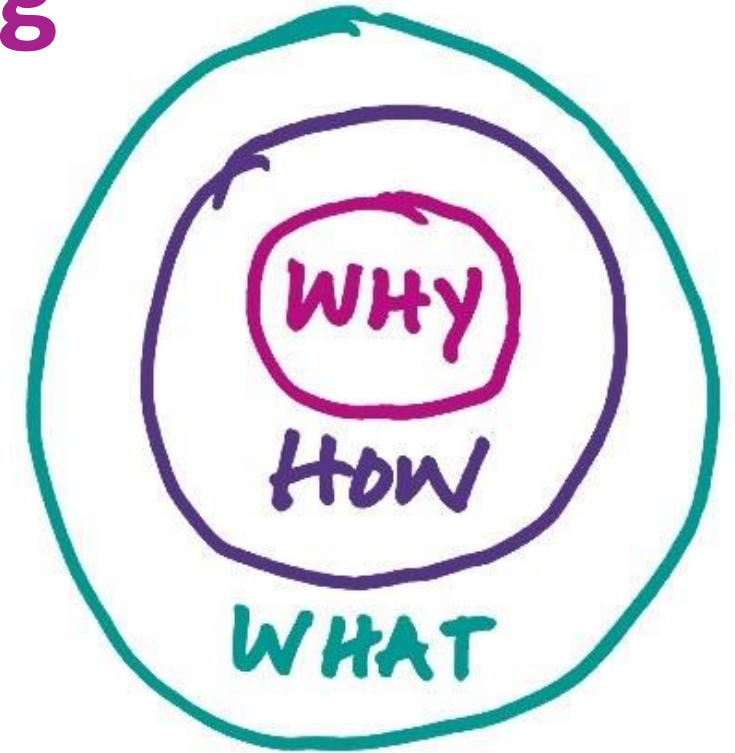


System and Partnership Working in Suffolk and North East Essex

Susannah Howard
Integrated Care Partnership (ICP) Director

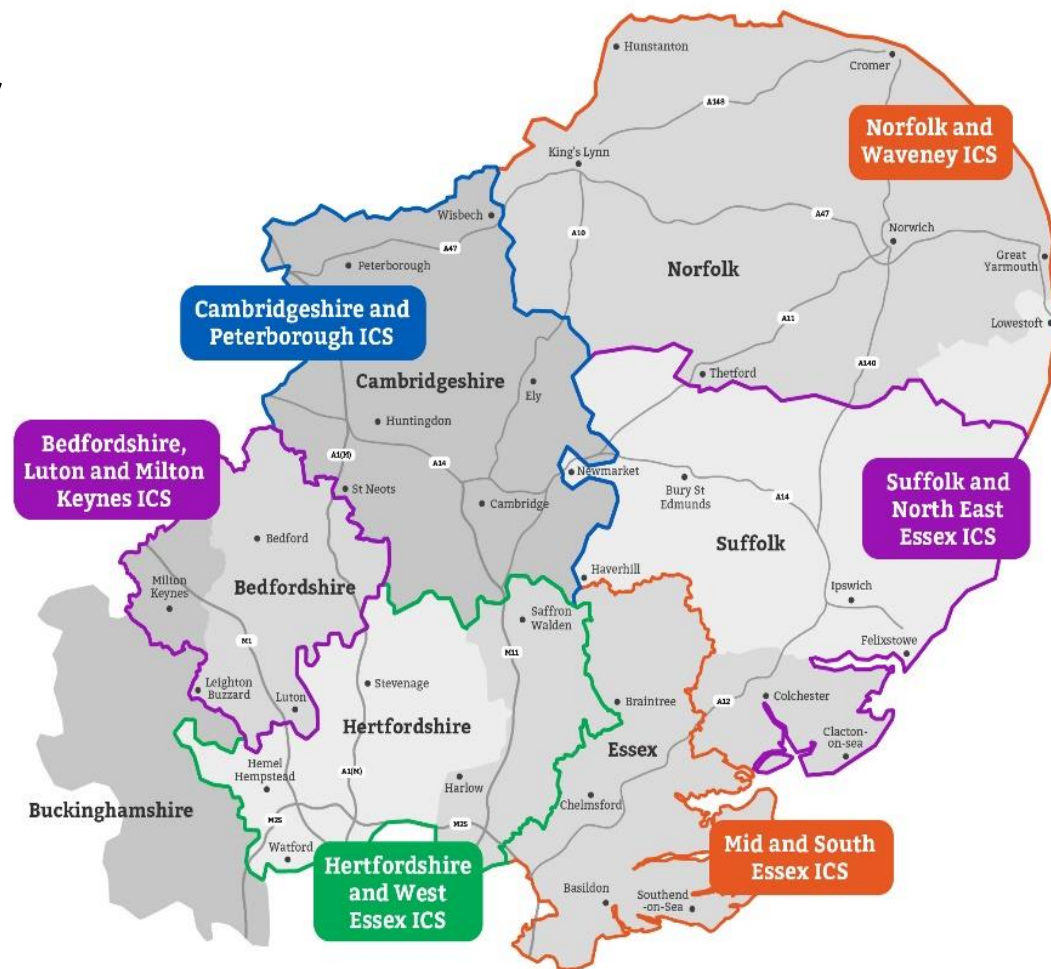
Rachel Jennings
ICP Communities Lead

Suffolk & North East Essex ICS

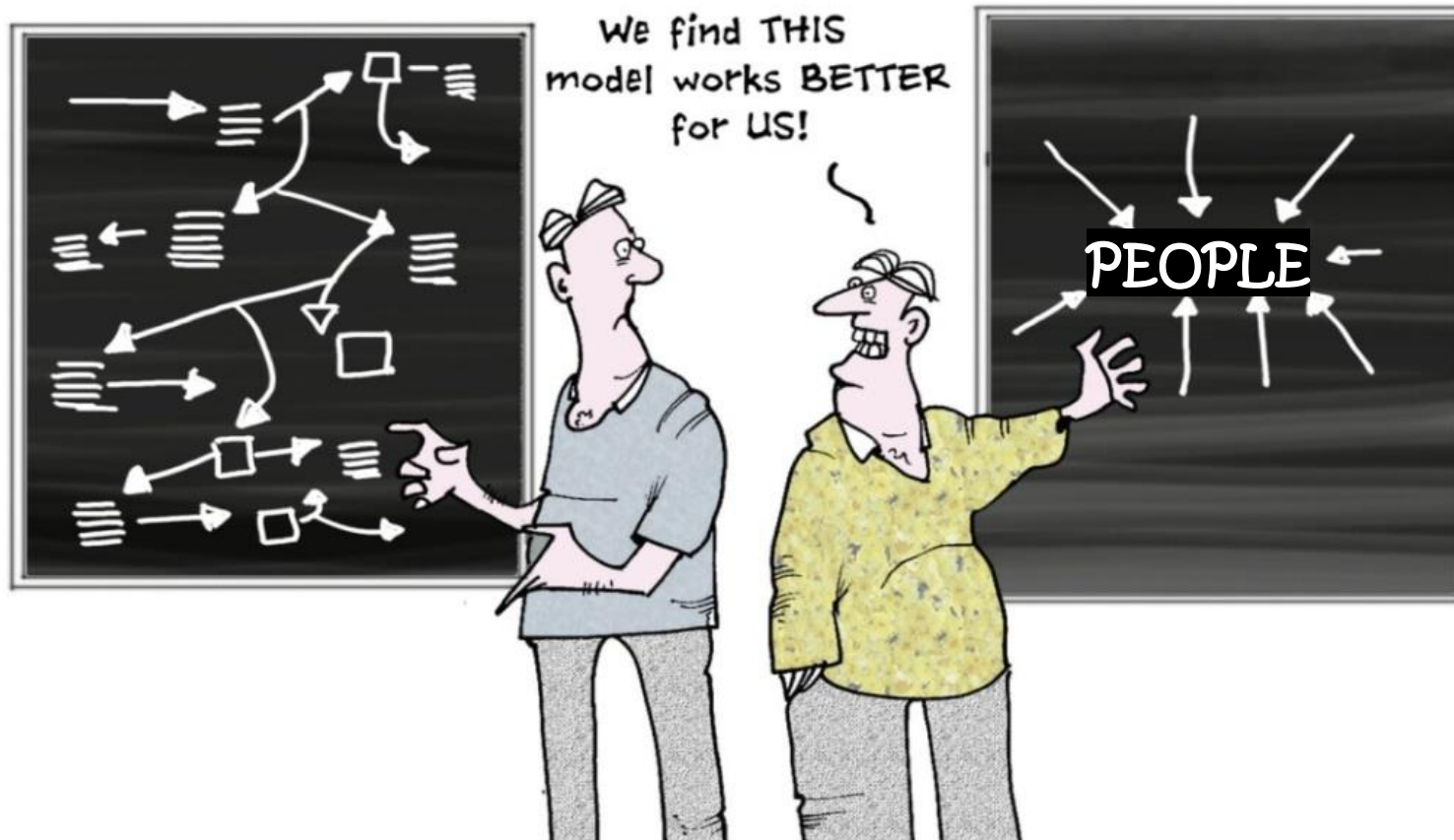


What are Integrated Care Systems?

- The Health and Care Act, 2022 created 42 statutory Integrated Care Systems in England
- Suffolk and North East Essex ICS brings together everyone in health and care who serves our local population of just over 1 million people
 - NHS Commissioners and NHS Trusts
 - County Councils - Social Care & Public Health
 - District and Borough Councils
 - GPs, Dentists, Pharmacists, Optometrists
 - Voluntary, Community, Faith and Social Enterprise (VCFSE) Sector
 - Social Care Residential and domiciliary providers
 - Patient and public representatives



What people, communities and our staff want is a local health and care system that is genuinely 'Can Do'



SOME FEATURES OF OUR INTEGRATED CARE ECO-SYSTEM



Suffolk and North East Essex Integrated Care Partnership (ICP)



NHS Suffolk and North East Essex Integrated Care Board (ICB)



Suffolk Health and Wellbeing Board



Essex Health and Wellbeing Board



North East Essex Alliance



Ipswich and East Suffolk Alliance



West Suffolk Alliance



Integrated Neighbourhood Teams



Primary Care Networks

NHS Provider Collaboratives



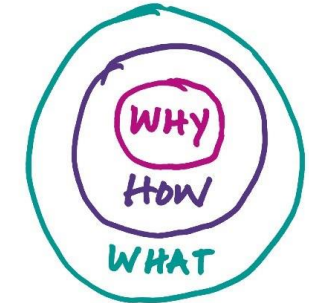
ICS VCFSE Assembly

ICS Chairs Group



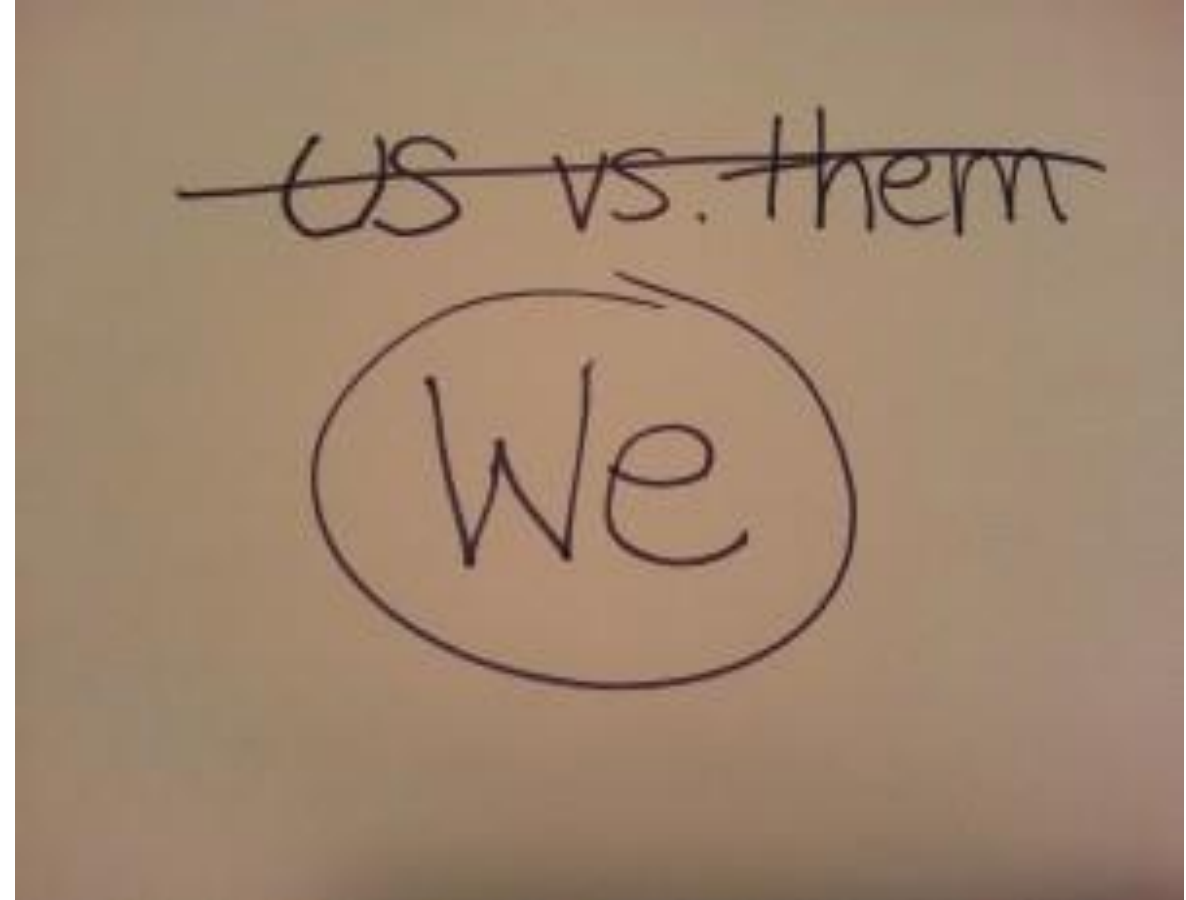
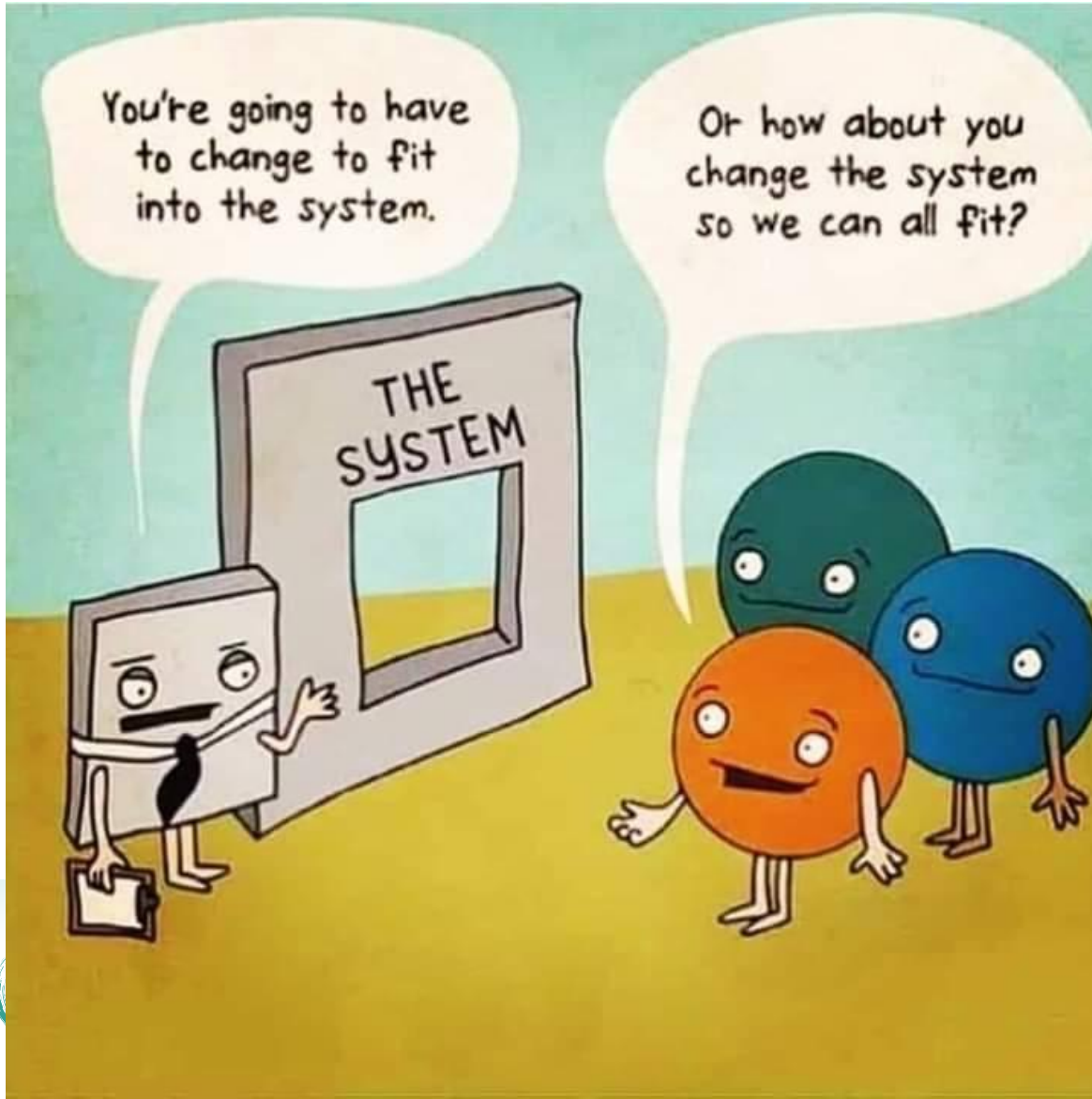
INTEGRATED CARE SYSTEM (ICS)

Our ICP is how we Cultivate our 'Can Do' Integrated Care Eco-System



sneecs.org.uk

We need to work at addressing the systemic barriers to partnership

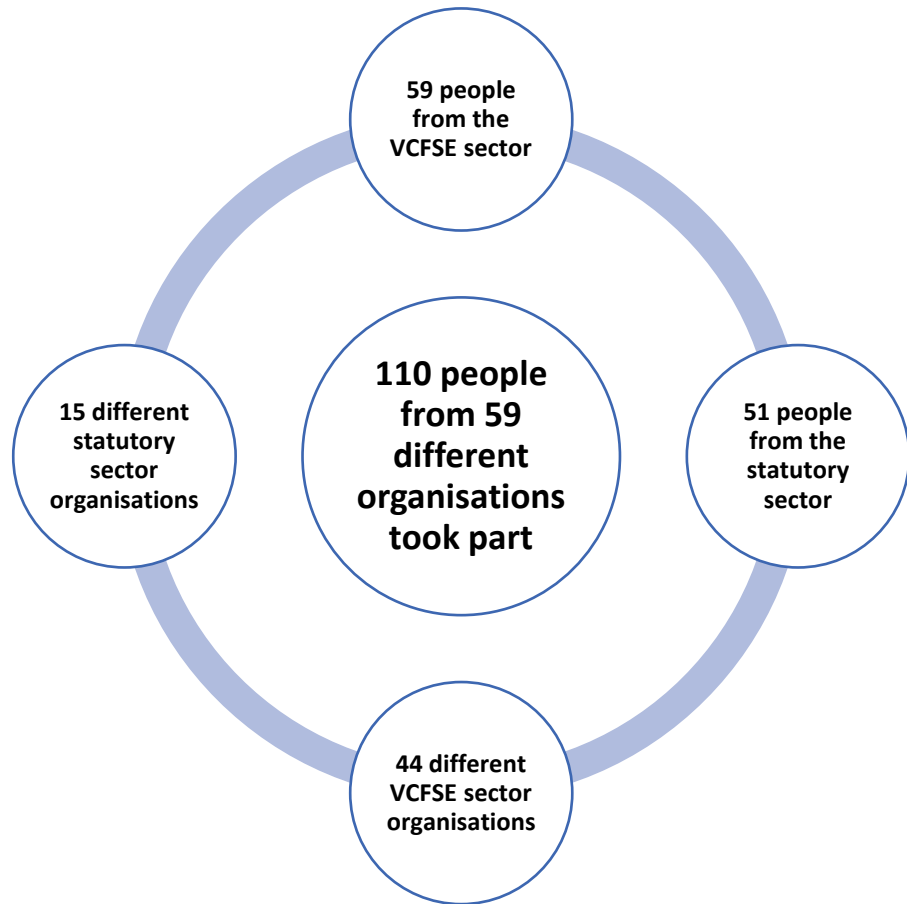


 Suffolk and North East Essex Integrated Care Partnership

SNEE ICS VCFSE Sector Resilience



The development of the VCFSE Resilience Charter



The process ran from Feb to Jun '23, and included an online survey, whole system workshops and 5 Task and Finish Groups with joint SRO's from VCFSE and statutory organisations to consider;

- *Sustainable Funding
- *Quality & Monitoring
- *Resilience & Capacity
- *Trust & Culture
- *Co-Production

In addition to developing the Principles for the Charter, each group agreed a number of recommendations for the ICS to progress to help embed this work.

The Principles

We will work together as **equal partners** with **mutual respect**, acknowledging that whilst there may be differences between sectors, we have **shared values** and **principles** to improve the health and well-being of our communities, and through working **as equal partners we are stronger**

We will have **open** and **honest communication**, using **common language**, recognising that **transparency** builds stronger, trusted relationships

We will work **collaboratively** to ensure that we are **utilising the insight** and trusted relationships the VCFSE sector has in **strategic planning such as prevention**

We will prioritise collaboration between sectors which is underpinned by genuine **co-design** at the earliest stage, valuing the benefits that the diversity of partnerships brings which allow us to **share knowledge** and ideas leading to **innovation** and **maximising our resources**

We will actively recognise the **diversity** of the VCFSE sector and will seek to engage the sector as widely as possible whilst being cognisant of the **resource and capacity challenges** that affects both small grassroots organisations and larger providers

We will work collaboratively to identify ways of **streamlining** and **removing unduly onerous processes** to how we fund, monitor, and evaluate programmes so they are **proportionate** to the scale and value of the activity and are **led by the outcomes we seek to achieve**

As a system we recognise the **impact** that **short-term funding** has on how services and interventions are delivered and how VCFSE organisations are sustained. We will **use the full range of funding mechanisms available** to us to achieve a range of funding opportunities that are suitable for all partners, and where appropriate, we will seek to expand upon multiyear investment. And we commit to finding opportunities that help us to **shape the funding environment that we all operate in**

We commit to the principles of the **One Workforce** and through this we are committed to how we can **build the resilience and capacity** of the VCFSE sector, recognising the scale and responsibilities the VCFSE sector has to its diverse workforce.



Progressing the recommendations of the Resilience Charter:



Co-designing a Good Practice Guide to Grant Funding & Procurement with ICS partners



The insight we had from our earlier co-design told us.....

What's important?

- There should be a **focus on sustainability** to maintain quality services to the end users - new and innovative isn't always best it means doing what we do best and not compromising by doing too much or for the scope of work to creep into unfamiliar territory
- **Maximising the use of resources and reducing duplication**
- There should be an **open and honest 2-way communication where challenges can be discussed and supported**, underpinned by shared values of Quality Assurance and Monitoring

A robust QA and Monitoring framework to provide assurances should be

- **easy to navigate** for VCFSE groups of all sizes
- **proportionate** to the level of funding and the size and scale of the work
- includes **monitoring systems that are co-designed** to reflect client group needs
- recognises the **value of qualitative feedback**
- timeframes that allow for lead in/start up and time for impact to become evident

Challenges

- Monitoring processes with statutory organisations generally prioritise quantitative over qualitative evidence
- Sporadic reporting is onerous and time consuming – funders/commissioners need to be clear at outset on the requirements. However, developmental services may require changes and flexibility so it's important to understand capabilities and limitations at the start
- The restrictions lifted during Covid-19 was a national directive, statutory orgs do not have power to do that independently so we should learn from covid-19 practices but be aware that the same levels of flexibility no longer exists – we need to be clear what's in our control and what's outside of it and be pragmatic and transparent

VCFSE sector case studies informed our Principles

Good practice

- In 2020 we piloted an early intervention programme offering support to our target group in 2 locations in our Alliance area. The funding for the pilot ended but it enabled us to test and evaluate the new approach. Recent reports were showing a rise in cases relating to this particular client group which was putting significant pressure on NHS services. Using the evidence from the pilot programme, we have been funded by the ICB to phase the programme across multiple locations to reach a much higher number of clients throughout the Alliance area during 2023/24.
- We've been delivering work for health and social care for over 20 years (core funded by social care for 20years +). Our health project work has been funded 8 years but non recurrent. During lockdown, the demand for our services increased so we began to work in partnership with health and social care. Post lockdown, we had conversations about a joined up approach to funding. Both commissioning organisations worked with us to collaboratively consider the pressures and costs of the old way of commissioning and the benefits of joint funding. We were awarded our first 3-year joint funded contract this current year, which provides us with a level of sustainability to run our service and enabled health and social care to jointly invest in our service.

Poor practice

- We have a 5+2 year contract. The contract is for a fixed annual payment with no inflationary increase per year so it doesn't take into account rising prices or an increase in demand from the client group. Whilst long term contracts provide sustainability for the VCFSE sector, expecting the same service and same KPIs to be delivered year on year with no inflationary increase is extremely difficult.
- There was a delay in issuing our contract, so it took 7 months before we received a payment and one of the other partners waited 11 months. There also seemed to be a lack of understanding from statutory colleagues about the need for some level of FCR/Overhead payment. There was an assumption that the only costs being incurred by us was the salary and associated pay costs and gave no thought to overheads that had to be met in order to deliver the service.
- Our contract meetings were delayed which is a shame as having verbal conversations to iron out issues would have been a swifter way to deal with the initial set up. Once they were in place, the monthly performance meetings could be quite difficult and we had requests to monitor new things that were outside of the initial scope of the contract. There was also a tendency to micro manage our personnel. They wanted to know who is allocated to the contract and how many hours they work rather than thinking about the wider perspective of we're commissioned to deliver a service and that we might flex our staffing in order to ensure that the service can be delivered in the best possible way.



 Suffolk and North East Essex Integrated Care Partnership

 Essex County Council

 Suffolk
County Council

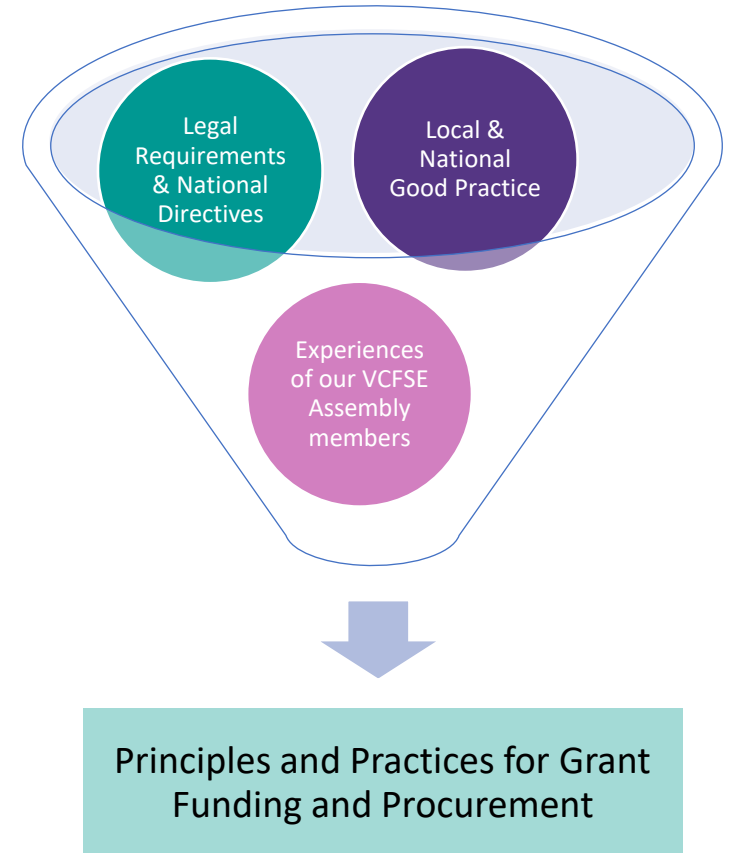
 NHS
Suffolk and North East Essex

Following the approval of the VCFSE Resilience Charter principles and recommendations by the ICP Committee in June 2023, a Task and Finish Group continued over the summer to progress the recommendations of the Sustainable Funding and Quality and Monitoring Task and Finish Groups with 3 priorities;

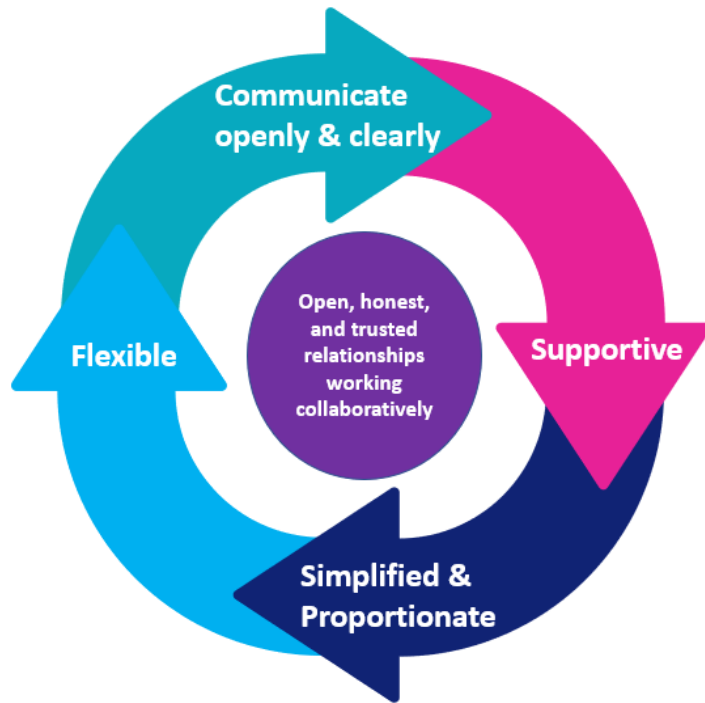
- To develop a Good practice guide for Funding & Procurement
- To consider best practice and principles that could be adopted to streamline monitoring processes
- To review the support and guidance for Social Value already offered across the ICS, and determine what else is needed

After developing the guidance, the group recognised the importance of having an assurance process to support the adoption of the principles, so a further output of the group was

- Assurance process and supporting documents.



The Principles & Practices for Grant Funding & Procurement



Open, honest, and trusted relationships are vital to the way we work together and this approach to working collaboratively underpins our principles.

We will communicate openly and clearly

- Use plain English without jargon or acronyms
- Increase opportunities for human contact e.g. webinars or phone calls so organisations can ask questions before they submit a bid
- Give meaningful and timely feedback to applicants
- Where possible provide a 6 month notice period for projects ending or continuing

We will be supportive

- Promote the support that is available to develop skills in bid writing and measuring and demonstrating impact
- Provide guidance on where to find data to support a project proposal
- Where possible and appropriate, incorporate time into the process to allow for delivery partnerships to be created
- Where possible offer longer term commitments and avoid repeating one-year grants/contracts
- Provide sufficient lead in time for new projects

Our processes will be simplified, proportionate and relevant

- For larger value grant awards, have a two-stage process with a simplified Expression of Interest
- Only request supporting information that is essential to the decision-making process
- Ensure that evidence and reporting requirements are proportionate to the funding awarded
- Work with organisations to co-design monitoring tools which will be used
- Focus on the 'impact' created rather than the 'outputs' so change is funded not just activity
- When a project is ending, review the experiences and learning from the relationship between parties to help inform future planning

We will be flexible

- Be clear on what the award is seeking to achieve but allow organisations to use their expertise in determining how best to deliver it
- Be transparent and flexible in how the award is monitored, and where possible adapt and change project plans and budgets in response to the needs that are identified
- Allow greater freedom in how applicants can present their evidence and report back

Embedding Assurance & Accountability

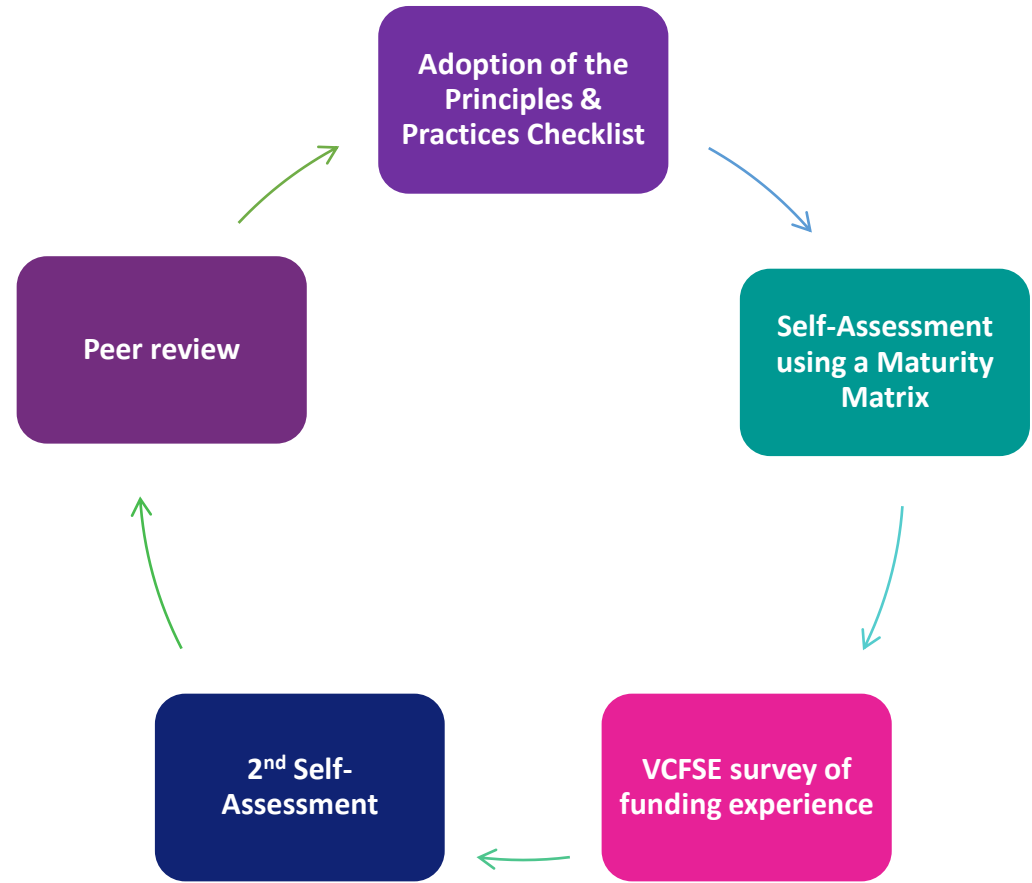
SNEE ICS Good Practice Guide to Grant Funding & Procurement Checklist



Principles & Practices	Yes/No	If No please explain why
We will communicate openly and clearly		
Use plain English without jargon or acronyms	Yes	
Increase opportunities for human contact via webinars or phone calls so organisations can ask questions before they submit a bid	Yes	

Give meaningful feedback to applicants	Our processes will be simplified, proportionate and relevant	
Where projects end or continue	For larger value grant awards, have a two-stage process with a simplified Expression of Interest	
Where projects end or continue	<ul style="list-style-type: none"> This should be proportionate to the value of the grant so not appropriate to grants with a lower value The 1st stage should be a simple overview of the proposal to assess if it meets the criteria, and the 2nd stage should not repeat any of the info gathered in stage 1 Timeframes need to be considered so that it doesn't extend the application process too much 	
We will communicate openly and clearly	Only request supporting information that is essential to the decision-making process.	
Promote the value of the grant	This should be proportionate to the value of the grant/contract	
Provide evidence of impact	Ensure that evidence and reporting requirements are proportionate to the funding awarded.	
Provide evidence of impact	<ul style="list-style-type: none"> Acknowledgement that national directives or grant maker requirements may limit this on some occasions 	
Provide evidence of impact	Work with organisations to co-design the monitoring tools they will use.	

Please consider the individual practices and assess which statement best describes your position				
Practices	Minimum	Developing	Mature	Exemplar
	Commitment to action but in early development	Practices are being followed but not consistently	Comprehensive adoption of practices across multiple services/programmes	Fully embedded across the organisation
Use plain English without jargon or acronyms				
Increase opportunities for human contact e.g. webinars or phone calls so organisations can ask questions before they submit a bid				
Give meaningful and timely feedback to applicants				
Where possible provide a 6 month notice period for projects ending or continuing				
Based on the results above how well do you consider yourself to be achieving the overarching Principle for Communication?				
Practices	Minimum	Developing	Mature	Exemplar
	Commitment to action but in early development	Practices are being followed but not consistently	Comprehensive adoption of practices across multiple services/programmes	Fully embedded across the organisation
We will communicate openly and clearly				



Implementation plans for SNEE ICB, Suffolk County Council and Essex County Council

Each organisation have outlined their own tailored plans to how they will adopt and embed the Good Practice Guide, but all incorporate the following themes:

- Embedding within policies and processes
- Incorporate into team meetings and training
- Adopting a phased implementation within the organisation
- Consulting with managers on how best to embed the checklist into processes
- Conducting annual self-assessments
- Further presentations and engagement to support wider adoption with the District & Boroughs.

