

Improving Lives Together

Our ambition for
a healthier future
in Sussex



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Our ambition for a healthier future

We want to improve the lives of people living across Sussex now and in the future and we will be working differently with our communities to make this happen. We want people to thrive and be the best they can be; to be healthier and feel supported; and have the best possible services available to them when needed

We know this is not happening often enough at the moment, particularly for those who are the most disadvantaged in our communities.

Not enough people are being supported to live healthier. Too many people are living in poor health. And too many people and their carers are waiting too long for treatment or care. This is despite our dedicated health and care staff working hard every day to give local people the best care they can.

In some areas, this has been the case for many years, but things have been made worse by the impact of the pandemic and the current pressures on people's lives due to the cost-of-living crisis.

A lot of work has already taken place across health and care to make improvements and we have made some progress for our population. But this has still not gone far enough for some people and more needs to be done.

A lot of the issues we face can only be resolved with long-term change. We need to think and work differently to make a bigger difference to local people. And this needs an even greater and longer-term ambition to build on what we have done in the past.

Improving Lives Together represents that ambition



We are building on the Health and Wellbeing Strategies we have in place across Brighton and Hove, East Sussex and West Sussex that focus on the priorities across our local populations.

In addition to this, we have agreed the areas that will make the biggest positive difference to people's lives that can be best achieved by working across the whole of Sussex. These are:

- **A new joined-up community approach to health and care**
- **Growing and developing our workforce**
- **Improving the use digital technology and information**
- **Maximising the power of partnership working**

We now have a better opportunity to make our ambition a reality because of the different way we – the organisations responsible for planning, providing, supporting and influencing health and care - are working together.

We will be strengthening how our organisations work formally in partnership across our populations in Brighton and Hove, East Sussex and West Sussex - what we call working at "place". This is where our organisations have already been working to better join-up care and take positive action, co-ordinated through three Health and Care Partnerships whose work is overseen by Health and Wellbeing Boards.

We cannot do this alone though and will be working with local people, our communities, and our staff to make it happen. We will all need to be committed to making the changes we want to make and help support each other to do so.

By working together in this way we can improve lives now and in the future.

Sussex Health and Care Assembly

Who we are

The Sussex Health and Care Assembly is a formal joint committee set up between NHS Sussex, Brighton & Hove City Council, East Sussex County Council and West Sussex County Council. Its membership includes representatives from universities, voluntary and community organisations, Healthwatch, further education, housing and local enterprise, across Sussex. Although each organisation is responsible for decisions about its own priorities and resources, we want to use the approach outlined in Improving Lives Together to keep us focussed on the things we can only achieve well by working together. You can read more information on the Assembly [here](#).

CLICK



About our Health and Wellbeing Boards and Strategies

There are three Health and Wellbeing Boards in Sussex covering Brighton and Hove, East Sussex and West Sussex. They have a statutory role to bring together representation from local government, including borough and district councils, local NHS organisations, Healthwatch and voluntary, community, social enterprise organisations, and other key public services to assess needs and agree plans, focussed on improving health, care and the overall social and economic wellbeing of their populations.

The Health and Wellbeing Board Strategies use local evidence, data and insight to set out the priorities for improving health and wellbeing of their populations, responding to the distinct issues and challenges in these places.

There are three Health and Care Partnerships that support the Health and Wellbeing Boards to deliver these strategies. The additional improvements we want to make in Improving Lives Together aim to support, build on, and accelerate these local priorities.



**Brighton and Hove
Joint Health and
Wellbeing Strategy**



**Healthy lives,
healthy people:
East Sussex Health
and Wellbeing
Board Strategy**



**West Sussex
Joint Health and
Wellbeing Strategy**

The background features a series of overlapping, semi-transparent circles in shades of green, red, magenta, and teal. Three stylized human figures are positioned on the right side, each within a colored circle. The top figure has dark hair and a light blue face, set against a teal circle. The middle figure has yellow hair and a green face, set against a red circle. The bottom figure has dark hair and a light blue face, set against a blue circle. The overall aesthetic is modern and vibrant.

1

Where we are now:
Why we need to change

The majority of people in Sussex receive good quality support, care and treatment most of the time. Satisfaction rates are still high among those using services and a lot of work has taken place to improve health and care over the last few years that has brought real benefits



This includes giving people better and quicker access to the right services when they need them. For example:

- **We are creating more appointments at GP practices at more convenient times of the day.**
- **We have improved how people get urgent care by introducing Urgent Treatment Centres at hospital sites and expanding the 111 service.**
- **There has been an expansion of mental health services to include a single point of access service in West Sussex, to go along with that already in place in Brighton and Hove and East Sussex.**
- **More is being done to prevent people going to hospitals for care, such as the 'virtual wards' we are creating to support people and their carers at home, and the community diagnostic centres being rolled out to provide people with tests, scans and treatments closer to where they live.**
- **There has been greater focus and improvements on how people can manage long-term conditions and on supporting people's wellbeing.**

During the Covid pandemic, all health and care organisations and staff worked together, and with our communities, to rapidly do whatever was needed to keep local people as safe and well as possible. Many of these ways of working have been maintained and improved, and the partnership working and learning from the pandemic has continued. We successfully rolled out the biggest vaccination programme in history and to date have delivered more than 3.8m jabs to keep people protected thanks to the efforts of health and care staff, and our partners.





Case study:

Supporting people at home during Covid

The Covid Oximetry at Home (CO@Home) and Covid Virtual Ward services were rapidly rolled out from December 2021 as part of the Sussex response to the pandemic. These supported patients to manage their Covid symptoms at home using simple technologies, that identified deterioration early. Patients were monitored virtually three times a day and clinical questions from doctors and healthcare professionals were sent via a portal, text, email or telephone call. Feedback shows the simple equipment and flexible contact methods made it easy for patients and their carers to monitor and report on their health and worked well for patients with learning difficulties, sensory impairment and mental health conditions, as well as those for whom English is not their first language. Across five months, over 2,100 patients were cared for by the services.





People are telling us things need to change

Despite the good work to improve and maintain high quality health and care, local people are telling us they are not always getting what they need, when they need it

We are constantly hearing feedback from individuals, communities and staff and we need to listen and respond to what they are saying. A lot of feedback is positive, but we also hear a lot about areas that need to improve. Every person has a different experience and story to tell, but there are common themes people keep telling us:



People say we need to improve access to services

"Getting to see the right service can be slow, inaccessible and makes you reluctant to ask for help. You don't want to bother emergency services which are already stretched and not the correct first point of call, so you just muddle through and feel unwell."



People are finding care disjointed and a confusing 'system'

"Services can be disjointed and appointments often seem unnecessary. Some services could be made much more accessible by being community based."

"My mother has a complex condition, both mental and physical. The biggest challenge has been dealing with all the different teams, being batted around, and no one really taking responsibility. You don't want to have to repeat your situation with each person you come into contact with. You can feel like you're going back to square one."

"I am carer for my husband who has Alzheimer's. I struggle to get help as the whole process from diagnosis is too confusing. You end up feeling you have been left to get on with it."





People need more involvement in their own care

"Someone's health belongs to them, not to the system. A person knows their body and mind best even if they can't diagnose what's wrong. They know what motivates and disincentivises them. A system built around the needs and preferences of an individual is more likely to see that person fully engage with it."

People need more focus on their individual needs

"I think the thing that gets missed is the individual person – what people actually need for them beyond a one size fits all. That's where people fall through the gaps."

People need better access to information

"I know the information I need is out there but I either cannot find or access it. This is a problem that other family members have faced."

People need support for all aspects of their lives

"I think you should be working with local activity and social groups to help get people out in their local community to show that people can help them."



We need to better support our workforce

"Tackling the issues and supporting local people better can only be done if the workforce is sufficient and encouraged, not stressed to the point of leaving the service or becoming ill themselves."

"I work in healthcare and don't really feel I can progress beyond my current role. I've done the same thing for many years and would like to develop and learn new skills but I don't know how best to do it."



How we have engaged with local people

We have collated feedback from local people over the last two years to help shape our ambition This includes:



Direct feedback from

18,000

people



500

interviews and direct
feedback through
partners, including
Healthwatch



Face-to-face and
virtual workshops with

420

people



1,440

survey responses on our
ambition priorities



Online communication
that has reached more
than

200,000

people across our
website, social media
and podcasts



800

individual conversations
in public engagement
events during the
summer and autumn
of 2022

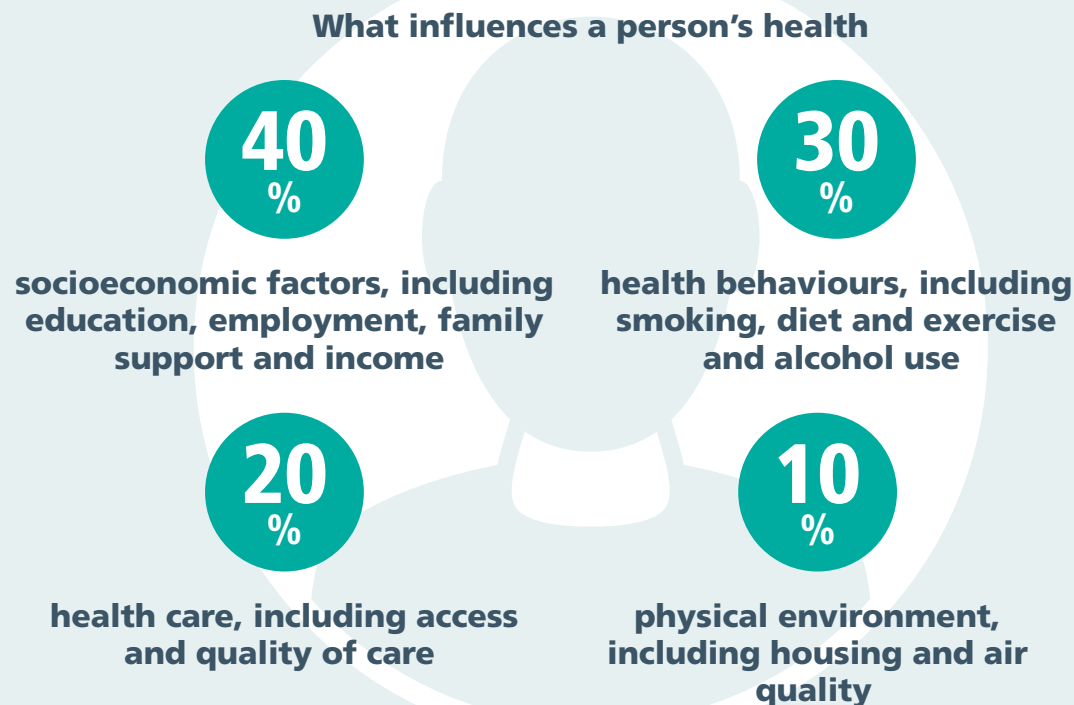


Engagement with
communities who
experience health
inequalities and
marginalised groups,
working with the
voluntary and
community sector



Understanding the reasons behind the need to change

More people living across Sussex now need more support, care and treatment more often and the services currently available cannot keep up. This is causing some people to get sicker, experience delays and is putting staff under more pressure. We need to understand what the reasons are behind this so we can tackle them and make improvements.



Institute for Clinical Systems Improvement, Going Beyond Clinical Walls: Solving Complex Problems (October 2014)

Across Brighton and Hove, East Sussex and West Sussex, there are unique strengths and challenges, which contribute to differences in the overall health of their populations. This informs the different approaches being taken in the three Health and Wellbeing Strategies and other local plans. There are also common themes across Sussex that we need to tackle and improve.

Different factors affecting health

Many factors influence a person's health and wellbeing, most of which they are unable to control or improve themselves without support. Caring can also have a significant impact on health and wellbeing. 60% of carers report a long-term health condition or disability compared to 50% non-carers (Carers UK analysis of GP Patient Survey 2021). Many different organisations are responsible for influencing these factors and they have not always worked in a joined-up way in the past. To make improvements, we need to consider all the factors and make sure all the organisations are working more closely together.



Growing and ageing population

We have a growing population, with the main reason being that more people are coming to live in Sussex. We also have an ageing population. This means more people are needing more care and support more often.

Brighton and Hove

292,000

people live in Brighton and Hove.

The population is predicted to increase by

3%
by 2032.

There is a younger population with

83%
aged under 60, but the greatest population increase is expected in the 65 and over age group.

East Sussex

559,000

people live in East Sussex.

The population is predicted to increase by

4 1%
by 2032.

There is a higher proportion of people aged 65 years and over compared to other places in the UK and over half the future increase in population is expected to be in this age range.

West Sussex

868,000

people live in West Sussex.

The population is predicted to increase by

5 3%
by 2032.

There is a higher proportion of people aged 65 years and over compared to other places in the UK and over half the future increase in population is expected to be in this age range.

Living with long term conditions

Many people are living with long-term conditions that are affecting their day-to-day lives and need to be better supported to manage their condition. Their carers also need to be supported. The common causes across all our populations are:

- Respiratory problems
- Mental health problems
- Lower backpain and joint problems
- Cardiovascular disease



Health inequalities

There are avoidable and unfair differences in health between different groups of people across Sussex that we need to reduce. There are many reasons for 'health inequalities', including disability, employment, where someone lives, income, housing, education, their ethnicity and their personal situation.

People living in more deprived areas have worse health and outcomes and there are big differences in life expectancy across Sussex which matches deprivation. The greatest levels of deprivation in Sussex are along the coast and in South West Crawley.

Brighton and Hove

The difference in life expectancy between the most and least deprived areas is



East Sussex

The difference in life expectancy between the most and least deprived areas is



West Sussex

The difference in life expectancy between the most and least deprived areas is



for both men and women

This is the largest differences seen in Sussex.

The impact of Covid and cost-of-living

The Covid pandemic, and the lockdowns we lived through, impacted on people's health and wellbeing in different ways. As a result, we have seen:

- **More children needing support for mental health issues.**
- **Increasing alcohol consumption, smoking and obesity among adults.**
- **Physical and mental wellbeing of older people getting worse.**
- **Waiting times for procedures and treatment growing.**
- **Sicker patients coming into hospital.**
- **Inequalities made worse for some people, including ethnic minority communities.**
- **More health and care staff leaving the profession.**

The current cost of living crisis is also having an impact on people's wellbeing and more are likely to need support and care as a result in future.



Why services cannot keep up with the need

There are a number of reasons services are not always able to keep up with the growing need These include:

How services are arranged and organised:

Services are currently run by different parts of the NHS, local authorities and other organisations and many people need support and care from more than one service at a time. Services do not always work seamlessly, which means they can sometimes feel disjointed, slow, and people have to repeat their stories many times.



Not enough emphasis on prevention:

The majority of health and care services are focused on treating and supporting people when they become ill. This is often necessary but there is more that could be done to focus on helping to prevent people becoming ill in the first place.



Not making best use of digital:

We have been developing new ways of using digital technology over the last few years to improve health and care services. But we are still not using it in the best possible way and not tapping into all the benefits it could bring.



Limited money and facilities available:

There is a limited amount of public funding available for health and care and this has an impact on investment in services. There is not enough money available to do everything we ideally would want to do, so we have to get the best value out of the funding we have. We are still using ageing buildings in some areas, which can make it difficult to provide high quality care and we need to think differently around how we can best use the buildings and land we have.



Our workforce challenge

When we talk about workforce, we are describing those that keep people safe and who deliver care and support, either through paid employment or volunteering. Working in health and care is incredibly rewarding and those that do want to give the best possible care, in the best possible way. They are currently not always able to do this because of the growing pressure on services and the way some services are run. There are three main issues we need to tackle:



- **Retaining our staff:**

The increasing pressure, and the lasting impact of their efforts during the pandemic, has resulted in some staff being stressed, overworked and tired, which is resulting in more going off sick and leaving health and care professions.



- **Recruitment:**

We are currently not able to recruit enough health and care professionals to cover vacancies in our services and it takes time to train and develop future staff. Housing is also very expensive in some parts of Sussex, which can mean some staff are not able to afford to live locally and makes it more difficult to recruit and keep a local workforce.



- **Development:**

We are not doing enough to support staff to develop new skills which can be used in the best possible way across different teams and services.

Other areas we need to improve

Alongside our commitment to give greater support to our most disadvantaged people and communities, we have agreed three other areas that need particular focus:



Children and young people

Our early years have a big impact on the rest of our lives. More children and young people are needing help and care, and the issues they have are more complicated and severe than they were, but services are not always able to meet this growing need. We have to give more focus on our children, young



people and families, to better support them in all aspects of their lives. This includes the environment they grow up, their education, and the support around them. We need to give particular focus to children in and leaving care, those who need support to keep them safe, and young people as they become adults.

Unpaid carers

Unpaid carers play an important role and on average have poorer health than people who are not carers. Over 10% of adults across Sussex say they provide unpaid care to a relative or friend. Many carers do not get the support they need and we need to do more to help them maintain their own health and that of those they are caring for.



People who feel lonely and live in social isolation

The feeling of being alone and a lack of social connections can have major impacts on someone's health and wellbeing. This is an issue for people of all ages, but particularly for our older population, and we can make a big positive difference by giving them more support.



2

**Where we want
to get to:**

Our ambition for
a healthier future



We are taking collective action to respond to what local people are telling us and to tackle and improve the issues

Our ambition is to improve the lives of people living across Sussex by supporting them to live healthier for longer and making sure they get the best possible care and treatment when needed.

To make this a reality, we have four goals we want to achieve:

- **Improve health and health outcomes for local people and communities, especially those who are most disadvantaged.**
- **Tackling the health inequalities we have.**
- **Working better and smarter, and getting the most value out of funding we have.**
- **Doing more to support our communities to develop socially and economically.**

We will do this by organisations working closer together and differently with and within our communities to support people through each stage of their lives.

We want to:

Help local people start their lives well by:

- Improving mother and baby health and wellbeing, especially for those most in need.
- Creating healthy environments for children, young people and families to grow up in.
- Supporting parents and parent carers.
- Linking health and care up in a better way with education and schools.
- Supporting good mental health for all children and young people.
- Doing more to support the most vulnerable children and young people, including those in and leaving care, and those who need to be kept safe.



Help local people to live their lives well by:

- Supporting people to look after their own health and wellbeing.
- Supporting people to live, work and play in places that promote health and wellbeing.
- Supporting people to know how they can look after themselves better when they have a health issue.
- Supporting people who have physical disabilities, learning disabilities and mental health conditions, to have good health and joined-up care and support, including access to opportunities such as accommodation, housing and employment.
- Ensuring more access to services for people who have traditionally been under-served, for example homeless people and other groups

Help local people to age well by:

- Ensuring fewer older people feel lonely or isolated.
- Helping older people to stay healthy and live independently for longer.
- Reducing the number of older people who suffer falls.
- Helping people receive good quality care at the end of their lives and to die at a place of their choosing.

Help local people get the treatment, care and support they need when they do become ill by:

- Tailoring care to support people in their own homes, or as close to home as possible.
- Supporting the health and wellbeing of carers.
- Giving them access to the most appropriate and best experts and professionals as early as possible that best suits their needs.
- Managing risk factors for long-term conditions.

- Giving greater joined-up care and support for people with long-term conditions and a number of health issues.
- Making sure people only need to use health and care services when they really need to.

Help our staff to do the best job they can in the best possible working environment by:

- Providing more support to them and creating a more diverse, inclusive and healthier working environment.
- Encouraging and supporting more people to go into health and care professions, particularly young people and students.
- Developing our staff to give them the skills they need to work more flexibly and progress their career.



3

**What we will do
to get there:**
Making our ambition
a reality



We are not starting from scratch as we look to achieve our ambition We have our Health and Wellbeing Board Strategies and other pieces of work underway that are making improvements all the time to try to meet the immediate needs of local people

We will now be building on this with bolder long-term action and change that aims to make a greater positive difference to local people.

This involves developing 'Joined-up Community Working' that will better meet the specific needs of local residents.

To support this, there are three 'success factors' that we need to develop and improve:

- **Growing and supporting our workforce**
- **Improving the use of digital technology and information**
- **Maximising the power of partnerships**



So how will this work and what difference will it make?

Joined-up Community Working

In future, health and care organisations will work in a more joined-up way with and within communities to better understand and respond to their specific needs. Support and services will be shaped around local people, rather than expect them to fit into the 'system'. When we say communities, we mean both the local area people live in and also communities that we know people identify with, such as those with the same interest, beliefs, or way of life.

What will be different?

This will involve a very different way of working to how health and care organisations have often worked with communities in the past. There will be three big differences:

- **Greater joined-up working:** Joined-up Community Teams of professionals and experts will work together across different organisations and within local communities to tailor support, care and treatment to what local people need. This will involve linking up all the services and organisations that influence a person's health, care and wellbeing - including primary care (GP services, pharmacy, dental and eye health services), social

prescribing, community, mental health and social care services, hospitals, the full range of support provided by local voluntary and community organisations, and wider services such as public health, schools and lifelong learning institutions, leisure, housing, environment and support for business. When someone needs more specialist care and treatment, they will be better supported to get it as quickly as possible.

- **Different relationship with communities:** We want to change the relationship between health and care organisations, voluntary and community organisations, the staff providing services and those who are receiving care and treatment. We will work with, rather than 'doing to', people and communities to

better understand their needs and circumstances, maximise the use of what already works well for them, and find solutions together to issues they face. This will involve greater engagement with local people, community leaders and those with lived experience.

- **Greater involvement of individuals:** Local people will be more involved in, and get more support for, their own health, wellbeing and care. People will be given more support to have the confidence to keep themselves healthy and, if they do become ill, help them manage better themselves so they can carry on living a fulfilled life. There will also be more involvement of, and support for, carers so they can stay healthy themselves and can better support the person they are caring for.



We know every community is different so there will not be a one-size fits all approach, and we will start by specifically focusing on communities who experience the poorest health and have the biggest needs.

As well as changes to how services work, this new way of working will have three differences in how we approach health and care:

- **Greater focus on all aspects of a person's life:** We will be focusing more on all the factors that influence a person's health. This will include doing more to support and contribute to local communities, such as supporting local

businesses and employment, working in a more joined-up way with housing and education, the community and voluntary sector, and supporting and working with community groups and local initiatives that encourage healthy living.

- **Greater focus on supporting you to stay healthy:** We want to shift more of our effort, resource and expertise into helping people stay healthy and supporting them to continue to live a fulfilled life if they do have a health issue. This includes more of what we call 'proactive care' which focuses on prevention and not just cure. We will make sure more people get urgent,

emergency and specialist care as early as possible when they need it to avoid their condition getting worse.

- **Greater focus on our children and young people:** We will focus more on supporting children, young people, families and parent carers with every aspect of their lives to help them stay healthy and get the support, care, and access to services they need when they need it. This includes more support during the early years, working closer together with schools and further education, and providing more career opportunities.

Bringing our ambition to life:

Case study on Universal Healthcare in Hastings

The local NHS is currently working with councils, community and voluntary organisations and local people in Hastings to design and develop health and care services and support in the future. A project called 'Universal Healthcare' is already underway with a number of community engagement workshops taking place to understand the needs of local people and help shape how they can be better supported in the long term. We intend to be able to start new ways of working from Spring 2023 and this is a good example of the way we want to work with our communities in future.

Our success factors

We have three success factors – workforce, digital technology and information, and partnership working – that need to be improved and developed. Without these, there will not be enough staff and the right expertise to give local people what they need, and services and organisations will not work in the best way



Growing and supporting our workforce

We want to support our staff and volunteers to do the best job they can by growing and developing our workforce. The number of people working in health and care has grown and we need to carry on increasing staff numbers but recruiting more is not the only answer. We need to also get the best out of the staff we already have.

There are five objectives we want to achieve:

- **Working as 'one team':** We want to create a 'one team' approach across health and care, as well as the voluntary sector, other professionals and volunteers, so they can work together and across different areas to help local people get the support and care they need.
- **A more multi-skilled workforce:** We will support staff to develop new skills and expand the skills they have. This will allow them to work across different disciplines and areas and help staff to have more opportunities to progress in their careers.
- **Creating an inclusive environment:** We want to create a more inclusive working environment that recognises diversity and has a workforce that better represents the population they care for.
- **More recruitment and career opportunities:** We will encourage, and make it easier for, more young people, students, and people who have never considered a career in health and care, to work with us. We will do this by working more closely with local further education, colleges and our universities. We want to employ more local people and we will give greater opportunities for those living in the most disadvantaged areas.
- **Learning culture:** We want to create a culture where people feel valued and supported to develop their skills and expertise. We want to take a 'lifelong learning' approach where people never stop developing their skills throughout their career.



Improving the use of digital technology and information

We will build on the work that has already taken place to improve the use of digital technology. This will help staff make better decisions, work more efficiently and provide better care. It will also help local people access services more easily, to tell their story once and have more involvement and control over their own health and care.

There are five objectives we want to achieve:

- **Connecting services:** We want to connect information better across our different services to help them work in a more joined-up way.
- **Improving technology and sharing data:** We want to support organisations to improve the way they use technology and how they share data to improve the support, care and treatment they provide.
- **Supporting staff:** We want to help staff access the information they need, wherever they are and whenever they need it.
- **Giving local people information:** We want to support local people better to access and manage their own health and care information, care preferences and choice, and the way they wish to interact with those providing services and arranging appointments.
- **Supporting people to use technology:** We want to do more to help people and their carers use and know how to use digital technology that will best suit them and their needs. This will help those who do not have regular access to technology or are unsure how to use it.



Maximising the power of partnerships

In addition to working at a local level across our communities, organisations responsible for influencing health and care will be working more closely together and with other organisations for the benefit of local people.

There are three objectives we want to achieve:

- **More leadership at “place”:** We will strengthen how our organisations can work together formally across our populations in Brighton and Hove, East Sussex and West Sussex, focussing on the distinct needs and challenges in our local areas. We call this working at “place” and it is where the local NHS, local government and a wide range of local partners come together to shape and transform health and care, and make the most of the collective resources available. We will do this by working in our three Health and Care

Partnerships to increase ways for our staff and volunteers to work together to deliver joined-up care and improve health in our local communities. More information can be found in **section 5** about how each place has made a start with this, and what we plan to do next.

- **Working across Sussex:** Our new Health and Care Assembly will strengthen how key organisations can work together formally on the complex and challenging issues that are shared across Sussex. This is a new way of working and will mean more organisations will be able to contribute to improving health and care.
- **Greater joining-up of the local NHS:** The local NHS will be doing more to join-up services in future. The NHS across Sussex is made up of 1,100 different organisations and we will be supporting them to work in a more effective and seamless way to improve the care and experience of local people.



Our ambition in summary



How this will benefit local people and staff

Achieving our ambition will bring real benefits to the lives of local people. Here are examples of what this will look like in future, based on the situations of real people living across Sussex



Emily

Emily, 13, lives with her mum, brother and cat in a block of flats. She used to like doing gymnastics but gave it up last year and now spends most of her spare time chatting to her friends on social media. She has been feeling quite anxious recently, is having more arguments with her mum and is less keen on going to school than she used to be.

What will be different for Emily in future?

- There will be more health and wellbeing support for her at school.
- There will be more opportunities for her and her family to be supported by healthy activities, facilities, groups and services where she lives, both virtually and physically.
- There will be more and quicker access to health, care and wellbeing services if she does become ill or need support.
- She will have more opportunities to make health and care a career choice when she leaves school.



Harpreet

Harpreet, 42, is a mum of two and lives with her husband in an old Victorian terraced house. She is relatively healthy, goes to the gym whenever she can, and hasn't needed to use health and care services for a long time.

What will be different for Harpreet in future?

- She will be better supported and informed to make her feel more confident about what she and her family can do to stay healthy.
- Her family will have more access to healthy activities.
- If she does become ill, she will be able to access the right service for her at a time that is more suitable for her busy life.
- She will be able to access services, and keep better track of her own health, through digital technology, such as her mobile phone.



Dave

Dave, 82, lives alone and has a number of long-term health conditions. His mobility is restricted, he doesn't go out of his house very often and needs support to travel. He needs care from a number of different professionals and services and his daughter is increasingly helping to look after him.

What will be different for Dave in future?

- He will have a personalised care and support plan in place so she doesn't have to repeat his story and the number of contacts he has with services will be reduced.
- All the health and care professionals supporting him will know his needs and what is important to him.
- His daughter will be treated as one of the team supporting Dave and will also be supported herself as his carer.
- His daughter will be treated as one of the team supporting Dave and will also be supported herself to identify as a carer and get the support she needs to stay healthy and well.
- His condition and health will be regularly reviewed to prevent him from deteriorating.
- If he needs a higher level of care, this will be done in his own home through a 'virtual ward' and Urgent Community Response service.
- He will be supported to have more opportunities to meet other people socially.

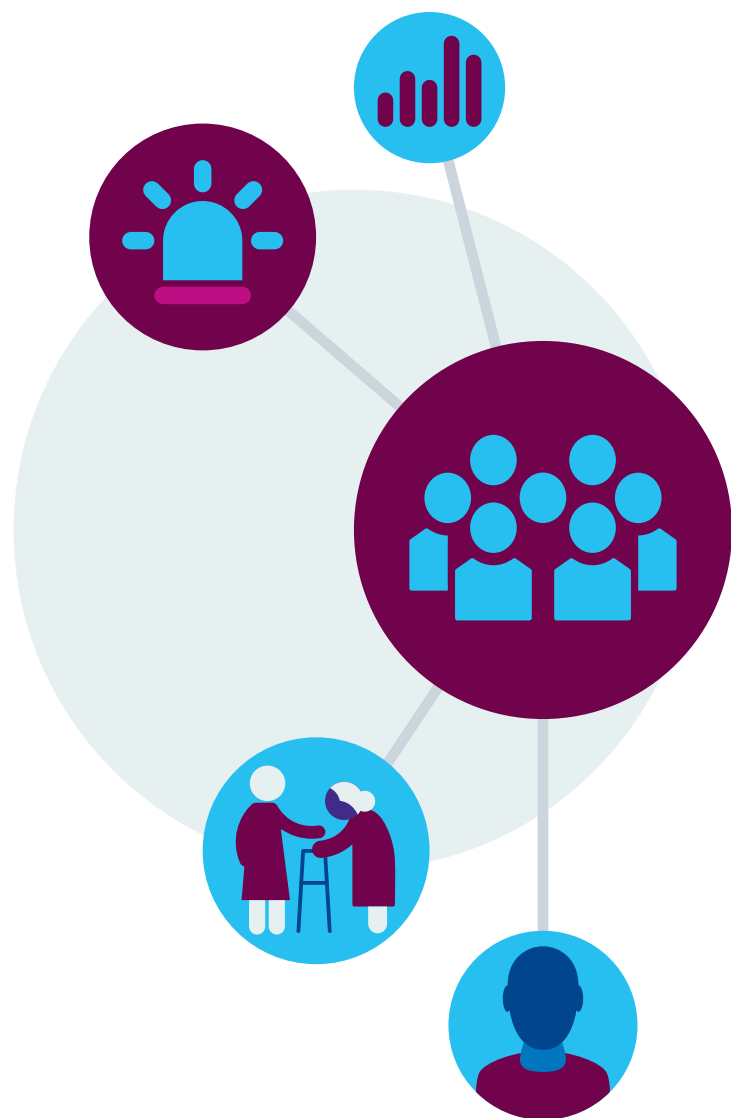


4

How we will get there:
Achieving our ambition



Achieving our ambition will need change, with how health and care organisations, services and teams work, and how communities interact with services and are involved in their own health, care and wellbeing



We want to achieve our ambition over the next five years and we will not be able to do everything at once, with some things taking longer than others to get up and running. We need to be focused on what we can do and when. We will also need to do it in a realistic way, using the funding, staff and facilities we have available. This is alongside all the work that we continue to do every day to improve and maintain the immediate and short-term support, care and treatment local people need.

This will be a big challenge but we need to be ambitious and bold because just doing what we have always done, or what we are doing now, is not going to make the difference we want and need. This will need a collective effort and everyone will need to play their part.

How we will achieve our ambition is something we will be discussing across organisations, staff, and our communities over the coming months. We will be developing a plan that clearly sets out what actions need to be taken and will be agreeing across organisations how they will need to work differently in the future. We will engage with local people and staff to discuss what will be different for them and how they can play a role in supporting the change.

We will also be setting out how we will measure progress and success to make sure we know whether or not our ambition has become a reality.

How we developed *Improving Lives Together*

Improving Lives Together has been developed with input from a large number of people. The Sussex Health and Care Assembly has been established to oversee its development and representatives have been involved in shaping what it looks like and agreeing the areas we want to focus on.

We have engaged with representatives and experts from NHS organisations, public health, social care, voluntary and community organisations, Healthwatch and other people who have an interest and knowledge of health and care.

We have used a significant amount of feedback from local people and communities from engagement carried out over the last two years and have been testing what we are proposing across our communities over the last six months.

Our ambition responds to a number of national strategies, plans and guidelines.

As well as being informed by the Health and Wellbeing Strategies across Brighton and Hove, East Sussex and West Sussex, we have used a range of evidence and supporting information.

This can be viewed here

5

Summaries of our place- based working

The following section summarises the key areas of focus and plans in Brighton and Hove, East Sussex and West Sussex. These form the basis of the work we are doing to achieve our ambition.



Brighton and Hove

Brighton and Hove is a coastal city, comprising 290,855 people (ONS estimates). It is the 131st most deprived local authority in England (of 317) according to the 2019 Index of Multiple Deprivation (IMD).

Brighton and Hove is a diverse city. We have:

- A younger population: 83% are aged under 60, however in planning for the future we know the greatest population increase is expected in the 65 and over age group.
- An estimated 11-15% of our residents are lesbian, gay or bisexual.
- An estimated 2,500 transgender residents.
- 19.5% of our population are from a black or minority ethnic group and 20% of the population were born outside the UK (higher than England at 16% and the South East at 14%).
- Over 3,000 known refugees/globally displaced migrants.

Some areas of the city: Whitehawk, Moulsecoomb, and Hollingdean and pockets of Woodingdean fall in the 20% most deprived areas in England. The deprivation experienced in these areas has an impact on life expectancy. There is a life expectancy gap of 9.9 years between men in the most and least deprived areas and of 7.7 years between women in the most and least deprived areas. The gap in healthy life expectancy is wider still, at 14 years between men and 12.5 years between women in the most and least deprived areas. The impact of the Covid-19 pandemic starkly demonstrated health inequalities across the country, including in Brighton and Hove.

We also have high rates of homelessness, substance misuse, alcohol use, smoking and poor mental health. The city has the fifth highest rate of homelessness, the ninth highest rate of deaths related to drugs misuse, and higher than average rates of self-harm and suicide by local authority in England. Of particular concern is the number of people receiving support for multiple compound needs, for example, homelessness, mental health and substance misuse.

Alongside this, however, we have some we have positive health promoting assets – such as access to green space

and higher rates of some positive lifestyle behaviours and activity. For example we have high rates of breastfeeding, and more people use outdoor spaces for exercise or health reasons in Brighton & Hove than England (18.3% compared with 17.9%) and are physically active.

Our vision is for everyone in Brighton & Hove to have the best opportunity to live a healthy, happy and fulfilling life. Our Joint Health and Wellbeing strategy, adopted by the Health and Wellbeing Board in 2019, reinforces the wider Integrated Care Partnership strategy and focus on improving outcomes by prioritising prevention and reducing health inequalities throughout the key life stages: starting well, living well, ageing well and dying well.

The Health and Wellbeing Board recognises that most of the building blocks of health are outside of health and care services, for example education and skills, employment, income, housing, environment, leisure and culture and transport. We are making health and wellbeing everyone's business and so the Health and Wellbeing Strategy has adopted a collaborative approach to support partners across the City to take action that improves health and reduces health inequalities.

Brighton and Hove Place Based Plan

The establishment of the Health and Care Partnership Executive Board in January 2020 enables us to continue and build upon the work already started and is now becoming formalised with this Sussex Integrated Care Strategy. The firm foundations of the Board enable us to develop and mature service design, delivery and governance over the coming years. We will seek to embed a philosophy of co-production in all that we do.

The Health and Care Partnership Executive Board have identified the “Plus” Population groups for Brighton & Hove as:

- i. Carers, including young carers;
- ii. Mental Health Transition in Children and Young People aged 16-25 years;
- iii. Globally displaced communities,
– those seeking asylum, refugees, vulnerable migrants and;
- iv. LGBTQ+ communities.

The Board has developed a Place Based Plan that includes five priority areas for Brighton and Hove:

1 Children and Young People: We will improve and expand access and existing support to children and young people and their families for mental health, emotional wellbeing, autism, ADHD and other neurodevelopmental conditions with a focus population prevention approaches and vulnerable groups. This is underpinned by the Sussex CYP mental health and emotional wellbeing strategy. We will improve early diagnosis and outcomes for children and young people e.g. reducing waiting times and redesign services and pathways to provide seamless transitions for children across all services and for children moving into adult services. We will increase the identification of, and support for Young Carers (5 yrs to 18 yrs), ensuring that the ‘carer burden’, which is well documented, experienced by Young Carers (YCs) is both recognised and the provision of a range of interventions implemented, aimed at reducing related health inequalities. identify and support young carers

2 Mental Health: We will implement the key recommendations of the 2022 Mental health JSNA which will be overseen by the B&H Health and Care Partnership. We will expand our support for people with mental health needs and further develop integrated community mental health services connecting mental health services with community assets. We will do this at local neighbourhood level and develop integrated systems and increase the provision of supported accommodation and support for people with mental health needs, co-occurring disease, and substance misuse services.

3 Multiple Compound Needs: We will improve and join up services to better support people with multiple compound needs by delivering a joined up, integrated service model, co-produced for and by people with lived experience. This will include the local delivery of the national drugs strategy, working with the Changing Futures programme, and respond to the Adults with Multiple Compound Needs, Needs Assessment recommendations to deliver joined up care underpinned by a trauma informed care approach



4 Multiple Long-Term conditions:

We will improve services to people with long term conditions to deliver personalised care, tailored to individual needs, strengths and capabilities. We will aim to better understand the interaction of mental and physical health conditions as a factor to improve outcomes. We will proactively identify and/or support and meet the needs of those at risk of or living with long term conditions, eg: for CVD, stroke, respiratory conditions and diabetes.

5 Cancer: We will complete the recovery of cancer services affected by the pandemic, improve performance against cancer waiting times standards and deliver the ambitions of the Long Term Plan to diagnose more people with cancer at an earlier stage, with a particular focus on disadvantaged areas and underserved communities where rates of early diagnosis and screening uptake are lower.

Examples of the work already undertaken by the Health and Care Partnership include:

- 1 The delivery of an outreach model of care to areas of greatest needs e.g., Fibro scanning, targeted lung health checks, twice weekly roving podiatry services.
- 2 Services targeted at specific communities with known health inequalities e.g. further development of specialist GP Practice services, routine HIV screening at Royal Sussex County Hospital Emergency Department, High Intensity Users programme for people with high A&E attendance.

To further build on our vision and collaboration with health and care services across Sussex and locally at community level, we will have a particular focus on those interventions which can help deliver better outcomes for our priority areas such as:

- Prevention and early detection.
- Supporting communities and building on our community assets approach working with Voluntary and Community Sector services.

- Holistic transformational programmes across the NHS and local authority aimed at supporting communities to thrive.

We will do this together by ensuring we have shared ambitions which will help us to deliver:

- Continuing to work across the city to influence the building blocks of health as well as health and care services, including community engagement to reduce health inequalities.
- A joined-up approach to meeting our population needs as opposed to individual organisations working separately.
- Localised provision to meet the needs of communities, prioritising those with the greatest need.
- Having joint teams and posts that work across all settings.
- A more efficient use of technology to ensure better flows of patient data across health and care services.



East Sussex

Responding to our population health and care needs

The following characteristics of our population significantly drive our local plans for integrated health and care in our communities:

- Our growing and ageing population - by 2026 almost one in four people (24%) will be aged 65-84, and more than 4% of our population will be over 85. Added to this by 2028, around 20,000 more people in East Sussex will be living with two or more long-term health conditions than was the case a decade earlier.
- Increasing numbers of children and young people with Education, Health and Care Plans, some of whom will have complex medical and care needs. There are growing levels of need and complexity in relation to safeguarding for children and young people.

More information about East Sussex, its strengths and challenges and our plans overall can be found in our Health and Wellbeing Board Strategy.

In response, we have worked together to offer joined-up care that can enable more support for complex needs in community settings, across all age groups. For children and young people this has meant:

- An integrated service for 0-5 year olds including health visitors, family keyworkers, communication support workers.
- Multidisciplinary staff teams for youth offending, specialist family service (SWIFT) assessments, young people's substance misuse services, and mental health services for children in care and adopted children.
- An integrated Single Point of Advice and front door joining early help, social care and mental health.
- Developing stronger links between mental health and emotional wellbeing services, and enabling access to shared information.

With more older people, which includes those who are frail and have multiple conditions, East Sussex is likely to have higher health and care needs than other areas of our size. To help with this we have put in place a model of integrated care aimed at supporting independence, reducing avoidable admissions to hospital and improving discharge into community-based care. This includes:

- Health and Social Care Connect – a single gateway for community health and care queries open to staff and the public and operating 24 hours a day, seven days of the week throughout the year.
- Joint Community Reablement – a partnership between Adult Social Care and health providing short-term rehabilitation and packages of care in people's own homes after episodes of ill health or time in hospital.
- Crisis response team – responding to certain health pathways as an alternative service to hospital.
- Discharge to assess – a joint approach to assessing people in short-term beds or their own home rather than hospital.



- Integrated health and social care teams – community nursing and social work services aligned and sometimes co-located, with integrated management arrangements and working with local GP surgeries, care homes and home care agencies.

Alongside key voluntary sector and housing services, and support for carers and families, this joined-up offer of care contributes to enabling people to live independently and well, for as long as possible in their own homes.

How we want to build on this – integrated health, care and wellbeing in our communities

Our next steps as the East Sussex Health and Care Partnership will be to build on these strengths to expand the integrated community model for our population in the following ways:

- Designing and agreeing an approach for working together in our communities across primary care,

community healthcare, education, social care, mental health, and the full range of local voluntary and community and housing organisations, driven by a deeper shared understanding of local needs.

- Making sure we keep strengthening our offer of integrated care. For children and young people this is about working with whole families (including through the Family Safeguarding model), and linking ever more closely with early years settings, schools and colleges. For adults this includes further developing Trusted Assessor roles, rapid crisis response and support with discharges from hospital, as well as exploring ways to build more integrated leadership and roles to deliver better coordinated care.
- To support improved population health overall and therefore the years of life people spend in good health, we have agreed our model needs to link strongly with the wider services in local areas that impact on social and economic wellbeing as well. This includes leisure, housing and environment services provided by borough and district councils and others.

Our partnership plans to embed hubs in communities to help coordinate access to local sources of support and activities, for example to boost emotional wellbeing and help with loneliness and isolation. We want to develop our plans for using our power as employers and buyers of services to stimulate economic and social wellbeing in our communities. This model will bring:

- Greater capacity in communities to promote mutual support, and deeper levels of joined-up and personalised care, building on the strengths and assets of individuals, families and communities.
- Greater levels of prevention, early intervention and ways to anticipate health and care needs.
- New ways to remove the barriers that prevent staff and volunteers working in different teams from working together on the ground.



West Sussex

The West Sussex Health and Care Partnership

The West Sussex Health and Care Partnership was formed in 2020, bringing together key local health and care partner organisations to work collaboratively to deliver the objectives of the Joint Health and Wellbeing Strategy and the Sussex-wide strategy through a Place-based Plan. The partnership leads on delivering shared population health objectives on behalf of the Health and Wellbeing Board. Having a place-based partnership allows us to adapt our working to the specific population needs that we have in West Sussex and use our local assets to deliver the solutions.

Partnership working to empower local communities

At the early stages of our partnership formation in 2020, we agreed with our Health and Wellbeing Board to embark on our journey to develop a model of collaboration that brings changes to people directly within their community. This model is our six Local Community Networks. These are co-located with district and borough footprints and are empowering communities to deliver change through collaborative working between primary care, district and borough councils, local Public Health, and voluntary sector enterprises.

All six of our Local Community Networks are already up and running and delivering life-changing differences for local people within their communities. As we continue on our partnership development journey, we will maintain our focus on how Local Community Networks can continue to make the positive changes for people who live in West Sussex.

The West Sussex Place-based Plan

The West Sussex Health and Care Partnership Place-based Plan uses evidence from our Joint Health and Wellbeing Strategy to determine local priorities and key areas for change agreed across our partners. Our three local priorities in West Sussex are to tackle health inequality, deliver transformation together and to integrate health and care services for a joined-up experience. In addition to our Sussex-wide priorities, there are six specific priority areas for change that have been identified from the Health and Wellbeing Strategy for West Sussex:

1 Tackling the wider determinants of health:

Our partnership will work together to influence the many determinants of healthy living, such as how services are accessed and how communities can be empowered to support healthy living for their residents. This is being done by:

- Delivering our Crawley transformation programme with new models for accessing health and care.
- Tackling the heart of health inequality experienced by communities within West Sussex, using public health data to target resources to close the gaps in health inequalities within communities.
- Building on our commitment to social prescribing to support people with managing their health with help and support.

2 Addressing health inequalities:

We will have a targeted and focused approach for those with most need and who need additional support. This is being done by prioritising the key health inequality related areas such as heart disease, respiratory illness and cancer and utilising approaches such

as tobacco control, targeted cancer screening and health checks to target activity and resources where it is needed most based on local evidence.

3 Adults Services: Our strategic objective is to help people 'live the life they want to lead', by remaining independent for as long as possible and maintain a high quality of life. Building on our early models of integrated health and social care, we want to grow our model of care in the community to deliver more health services and care to people in their home-setting and local community, supporting people living with long-term conditions.

4 Children and Young People: We will improve the existing support to children and young people so they can have the best possible start to live. This is being delivered through our health priorities set out in our West Sussex Children First programme, improving maternity experiences amongst more deprived people, delivering the best standard health-checks for children who are in care, and developing new services and support for the emotional wellbeing of all young people.

5 Mental Health: We will expand our support for people with mental health needs to address the growing need. We aim to deliver the best standard physical health checks for people with mental illness, and to develop sustainable housing solutions for people living with long-term mental illness, linking to our Health, Housing and Social Care Memorandum of Understanding.

6 Learning Disabilities and Neurodevelopmental Needs: We will provide greater focus and support for those with a learning disability and neurodevelopmental needs. We are reforming our children's and young people's neurodevelopmental diagnosis and care pathway, including social support. We want to ensure regular high-standard health checks for people with a learning disability, and we want to create more long-term paid employment opportunities for people with a learning disability.



