

Health Update – April 2024

Driving equality for north east London

We have developed an outline of the challenges we face in driving equality for people of north east London. The population of north east London is very fast growing and has many existing health inequalities. This results in very high levels of demand for health services. Alongside this high demand, north east London has the lowest capital allocation in London (money allocated from NHS England to invest in the local NHS) making it difficult to invest in the improvements needed to really challenge the health inequalities we see locally. That's why we are working to challenge the systemic barriers that are currently impeding our progress and secure additional investment and have set out our position to NHS England. We will provide a detailed briefing in the near future.

Specialised services commissioning

NHS England currently commission all specialised services; however, in December 2023 the NHS England Board approved plans to fully delegate commissioning of appropriate specialised services to Integrated Care Boards (ICBs) by April 2025. Specialised services are a diverse portfolio of around 150 services generally accessed by people living with rare or complex conditions. These include services for people with physical health needs, such as cancer, neurological, and genetic conditions and some mental health services too.

Joint commissioning will take place from April 2024 to support a smooth transition of commissioning responsibility (Delegation) by April 2025. Moving to ICB-led commissioning supports a focus on population health management across whole pathways of care, improving the quality of services, tackling health inequalities and ensuring best value. These plans, which were first set out in the <u>Roadmap for Integrating Specialised Services within Integrated Care Systems</u>, have been developed in close collaboration with NHS England's regional teams, ICBs and specialised service providers. They represent the outcome of a thorough assessment of ICB system readiness, and a comprehensive analysis of services to determine their suitability and readiness for more integrated commissioning.

People and Culture Strategy

We have developed a People and Culture Strategy following extensive engagement with system stakeholders and with consideration of our Interim Integrated Care Strategy, Joint Forward Plan, and national directives and plans.

We need a radical new approach to how we work as an integrated care system to tackle what we are facing today and secure our sustainability for the future. The strategy outlines our challenges and how we plan to overcome them, recognising our role as an 'Anchor Institution' in tackling issues relating to employment, health and wellbeing and diversity. It also acknowledges that we must be flexible to respond to emerging demands and population health needs.

It identifies four core people and culture pillars, focusing on how we attract, retain, innovate and lead.

Our focus also aligns to wider national people directives and plans, such as the NHS People Plan. Our strategy will be underpinned by a detailed delivery plan (to be developed as part of the next steps with partners) whereby the priorities for the next five years will be considered and agreed upon.

An overview of our focus for the five years, and in particular, the first twelve-month priorities and actions are detailed in the strategy. The details of the full five years will be scoped and captured within the detailed delivery plan.

People and Culture Strategy - Priorities



Attract (the offer)

Helping our local populations to choose to work in Health and Social Care, (H&SC) supporting their entry into tailored roles and apprenticeships, giving them the best start in employment to enable them to become valued members of our workforce and to thrive in successful careers that are meaningful to them.

First year priorities

- Attraction We will work with partners to understand the barriers to employment in health and social care for our local residents, exploring existing support programmes, further potential and developing innovative attraction mechanisms to support key areas of workforce shortage across the system.
- Recruitment We will identify differences and barriers in our recruitment processes and simplify the application process across NEL.
- 3. Plans We will collaboratively create attraction, recruitment and induction plans across NEL.



Retain (best place to work)

Helping our NEL partners to become 'employers of first choice' for our diverse NEL Health and Social Care workforce by creating work environments with safe, inclusive, and empowering cultures which enable all staff to progress and maximise their potential.

First year priorities

- Career pathways We will focus on developing open and transparent career pathways (from temporary to permanent employment) for all NEL Health and Social Care (H&SC) employees, supported by clear, agreed performance objectives and individual training and development plans that promote life-long learning.
- First choice We will focus on developing an employment offer that supports our current and future staff to balance their working and personal lives.



Innovate (new ways of working)

Working in a collaboration across the NEL system to develop joined up solutions and to establish the right cultures, protocols and systems to enable the pro-active planning, development, management and deployment of a productive 'One Workforce for NEL' that will deliver excellent services to our residents.

First year priorities

- System OD and Culture Programme we will build a programme for all NEL Health, Social Care and Voluntary Sector leaders to build bridges and develop a system-wide culture of shared values, including trust, relationship building, collaborative and seamless working, open and transparent information sharing, and to agree how leaders will come together to address their common challenges.
- 2 Pathways in collaboration with Employers and Higher Education Institutions, we will develop education and career progression pathways to support the needs and advancement of young people, women, carers and other targeted under-represented groups who will join the Health, Social Care and Voluntary Sector across NEL.



Lead (leadership orientation)

Building a compassionate, equitable and inclusive leadership collectively across NEL Health and Social Care that reflects the diverse communities it serves, leads by example supported by developed talent pipelines to maximise our staff's potential and develop the next cohort of leaders.

First year priorities

- Leadership behaviours and framework We will promote system-wide implementation of the upcoming National Leadership Competency Framework.
- Training and development We will implement an essential system-wide package of EDI, Cultural Sensitivity, Anti-Racist, Compassionate and Inclusive Leadership and Unconscious Bias training for all in leadership positions including aspiring leaders.

People and Culture Strategy – Next Steps



Homerton Healthcare Fertility Unit

- The Human Fertilisation and Embryology Authority (HFEA) has suspended the license until May 2024 as a result of their concerns about three incidents
- Homerton is continuing to work alongside the HFEA and is investigating the incidents. Each person affected by the incidents has been contacted by the unit's clinical team
- People who are currently undergoing treatment will continue to be treated there to complete it, however, the unit is unable to accept new patients.
- We have provided local GPs with guidance on what this means for people currently undergoing treatment at Homerton and for those who have not yet been referred for treatment
- We are working with the HFEA and NHS England to support the Homerton and to ensure that we implement any recommendations that come out of the external investigations.
- We are working with other fertility treatment providers to manage capacity across north east London and will
 endeavour to ensure all eligible people receive treatment in a timely manner.