

ROTHERHAM'S HWBB ICP FEEDBACK DRAFT

In general support the recommendations as proposed in papers, but highlight the following:

We

- Support the direction of travel, in particular the plan on a page, shared outcomes, bold ambitions and joint commitments, as they align with our priorities for Rotherham. However we do feel that on the Plan of a page the words “ with a focus on racism” need to be removed. The previous part of the sentence is strong enough in its right , there area range of groups/cultures etc that face discrimination re access to care and that we should not pick out one single characteristic and it then puts aspects such a spoverty and deprivation as less important
- Note the breadth of engagement work done within the short timescales, but highlight the importance of involving place, neighbourhood and community partners in future engagement and build on the experience and expertise locally and not duplicate engagement.
- After completion of the strategy, our view is that the role of an ICP Working Group should not be to plan delivery, as the ICP is not a delivery body, but an accountability body. Delivery plans should come to the ICP for scrutiny on how well they meet the strategy aims, as well as to support *integration* in delivery.
- We need to consider the opportunity afforded by the NHS Five Year Joint Forward Plan and how best to enable alignment of our delivery planning approach starting from local Place.
- Engagement needs to be ongoing and it is crucial local partners are part of this.
- In the development of the strategy, where points have been raised by ICP members, it would be good to receive feedback on those points.
- It will be important to work out, where things will be commissioned at system level, which will be appropriate in some cases, how they will be allocated between the four places. A key point is the need to start at local Place and to be aware that as an ICP we cannot override an individual HWBB's or other groups/organisations plans

Delivery and ICP working group:

There is a national expectation that the NHS Five Year Joint Forward Plan acts as a shared delivery plan for Integrated Care Strategies. It is acknowledged that the Plan needs to be in line with Joint Strategic Needs Assessments and Health and Wellbeing Strategies. Papers propose that a reformulated ICP Working Group is used to work through the following:

- to determine how best to enable alignment of our delivery planning approach, in a way that maximises the opportunity posed by the NHS Five Year Joint Forward Plan
 - We really need to make sure that there is a shared understanding, for example of terms such as school readiness
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As stated above, after completion of the strategy, our view is that the role of any ICP Working Group should not be to plan delivery, as the ICP is not a delivery body, but an accountability body. Jointly developed delivery plans should come to the ICP for scrutiny on how well they meet the strategy aims, as well as to support integration in delivery.

The alignment of the delivery planning approach should sit between ICB and LAs and report into the ICP for scrutiny.

On the development of the joint forward plan, the ICP needs to work out how to receive updates on local delivery – we could send updates on our Health and Wellbeing Action Plan, after they have been to Health and Wellbeing Board.

Plans to Communicate strategy

Support plans to ensure accessibility of strategy.

Key narrative chosen aligns with several of our messages locally, and focus on pride aligns with 'Place to be Proud of' and key messages in Rotherham Plan.

Make sure our comms leads are engaged on comms