



**Bedfordshire, Luton
and Milton Keynes**
Integrated Care Board

Health and Care Partnership

21 September 2022

▪ **Date:** 21 September 2022

Time: 17.00 to 18.00

Venue: Central Bedfordshire Council, Priory House, Chicksands, SG17 5TQ

Meeting: Bedfordshire, Luton and Milton Keynes Health and Care Partnership (Joint Committee) – Meeting in Public

Agenda

No.	Agenda Item	Lead	Purpose	Time
Opening Actions				
1.	Welcome, Introductions and Apologies	Chair	-	17.00
2.	Relevant Persons Disclosure of Interests	Chair	Note	
3.	Approval of Minutes and Matters Arising	Chair	Agree	17.05
4.	Review of Action Tracker	Chair	Agree	17.07
5.	Draft Integrated Care Partnership Terms of Reference – appointment of Deputy Chair	Chair	Note	17.10
Strategy				
6.	Draft Integrated care strategy update	Hilary Tovey	Presentation/ discussion	17.15
Governance				
7.	Questions from the public	Chair	Discussion	17.30
8.	Communications from the meeting	Chair	Verbal	17.35
9.	Health & Care Partnership Forward Plan	Chair	Discussion	17.40
Closing Actions				
10.	Any Other Business <ul style="list-style-type: none"> • Review of the meeting 	Chair	-	17.45

No.	Agenda Item	Lead	Purpose	Time
	<ul style="list-style-type: none"> Glossary of acronyms – will be circulated for information 			
11.	Date and time of next meeting: 14 December 2022 14.00-17.00pm Council Chamber, Bedford Borough, Borough Hall, Cauldwell Street, Bedford MK42 9AP	Chair	-	

The papers for this meeting have been published on the BLMK Health and Care Partnership public website. The meeting can be attended by clicking on the link on the BLMK Health and Care Partnership website <https://blmkhealthandcarepartnership.org/about-us/integrated-care-partnership-joint-committee/> link.

Members of the public can submit questions by emailing to blmkccg.contactus@nhs.net

Report to the Health and Care Partnership

3. Approval of Minutes and Matters Arising

Vision: “For everyone in our towns, villages and communities to live a longer, healthier life”

Please state which strategic priority and / or enabler this report relates to

Strategic priorities [click all that apply]

<input type="checkbox"/>	Start Well: Every child has a strong, healthy start to life: from maternal health, through the first thousand days to reaching adulthood.
<input type="checkbox"/>	Live Well: People are supported to engage with and manage their health and wellbeing.
<input type="checkbox"/>	Age Well: People age well, with proactive interventions to stay healthy, independent and active as long as possible.
<input type="checkbox"/>	Growth: We work together to help build the economy and support sustainable growth.
<input type="checkbox"/>	Reducing Inequalities: In everything we do we promote equalities in the health and wellbeing of our population.

Enablers [click all that apply]

Data and Digital <input type="checkbox"/>	Workforce <input type="checkbox"/>	Ways of working <input type="checkbox"/>	Estates <input type="checkbox"/>
Communications <input type="checkbox"/>	Finance <input type="checkbox"/>	Operational and Clinical Excellence <input type="checkbox"/>	Governance and Compliance <input checked="" type="checkbox"/>
Other <input type="checkbox"/> (please advise):			

What are the members being asked to do?

Approve <input checked="" type="checkbox"/>	Note <input type="checkbox"/>	Discuss <input type="checkbox"/>
--	----------------------------------	-------------------------------------

Report Author [name and role]	Michelle Evans-Riches BLMK ICB ICS Transition Programme Manager
Date to which the information this report is based on was accurate	14 September 2022
Senior Responsible Owner	Health and Care Partnership Chair

Executive summary		
The purpose of this paper is to review the Draft Minutes from the meeting held on 4 July 2022 with a view to their approval.		
What are the available options?		
To approve the minutes or to approve them subject to any required amendments.		
Recommendation/s		
The members are asked to review the Draft Minutes of the meeting on 4 July 2022 with a view to their approval.		
Key Risks and Issues [please describe your key risks and mitigation]		
None identified		
Have you recorded the risk/s on the Risk Management system? Click to access system	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Not applicable		
Are there any financial implications or other resourcing implications? [please outline sources and applications of funds]		
None		
How will / does this work help to address the Green Plan Commitments? Click to view Green Plan		
Not applicable		
How will / does this work help to address inequalities?		
Not applicable		
The following individuals were consulted and involved in the development of this report:		
Health and Care Partnership Chair		
Next steps:		
The Secretariat will finalise minutes e.g., make required amendments and save as approved.		
Appendices [please list]		
Appendix A – Draft minutes of the Health and Care Partnership on 4 July 2022.		

Date: 4 July 2022

Time: 10am

Venue: MSTeams

Minutes of the: Health and Care Partnership (ICP) held in public

Members:		
Name	Role	Initial
Councillor Tracey Stock	Chair	TS
Dr Manraj Barhey	Luton PCN Clinical Director	MB
Felicity Cox	ICB CEO	FC
Alison Davis	Milton Keynes University Hospital, Chair	AD
Emma De-Carteret	East of England Ambulance Director of Corporate Affairs and Performance	ED
Mary Elford	Cambridgeshire Community Services, Chair	ME
Javed Hussain	Luton Borough Council, Councillor	JH
Tracy Keech	Healthwatch Milton Keynes, Deputy CEO	TK
Rima Makarem	ICB Chair	RM
Peter Marland	Milton Keynes Council, Leader	PM
Sonal Mehta	VCSE Lead	SM
Mike Murphy	SCAS Executive Director of Strategy & Business Development	MM
Lucy Nicholson	Healthwatch Luton, Chief Executive	LN
Julie Ogley	Central Bedfordshire Council, Director of Social Care, Health and Housing	JO
Dr Navaneetha Rammohan	Milton Keynes PCN Clinical Director	NR
Eileen Taylor	ELFT Chair	ET
Helen Terry	Healthwatch Bedford Borough Chief Executive	HT
Kate Walker	Bedford Borough Council, Director of Adults' Social Care	KW

In attendance:		
Name	Role	Initial
Sanhita Chakrabarti	BLMK ICB Children and Young Peoples clinical lead	SC
Hilary Tovey	Assistant Director of Strategy	HT

Maria Wogan	Chief of System Assurance and Corporate Services	MW
Michelle Evans-Riches	Secretariat (Minutes)	ME-R

Apologies:		
Name	Role	Initial
Dorothy Griffiths	CNWL Chair	
Cllr Louise Jackson	Bedford Borough Council Chair of the Health and Wellbeing Board	
Dr Jane Kocen	Bedford PCN Clinical Director	
Cllr Khjtja Malik	Luton Council Portfolio Holder Public Health and Commissioning	
Cllr Hazel Simmons	Luton Council Leader	
Vicky Head	Bedford Borough, Central Bedfordshire and Milton Keynes Director of Public Health	

No.	Agenda Item	Action
1.	<p>Welcome, Introductions and Apologies</p> <p>The Chair welcomed everyone to the first meeting of the BLMK Health and Care Partnership (ICP). Apologies were received and noted as above.</p> <p>The meeting was confirmed as quorate.</p>	
2.	<p>Relevant Persons Disclosure of Interests</p> <p>Members were informed that the Conflict of Interest Management & Standards of Business Conduct Policy was approved by the ICB on 1 July and a conflicts of interest form would be sent to all members of the Health and Care Partnership for completion. Members were reminded that declarations of interest should be made as soon as reasonably practicable and by law within 28 days after the interest arises which could include an interest an individual is pursuing).</p> <p>Members were asked to declare any relevant interests relating to matters on the Agenda. There were none declared.</p>	
3.	<p>Health and Care Partnership (ICP) Terms of Reference</p> <p>The Health and Care Partnership (ICP) Terms of Reference were approved by the ICB meeting on 1 July and were presented to the joint Committee for noting.</p>	

	<p>Agreed:</p> <ol style="list-style-type: none"> 1. It was moved, duly seconded that Councillor Tracey Stock be appointed as Chair of the Health and Care Partnership. 2. That the agenda setting group consider a nomination for the role of Deputy Chair and it would be reported to the next meeting for approval. 3. That the delegated authority as detailed in paragraph 8.1 would be completed and reported to the next meeting. 	<p>Action1 TS Action 2 MER</p>
<p>4.</p>	<p>Integrated Care Strategy</p> <p>The Health and Care Partnership had met informally on 28 March and 26 May when there had been engagement on the development of the Integrated Care Strategy.</p> <p>The strategy needs to define the ICS ambition for the next 10-20 years and focus on the purpose of the ICS of improving health outcomes, supporting sustainability and reducing inequalities.</p> <p>The strategy would be developed over the summer, with community and partner engagement during the autumn and was required to be published by the end of December 2022. The strategy informed the Integrated Care Board’s joint integrated care plan for the next 5 years which was required to be published by the end of March 2023.</p> <p>The strategy will be informed by existing plans and strategies from partner organisations e.g. Joint Strategic Needs Assessments (JSNA), health and wellbeing strategies, place plans and insight from our people and communities. It will define how we work as a system, specify the case for change, and our population health ambition.</p> <p>BLMK had already adopted system priorities and enablers which provided the framework for the elements in the strategy. There are three core stages to its development:</p> <ul style="list-style-type: none"> • Desktop review of all partners existing strategies and plans • Review and forward view of population health data and system assets • Engagement with partners, workforce and communities <p>Partnership members were asked to reflect on messages that have been shared so far for example the importance of inclusion of the wider determinants of health e.g. housing, employment, education and consider key measurements of success.</p>	

	<p>Data would be gathered from Place and Primary Care Network profiles including, Core 20+5 inequalities data, JSNA profiles and local insight. It was clarified that mental health data was included in primary care network profiles.</p> <p>Key themes from community engagement to date were:</p> <ul style="list-style-type: none"> • Access to services, particularly primary care • Information and communication • Integrated working e.g. across schools, primary and secondary care • Training for all staff on mental health awareness and dealing with people with compassion • Personalised care • Inequalities and inclusive services <p><u>Discussion</u></p> <p>The strategy needs to reflect what partners are required to deliver, especially the statutory and contractual requirements.</p> <p>The importance of communication with the community was stressed and to ensure engagement was maximised especially regarding prevention initiatives e.g. wellbeing checks.</p> <p>Engagement was more effective if there is a small number of specifics that can be relayed to have an informed discussion on e.g. access to addiction services and how improving the experience in this area can be used as a model for other services. It was noted that there was some prioritisation in the Place Plans that need to be reflected in the strategy.</p> <p>The importance of thinking of a broad range of opportunities for example the experience the VCSE has working with groups and communities.</p> <p>The review of strategies and plans needs to include Buckinghamshire County Council.</p> <p>The importance of cultural competency and awareness of unconscious bias to ensure that the strategy and subsequent plan is inclusive of everyone in the community.</p> <p>The framework for making difficult decisions, particularly regarding financial investment when resources are stretched, was questioned. In response, it was noted that any changes to services or investment would have a quality impact assessment undertaken to inform the decision. National guidance was awaited for the 2 year operational plan, which was anticipated in the autumn and it was believed there would be a two year financial settlement which would assist in the planning process.</p>	
--	--	--

	<p>It was emphasised that the strategy which covered the whole life course of our population was the responsibility of the joint Committee to develop and agree and the Integrated Care Board would work with partners on the NHS integrated plan to achieve the ambitions of the strategy. A number of partner organisations undertake quality improvement assessments as part of their service improvement agenda and this knowledge and expertise will be used to create and implement the integrated plan.</p> <p>The Partnership members were invited to respond to the following questions and the responses would be used to develop the strategy:</p> <ol style="list-style-type: none"> 1. Are there any other specific groups or approaches we should be using to engage our system partners in the development of our strategy? 2. Are there any other specific groups or approaches we should be using to engage our system workforce in the development of our strategy? 3. Are there any other sources of data, or specific analysis you have undertaken, that you think we should be considering as part of this review? 4. Are there any other key themes or specific groups of our population that you think we should be considering as part of our review? 5. Are there any other key themes or strategies and plans that you think we should be considering as part of our review? <p>The responses to the questions were captured in a Menti poll and would be used to develop the strategy.</p> <p>Agreed: That the points raised in the discussion and responses to the specific questions be incorporated into the development of the draft Integrated Care Strategy which will be reported to the next meeting.</p>	<p>Action 3 HT</p>
	<p>Communications from the meeting</p> <p>The Chair summarised the following:</p> <p>The integrated care strategy will be developed from a variety of information sources including community insight, population health data, joint strategic needs assessments and local strategies Workshops will be held to understand and define the ambition of the partnership. The strategy will build on co-production and integrated working in BLMK.</p>	
	<p>Review of Meeting Effectiveness</p> <p>At each meeting members will be asked to comment on the effectiveness of the meeting, the information circulated in advance and any areas of improvement.</p>	
	<p>Annual Cycle of Business</p>	

	<p>Partnership Board members were invited to put forward items for future meetings via the Committee Secretariat.</p> <p>Noted</p>	
	<p>Any Other Business</p> <p>None</p>	
	<p>Date and time of next meeting</p> <p>21 September 2022 17:00 to 20:00 Central Bedfordshire Council, Priory House Chicksands SG17 5TQ</p>	

Approval of Minutes:		
Name	Role	Date
Tracey Stock	Chair	20/07/2022

Report to the Health and Care Partnership

4. Action Tracker

Vision: “For everyone in our towns, villages and communities to live a longer, healthier life”

Please state which strategic priority and / or enabler this report relates to

Strategic priorities [click all that apply]

<input type="checkbox"/>	Start Well: Every child has a strong, healthy start to life: from maternal health, through the first thousand days to reaching adulthood.
<input type="checkbox"/>	Live Well: People are supported to engage with and manage their health and wellbeing.
<input type="checkbox"/>	Age Well: People age well, with proactive interventions to stay healthy, independent and active as long as possible.
<input type="checkbox"/>	Growth: We work together to help build the economy and support sustainable growth.
<input type="checkbox"/>	Reducing Inequalities: In everything we do we promote equalities in the health and wellbeing of our population.

Enablers [click all that apply]

Data and Digital <input type="checkbox"/>	Workforce <input type="checkbox"/>	Ways of working <input type="checkbox"/>	Estates <input type="checkbox"/>
Communications <input type="checkbox"/>	Finance <input type="checkbox"/>	Operational and Clinical Excellence <input type="checkbox"/>	Governance and Compliance <input checked="" type="checkbox"/>
Other <input type="checkbox"/> (please advise):			

What are the members being asked to do?

Approve <input checked="" type="checkbox"/>	Note <input type="checkbox"/>	Discuss <input type="checkbox"/>
--	----------------------------------	-------------------------------------

Report Author [name and role]	Michelle Evans-Riches BLMK ICB ICS Transition Programme Manager
Date to which the information this report is based on was accurate	14 September 2022
Senior Responsible Owner	Health and Care Partnership Chair

Executive summary

The purpose of this paper is to review the Action Tracker by updating actions with progress and to agree closure of proposed completed actions.

What are the available options?

To close, update or amend actions listed on the Actions Tracker.

Recommendation/s

The members are asked to **review** the Action Tracker by updating actions with progress and to **agree** closure of proposed completed actions.

Key Risks and Issues

[please describe your key risks and mitigation]

None identified

Have you recorded the risk/s on the Risk Management system?

[Click to access system](#)

Yes

No

Not applicable

Are there any financial implications or other resourcing implications?

[please outline sources and applications of funds]

None

How will / does this work help to address the Green Plan Commitments?

[Click to view Green Plan](#)

Not applicable

How will / does this work help to address inequalities?

Not applicable

The following individuals were consulted and involved in the development of this report:

Health and Care Partnership Chair

Next steps:

To update the action tracker following comments from the Health and Care Partnership.

Appendices

[please list]

Appendix A – Health and Care Partnership Action tracker

Meeting of the **Health and Care Partnership** - Action Tracker

Key

Escalated	Escalated - items flagged RED for 3 subsequent meetings - BLACK
Outstanding	Outstanding - no actions made to progress OR actions made but not on track to deliver
In Progress	In Progress - Outstanding - actions made to progress & on track to deliver due date -
Not Yet Due	Not Yet Due
COMPLETE: Propose closure at next meeting	COMPLETE - GREEN
CLOSED (dd/mm/yyyy)	CLOSED

Items to be moved to "closed actions" once closed

Action No.	Meeting Date	Item Title	Action	Responsible Manager (Enter full name)	Past deadlines (Since Revised)	Current Deadline	Current Position	RAG (Add date action is agreed closed)
1	04/07/2022	H&CP Terms of Reference	Agenda setting group consider the Deputy Chair and report to the next meeting	Tracey Stock		21/09/2022	Report on the agenda	COMPLETE: Propose closure at next meeting
2	04/07/2022	H&CP Terms of Reference	Delegated authority as detailed in paragraph 8.1 of the Terms of Reference would be completed and reported to the next meeting	Michelle Evans-Riches		14/12/2022	This paragraph will be updated when authority is delegated from BLMK Integrated Care Board.	Not Yet Due
3	04/07/2022	Integrated Care Strategy	Comments from the Committee incorporated into the development of the Integrated Care Strategy that will be reported to the next meeting.	Hilary Tovey		21/09/2022	Update report on the agenda	COMPLETE: Propose closure at next meeting

Report to the Health and Care Partnership

5. Appointment of Health and Care Partnership Deputy Chair

Vision: “For everyone in our towns, villages and communities to live a longer, healthier life”

Please state which strategic priority and / or enabler this report relates to

Strategic priorities [click all that apply]

<input type="checkbox"/>	Start Well: Every child has a strong, healthy start to life: from maternal health, through the first thousand days to reaching adulthood.
<input type="checkbox"/>	Live Well: People are supported to engage with and manage their health and wellbeing.
<input type="checkbox"/>	Age Well: People age well, with proactive interventions to stay healthy, independent and active as long as possible.
<input type="checkbox"/>	Growth: We work together to help build the economy and support sustainable growth.
<input type="checkbox"/>	Reducing Inequalities: In everything we do we promote equalities in the health and wellbeing of our population.

Enablers [click all that apply]

Data and Digital <input type="checkbox"/>	Workforce <input type="checkbox"/>	Ways of working <input type="checkbox"/>	Estates <input type="checkbox"/>
Communications <input type="checkbox"/>	Finance <input type="checkbox"/>	Operational and Clinical Excellence <input type="checkbox"/>	Governance and Compliance <input checked="" type="checkbox"/>
Other <input type="checkbox"/> (please advise):			

What are the members being asked to do?

Approve <input checked="" type="checkbox"/>	Note <input type="checkbox"/>	Discuss <input type="checkbox"/>
--	----------------------------------	-------------------------------------

Report Author	Michelle Evans-Riches BLMK ICB ICS Transition Programme Manager
Date to which the information this report is based on was accurate	12 September 2022
Senior Responsible Owner	Maria Wogan Chief of System Assurance and Corporate Services

Executive summary

The Health and Care Partnership Terms of Reference were approved by the Board of the Integrated Care Board (ICB) on 1 July, reported to the first meeting of Health and Care Partnership on 4 July and are in the process of being approved by all five of the local authorities who form the joint committee. At this time a Deputy Chair had not been nominated.

In line with its terms of reference, The Health and Care Partnership has an agenda setting group which comprises of:

Health and Care Partnership Chair and Chair of Central Bedfordshire Health and Wellbeing Board

BLMK Integrated Care Board Chair

Bedford Borough Council Health and Wellbeing Board Chair

Luton Council, Portfolio Holder for Public Health and Commissioning

Milton Keynes Council, Health and Wellbeing Board Chair (now known as the Milton Keynes Health and Care Partnership)

Should Bucks be on this?

The Agenda Setting Group met on 28 July and proposed that Rima Makarem, BLMK ICB Chair, be nominated as the Health and Care Partnership Deputy Chair. This will ensure that the views of the Health and Care Partnership are represented at the Board of the ICB, as both the Partnership Chair and Deputy Chair are members of the ICB.

The Health and Care Partnership TOR specifies that the term of office is for two years, which is the same as that of the Chair.

What are the available options?

That other nominations are considered by the Committee.

Recommendation/s

The members are asked to **approve** Rima Makarem as the Deputy Chair of the Health and Care Partnership for a period of two years September 2024.

Key Risks and Issues

None as a result of this report.

Have you recorded the risk/s on the Risk Management system?

[Click to access system](#)

Yes

No

N/A

Are there any financial implications or other resourcing implications?

None

How will / does this work help to address the Green Plan Commitments?

[Click to view Green Plan](#)

N?A
How will / does this work help to address inequalities?
N/A
The following individuals were consulted and involved in the development of this report:
Health and Care Partnership Agenda Setting group.
Next steps:
N/A
Appendices
None

Report to the Health and Care Partnership
6 Update on the Integrated Care Strategy

Vision: “For everyone in our towns, villages and communities to live a longer, healthier life”

Please state which strategic priority and / or enabler this report relates to

Strategic priorities [click all that apply]

<input checked="" type="checkbox"/>	Start Well: Every child has a strong, healthy start to life: from maternal health, through the first thousand days to reaching adulthood.
<input checked="" type="checkbox"/>	Live Well: People are supported to engage with and manage their health and wellbeing.
<input checked="" type="checkbox"/>	Age Well: People age well, with proactive interventions to stay healthy, independent and active as long as possible.
<input checked="" type="checkbox"/>	Growth: We work together to help build the economy and support sustainable growth.
<input checked="" type="checkbox"/>	Reducing Inequalities: In everything we do we promote equalities in the health and wellbeing of our population.

Enablers [click all that apply]

Data and Digital <input checked="" type="checkbox"/>	Workforce <input checked="" type="checkbox"/>	Ways of working <input checked="" type="checkbox"/>	Estates <input checked="" type="checkbox"/>
Communications <input checked="" type="checkbox"/>	Finance <input checked="" type="checkbox"/>	Operational and Clinical Excellence <input checked="" type="checkbox"/>	Governance and Compliance <input checked="" type="checkbox"/>
Other <input type="checkbox"/> (please advise):			

What are the members being asked to do?

Approve <input type="checkbox"/>	Note <input type="checkbox"/>	Discuss <input checked="" type="checkbox"/>
-------------------------------------	----------------------------------	--

Report Author [name and role]	Hilary Tovey, Interim Director, Strategy and Planning
Date to which the information this report is based on was accurate	14/09/2022
Senior Responsible Owner [name and role] [please do not insert name unless approval has been given by them to submit this report]	Maria Wogan, Chief of System Assurance and Corporate Services

Executive summary

The ICS is continuing to work to develop our system strategy ahead of publication in December 2022. This strategy will set our population health ambition and how we want to work as a system over the next 10-20 years, will build on our already agreed five strategic priorities and will be informed by Joint Strategic Needs Assessments, Health and Wellbeing strategies and Place plans.

Building on a number of productive discussions at the Health and Care Partnership, other system partners, and a review of existing strategies and insight from our people and communities, we now have a number of key themes which will form the basis of our final strategy. We are working with partners over the next couple of months to refine these.

We are also keen to use this strategy to define specific population health outcomes, and areas of focus for the system against our key population health challenges but recognise that defining these areas robustly will take time.

It is therefore proposed that the first iteration of the strategy will be light touch and will evolve over time.

We are developing a process for taking a more detailed look at our system ambitions, through the lens of our priority areas, over the course of 2022/23 and in to 2023/24. This will also allow the Health and Care Partnership to play a more involved role in shaping the future direction and ambition for our system and ensure that this is grounded in the needs and views of our residents and all system partners, and the reality of some of the challenges we face as a system. It is expected that the output from these discussions will form the basis of system plans, including the five-year joint forward plan being developed by the Integrated Care Board.

Two areas that have been identified as areas of focus to be included in the first draft of the strategy are: Children and young people and inequalities. We are also reviewing recent strategic development work in mental health to consider how this will fit into our initial strategy.

We are asking Health and Care Partnership members to agree this approach and to identify future areas for priority focus and the timelines associated with this.

The strategy will be drafted in preparation for discussion at the next meeting of the Health and Care Partnership on 14th December, in the lead up to this meeting we would like to provide opportunities for Health and Care Partnership members and their organisations to review and input to the developing strategy. As a minimum this will include circulating early drafts of the strategy for comment to Partnership Members. Members of the Health and Care Partnership are asked to advise how they would like to engage with the development of the strategy document in between meetings. If there are any specific requests from individual members and their organisations, please advise Michelle Evans Riches who will co-ordinate the engagement.

It is proposed that further public engagement will take place from January 2023 onwards and will focus on engagement related to the development of the Joint Forward Plan which will deliver the strategic ambitions set by the Partnership.

What are the available options?

Health and Care Partnership members are asked to consider areas for specific focus in the future.

Recommendation/s

The members are asked to **approve** the following:

- 1) The approach to deliver a light touch strategy in December 2022 with a focus on specific priority areas
- 2) To establish a series of 'deep dive' sessions over 2022/23 and 2023/24 and identify what specific areas would you like to see included within these and agree that the Health and Care Partnership Agenda Setting Group should be responsible for agreeing the programme of deep dive sessions.

Key Risks and Issues

The risks associated with this project include risks around failure to realise the benefits of the Integrated Care System lack of transformation and lack of clarity of what activities should operate at scale, place and Primary Care Network (PCN).

Have you recorded the risk/s on the Risk Management system?

[Click to access system](#)

Yes

No

Risks are STR 4, 5 and 6

Are there any financial implications or other resourcing implications?

Not associated with this update

How will / does this work help to address the Green Plan Commitments?

[Click to view Green Plan](#)

This will be included in the strategy

How will / does this work help to address inequalities?

This will be included in the strategy and is one of our areas of focus for a deep dive.

The following individuals were consulted and involved in the development of this report:

Health and Care Partnership Chair, BLMK ICB Chief of System Assurance and Corporate Services

Next steps:

Strategy will continue to be developed, as outlined in the report and a draft strategy will be reported to the Health and Care Partnership in December 2022 for approval.

Appendices

Appendix A – Update on strategy development

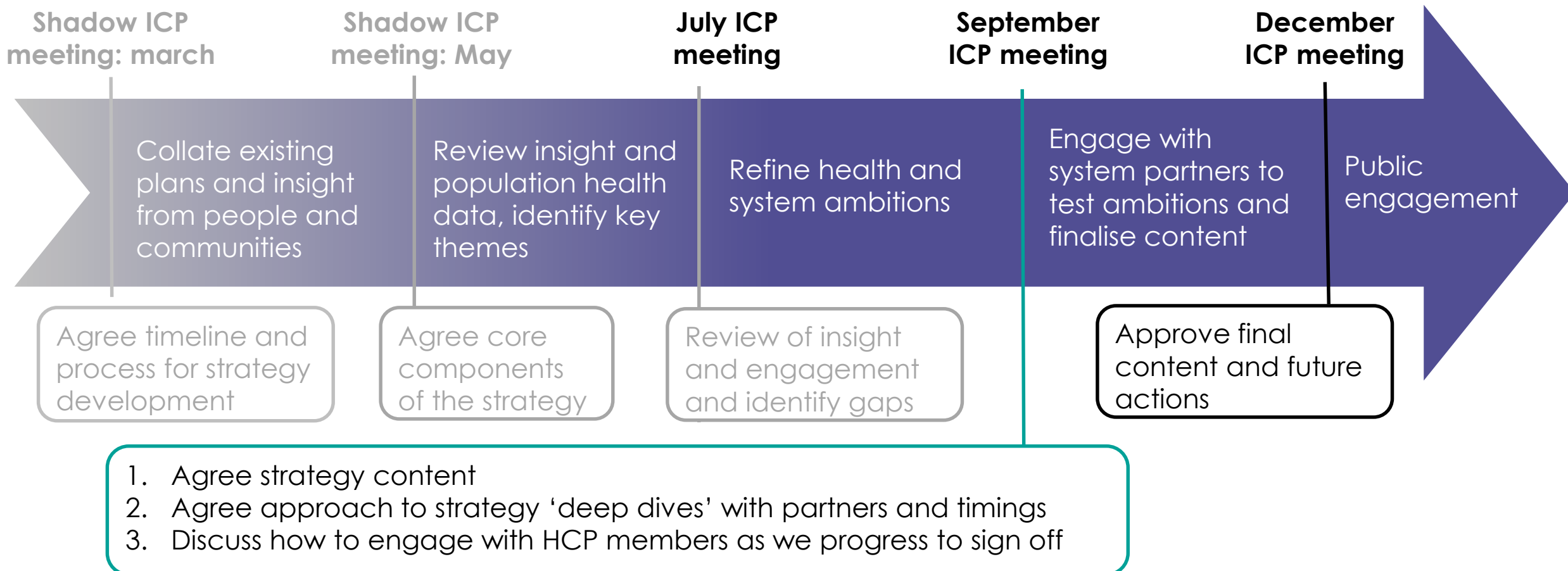
Government guidance on the preparation of integrated care strategies can be found [here](#):

<https://www.gov.uk/government/publications/guidance-on-the-preparation-of-integrated-care-strategies/guidance-on-the-preparation-of-integrated-care-strategies>

Integrated Care Strategy: update on progress

21st September 2022

Our discussion today



Update on guidance

The government has now published **national guidance** to support the development of integrated care strategies. This guidance sets out that these strategies should aim to :

- Set the direction of the system across the area of the integrated care board and integrated care partnership,
- Set out how commissioners in the NHS and local authorities, working with providers and other partners, can deliver more joined-up, preventative, and person-centred care for their whole population, across the course of their life.
- Provide an opportunity to reach beyond 'traditional' health and social care services to consider the wider determinants of health or joining-up health, social care and wider services.

For **Bedfordshire, Luton and Milton Keynes** our strategy will:

- Define a small number of population health outcomes which we will work towards as a system
- Formalise how we will work together as a system to deliver our strategy, what capabilities do we need to build and how will this be different to what has come before
- Consolidate our existing strategies for workforce, digital and estates transformation, finance and working with people and communities.

It is expected that the first iteration of the strategy will be light touch and focus on reaching consensus with partners on the purpose and ambitions for our strategy.

Strategy content

Our strategic imperative



Our key system ambitions



The system capabilities we will need to develop to realise these ambitions

Who we are

Our geography and assets

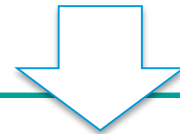
What people want

Our population health data

Vision, mission and priorities

Existing strategies

What 'a longer healthier life' means for our population, building on our population health data and inequalities, building on:



1. Our agreed system strategic priorities

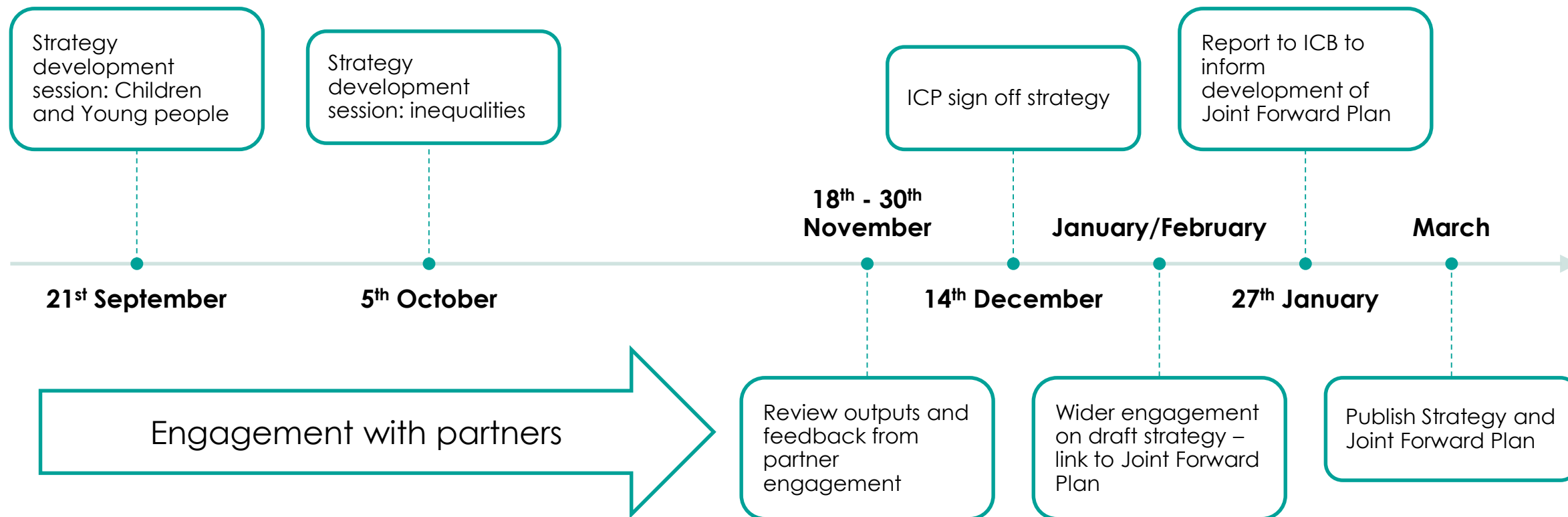
2. Our principles for system working building on principles for working and enabler strategies

- 01 Start Well
- 02 Live Well
- 03 Age Well
- 04 Growth
- 05 Reducing Inequalities

Our development approach

- We have been working with the Integrated Care Partnership in shadow form since March 2022 to explore and refine the purpose and approach to strategy development. These sessions have identified key themes and build on existing strategies and insight from people and communities.
- Over the next two months, we will be engaging with partners at board level to test these themes and define our system ambitions.
- In addition to these key themes, we are also proposing to hold a number of ‘deep dive’ sessions which aim to:
 - Agree our baseline understanding of the population health challenges we are aiming to solve in a particular area and what is driving this
 - Agree the outcomes we want to see and the targets or high-level trajectories associated with this.
 - Identify specific target population groups or areas where we want to focus our efforts as a system.
- The first two of these sessions on children and young people (21st September) and inequalities (5th October) are in train and the outputs will feed into the initial strategy document to be published in December 2022

Planning Timeline



Report to the Health and Care Partnership

9 Health and Care Partnership Forward Plan

Vision: “For everyone in our towns, villages and communities to live a longer, healthier life”

Please state which strategic priority and / or enabler this report relates to

Strategic priorities [click all that apply]

<input type="checkbox"/>	Start Well: Every child has a strong, healthy start to life: from maternal health, through the first thousand days to reaching adulthood.
<input type="checkbox"/>	Live Well: People are supported to engage with and manage their health and wellbeing.
<input type="checkbox"/>	Age Well: People age well, with proactive interventions to stay healthy, independent and active as long as possible.
<input type="checkbox"/>	Growth: We work together to help build the economy and support sustainable growth.
<input type="checkbox"/>	Reducing Inequalities: In everything we do we promote equalities in the health and wellbeing of our population.

Enablers [click all that apply]

Data and Digital <input type="checkbox"/>	Workforce <input type="checkbox"/>	Ways of working <input type="checkbox"/>	Estates <input type="checkbox"/>
Communications <input type="checkbox"/>	Finance <input type="checkbox"/>	Operational and Clinical Excellence <input type="checkbox"/>	Governance and Compliance <input checked="" type="checkbox"/>
Other <input type="checkbox"/> (please advise):			

What are the members being asked to do?

Approve <input checked="" type="checkbox"/>	Note <input type="checkbox"/>	Discuss <input type="checkbox"/>
--	----------------------------------	-------------------------------------

Report Author [name and role]	Michelle Evans-Riches BLMK ICB ICS Transition Programme Manager
Date to which the information this report is based on was accurate	14 September 2022
Senior Responsible Owner	Health and Care Partnership Chair

Executive summary

The purpose of this paper is to review the forward plan and consider items for future meetings.

What are the available options?

To amend the forward plan.

Recommendation/s

The members are asked to **review** the forward plan and to **agree** items for future meetings

Key Risks and Issues

[please describe your key risks and mitigation]

None identified

Have you recorded the risk/s on the Risk Management system?

[Click to access system](#)

Yes

No

Not applicable

Are there any financial implications or other resourcing implications?

[please outline sources and applications of funds]

None

How will / does this work help to address the Green Plan Commitments?

[Click to view Green Plan](#)

Not applicable

How will / does this work help to address inequalities?

Not applicable

The following individuals were consulted and involved in the development of this report:

Health and Care Partnership Chair

Next steps:

To update the forward plan with any comments made by the Health and Care Partnership.

Appendices

[please list]

Appendix A – Health and Care Partnership Forward Plan

BLMK Health and Care Partnership Forward Plan 2022-23

	4 July 2022 10-11.30am MS Teams	21 September 2022 5-8pm Central Bedfordshire Council	14 December 2022 2-5pm Bedford Borough Council	7 March 2023 5-8pm Milton Keynes Council
Public Meeting Agenda Items				
Report Deadline		Noon 9 September 2022	Noon 2 December 2022	Noon 23 February 2023
1	Terms of Reference	Terms of Reference – appointment of Deputy Chair	Draft Integrated Care Strategy	
2	Integrated Care Strategy progress update	Integrated Care Strategy progress update		
3	Review of Shadow Meeting	Research and Innovation in BLMK		
5	Work plan	Work plan	Work plan	Work plan

Note: Include a glossary of acronyms with agenda