



Mid and South Essex
Integrated Care
System



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Integrated Care System

What is an ICS for? To work in partnership to....



1
Improve outcomes in population health

Improve access to, and quality of, the services we provide.

Focus on healthy, happy lives – prioritise prevention and self-care.



2
Tackle Inequalities

Relentless focus on reducing health inequalities across our populations.



3
Productivity and Value for Money

Be financially sustainable while improving productivity

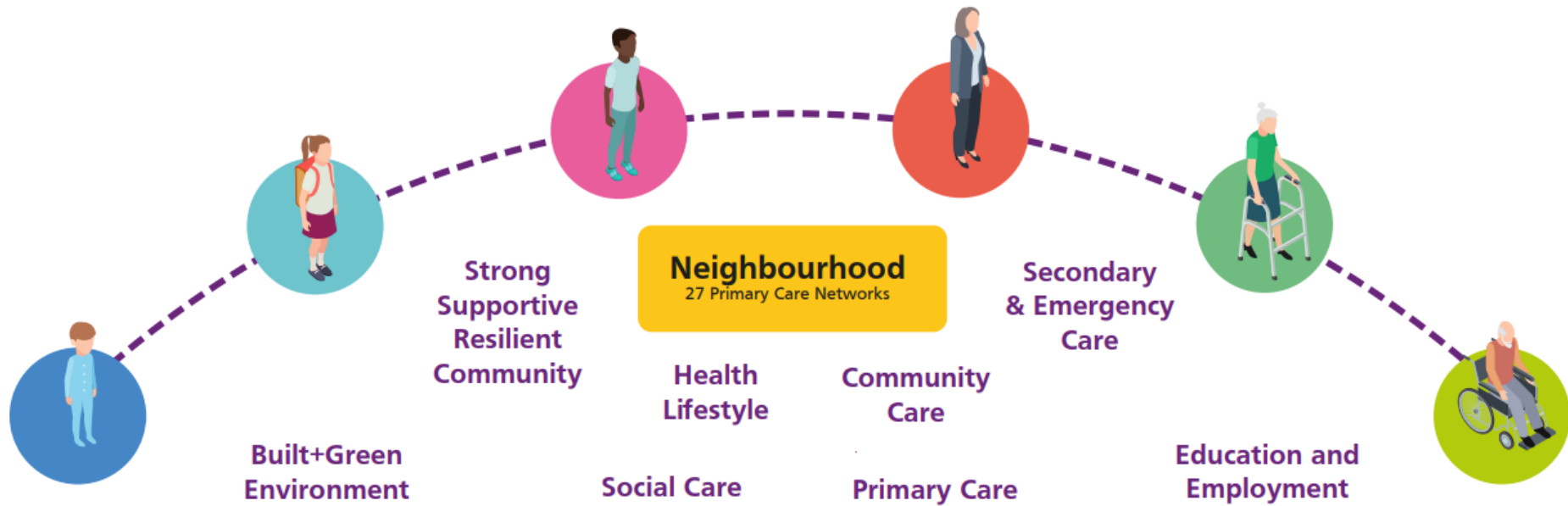
Address workforce challenges.



4
Support Socio-Economic Development

Leading role as Anchor Institutions:

- Education
- Employment
- Local procurement
- Sustainability



Our Beliefs

- **Subsidiarity** - devolving planning and delivery to the lowest possible level.
- **Respect for sovereignty** of statutory organisations
- **Collaboration** to bring about improved Standards, Outcomes and the application of Common Clinical Policies
- **Asset and strengths-based approaches**, delivering care according to people's preferences
- **A focus on healthy lives** – prioritising prevention and self-care
- **Delivery of integrated care**, with meaningful engagement with our communities

Our Beliefs

- **A shared agenda** driven and owned by partners working together with a focus on **reducing health inequality**
- **Data Driven:** serving the individual needs of our population, not organisations
- **Clinical and Care Professional engagement** at the earliest opportunity
- **Empowering front line staff to do the right thing** – through distributed leadership
- **Pragmatic pluralism** – differing needs across our populations require different approaches. Not a one size fits all approach
- **Innovative** - trying new and innovative approaches, test and learn

What do we want to achieve?

- **Raise our game:** improve outcomes, enhance quality and reduce disparities
- **Integrate care:** so people don't fall through gaps between services or settings
- **Support an individual's independence, autonomy, choice and control:** through personalised approaches
- **Promote positive, healthy lives** – enabling prevention of ill health and self-care
- **Enable the safe sharing of records** – including data sharing agreements to smooth care provision
- **Incentivise** organisations to have shared outcomes

What do we want to achieve?

- **Deploy resources imaginatively**, prioritise upstream interventions to improve population health
- **Drive forward by decisive leadership**, engaging with local people and taking clear joint accountability for delivery
- **Integrate where it makes sense** for individuals and families
- **Develop an ever more capable, confident workforce together** which is deployed in a way that allows us to wrap services around individuals, their families and carers
- **Base blended teams around individuals** to exploit opportunities for joint resourcing at all levels

Executive Team



Anthony 'Mac' McKeever
Chief Executive Officer



Dr Ronan Fenton
System Medical
Director



Dr Ruth Jackson
Executive Chief
People Officer



Dawn Scrafield
Director of Resources
(Interim)



Rachel Hearn
Executive Chief Nurse



Jo Cripps
Executive Director of
Strategy and Partnerships



Barry Frostick
Chief Digital Officer



Tiffany Hemming
Director of Delivery
(Interim)



Dan Doherty
Alliance Director



Pam Green
Alliance Director



Ruth Hallet
Alliance Director
(Interim)



Steve Porter
Alliance Director
(Interim)

MSE Integrated Care Board



Prof Michael Thorne CBE
Chair



Anthony 'Mac' McKeever
Chief Executive Officer



Dr Neha Issar-Brown
Non-Executive Member



George Wood
Non-Executive Member



Joseph Fielder
Non-Executive Member



Hannah Coffey
Partner Member,
MSEFT



Ian Wake
Partner Member,
Thurrock Council



Peter Fairley
Partner Member
Essex County Council



Tandra Forster
Partner Member,
Southend City Council



Dr Anna Davey
Partner Member,
Primary Care



Paul Scott
Partner Member, EPUT



Rachel Hearn
Executive Chief Nurse



Dr Ronan Fenton
System Medical Director



Dr Ruth Jackson
Executive Chief People Officer



Dawn Scrafield
Director of Resources (Interim)

The Integrated Care Partnership

A joint committee established by the NHS and Upper Tier Local Authorities and involves:

- District, Borough & City Councils
- Alliances
- NHS providers
- VCSE (*Voluntary, Care and Social Enterprise*)
- Healthwatch
- Universities
- Police


Our Alliances

Four across Mid & South Essex: Mid-Essex, Basildon & Brentwood, South East Essex & Thurrock

A broad range of partners operating at a local level, for the benefit of local residents.

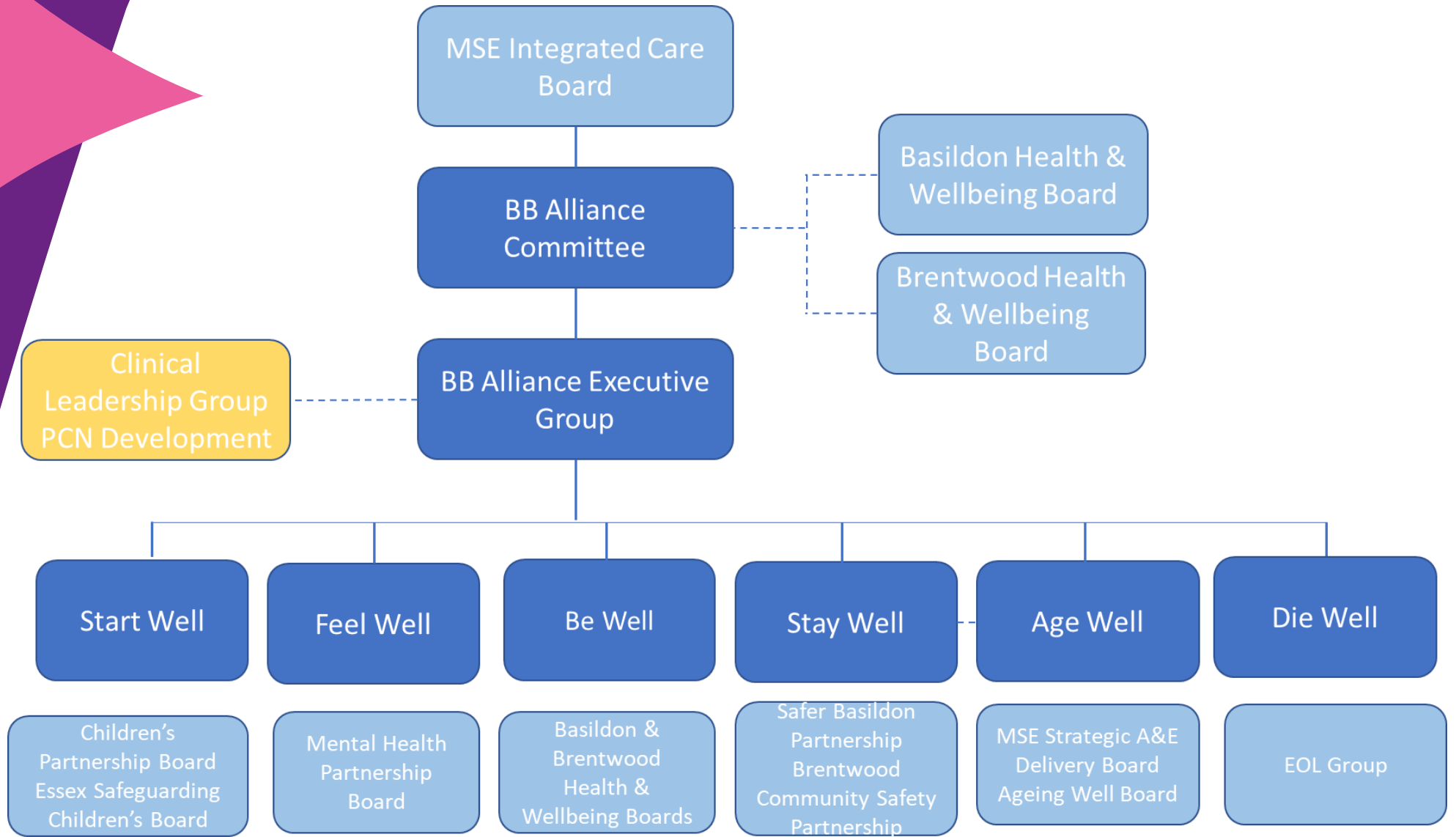
Basildon and Brentwood Alliance

- Mid & South Essex Integrated Care System
- Essex County Council
- Basildon Council
- Brentwood Council
- Mid & South Essex Foundation NHS Trust
- North East London Foundation NHS Trust
- Essex Partnership University NHS Trust
- St Luke's Hospice
- Six Primary Care Networks (Billericay, Brentwood, East Basildon, Central Basildon, West Basildon & Wickford)
- Healthwatch
- Voluntary Sector



Helping people in Basildon and
Brentwood to live well by
improving population health
through person-centred, holistic
and integrated working across the
whole system

Basildon & Brentwood Alliance



Live Well Domains

Comparatively poor outcomes
Areas within scope

Start Well <i>Harriet Pickering</i>	Feel Well <i>Clare Burns</i>	Be Well <i>Grant Taylor/Kim Anderson</i>	Stay Well <i>Clare Burns</i>	Age Well <i>Simon Griffiths</i>	Die Well <i>Joanne McCollum</i>
<p>Giving children and young people have the best start in life.</p> <ul style="list-style-type: none">• Dental Decay• Pupil absence• Education qualifications• Childhood Obesity	<p>People enjoy mental health well being</p> <ul style="list-style-type: none">• Self - harm• Depression• Suicide• Loneliness• Mental Health Access• Integrated Primary and Community Care	<p>People are empowered to make health lifestyle choices</p> <ul style="list-style-type: none">• Physical activity• Obesity• Smoking• Alcohol• Chlamydia• Community empowerment & development• Voluntary sector• Asset mapping	<p>People will have access to the best clinical services.</p> <ul style="list-style-type: none">• Cancer screening• Diabetes• Prevention• Long Term Conditions such as Hypertension, Respiratory• SMI & LD• Support for Carers• Wider determinants of health	<p>People live safely and independently as they grow older</p> <ul style="list-style-type: none">• Integration of health & social care - neighbourhood teams• Frailty• Risk stratification• Social care market resilience• Dementia• System flow & resilience	<p>Individuals nearing end of life have choices around care</p> <ul style="list-style-type: none">• Choices register• Preferred place of death

Your views

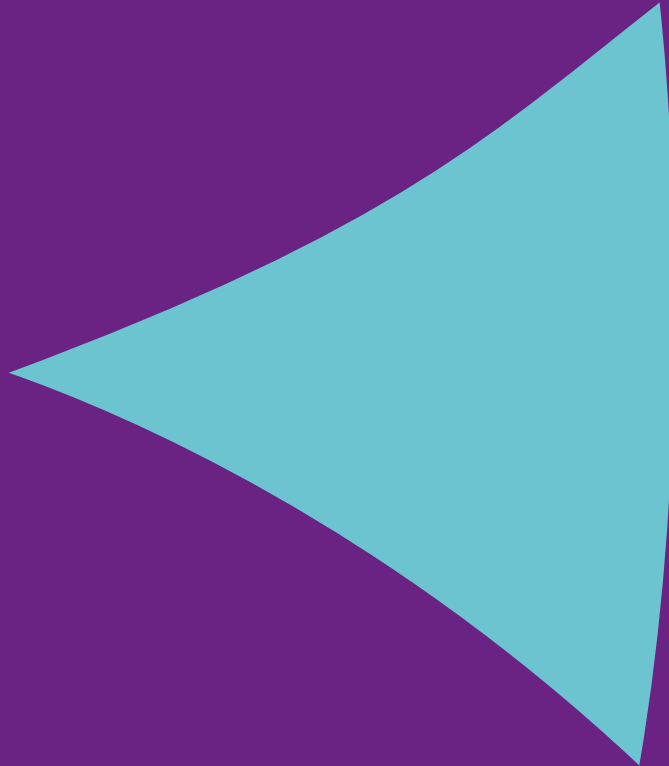
- Role of Brentwood Health and Wellbeing Board in future Basildon and Brentwood Alliance and wider ICS



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Emma Timpson

e.timpson@nhs.net

www.midandsouthessex.ics.nhs.uk