elective Centre is a great example of how clinically-led innovation can make a real difference to the lives of our patients and staff, as well as the wider health system.

Stella Vig, Consultant Surgeon and Clinical Director for COVID-19 Recovery, Croydon Health Services NHS Trust

Thank you.
Any questions?

