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Wednesday, 19 July 2023

Via email

To:

- NHS West Yorkshire Integrated Care Board Members
- West Yorkshire Health and Care Partnership Board
- West Yorkshire Chairs and Leaders Group
- West Yorkshire Community Provider Collaborative
- West Yorkshire Clinical and Care Professional Forum
- West Yorkshire Programme Leads
- West Yorkshire Primary Care Leads
- Local Medical Committees
- Healthwatch CEOs
- Staff Partnership Forum (ICB staff union representatives)
- Area Partnership Group (unions).

Cc:

- Richard Barker, NHS England, Regional Director for the North East and Yorkshire and North West Regions
- Wider communication and engagement network (for information only – a communication toolkit will follow)

Dear colleague

West Yorkshire Health and Care Partnership launches its strategy and associated plans in support of 2.4 million people

Our Health and Care Partnership, which includes [NHS West Yorkshire Integrated Care Board](#) (NHS WY ICB), will launch its Five-year Integrated Care Strategy and NHS Joint Forward Plan on Thursday 20 July, to support the 2.4 million people living across the area.



Our 2020 strategy was published immediately prior to the pandemic, and it is right that we are now able to publish a refreshed strategy in the context of living with COVID-19, the cost-of-living crisis and the need to recover and transform care.

With the passing of the [Health and Care Act 2022](#), there is also a requirement for Integrated Care Systems (like the [West Yorkshire Health and Care Partnership](#)) to develop an Integrated Health and Care Strategy and for Integrated Care Boards to develop a Joint Forward Plan to deliver the NHS components of the strategy. This is consistent with our approach.

Our West Yorkshire strategy has been signed off by our health and care partnership, through its Integrated Care Partnership Board (also known as the [Partnership Board](#)).

The Integrated Care Board has developed the Joint Forward Plan with its partners to help deliver the strategy. Both are important documents that serve each other and the subsequent work we do in our local places and providers. They are worthy of focus and attention. We will be held to account for delivery and progress. We will also hold each other to account for our mutual roles in delivery.

You can view the plans on the Partnership's website at wypartnership.co.uk/publications/west-yorkshire-integrated-care-strategy and the Joint Forward Plan at wypartnership.co.uk/joint-forward-plan-2023. They are also available in alternative formats, including easy read and British Sign Language.

Co-production and ownership

We believe that “people own what they help create” and we hope you recognise the development of our strategy and plans in West Yorkshire has been a collaborative effort involving colleagues from all sectors. We have also engaged with Healthwatch, considered local involvement activities, gathered insights from public meetings held by the local health and wellbeing boards, West Yorkshire Joint Health Overview and Scrutiny Committee, the NHS West Yorkshire Integrated Care Board, and the West Yorkshire Health and Care Partnership Board.

Recent reports from [Healthwatch and the Joint Forward Plan public consultation](#) have emphasised the significance of ensuring access to care, including general practitioners (GPs) and NHS dentists, whilst also addressing health inequalities, improving coordination of care, enhancing workforce recruitment, and focusing on fundamental aspects of healthcare delivery.

We are committed to delivering better outcomes and delivering joined up services, with faster access to care for the people of West Yorkshire, both in the short and long term. These priorities remain at the forefront of our efforts as we work towards achieving our ambitions for West Yorkshire health and care services and importantly staff, people and communities.



Context

Since the publication of our last plan in 2020, our approach has evolved to adapt to the changing context we find ourselves in. We are now faced with challenges such as living with COVID-19, widening health inequalities, and a cost-of-living crisis. Industrial action continues to disrupt care for patients, people and communities. Our new plans reflect this updated context and aims to address these issues effectively.

We must also recognise that reductions of 30% in the running cost allowance for the ICB, the transfer of functions from NHS England to the ICB. The merger of NHS England with NHS Digital and Health Education England will also have an impact on our staff and people we work with.

This change in structure and function will be done with people and partners and seeks to amplify working with provider collaboratives and places (Bradford District and Craven, Calderdale, Kirklees, Leeds and Wakefield District). It should help accelerate change, whilst giving us an opportunity to reduce duplication and increase focus. It will cause some disruption too.

We will build on the work that we have done together over the past seven years to ensure that our plans are delivered.

We should be proud of the way we collaborate to get things done. For example, to support targeted reductions in health inequalities, our Partnership has been allocated £10.7m of recurrent and additional resources to support the [Core20Plus5](#) work, which involves implementing a range of interventions to improve people's health and work within local communities. This was done using an approach that targeted people in the first decile of deprivation (poorest communities) – the 22% of people in West Yorkshire that need the most support.

This national work on inequalities is welcome. It corresponds with our local efforts to ensure we see everything through an inequalities lens. For example, in terms of healthy life expectancy, musculoskeletal and long-term mental health conditions are the two main contributors to the gap in healthy life expectancy. In the short term, we need to prioritise inclusive elective recovery to support people who are experiencing long waiting times for elective procedures and to reduce the number of people added to waiting lists. We will develop initiatives tailored to local needs and addressing these priority areas.

Our efforts will involve targeting prevention resources in neighbourhoods, hospitals, and specialist centres related to these clinical areas. We will work collaboratively with the voluntary, community, and social enterprise (VCSE) sector to ensure that help and support are accessible to communities.

To tackle the increasing demand for health and care services, our focus will be on preventing ill health and proactively supporting people to stay well at home. We will work to ensure that services are arranged in a way that allows local people to receive care from the most appropriate healthcare providers in the right setting.



Taking a comprehensive life cycle approach, we recognize the importance of addressing inequalities experienced by children and young people by adopting a family-centered approach. By working together and implementing our plans, we aim to address the rising need for health and care services and improve the overall well-being of everyone in West Yorkshire.

National targets and expectations

We are required as a Partnership to deliver the expectations of Government, set out in the mandate for the NHS and in guidance and legislation.

These expectations include targets on tackling waiting times for elective care, improved ambulance and A&E responses, access to a GP, improved mental health services and substantial improvements for people with learning disabilities. These overlap with the findings of our work with Healthwatch and [local involvement activity](#) on what local people want from us. These are essential parts of our plan.

Our 10 big ambitions

Our [10 big ambitions](#) summarise the work we do. They remain and they are central to our efforts in increasing the number of healthy years people live in West Yorkshire. We still have specific focus areas, such as improving early diagnosis rates for cancer and preventing suicide.

Additionally, we aim to reduce the gap in life expectancy by 10% for people with mental health illness, learning disabilities, and/or autism and other groups.

We know that people's ability to lead healthy and fulfilling lives is significantly influenced by factors such as their social, cultural and demographic backgrounds. Therefore, it is crucial that our services and initiatives continue to acknowledge and address these factors, whilst also tackling inequalities and injustice within our workforce.

Our commitment to this is evident in our efforts outlined in our [Tackling Health Inequalities for Black, Asian, and Minority Ethnic Communities and Colleagues Review](#). This report has spurred significant progress across all system partners in pursuing our ambitions. We have made strides in recruitment inclusivity, established The [Fellowship](#), implemented coaching and mentoring programmes, and initiated various initiatives to address health inequalities in our population, including our anti-racism movement.

Furthermore, we continue to collaborate with colleagues in planned care and partners across the system, place, and sectors to understand the needs of our population regarding weight management and living with obesity. Our aim is to improve health outcomes and reduce the pressures on health and social care services, both for current and future generations.



Financial challenge, efficiency and effectiveness

Alongside this, indications are that 2023/24 will be a challenging year financially and the medium term will be no less challenging. We have submitted a balanced financial plan for this year, which is predicated on needing to deliver significant levels of efficiency. This is in addition to all places carrying a high level of unmitigated risk, for example where cost growth may end up being higher than levels assumed in plans. Local authority, voluntary, community, social enterprise sector (VCSE) and other partners also face significant levels of financial pressure.

Our strategy and plan include a focus on efficiency, effectiveness and value for money. We will create a longer-term financial model that looks at the choices and opportunities for us to deliver our plans over the next five years.

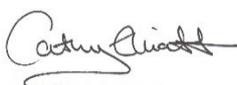
Whilst challenges are significant, the belief is that working together at all levels is the most effective approach to take if we are deliver on these plans for people in uncertain times. Our Partnership's history demonstrates the benefits of collaboration. **Thank you to each one of you.**

Overall, the launch of these plans is a significant milestone for our West Yorkshire Health and Care Partnership, and it showcases our continued commitment to improving health and care services for staff, and everyone we serve. Significant risks remain and we will continue to work incredibly hard to ensure that we focus on implementation and delivery.

Thank you to everyone involved in the development of the strategy and plan – for your hard work and commitment. We look forward to hearing about the positive difference both plans make at all levels of our Partnership.

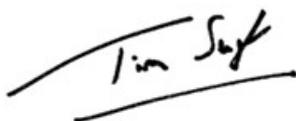
Yours sincerely

Cathy Elliott



Chair of NHS West Yorkshire Integrated Care Board and Deputy Chair for West Yorkshire Health and Care Partnership

Cllr Tim Swift MBE



Chair of West Yorkshire Health and Care Partnership

Rob Webster CBE



CEO for NHS West Yorkshire Integrated Care Board and CEO Lead for West Yorkshire Health and Care Partnership

