

North East London Integrated Care Partnership

Thursday, 6 July 2023; 14:00-14:45; Venue Main Hall, Stratford old Town Hall

AGENDA

	Item	Time	Lead	Attached/ verbal	Action required
1.0	Welcome, introductions and apologies	2.00pm	Chair		
1.1. 1.2.	Declaration of conflicts of interest Minutes of last meeting held on 5 April			Attached	Note
1.2.	2023			Attached	Approve
1.3.	Matters arising and action log			Attached	Note
2.0	The Big Conversation	2.05pm	СР	Attached	Discuss
3.0	Review/reflection on the past year results of effectiveness survey and improvement plan	2.15pm	Chair	Attached	Note
4.0	ICP work plan	2.25pm	Chair	Attached	Note
5.0	Questions from the public	2.35pm	Chair	Verbal	
6.0	Close	2.45pm	Chair		
Date	of next meeting: 4 October 2023	•	•	•	•



North East London Integrated Care Partnership Register of Interests

- Declared Interests as at 28/06/2023

Name	Position/Relationship with ICB	Committees	Declared Interest	Name of the organisation/business	Nature of interest	Valid From	Valid To	Action taken to mitigate risk
Christopher Kennedy	Councillor	City & Hackney ICB Sub-committee City & Hackney Partnership Board ICP Committee	Non-Financial Professional Interest	London Borough of Hackney	Cabinet Member for Health, Adult Social Care, Voluntary Sector and Leisure in London Borough of Hackney	2020-07-09		
			Non-Financial Personal Interest	Lee Valley Regional Park Authority	Member of Lee Valley Regional Park Authority	2020-07-09		
			Non-Financial Personal Interest	Hackney Empire	Member of Hackney Empire	2020-07-09		
		_	Non-Financial Personal Interest	Hackney Parochial Charity	Member of Hackney Parochial Charity	2020-07-09		
			Non-Financial Personal Interest	Labour Party	Member of the Labour Party	2020-07-09		
			Non-Financial Personal Interest	Local GP practice	Registered patient with a local GP practice	2020-07-09		
Dr Paul Francis Gilluley	Chief Medical Officer	Clinical Advisory Group	Non-Financial Professional Interest	British Medical Association	I am a member of the organisation.	2022-07-01		
		ICB Population, Health & Integration Committee	Non-Financial Professional Interest	Royal College of Psychiatrists	Fellow of the College	2022-07-01		
		ICB Quality, Safety & Improvement Committee ICP Committee	Non-Financial Professional Interest	Medical Defence Union	Member	2022-07-01		
		ICS Executive Committee Primary care contracts sub-	Non-Financial Professional Interest	General Medical Council	Member	2022-07-01		
		committee	Non-Financial Personal Interest	Stonewall	Member	2022-07-01		
Eileen Taylor	Joint Chair, East London NHS Foundation Trust and North East London NHS Foundation Trust	Mental Health, Learning Disability & Autism Collaborative subcommittee	Non-Financial Professional Interest	MUFG Securities EMEA PLC	Non Executive Director	2019-04-01		
			Non-Financial Professional Interest	North East London NHS Foundation Trust	Chair from January 1, 2023	0202-01-31		
lan Buckmaster	Member of PCCC Joint Committee	ICP Committee	Non-Financial Personal Interest	Havering Healthwatch C.I.C. (Healthwatch Havering)	Director of company	2013-04-01		



Jenny Ellis	Member of Redbridge Partnership Board	ICP Committee Redbridge ICB Sub-committee Redbridge Partnership Board	Financial Interest	Redbridge Council for Voluntary Service (Redbridge CVS)	RedbridgeCVS is a provider of social prescribing, community engagement and infrastructure support for the voluntary and community sector.	2020-01-19	
			Financial Interest	Odd Eyes Theatre Company	Trustee of a North East London-based charity that specialises in community empowerment and social inclusion through theatre.	2018-05-24	
Johanna Moss	Chief strategy and transformation officer	ICB Board ICB Population, Health & Integration Committee ICP Committee ICS Executive Committee Mental Health, Learning Disability & Autism Collaborative sub- committee Primary Care Collaborative sub- committee	Non-Financial Professional Interest	UCL Global Business School for Health	Health Executive in Residence	2022-09-01	
John Gieve	Chair of Homerton Healthcare	City & Hackney ICB Sub- committee City & Hackney Partnership Board ICP Committee	Indirect Interest	Pause	My wife is a trustee of Pause, the charity to support women whose children have been taken into care, and a board member of Pause Hackney.	2015-06-01	
			Non-Financial Professional Interest	Homerton Healthcare NHS Foundation Trust	I am Chair of Homerton Healthcare whose interests are affected by ICP and City and Hackney Parnership decisions	2019-03-01	



Marie Gabriel	ICB and ICP Chair	ICB Board ICB Finance, Performance & Investment Committee ICB Population, Health & Integration Committee	Non-Financial Personal Interest	West Ham United Foundation Trust	Trustee	2020-04-01	Declarations to be made at the beginning of meetings
			Non-Financial Personal Interest	East London Business Alliance	Trustee	2020-04-01	Declarations to be made at the beginning of meetings
		ICB Quality, Safety & Improvement Committee ICB Workforce & Remuneration	Non-Financial Professional Interest	Race and Health Observatory	Chair of the RHO	2020-07-23	Declarations to be made at the beginning of meetings
		Committee ICP Committee NEM Remuneration Committee	Non-Financial Personal Interest	Member of the labour party	Member of the labour party	2020-04-01	Declarations to be made at the beginning of meetings
			Non-Financial Professional Interest	NHS Confederation	Trustee Associated with my Chair role with the RHO	2020-07-23	Declarations to be made at the beginning of meetings
			Financial Interest	Local Government Association	Peer Reviewer	2021-12-16	Declarations to be made at the beginning of meetings
			Non-Financial Professional Interest	UKHSA	Associate NED	2022-04-25	Declarations to be made at the beginning of meetings
			Non-Financial Professional Interest	Institute of Public Policy Research (IPPR)	Commissioner on the IPPR Health and Prosperity Commission	2022-03-13	Declarations to be made at the beginning of meetings
Mark Santos	Redbridge Cllr & Cabinet Member Adult Services & Public Health	ICP Committee Redbridge ICB Sub-committee Redbridge Partnership Board	Financial Interest	Positive East	I am the Executive Director of the HIV Charity Positive East. Positive East receives statutory income via NEL Local Authorities & NHS via London HIV Fast Track Cities	2022-04-01	Declarations to be made at the beginning of meetings
			Indirect Interest	Bart's Health	My sister is a Finance Manager at Barts Health	2022-04-01	Declarations to be made at the beginning of meetings
Rt Hon Jacqui Smith	Member of Integrated Care Partnership Board	ICP Committee	Financial Interest	Barking, Havering & Redbridge University Hospitals Trust	Chair in common with Barts Health NHS Trust	2021-10-01	
			Financial Interest	Sandwell Children's Trust	Chair	2021-10-01	
			Financial Interest	Jacqui Smith Advisory Limited	Director	2021-10-01	
			Financial Interest	Dalgety Limited	Non-Executive Director	2021-10-01	
			Financial Interest	Global Partners Governance	Associate	2021-10-01	
			Non-Financial Personal Interest	Jo Cox Foundation	Chair	2021-11-01	
			Non-Financial Professional Interest	Kings Fund	Trustee	2021-10-01	
			Non-Financial Personal Interest	The Precious Trust	Chair	2021-10-01	
			Non-Financial Professional Interest	UCL Partners	Director	2021-10-01	
			Non-Financial Professional Interest	Barts Charity	Trustee	2021-10-01	4



Tony Wong	Chief Executive, Hackney Council for Voluntary Services	City & Hackney ICB Sub- committee City & Hackney Partnership Board ICP Committee	Non-Financial Professional Interest	Hackney Council for Voluntary Services	Chief Executive for Hackney Council for Voluntary Services	2021-10-04	Declarations to be made at the beginning of meetings
Zina Etheridge	Chief Executive Officer Designate of the Integrated Care Board for north east London	ICB Audit and Risk Committee ICB Board ICB Population, Health & Integration Committee ICB Workforce & Remuneration Committee ICP Committee ICP Committee ICS Executive Committee Mental Health, Learning Disability & Autism Collaborative sub- committee	Indirect Interest	Royal Berkshire NHS Foundation Trust	Brother is employed as Head of Acute Medicine at Royal Berkshire hospital	2022-03-17	Declarations to be made at the beginning of meetings



- Nil Interests Declared as of 28/06/2023

Name	Position/Relationship with ICB	Committees	Declared Interest
Dianne Barham	Healthwatch, Tower Hamlets	ICP Committee Waltham Forest Health and Care Partnership Board Waltham Forest ICB Sub-committee	Indicated No Conflicts To Declare.
Charlotte Pomery	Chief Participation and Place Officer	Barking & Dagenham ICB Sub-committee Barking & Dagenham Partnership Board City & Hackney ICB Sub-committee City & Hackney Partnership Board Havering ICB Sub-committee Havering Partnership Board ICB Board ICB Population, Health & Integration Committee ICB Quality, Safety & Improvement Committee ICB Quality, Safety & Improvement Committee ICP Committee ICS Executive Committee Newham Health and Care Partnership Newham ICB Sub-committee Redbridge ICB Sub-committee Redbridge Partnership Board Tower Hamlets ICB Sub-committee Tower Hamlets Together Board Waltham Forest ICB Sub-committee	Indicated No Conflicts To Declare.
Maureen Worby	Councillor In London Borough of Barking & Dagenham	Barking & Dagenham ICB Sub-committee Barking & Dagenham Partnership Board ICB Board ICB Population, Health & Integration Committee ICB Quality, Safety & Improvement Committee ICP Committee	Indicated No Conflicts To Declare.
Cathy Turland	Member of a committee	ICP Committee Redbridge ICB Sub-committee Redbridge Partnership Board	Indicated No Conflicts To Declare.
Paul Rose	Chair of the Havering Compact	Havering Partnership Board ICP Committee	Indicated No Conflicts To Declare.
Matthew Adrien	Partnership working	ICP Committee Tower Hamlets ICB Sub-committee Tower Hamlets Together Board	Indicated No Conflicts To Declare.
Caroline Rouse	Member of IC Board (VCS rep)	ICB Board ICP Committee	Indicated No Conflicts To Declare.
Gillian Ford	Councillor, member of a joint committee	Havering Partnership Board Havering ICB Sub-committee ICP Committee	Indicated No Conflicts To Declare.
Veronica Awuzudike	Healthwatch Newham Manager	ICP Committee Newham Health and Care Partnership Newham ICB Sub-committee	Indicated No Conflicts To Declare.
Catherine Perez Phillips	Committee member	ICP Committee	Indicated No Conflicts To Declare.
Naheed Asghar	Committee member	ICP Committee Waltham Forest Health and Care Partnership Board	Indicated No Conflicts To Declare.
Gulam Kibria Choudhury	Member	ICP Committee	Indicated No Conflicts To Declare.



DRAFT Minutes of the North East London Integrated Care Partnership

Wednesday 5 April 2023; 11:00-12:20; Held via MS Teams

Members:		
Marie Gabriel	(MG)	Chair, NHS North East London
Johanna Moss	(JM)	Chief Strategy & Transformation Officer, NHS North East
		London
Sir John Gieve	(JG)	Chair, Homerton Healthcare
Rt Hon Jacqui Smith	(JS)	Chair, Barts Health and Barking Havering and Redbridge
		University Hospitals Trust
Aamir Ahmad	(AA)	Vice Chair, East London Foundation Trust (for Eileen Taylor)
Cllr Maureen Worby	(MW)	Cabinet Member, London Borough of Barking & Dagenham
Cllr Christopher Kenne		Cabinet Member, London Borough of Hackney
Cllr Gillian Ford	(GF)	Cabinet Member, London Borough of Havering
Cllr Neil Wilson	(NW)	Cabinet Member, London Borough of Newham
Cllr Mark Santos	(MS)	Cabinet Member, London Borough of Redbridge
Rachel Cleave	(RC)	Healthwatch City of London
Catherine Perez Philli		Healthwatch Hackney
Veronica Awuzudike	(VA)	Community Barnet (Newham Healthwatch)
Matthew Adrienne	(MA)	Healthwatch Tower Hamlets
Dianne Barham	(DB)	Waltham Forest Healthwatch
Elspeth Paisley	(EP)	Lifeline Community (Barking & Dagenham Healthwatch)
Cathy Turland	(CT)	Healthwatch Redbridge
Jessica Lubin	(JL)	Hackney CVS
Jenny Ellis	(JE)	Redbridge CVS
Attendees:		
Charlotte Pomery	(CP)	Chief Participation & Place Officer, NHS North East London
Marie Price	(MP)	Director of Communication and Involvement, NHS North East
		London
Helen McKenna	(HMK)	Chief of Staff, Barts Health and BHR Hospitals Trust
Anne-Marie Keliris	(AMK)	Head of Governance, NHS North East London
Laura Anstey	(LA)	Chief of Staff, NHS North East London
Keeley Chaplin	(KC)	Minutes - Governance Manager, NHS North East London
Emmanuel Baidoo	(EB)	Poplar HARCA, Spotlight Outreach Coordinator
Angela Skrabania	(AS)	Enabled Living Healthcare
Harpreet Jutle	(HJ)	Engagement and Community Communications Manager,
		NHS North East London
Apologies:		
Zina Etheridge	(ZE)	Chief Executive Officer, NHS North East London
Paul Gilluley	(PG)	Chief Medical Officer, NHS North East London
Eileen Taylor	(ET)	Joint Chair, East London Foundation Trust and North East
	. ,	London Foundation Trust
Cllr Mary Durcan	(MD)	Cabinet Member, London Borough of City of London
Cllr Gulam K Choudh	ury(GKC)	Cabinet Member, London Borough of Tower Hamlets
Cllr Naheed Asghar	(NA)	Cabinet Member, London Borough of Waltham Forest
Pip Salvador-Jones	(PSJ)	Barking & Dagenham CVS
Vicky Scott	(VS)	Tower Hamlets CVS
Paul Rose	(PR)	Havering Compact

Caroline Rouse	(CR)	Compost London (Newham)
Ian Buckmaster	(IB)	Healthwatch Havering
Manisha Modhvadia	(MM)	Healthwatch Barking & Dagenham

Item No.	Item title	Action
1.0	Welcome, introductions and apologies	
	The Chair welcomed everyone to the f meeting of the Integrated Care Partnership (ICP) held virtually in public.	
	The Chair also welcomed members of the public who had joined the meeting to observe.	
1.1.	Declaration of conflicts of interest	
	The Chair reminded members of their obligation to declare any interest they may have on any issues arising at the meeting which might conflict with the business of the ICB.	
	No additional conflicts were declared.	
	Declarations declared by members of the ICP are listed on the Register of Interests. The Register is available from either the Governance Team or on the ICB's website (northeastlondonicb.nhs.uk)	
1.2.	Minutes of last meeting	
	The minutes of the meeting held on 11 January 2023 were agreed as a correct record.	
1.3.	Matters arising	
	Actions from the last meeting were noted as completed and actions closed.	
2.0	Governance update	
	The steering group of the Integrated Care Partnership (ICP) have been regularly meet to discuss the forward plan for the ICP. The terms of reference for the steering group were presented to members. It was noted that the steering group have appointed Councillor Neil Wilson, London Borough of Newham, as the Deputy Chair.	
	Members approved the Integrated Care Partnership Steering Group terms of reference.	
	It was further proposed that Councillor Neil Wilson become Deputy Chair to the ICP Chair, Marie Gabriel. This was discussed at a meeting of the local authority cabinet members and leaders at their meeting on 27 March who had endorsed the proposal.	
	Members agreed that Councillor Wilson become Deputy Chair of the Integrated Care Partnership.	
	A forward plan for the ICP was presented to members who were invited to make comments and to add further to this. The following will be added to the plan:	кс

Item No.	Item title	Action
	Progress report on integration and working together as a system. This should include the balance between place-based partnerships and the rest of the NHS including data sharing.	
	Members noted the approach to future meetings and the forward plan updated.	
3.0	Joint forward plan – update	
	Members received an update on the system's Joint Forward Plan (JFP) which is a five-year plan describing how we will deliver our Integrated Care Partnership Strategy as well as core NHS services, as a system. A supporting reference document providing further detail on the transformation programmes described in the main plan was included. A draft of the plan was submitted to NHS England at the end of March, with further work and engagement across the system during April and May being undertaken before being published in June 2023. The plan will then be refreshed on an annual basis. Three key strategic challenges have been identified that lie beyond the system's ability to control and solve ourselves. These are: higher levels of poverty and deprivation than in other parts of London and England;	
	significant population growth particularly in the most deprived areas; inadequate investment available for this population growth for both clinical and care capacity and capital development. Comments noted were: Funding for the Whipps Cross Hospital redevelopment is not yet confirmed and we need to ensure this is reflected in the draft plan. This will make a bigger case on the disparity of capital allocation across London and can be used to outline the needs for capital investment	
	 Challenges with health and care workforce such as recruitment and retention, particularly in general practice, should be emphasised. A good example of transformation is the integrated development framework in Waltham Forest that is linked to the Whipps Cross redevelopment and this should be included. Members agreed with the statement on inadequate investment. 	
	 Members agreed with the statement on inadequate investment especially as there has been historic inequity in funding across boroughs. Local authority colleagues had raised the need for us to work together to make a case to decision makers on funding. Co-location of services should be considered to utilise buildings, providing neighbourhood delivered services which can bring benefits to the residents as well as reduce costs. Members would welcome the inclusion of numbers and targets, which will be developed after the Big Conversation. A list of what the ICB is leading on and where it can support and enable places to deliver would be useful. 	
	Members noted the draft joint forward plan and comments will be incorporated into the next iteration. The joint forward plan will be presented to place-based partnerships and health and wellbeing boards in April and	

Item No.	Item title	Action
	May for further comment on the final document. It will also form part of the big conversation being held with communities.	
4.0	Co-production Showcase	
	The Committee have agreed to focus on one of the core priorities or cross cutting themes that are detailed in the integrated care strategy, at each meeting. The theme for this meeting is on co-production and organisations were invited to showcase examples of good practice including the approach, lessons learned and impact on the local population.	
	Emmanuel Baidoo introduced Spotlight which offers schemes to young people aged 11-19 in Tower Hamlets to try new things, gain skills and provides support and advice. The health offer is being developed, which includes a confidential GP service and other community organisations. The service showcased is a scheme that was set up in partnership with Public Health to encourage young people as part of the vaccine roll-out. A survey was conducted to establish their initial views. The young people were then involved in developing workshops, bringing in a public health nurse, and they wanted it to be interactive and eye catching so created a video to upload onto YouTube as well as a graphic novel and an animation. This was a good example of young people being involved from the start to shape and design a service for them.	
	Aamir Ahmad, Vice Chair and the Trust Board lead on patient and public engagement in ELFT gave an overview on co-production which is weaved throughout the organisation, along with quality improvement. Co-production is an important way to ensure that they are making a difference in people's lives and impacting them in the right way. One example provided came from when service users were frustrated when they were let down by gaps in the system when being passed from one clinical team to another or their GP was linking with the consultant and their medications were lost or missed. The service users felt disempowered, not listened to and the provision of care added to their mental health issues. Services users were asked to lead on a quality improvement programme to help resolve these issues. They defined the issues, involved clinicians and gave practical ideas such as involving pharmacists, improving communication. ELFT gained from this in terms of how to deliver services better but the impact on service users being able to participate in the programme and having their voice heard was of clinical benefit and many felt it gave them some control in their lives. An example of a change made is that letters are now sent to service users directly and their GPs are copied in rather than to GPs directly. ELFT aspire to being an effective anchor institution, also helping people into employment and feedback was this engagement gave people more confidence and they felt empowered.	
	Angela Skrabania from Enabled Living Healthcare introduced Angus McKenzie-Davie and Aqua Ephraim who are users of the service to present their experience of co-production. Enabled Living is a small business in Newham offering community equipment, wheelchair services and sensory services to support people to continue to live independently. It is a people centred business and is formed with a flat structure and there is no 'us and them' with good relationships, mutual respect, being supportive, open and	

Item No.	Item title	Action
	transparent. Recruitment and training is undertaken together with peer support sessions. Service change and development is service user led as expertise is rooted in the people that use the service. Key lessons learned has been to get on and do it, learn and then adjust to improve as this can save a lot of time. Another key point is to manage everyone's expectations and to build on everyone's strengths.	
	Harpreet Jutle, Engagement and Community Communications Manager presented on the engagement work undertaken on the development of the Ilford Exchange health and care centre. Harpreet was keen to involve people with a disability in the design of the centre to ensure all levels of accessibility were considered and worked with the charity One Place East and the partnership. The construction team advised that the building would meet accessibility regulations but feedback from the people that use the buildings is they don't always meet their needs e.g. ensuring reception desks were at the correct height for people in different height wheelchairs. A feedback report was presented to the design team and adjustments in the design are being made. The focus now is ensuring local people and service users are involved from the very start of the process, before any business case or service plan is written, to make it fully co-produced. There is also work ongoing by the Redbridge Borough Partnership to make the borough more accessible for BSL users and fully involved with their care and the communications team are also working on making NEL ICB more accessible.	
	In responding to questions, Aamir Ahmad clarified that ELFT have co- production teams in all their services including neurodiversity.	
	Co-production could be used in areas such as in finance or workforce recruitment. Enabled Living have helped to develop recruitment strategies and service users are part of the recruitment panel and this adds a different and valued perspective. Feedback received from recruited staff has been positive to this approach. Aamir Ahmad added that in ELFT they have a corporate co-production team and agreed that it is important to include service users in recruitment ensuring candidates have empathy and an understanding of issues that service users have.	
	The chair thanked all those who presented and summarised that co- production is the heart of how people and communities are involved in planning, design, delivery and evaluation and as a result of this how new services and new ways of working have been developed with improved and meaningful outcomes and wellbeing for the people that participated.	
5.0	Questions from the public	
	No questions were received.	
6.0	Any other business	
	None raised.	
	Date of Next meeting – 6 July 2023	



Integrated Care Partnership Actions Log

OPEN ACTIONS

Action ref:	Date of meeting	Item no	Action required	Lead	When	Status
ACT004	05/04/23	2.0	Governance update Progress report on integration and working together as a system added to be forward plan.	КС	Jul 2023	Added to forward plan and action completed

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Integrated Care Partnership 6 July 2023

Title of report	The Big Conversation		
Author	Zoe Anderson, Associate Director, Communications and Engagement		
Presented by	Charlotte Pomery, Chief Participation and Place Officer		
Contact for further information	zoe.anderson@nhs.net		
Executive summary	As part of the wider 'Working with People and Communities Strategy' developed with partners across north east London last year and adopted by NHS North East London's Board in July 2022, and the subsequent development of the Integrated Care Partnership Interim Strategy, partners committed to a 'Big Conversation' with local residents.		
	This is intended to build on the good work on participation and co-production already happening through each place-based partnership and underway with provider collaboratives. It is not a one-off exercise, but through a series of activities over the coming months, provides a chance to share more information about the wider NEL and local partnership, including our key plans and priorities. More than this, it provides an opportunity to work with local people to shape our future strategies and budget plans, and to agree together how we should measure success in a meaningful way.		
	There are a range of opportunities for people to participate – through surveys online or face to face, at drop-ins, events, online discussions and more. We hope that by using the insight we have, while testing and building on this, that we will build a rich picture of what matters most to people locally which will in turn inform our future plans.		
Action / recommendation	The Integrated Care Partnership is asked to note the update and feedback received from engagement to date.		
Previous reporting	Population Health and Integration Committee Integrated Care Partnership Steering Group All place-based partnership meetings		
Next steps/ onward reporting	Updates will be provided at future meetings as above		
Conflicts of interest	None		
Strategic fit	This aligns with and will enrich our plans to address all four priorities for the ICS:		
	To improve outcomes in population health and healthcare		

	To tackle inequalities in outcomes, experience and access		
	To enhance productivity and value for money		
	To support broader social and economic development		
Impact on local people, health inequalities and sustainability	This approach is intended to directly improve local people's experience of health and care services by hearing and working together with then to design future services together.		
Impact on finance, performance and quality	A budget has been identified for the exercise, to support Healthwatch and voluntary/community sector partners to broaden our reach to local people.		
Risks	Key risks and mitigations are:		
	Overloading local people with demands for feedback that they have shared already and through multiple/confusing opportunities to be involved. We will mitigate this through using insight Healthwatch already hold through the community insights system and through ensuring activities are joined up with those already planned.		
	That we raise expectations on co-production that are not met. This will be mitigated through a real commitment from all statutory partners to hold to the principles articulated in our Working with People and Communities Strategy, as well as each organisation's local strategies.		

The Big Conversation

The Big Conversation is about listening to the people in our communities, and understanding their views about health, care and wellbeing. It will help us focus on what matters to local people and how we can work with them and use their insight to improve what we do.

Based on what we already know about the needs of local people, the Big Conversation focuses on our four priorities for improving quality and outcomes and tackling health inequalities: **Babies**, **children and young people**, **long term conditions**, **mental health** and **local employment and workforce**.

We are running an online <u>survey</u> open until 31 July (with c400 responses so far) and holding a series of events throughout June and July in local areas and online, with different groups and focusing on different topics, supported by local Healthwatch.

Analysis will take place in August with an event planned for Autumn to look at findings and how we use these to develop success measures to hold ourselves to account on and report on regularly.

For more info: The 'Big Conversation' - North East London Health & Care Partnership (northeastlondonhcp.nhs.uk)

Feedback from engagement to date

 Three events to date in Waltham Forest, Redbridge and Barking and Dagenham, c180 people engaged with. More planned during July.

Main themes emerging:

- People want more empathy and compassion from health and care staff
- People don't feel that agencies/organisations are working well together and don't know where they can go to get help/answers
- Need ways to support people to be physically and mentally well in local communities
- Navigating ways into health and care jobs is complicated and complex not sure where to start/being put off



Integrated Care Partnership 6 July 2023

Title of report	Integrated Care Partnership - committee effectiveness survey results		
Author	Marie Price, Director of Communication and Involvement		
Presented by	Marie Gabriel, Chair		
Contact for further information	keeley.chaplin@nhs.net		
Executive summary	It is good practice to undertake a review of the effectiveness of the ICB's committees, including those that are joint, and this will be undertaken annually going forward. This will enable the ICP to ensure that its governance arrangements remain fit for purpose. The ICP steering group considered the results at their last meeting and the outcome of the discussion is summarised in section 3. A number of the recommendations from the survey have already been taken forward, for example meeting face to face and wider priorities fed into the forward plan for this committee. A more detailed plan based on the recommendations will be developed for consideration by the steering group, and then this committee.		
Action / recommendation	 Committee members are asked to note and discuss the results of the recent committee effectiveness survey. To agree next steps in terms of future improvements as to how the committee operates in future. To consider the membership of the wider ICP and whether this includes the right mix of colleagues based on our programme of work and ambition. 		
Previous reporting	N/A		
Next steps/ onward reporting	Comments will be considered in future planning and key themes will be included in the ICB's annual report.		
Conflicts of interest	None		
Strategic fit	N/A		
Impact on local people, health inequalities and sustainability	N/A		
Impact on finance, performance and quality	Well run and effective committees support good decision making and improvement in relation to finance, performance and quality.		
Risks	That the learning from the survey and further discussion is not taken on board, missing the opportunity to improve.		

1.0 Introduction

Each year committee members are asked, through a survey, to share their views on the effectiveness of their committees, reflecting on what went well and what could be improved. This is done to inform future development of the committee and a summary of the results are included in the ICB's annual report. Given the ICB was established part way through the financial year, with nine months of committee operations from July to year end, these results are a more limited snapshot than usual, but still provide useful feedback to consider in terms of what to build on, change and develop for the new financial year.

2.0 Summary of overall comments on committee effectiveness

2.1 Things that went well:

- The Steering Group which helps to shape the agenda.
- Well attended from all sectors
- The chairing of the ICP
- Broad membership allowed for good debate and challenge
- The ICP has managed to establish itself and sign off the integrated care strategy in a relatively short space of time
- Clarity of presentations provided

2.2 What hasn't worked so well:

- It is not always easy to engage in a wider room, even if it is virtual, so need to think about who is not speaking up.
- The need to have this online does prevent more informal exchanges
- There is a reluctance from some people to speak and also there is a need to "capture" the chat.
- Meeting online
- The membership could reflect the population better in terms of diversity
- Its size means it will never be a forum for taking decisions as opposed to blessing decisions taken elsewhere
- The length of time taken to decide on governance
- Large areas requiring stakeholders to cover more than their normal areas (for example VCSEs being asked to provide representation for all boroughs)

2.3 Other comments:

- It is more difficult to see what our role is now we have signed off the Interim Integrated Care Strategy so some work on that would be useful.
- Work out what success looks like and that it must be informed by patients/ residents. This will help shape our future work.
- Holding a meeting in person would enable relationships to be built on further and engage the audience more effectively
- Better sharing of good practice initiatives with clearer opportunities for boroughs to 'level up' on provision of services
- Focus on a particular theme at each
- Better communication with all boroughs

3.0 Progress to date and next steps

3.1 ICP Steering Group consideration

At the June meeting steering group members considered the results of the first committee effectiveness survey for the Integrated Care Partnership. Key points noted were:

- The continuance of smaller breakout groups in focussed sessions will encourage all voices in the room to be heard.
- It was noted that the Big Conversation is engaging and will continue to engage with underserved groups. It will also be a dialogue that ensures people receive feedback, are kept informed of any changes made due to their input, ensuring that they and their contribution are valued.
- Measuring success will form part of the Big Conversation.
- Now that the Integrated Care Strategy has been published the ICP can focus and monitor system success measures.
- Ensure public expectations are managed and to be open about budgets and workforce.
- Members of the ICP confirmed they are feeding back information and progress on the ICP at different forums e.g. via board chair/CEO reports.
- First meeting held face to face planned for July.

3.2 Next steps

For a development plan to be produced for the ICP steering group, considered and presented to the next ICP committee meeting.

26 June 2023

Integrated Care Partnership

Forward planner 2023/24

Month	Item	Lead	Things to consider
Standing items	 Apologies Declarations of interest Minutes of the last meeting Matters arising AOB 	Chair	
Wednesday 4 October 2023	 Reflections on the ICP development session Workforce Strategy Estates Strategy - TBC ICP system planning process System pressures 	CP FO Carolyn B Jo M/Anna C All	Verbal item to raise pressures in system for ICP discussion
Wednesday 10 January 2024	Review of ToRs		