# Healthwatch in Sussex [HWiSx], delivering the Sussex ICS Strategy

# 1. The Sussex ICS Strategy

#### **Ambitions**

Starting well

Living well

Ageing well

Better care and treatment

Supported staff

## Joined up communities

- 1. Joined-up services and teams
- 2. Working with communities
- 3. Greater Involvement of individuals
- 4. Focus on keeping people healthy
- 5. Focus on all areas of people's lives
- 6. Focus on children and young people

## **Success factors**

- a. Maximising power of partnerships
- b. Growing and supporting our workforce
- c. Improving use of technology and Information

# 2. HWiSx the challenge

- Healthwatch England advice to local Healthwatch on the Health and Care Bill and our additional and changed responsibilities <a href="https://network.healthwatch.co.uk/guidance/2021-07-14/health-and-care-bill-what-it-means-you">https://network.healthwatch.co.uk/guidance/2021-07-14/health-and-care-bill-what-it-means-you</a>
- Capacity local Healthwatch services are not Commissioned by the Sussex ICS or NHS Sussex other than on a project by project basis. Most ICS's that are actively supporting local Healthwatch as members of the integrated system are contributing as additional £30,000 per year per Healthwatch in addition to project related funding. We have a generous offer from NHS Sussex of £30,000 2022/23 and £30,000 2023/24 of unrestricted funding [i.e. not identified as attached to project delivery]. However, this falls far short of the amount provided by other ICS's and the amount estimated by HWiSX as being required [approx. £90-£100,000]
- HWiSx can support the delivery of ICS strategy by:
  - Attending the Assembly
  - o Assisting with the implementation of the ICS engagement plan

- Sussex wide insight on the 3 ICS Strategy success factors, for example, GP access and digital support Sussex wide.
- Providing independent, evidence based challenge to the Assembly and NHS Sussex on topics that may be topical, relevant and related to its priorities, But also on issues, and for people & communities, that are lesser heard. Challenging on issues that are unknown, unnoticed and not currently prioritised by the ICS.
- Sussex wide insight on the wider determinants of health and wellbeing and health inequalities
- Working with the ICS voluntary sector representatives to promote the role of volunteers and unpaid carers in delivering Workforce improvements
- Sussex wide insight gained from more local project work e.g. from B&H GP access in East Brighton, End of Life Care, Maternity and Mental Health in the peri natal period

#### 3. HWiSx next steps

- Set out a work programme for 12-18 months that closely aligns with the local and Sussex wide ICS Strategy and Delivery Plans.
- Consider what can be provided to support the ICS within the resources already offered and justify the added value of funding at a more realistic and equitable level.
- Liaise with ICS voluntary sector reps locally and Sussex wide to integrate the HWiSx offer with that or the voluntary sector.

## 4. Healthwatch Brighton and Hove 12-18 month plan

See attached, and in summary:

Project	ICS Priority	B&H Priority
Access to GP	1,4, c above	
appointments		
across Sussex –		
public opinion		
Home care checks	1,3, a and b	Quality assurance
Environmental	1,3,5 and a	Quality assurance
Audits of University		
Hospitals Sussex &		
PLACE		
Dentistry	4,6 and b	
Delivering a toolkit	1,4 and b	
to support a		
wellbeing check for		
people recently		
discharged from		
hospital.		
Outpatient	1,4,5 a and b	
Transformation:		
Deliberative		
Engagement of		
Patient Experience.		

Maternal mental	2,6,a	Need identified in B&H Mental
health		Health JSNA [2022]

## 5. What can be provided within current resources and those offered by the ICS

- Attending the Assembly and providing a limited part time liaison function
- Providing independent, evidence based challenge to the Assembly and NHS Sussex on topics that may be topical, relevant and related to its priorities, But also on issues, and for people & communities, that are lesser heard. Challenging on issues that are unknown, unnoticed and not currently prioritised by the ICS.
- Sussex wide insight gained from more local project work e.g. from B&H GP access in East Brighton, End of Life Care, Maternity and Mental Health in the peri natal period

#### 6. Business case for an additional NHS Sussex investment in HWiSx

Without a further investment in HWiSx the ICS runs the risk of reputational damage in neglecting to have a strong independent and external route for quality assurance and challenge.

When compared to peer ICS's the Sussex system will be seen to have underinvested in external challenge and expertise in co-creation and co-design with local people, communities and service users.

#### 7. Added value in a further ICS investment in HWiSx

- Assisting with the implementation of the ICS engagement plan, with dedicated liaison post linking ICS and local delivery plans, commissioning engagement plans and Healthwatch insight
- Attending Sussex wide NHS Sussex and ICS decision making forums and advisory committees using Healthwatch staff and volunteers to provide independent and external assurance, insight and comment
- Sussex wide insight on the 3 ICS Strategy success factors, for example, GP access and digital support Sussex wide
- Sussex wide insight on the wider determinants of health and wellbeing and health inequalities
- Working with the ICS voluntary sector representatives to promote co-creation, codesign and delivery of commissioning and services
- Working with the ICS voluntary sector representatives to promote the role of volunteers and unpaid carers in delivering Workforce improvements
- Access to the Healthwatch England research bank, providing insight from local Healthwatch across England
- Access to Healthwatch England as a means of access to health and care decision makers, influencers, politicians and media nationally