SOUTH YORKSHIRE INTEGRATED CARE PARTNERSHIP STRATEGY

Working together to build a healthier South Yorkshire Our Initial Integrated Care Strategy

March 2023

A message for the people and communities of South Yorkshire:

In South Yorkshire we want everyone to live happy and healthier lives for longer. We know times are tough with the ongoing effects of Covid-19 and the rising cost of living, our engagement shows that having access to high quality care and support is important for our community. That's why we're working together as a partnership to make sure you have the support you need.

We're committed to listening to you, involving you, and responding to your needs. This strategy was created by our newly formed Integrated Care Partnership between September and December 2022 and will guide us up until 2030. It's a legal requirement, but we see it as just the start of a journey with all of you.

We're excited to work alongside our communities and the amazing people in our voluntary, community, and social enterprise sector. And we want this strategy to continue to improve and evolve through your involvement, because your health and well-being is important to us all. Let's work together for a happy and healthy South Yorkshire.

Foreword

The Mayor of South Yorkshire - Oliver Coppard

This strategy is a test; a test we are setting ourselves. Included in that test are questions we have asked ourselves before. And if we do not rise to the challenge this time, we will be back here again in a few years' time to ask ourselves those questions again. And within those intervening years yet more people – our friends, colleagues and neighbours – will have had their lives blighted, their careers cut short, and their happiness undermined by ill health.

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So I am determined we will make a positive difference to the health of our communities across South Yorkshire, and this strategy is where we start. We have to challenge ourselves to think radically about what we do and how we do it.

That's why this strategy is so important as we look ahead over the next decade to 2030. If we achieve the goals in this strategy we will improve the health of our communities across Barnsley, Rotherham, Doncaster and Sheffield, tackle deep seated inequalities in health outcomes and access, make the most of the resources we have, and make sure our health and care services support our wider objectives as a region; making South Yorkshire a healthier, wealthier and happier place.

If we're going to achieve those goals, we will need to use not just the £3.8bn spent on health and care but also the wider £16bn



of public services spent in South Yorkshire each year to help those who need it most. We will need our 72,000 strong health and care staff to have the skills and resources they need to support our communities.



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We need all our public services, such as employment support, transport and housing, to promote good health. We will need to listen to and strengthen our voluntary and community sector and recognise them as the equal partner they are. And we will need to put the lived experiences of our diverse communities at the heart of the way in which we work.

There are no shortage of great assets and examples of good practice across South Yorkshire upon which we can build however, there is no denying the scale of the challenge we face; those challenges are longstanding and complex. Some people in our communities will live shorter lives than others, by as much as nearly a decade in some cases. Life expectancy in South Yorkshire is no longer going up, something that has not happened in the last 40 years. There is healthy life expectancy gap of 20 years between some of our communities. And around a third of people across our region are living in some of the most deprived parts of our country.

So the challenges are undeniable. But there is nothing inevitable or insurmountable about them. If we are going to overcome those challenges, together, we must do things differently. Our commitment to you, our 1.4 million strong community across South Yorkshire, is to work in partnership together, to do things differently, to focus our people and our resources on those that need them the most, and to accelerate our focus on prevention and early identification. And through all of this we will continue to put our community's voices and needs first. This is our plan for a happy, healthier South Yorkshire.

Oliver Coppard

Mayor of South Yorkshire

Summary Plan on a Page

Our Shared Outcomes, Bold Ambitions and Joint Commitments

	Working Vision	Everyone in our diverse communities lives a happy, healthier life for longer								
	Goals	Healthier and	d Longe	er Life Fairer Outcomes for all			He	o quality Wellbeing and care		
	Shared Outcomes	Best start in life for Children & Young People		Living healthier and longer lives AND improved wellbeing for those with greatest need		Safe, strong and vibrant communities		People with the skills and resources they need to thrive		
Engagement	Bold Ambitions	Focus or developmer early years so every child South Yorks is school re	nt in o that l in shire	to st & ou pr a	differently gether to rengthen accelerate r focus on revention and early ntification	Work together to increase economic participation and support a fair, inclusive and sustainable economy		Collaborate to value & support our entire workforce across health, care, VCSE, carers, paid, unpaid. Developing a diverse workforce that reflects our communities		
	Joint Commitments	Bold, visible and collaborative leadership	Identifying, recognising and tackling systemic discriminatior including a focus on anti-racism		Reallocation of resources to where there is most need	Joined up service delivery and support	co-proo W peopl	ng and duction ith le and unities	Create a culture of learning and innovation	
Enabling Plans Our pathway to better health										

Bold Ambitions

This strategy to better health, recognises the work already ongoing and set out in strategies and plans in each of our places and across South Yorkshire. Our intention is not to duplicate these but to build on them. This strategy sets out where, as a whole partnership working together, we can add value to go further faster with a targeted number of action focused **bold ambitions** which can only be achieved by the Integrated Care Partnership joining forces to practically align collective power and influence to enable delivery at pace and at scale. The next step is to do the work to agree together the specific actions we need to take to deliver on these ambitions.

1 Focus on development in early years so that every child in South Yorkshire is school ready

Raise the level of school readiness in South Yorkshire and close the gap in those achieving a good level of development between those on free school meals and all children by 25% by 2028/30

2 Act differently together to strengthen & accelerate our focus on prevention and early identification

With a focus on the four main modifiable risk factors, smoking, healthy weight, alcohol and hypertension and early identification and management of the main causes of premature mortality in South Yorkshire. Specifically acting together to strengthen our focus on reducing smoking to reduce the levels of smoking to 5% by 2030

3 Work together to increase economic participation and support a fair, inclusive and sustainable economy

Reduce the economic inactivity rate in South Yorkshire to less than 20% across our places by 2028/30

Reduce the gap in the employment rates of those with a physical or mental health long term condition (as well as those with a learning disability) and the overall employment rate by 25% by 2028/30

Enable all our young people that are care leavers in South Yorkshire to be offered the opportunity of good work within health and care by 2024

Establish a South Yorkshire Citizens Assembly for climate change and accelerate progress towards environmental statutory emissions and environmental targets

4 Collaborate to value & support our entire workforce across health, care, VCSE, carers, paid, unpaid. Developing a diverse workforce that reflects our communities

Develop a Workforce Strategy that will enable us to collaborate across South Yorkshire to educate, develop and support our entire workforce

For our statutory partners to accelerate progress towards a workforce that is diverse and representative of all our communities

Contribute to South Yorkshire becoming an anti-racist and inclusive health and care system through everything that we do and how we do it with our communities. Committing to real actions that will eradicate racism



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1

Introduction

South Yorkshire has much to be proud of with our strong and vibrant communities, proactive Voluntary, Community and Social Enterprise Sector and a broad range of health and care services providing a strong foundation for improvement. South Yorkshire developed around the industries of mining and steel and this industrial heritage means our close communities have a deep sense of place and identity. These have developed into a diverse and vibrant economy with health and care including regional and national specialised services and centres of excellence, advanced manufacturing, technology, research and education being significant industry sectors across South Yorkshire. We are a diverse and welcoming county with outstanding natural, heritage, cultural and artistic assets. We are geographically compact and fortunate in our location, in that we have good access to open green spaces, including the western edge of Sheffield and Barnsley bordering the Peak District National Park. All this contributes to South Yorkshire being a great place to be born, live and work.

There are, however, some serious challenges to overcome. South Yorkshire has a significant proportion (37%) of people living in the most 20% deprived areas nationally. Life expectancy in South Yorkshire is no longer increasing. Not only are people in South Yorkshire dying younger, they are living fewer years in good health. There is also a significant difference in the number of years people can expect to live in good health, with those living in the most deprived areas dying up to nine years earlier compared to people living in more affluent areas across South Yorkshire communities. The gap in life expectancy between the most and least deprived areas is also widening. Our commitment in this strategy is to change this to improve outcomes for everyone in South Yorkshire. We are committed to working together to take action to address health inequalities and improve healthy life expectancy. We will work together as partners, with people and communities and our voluntary, community and social enterprise sector. Our ultimate ambition is in line with the Mayor's Manifesto, for South Yorkshire to become the healthiest region in the UK and this strategy is our initial staging post.



The 'Marmot Review 10 Years on' report¹, published prior to the Covid-19 Pandemic, found unprecedented declines in health nationally over the decade before Covid-19. Improvement in health in the UK had slowed dramatically, inequalities had increased and health for the poorest people in society had got worse. The Covid pandemic has further exposed these deep inequalities and it is evident that the current cost of living crisis has further exacerbated these disparities. South Yorkshire with its relatively lower level of earnings and employment is particularly vulnerable. However, health inequalities are not inevitable and by definition are preventable. It is within this challenging context that we have come together to develop our South Yorkshire Integrated Care Partnership with refreshed energy and renewed commitment to collaborate as partners and work with our local communities of Barnsley, Doncaster, Rotherham and Sheffield to work differently together to address health inequalities and improve the health and wellbeing of all people living in South Yorkshire.

This is our initial Integrated Care Strategy developed within the challenging timeline set nationally at a time when there is immense pressure across the health and care system. We have endeavored to engage broadly, to listen to what matters to people living in South Yorkshire and actively engage with our wider partners in the development of this Strategy. We will build on this and continue to engage and involve as the Strategy evolves and we translate its ambition into delivery.

What is the South Yorkshire Integrated Care System – an overview

Partner organisations across South Yorkshire have a long history of collaboration. The first Sustainability and Transformation Partnership was established in 2016. This then became one of the first non-statutory Integrated Care Systems in England in 2018. Following the Health and Care Act 2022 a statutory Integrated Care System (ICS) has come together from July 1st.

Partners have already started to break down organisational barriers so that we can wrap support, care and services around people and improve lives. In Barnsley, Doncaster, Rotherham and Sheffield, our Local Authorities, NHS partners, the Voluntary, Community and Social Enterprise Sector and many others have strengthened the way they work with each other and have joined forces where it makes sense to do so and where it makes a real difference to the public, patients, and staff. Our pledges in 2016 were to give people more options for care while joining it up in communities and neighbourhoods, to help people to stay healthy, tackle health inequalities, improve quality, access and outcomes of care, meliorate workforce pressures and introduce new technologies. We paid particular attention to cancer, mental health and primary care, and the two key enablers of workforce and digital technology. Since then, much has changed the impacts of the Covid-19 pandemic and the more recent cost of living crisis provide a very challenging backdrop as we set out our new strategy.

But we remain focussed and committed in our goal and undeterred for the people of South Yorkshire. We will build on our commitment to the quadruple aim, set out in our **Health and Care Compact** and use the new system architecture and partnerships and our renewed vision, ambition and commitments to go further faster on health inequalities. We will also build new partnerships with agencies outside the ICS to support improved and more equitable health and wellbeing for all and focus on those with greatest need.



New statutory Integrated Care Systems have been set up to bring local authorities, NHS organisations, combined authorities and the Voluntary, Community and Social Enterprise Sector together with local communities to take collective responsibility for planning services, improving health and wellbeing and reducing inequalities.

Integrated Care Systems have four key purposes:

- 1 Improving outcomes in population health and health care
- 2 Enhancing productivity and value for money
- 3 Tackling inequalities in outcomes, experience and access
- 4 Helping the NHS to support broader social and economic development

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They are made up of:

• An Integrated Care Partnership

- a statutory committee jointly convened
by Local Government and the Integrated
Care Board, to bring together the NHS with
Local Authorities, Combined Authorities, the
Voluntary, Community and Social Enterprise
Sector and other partners.

The partnership is set up to facilitate joint action to improve health and care outcomes and experiences across their populations and reduce health inequalities. They are rooted in the needs of people, communities and places, oversee population health strategies, drive integration and take an inclusive approach to involvement.

 An Integrated Care Board, which is an NHS organisation responsible for planning and funding NHS services, in our case NHS South Yorkshire established in July 2022. NHS South Yorkshire has been established with Partner Board Members, including Healthwatch, Mental Health and the Voluntary Care Sector representation.



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What matters most to me about my health and wellbeing is to live in an equal society. Only through equality can health equity be achieved. I want to live in high-quality housing, in pedestrianised, green, and clean neighbourhoods, with local community facilities and assets prioritised. I want to live in a city that takes care of the most vulnerable, and where everyone is valued. I want to receive compassionate and destigmatising care from health and wellbeing professionals, that empowers me to take control of my life and health. I want to be able to access the resources to take care of myself and my community.

Quote from a South Yorkshire Citizen submitted as part of the What Matters to You exercise

In South Yorkshire the membership of our Integrated Care Partnership (ICP) was proposed by the Health and Wellbeing Boards in the four local authority areas – Barnsley, Doncaster, Rotherham and Sheffield and NHS South Yorkshire. We have worked hard to ensure there is a rich diversity of voices and perspectives represented and will continue to do this across the life of this strategy. Oliver Coppard, Mayor of South Yorkshire Combined Mayoral Authority became Chair of the South Yorkshire Integrated Care Partnership in September 2022 and Pearse Butler the Chair of NHS South Yorkshire is vice chair. By developing our partnership in this way we have built upon our existing partnership and aligned with Health and Wellbeing Boards. Work continues to increase diversity and inclusion in our Partnership and to further strengthen representation from our Voluntary, Community and Social Enterprise Sector as an equal partner, linking with the developing Voluntary, Community and Social Enterprise (VCSE) Sector Alliance. The South Yorkshire Integrated Care Partnership covers the 1.4 million people and families living in Barnsley, Doncaster, Sheffield and Rotherham.



Places, Collaboratives, Alliances and Networks

Places: In each of our communities of Barnsley, Doncaster, Rotherham and Sheffield we have well established place-based health and care partnerships already working well together to provide joined up integrated health and social care, support and services by creating integrated multidisciplinary neighbourhood teams to meet the needs of local people. These are the cornerstone of our health and care system and already have delegated authority from the new NHS South Yorkshire to plan, determine and deliver for local communities.

Collaboratives: Our hospitals, mental health trusts and primary care organisations have also established strong collaborative arrangements. These Provider Collaboratives have been developed to further strengthen partnership working between our hospital and care providers to support joined up sustainable health and care services building resilience across organisations and pathways of care. They include:

- Mental Health Learning Disability and Autism Provider Collaborative (including acute, community and specialist services)
- Acute Hospital Provider Collaborative (including acute, elective and diagnostics children's and specialist services)



Alliances & Networks: Important Alliance arrangements have also been developed where partners across whole pathways or sectors come together to integrate and improve services and care support. These include:

- Primary Care Alliance (including general practice, pharmacists, dentists, and optometrists)
- Urgent & Emergency Care Alliance
- Children and Young People's Alliance (CYPA)
- Voluntary, Community and Social Enterprise Sector Alliance (VCSE) and creative and arts sector
- Cancer Alliance

- Local Maternity and Neonatal Network (LMNS)
- Social Care Networks and Clinical Networks





The South Yorkshire Mayoral Combined

Authority (SYMCA) is a formal partnership of our four local authorities in South Yorkshire: Barnsley Metropolitan Borough Council, Doncaster Council (City of Doncaster Council from January 2023), Rotherham Metropolitan Borough Council and Sheffield City Council. It covers the same population and is led by an elected Mayor. Its Strategic Economic Plan for the region recognises the critical interdependency of health, the economy and having good work. It aims to deliver a stronger, greener and fairer economy, one which reduces social and health inequalities. Oliver Coppard was elected as Mayor of South Yorkshire in May 2022 and is the Chair of the Integrated Care Partnership. One of his Mayoral priorities is the health and wellbeing of local communities, and he has a personal ambition to make South Yorkshire the healthiest region in the country.

We tend to think of our health as being mostly the product of our own energies, whereas in fact health outcomes and the inequalities in those outcomes are largely shaped by social, environmental, commercial and economic conditions in which we live. Our chances of experiencing good health and wellbeing, and maximising the length and guality of our lives, depend on the circumstances and environment within which we are born, live, work and age. Good health outcomes and health inequalities are rooted in socioeconomic circumstances. Many of the levers for improving population health, such as quality education, good employment, comfortable, quality housing, connectivity, healthy local neighbourhoods, creativity and arts and commercial environment reside with our local authorities and SYMCA, making our partnership a unique opportunity to make a real difference.

Listening to our communities in creating this Strategy

To develop our strategy, we started by understanding what matters to people living in South Yorkshire by:

- Gathering insight from a wide range of engagement and involvement activities undertaken in South Yorkshire in the last two years by our ICP partners, from 284 different sources (for more details see page 69).
- Building on this with a campaign to gain new insights: **'What Matters to You'.**

Our early insight-gathering identified the following key themes:

- Awareness the need for more information about health prevention and availability of different health and social care services.
- Access making it easy for people to access health and social care services and removing barriers
- Agency enabling people to have the information, tools and capacity to make informed decisions and be in control of their lives.

Our **'What Matters to You Campaign'** took place over November. Working with our local Healthwatches and VCSE we asked people a single question. We reached out to as many people as possible in South Yorkshire, including our health and care workforce, children and young people, under-represented and socially excluded groups and asked **'What matters to you about your health and wellbeing?'** The 'live feedback' from our campaign has been actively used to shape and inform our Strategy. The following key themes have emerged in addition to those from the early insight and they have been used to shape our strategy:

- Access to care
- Quality of care
- Improving mental health and wellbeing
- Support to live well
- Wider determinants of health
- Affordability

All the quotes throughout this Strategy are taken directly from our engagement work and the insight gathered informs our goals, shared outcomes, bold ambitions and joint commitments outlined in the next section. We have endeavoured to engage broadly and acknowledge the national timeline for development of this initial Strategy has made it challenging. There is a strong commitment from the partnership members to continue to engage and involve as the Strategy evolves and we translate it into delivery. This will include continuing to work with our local healthwatches and VCSE to engage with local people in neighbourhoods. We are working with local healthwatches and VCSE to engage with local people in neighbourhoods including those we have yet to hear from.



Our vision, strategic goals and shared outcomes for South Yorkshire

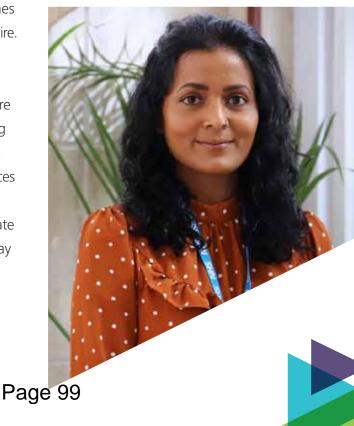
Our strategy to better health starts with people and families living in our communities.

Our Vision is that **Everyone in our diverse communities lives a happy, healthier life for longer.** Our vision is in line with Mayor's Manifesto, for South Yorkshire to become the healthiest region in the UK.

We have developed our initial strategy at a significantly challenging time for all partners. We are recovering from the covid pandemic, managing increasing operational and workforce pressures and responding to periods of industrial action. All these substantial factors are together creating an incredibly challenging environment for our health and care services and contributing to the access issues and increasing waiting times being experienced by people living in South Yorkshire.

Access to high quality services is identified as what matters most to people in South Yorkshire from our recent engagement work. Addressing access issues, including access to primary care, urgent and emergency care, mental health services and the increasing waiting times for hospital services are a key area of focus for our immediate delivery plans, with work already well underway upon which we will continue to build. To improve access to services we know that we need to address increasing waiting times. We also need to understand the barriers people face and how we can work together with them and our VCSE partners to overcome these barriers to address inequalities in access. Alongside ensuring we have sufficient capacity in services to meet demand.

Addressing inequalities in access, improving access to services for those with the greatest needs will actively contribute to addressing health inequalities in South Yorkshire. So we commit to work together to address our immediate challenges through our delivery plans, including our NHS Five Year Joint Forward Plan, in a way that builds towards our longer term vision to address health inequalities in South Yorkshire.



This strategy is our initial staging post, through which we are making a commitment to work together to take action to address health inequalities and improve healthy life expectancy in South Yorkshire.

Creating the environments and economy that create and support health and allow people to thrive, now and in the future.

Our Strategic Goals

Our vision is underpinned by three overarching goals. We want to see the people in all our communities:

- 1 Live healthier and longer lives
- 2 Experience fairer outcomes
- 3 Have access to quality health and wellbeing support and care

Our success in these goals will ultimately be determined by improvements in Healthy Life Expectancy (HLE), the gap in HLE between the most and least deprived groups, eliminating inequalities in access and experience and unwarranted variation between our communities.

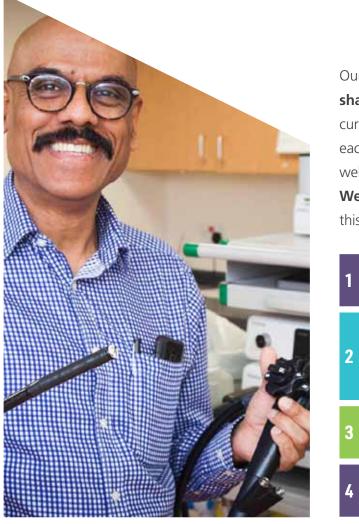
Our aim is to:

Halt the stall in Life Expectancy (LE) in South Yorkshire and improve it by 3 years by 2028/30

Halt the stall in Healthy Life Expectancy (HLE) and close the gap between South Yorkshire and England by 2028/30

Close the gap in healthy years lived between the most and least deprived groups in South Yorkshire





Our vision and goals are supported by **four shared outcomes** which are reflected in all our current Health and Wellbeing Board Strategies in each of our places. These shared outcomes align well to the life courses of **Starting Well, Living Well** and **Aging wel** and act as an enabler in this strategy for current plans. These are:

- 1 Children and young people have the best start in life
- People in South Yorkshire live longer and healthier lives AND the physical and mental health and wellbeing of those with the greatest need improves the fastest
- **3** People are supported to live in safe, strong and vibrant communities
- 4 People are equipped with the skills and resources they need to thrive

Working Vision

Everyone in our diverse communities lives a happy, healthier life for longer

Goals	Healthier and Longer Life			utcomes all	Access to quality Health and Wellbeing support and care		
Shared Outcomes	Best start in life for Children & Young People	and ANE wel	ng healthier longer lives D improved llbeing for ose with atest need	Safe, stro and vibra communit	ant	People with the skills and resources they need to thrive	

In this strategy we will set out a focussed number of bold ambitions to support achievement of our shared outcomes which can only be achieved by all partners working together.

Where are we now?

The impacts of the pandemic have been unequal and unfair and have highlighted inequalities which have been there for some time in South Yorkshire. Learning from the pandemic has provided us with an expanded view of inequality and to consider the importance and interplay of housing, employment, environment, skills, creativity, and transport (as key wider determinants of health) and their fundamental impact on health and wellbeing. We are fortunate to have many excellent care and support services across South Yorkshire, however, as a result of the pandemic and the impact on our workforce these have become stretched and under significant pressure over a prolonged period. We know from our engagement work, our communities value simple and timely access to high quality care and for this to support both physical and mental health needs. Our strategy and delivery plans, including our NHS Joint Forward Plan, which follow will address this and our focus will be on enabling equitable access to care and support.

Understanding the Population Health Needs and outcomes in South Yorkshire

Inequalities cost lives. People of South Yorkshire are living shorter lives than they should. The average number of years a baby born today in South Yorkshire can expect to live is 1.5 years less that those living elsewhere in England.



Not only are we dying younger, but we are living less years in good health, around 3.6 more years of life in poorer health than other areas in England. 37% (527,000) of people living in South Yorkshire live in the most 20% deprived areas nationally. Men and women living in the most deprived parts of South Yorkshire die around nine years earlier than those living in the most affluent parts of South Yorkshire. People who live in the most deprived areas are also more likely to spend longer in poorer health.

National data tells us that women in the most deprived areas will spend up to 19 years in poorer health compared to those in the most affluent areas. People living in the most deprived areas will experience the onset of multiple ill health conditions 10-15 years earlier than those in the most affluent areas.

Poor health damages our economy, prosperity and opportunity. Around a third of the productivity gap between the North and the rest of the country is estimated to be attributable to poor health. We are also seeing a rise in older workers leaving the labour market due to poor health.



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My health is dependent on my financial stability. If I can afford to heat my home, eat well, socialize, and commute to work safely then I am starting from a good foundation.

The conditions that create our health (wider social, environmental and commercial determinants)

To have a healthy society we need a range of building blocks in place: stable jobs, good pay, quality housing and education.

We need local streets and places that create and support health, environments that are free from pressure towards unhealthy products and behaviours and make it easier to be active and connect with people and with nature.

Over the last century or more we have seen a rise in non communicable diseases linked to smoking, obesity, alcohol and lack of physical activity. In that time people's genetics or will power have not changed, what has changed is the cultural and commercial environment in which we live.

Making changes to ensure everyone has equality of opportunity, has an environment that gives agency of choice and gives access to the building blocks of health is not easy and will require us to be determined in our focus for the people of South Yorkshire.



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	Theme	Key indicator
	Housing Many of the most pressing health challenges such as obesity, poor mental health, physical inactivity are directly influenced by the built and natural environment, including access to quality housing.	Nearly 19% of South Yorkshire homes were reported to be experiencing fuel poverty, this is significantly worse than the England average (13%). This is likely to significantly increase given the rising cost of fuel prices and is estimated to impact on at least 42% of households.
	Access to green spaces and active travel Access to green space such as woodland, supports wellbeing and allows people to engage in physical activity.	 14% of adults in South Yorkshire walk for travel. 16% of South Yorkshire residents make use of outdoor space for exercise or health reasons. All four Places in South Yorkshire are ranked in the top 10 of all local authorities with the highest rates of children being killed or seriously injured on roads.
	Education Access to a high-quality education will reduce inequalities in educational outcomes and enable children to maximise their capabilities and have control over their lives.	 An estimated 1,840 (6.2%) young people are not in education, employment or training in South Yorkshire. 30% of children were deemed to not have achieved the expected level of development at the end of reception.
R	Jobs Being in good work is good for both physical and mental health/wellbeing.	 73% of South Yorkshire residents aged 16-64 are in employment, this is significantly lower than the England average. The average weekly earnings are only 91% of the England average. The main reason for sickness absence is MSK– 19% of over 16s report having a long term MSK problem.
	Inclusive work To ensure everyone can benefit from the protective factors of being in good work, labour markets should be inclusive and diverse so everyone can access good work with fair pay.	 There is a 12% gap in the employment rate between those with a physical or mental long term condition and the overall employment. This is even worse for those with a learning disability, where the gap is 66%. Those from non-white ethnic minority groups are less likely to be in employment, similarly employment levels are lowest in those in the most deprived areas and those aged 50-64.
2	Crime and violence Crime is both a risk factor for health and an outcome from a number of other social determinants of health: crime can lead to both the short term effects which can be severe but it can also lead to long term problems such as depression or anxiety- related illnesses and; crime itself has its own risk factors.	 There were approximately 46,000 violence offences reported, a rate of 33 offences per 1,000 population, this is higher than the value for England (29 per 1,000). The rate of deaths to drug misuse was 7.6 per 100,000, that's nearly 300 deaths due to drug misuse (in a three-year period).
	Air pollution Poor air quality is the largest environmental risk to public health in the UK as long-term exposure to air pollution can directly result in long term conditions as well as exacerbate conditions leading to hospitalisation.	 Approximately 5% of all deaths are attributable to air pollution. It is estimated that 200,000 residents of South Yorkshire live in areas that are vulnerable to air pollution.

Health conditions amenable to prevention

We have a good understanding of the main contributors to mortality in South Yorkshire. They are cardiovascular disease, which includes all heart and circulatory diseases such as coronary heart disease, hypertension, stroke and vascular dementia. Inequalities in the wider determinants, risks and behaviours are strongly associated with poorer outcomes. The principal risk factors associated with the main causes of death and ill health are smoking, high blood pressure, diet, obesity and alcohol. South Yorkshire has higher than national rates of these common, but modifiable, risk factors.

Key numbers:

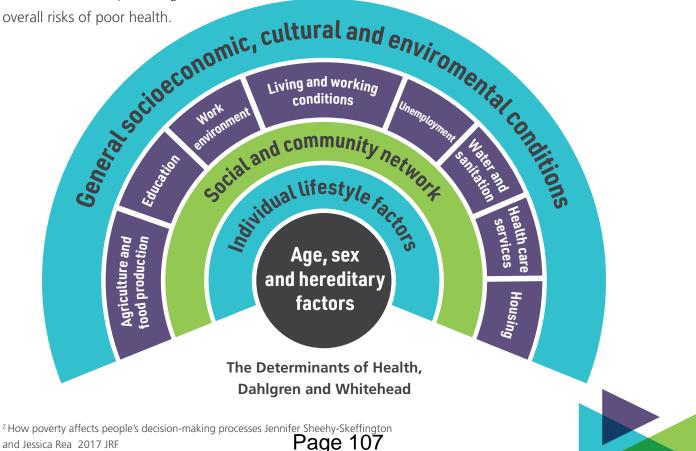
- 14% of population are recorded to have high blood pressure and 7% diabetes
- Rates of deaths from stroke are twice that in the most deprived group than least deprived group.
- Admissions for pneumonia in all 4 places are some of the highest in the country
- Early detection of cancer is most important factor for outcomes, only 51% of cancers are diagnosed early, which is much less than the national target of 75%

Main causes of inequalities in premature mortality	Risk factor	Opportunity for prevention			
	20% of deaths to smoking	-	16% of SY population smoke		
24% of deaths to circulatory disease	14% of deaths due to high blood pressure	-	37% don't have blood pressure levels controlled to target		
15% of deaths to cancer	13% of deaths to poor diet		Only 48 % of SY eat the recommended 5-fruit or veg		
12% of deaths to respiratory disease	9% of deaths to obesity	-	67% of SY adults are overweight or obese		
	4% of deaths due to alchol (also contributes to obesity, high blood pressure and diet)	-	18% of SY population report binge drinking		

The health of groups vulnerable to inequalities

Smoking, poor diet, physical inactivity and harmful alcohol are drivers for early onset of illness and death in South Yorkshire. But people's ability to adopt healthy behaviours is strongly shaped by the environment in which they live. People in deprived areas tend to have less agency to make healthier choices as they disproportionately experience the pressures of unhealthy products due to increased advertising, exposure, normalisation, and a reduced financial means to access better alternatives, thus driving inequality.

Inequalities in the wider determinants of health; housing, environment, education, jobs and the modifiable risk factors (smoking, healthy weight, alcohol) often cluster in individuals and communities, compounding their overall risks of poor health. The cost-of-living crisis means many more children, young people and adults in South Yorkshire will be living in poverty. Cuts in income combined with increased costs of living also means for many not being able to eat, heat their homes or keep clean. This impacts on immediate health and ability to access health and care services and support and increases the risk of illness in the short and longer-term. Poverty impacts on health through the wider determinants, affecting educational outcomes, life chances, choices and opportunities. By having to focus on their immediate needs and threats, people living in poverty may make decisions that are damaging for their health in the longer term.²



Very poor health and lower average age of death is also often experienced by people who have become socially excluded as a result of multiple adverse events such as poverty, violence and complex trauma. This may be experienced, for example, by people who experience homelessness and drug and alcohol dependence. It may also be experienced by vulnerable migrants, Gypsy, Roma and Traveller communities. Poor access to health and care services and negative experiences can also be commonplace for these groups due to multiple barriers, often related to the way healthcare services are delivered, further compounding their inequalities in health.

The Covid pandemic has brought to the fore the health inequalities experienced by people from Black and minority ethnic groups in the UK. The recently formed NHS Race and Health Observatory concludes that the health of ethnic minority patients has been negatively impacted by inequalities in access to, experiences of, and outcomes of healthcare and that these longstanding problems in the NHS are rooted in experiences of structural, institutional and interpersonal racism.³



Key Facts:

- People from Black and minority ethnic groups are disproportionately affected by socio economic deprivation
- People with severe mental illness are at greater risk of poor physical health and reduced life expectancy compared to the general population. On average men with severe mental health conditions die 20 years earlier, and women die 15 years earlier than the general population.
- People with a learning disability have worse physical and mental health and women with a learning disability die on average 18 years younger and men 14 years younger.



Figure Ethnic Health Inequalities in the UK Source: Ethnic Health Inequalities in the UK - NHS - Race and Health Observatory NHS – Race and Health Observatory (nhsrho.org)

BLACK WOMEN ARE SOUTH ASIAN & BLACK PEOPLE ARE MORE LIKELY MORE LIKELY THAN WHITE women to DIE in PREGNANCY or Type 2 diabetes than white people. childbirth in the UK. Ref: https://bit.ly/3ulDy88 Ref: https://bit.ly/3ihDwcN IN BRITAIN, SOUTH ASIANS HAVE A IN THE UK, AFRICAN-CARIBBEAN higher Death Rate MEN ARE UP TO more likely to DEVELOP P ROSTATE from CHD than the general CANCER than white men of the population. same age. Ref: https://bit.ly/3iifo9V Ref: https://bit.ly/39KWqEs BLACK AND MINORITY ETHNIC PEOPLE HAVE UP TO ACROSS THE COUNTRY, FEWER THAN OF BLOOD DONORS the mortality risk from COVID-19 than are from BLACK AND MINORITY people from a WHITE BRITISH ETHNIC communities. BACKGROUND. Ref: https://bit.ly/3ulg17r Ref: https://bit.ly/3EZS20d **ESTIMATES OF DISABILITY-FREE LIFE** EXPECTANCY ARE BLACK AFRICAN AND BLACK CARIBBEAN PEOPLE ARE OVER more likely to be subjected to LOWER FOR BANGLADESHI MEN living MUNITY TREATMENT ORDERS in England compared to their White than White people. British counterparts. Ref: https://bit.ly/3zK5ljL Ref: https://bit.ly/3urjmit



Summary Plan on a Page

Our Shared Outcomes, Bold Ambitions and Joint Commitments

	Working Vision	Everyone in our diverse communities lives a happy, healthier life for longer								
	Goals	Healthier and	l Longe	er Life Fairer Outco		omes for all	He	Access to quality Health and Wellbeing support and care		
	Shared Outcomes	Best start in life for Children & Young People		Living healthier and longer lives AND improved wellbeing for those with greatest need		Safe, strong and vibrant communities		People with the skills and resources they need to thrive		
Engagement	Bold Ambitions	Focus on development in early years so that every child in South Yorkshire is school ready		Act differently together to strengthen & accelerate our focus on prevention and early identification		Work together to increase economic participation and support a fair, inclusive and sustainable economy		Collaborate to value & support our entire workforce across health, care, VCSE, carers, paid, unpaid. Developing a diverse workforce that reflects our communities		
	Joint Commitments	Bold, visible and collaborative leadership	Identifying, recognising and tackling systemic discrimination including a focus on anti-racism		Reallocation of resources to where there is most need	Joined up service delivery and support	co-pro W peop	ng and duction ith le and unities	Create a culture of learning and innovation	
Enabling Strategies Our pathway to better health										

Across South Yorkshire and in each of our places we have existing, strong strategies and plans, these include our Health and Wellbeing Strategies, our Place plans, our 5 Year Health and Care Plan and our South Yorkshire Stronger, Greener, Fairer Strategic Economic Plan. It is not our intention in this initial Integrated Care Strategy to duplicate these but to build on them, setting out where, as a whole partnership working together, we can add value and support to go further faster on some of the more challenging and intractable issues to contribute to reducing health inequalities and improving healthy life expectancy.

Our intention is to:

- Ensure that we focus on what matters to people, including good access to high quality care and support, and to demonstrate we have listened we have identified this as one of our strategic goals.
- Amplify or give visibility to exemplars of best practice to support learning, sharing and adoption.
- Identify a targeted number of action focused bold ambitions which can only be achieved by the Integrated Care Partnership joining forces to practically align our collective power and influence to enable delivery at pace and at scale.



Our shared Outcomes are:

- 1 Children and young people have the best start in life
- 2 People in South Yorkshire live longer and healthier lives AND the physical and mental health and wellbeing of those with the greatest need improves the fastest
- **3** People are supported to live in safe, strong and vibrant communities
- 4 People are equipped with the skills and resources they need to thrive

Our Bold Ambitions are to:

- Focus on development in early years sothat every child in South Yorkshire is school ready
- 2 Act differently together to strengthen & accelerate our focus on prevention and early identification
- Work together to increase economicparticipation and support a fair, inclusive and sustainable economy
- 4 Collaborate to value & support our entire workforce across health, care, VCSE, carers, paid, unpaid. Developing a diverse workforce that reflects our communities

age 111



Our Shared Outcomes

1

Children and young people have the best start in life

GG

We need...local community groups to allow children to do things outside school. Access to help on healthy eating and groups to promote exercise at all ages.

Quote from a South Yorkshire Citizen submitted as part of the What Matters to You exercise

Why is it important?

- The 1,001 days from pregnancy to the age of two set the foundations for an individual's cognitive, emotional and physical development. Development in the early years (including in the womb) can have a lifelong impact on health and wellbeing, educational achievement and economic status.
- Behaviour is heavily influenced by our living conditions. Living in a street or place which encourages play and physical activity within daily life makes it much easier for children to develop healthy habits. We know that physical activity improves mental and physical health and is important for childhood development.
- Childhood is the most important time for enabling the development of behaviours that will have a lifelong influence on health and wellbeing, including physical activity and healthy eating.
- As with adults, the wider determinants of children's health include socio-economic factors, housing, social networks and education.
- Parental ill health, including mental health can also have implications, these vary according to the nature of each parent's condition, their child's health and stage of development, and relationships with other family members.
- Poverty is a major social determinant and adversely affects children's life chances.
 In South Yorkshire a quarter of children live in poverty, which is higher than the national average and the increasing cost of living is placing additional strain on many families in our communities.

We have lower rates of school readiness, more children who are obese and the number of children who have dental caries is higher than the national average.

 In addition, evidence suggests that the pandemic has had a significant negative impact on children and young people and their mental and physical health.

Key Facts:

Compared to the national average, children in South Yorkshire are:

- Less likely to be breastfed at 6-8 weeks after birth
- Have slightly lower rates of school readiness (71% of children achieved a good level of development at the end of reception)
- More likely to be obese (37% of Year 6 and 25% of reception children are overweight or obese)
- More likely to have dental caries (830 admissions per 100,000 population, ages 0-5)
- More likely to die / be seriously injured on roads (37 deaths per 100,000 population of those aged 16 and under)
- There were 212 hospital admissions per 100,000 as a result of self-harm in those aged 10-14 (180 of our children)

What are we doing about it?

- We are working in each of our places, with our Local Maternity and Neonatal Network and Children and Young People's Alliance and Primary Care Networks to enable all our children and young people to thrive, have good physical and mental health, high aspirations and to ensure that they are able to maximise their capabilities to participate and contribute to society.
- We are enabling children and young people and their families to have a voice together with the information, tools and resources to manage their own health and wellbeing and to actively participate in how we improve and integrate services.
- We know that there is more we can do together to support families, including the development of family hubs in South Yorkshire to ensure that all our children are well supported in their early years and are all school ready and enabled to maximise their potential. To both support children to have the best start possible now, and to build on this for future generations.
- We are committed to supporting a reduction in healthcare inequalities, using the new Core20Plus 5 framework adapted for children and young people. The 'Core20' is the most deprived 20% of the national population as identified by the national index of multiple deprivation. The plus groups include ethnic minority communities; people with a learning disability, autistic people; people with multi morbidities; and those with protected characteristics.

Specific consideration is given to young carers, looked after children, care leavers and those in contact with the justice system. As part of the framework five clinical areas have been identified to be focused on by Integrated Care Boards and Integrated Care Partnerships and these are the key areas we are already working on:

- Asthma
- Diabetes
- Epilepsy
- Oral health
- Mental health
- We are working together with the Mental Health Provider Collaborative to improve the support of our children and young people's emotional wellbeing and mental health responding to the ongoing impact of the covid pandemic.
- We know the association between exposure to adverse childhood experiences and poor adult outcomes is heightened in looked after children therefore we are working to support all our looked after children to enable them to achieve academically and develop the capabilities to maximise their potential.
- Children's social care services are supporting families to stay safely together, with a focus on early help, access to services and preventing them from reaching crisis point.
- We are working together to identify where unhealthy commodity industries influence our environment and choices for profit, and use our powers to control those pressures. For example Local Authorities limiting saturation of hot food takeaways in areas around schools and working to remove industry interference in alcohol and gambling educational materials.



As a South Yorkshire Integrated Partnership, we will:

- Act swiftly together to galvanise all partners, including Primary Care Networks and partners in education and childcare settings, to deliver our bold ambition to focus on development in early years so that every child in South Yorkshire is school ready.
- Ensure, through our Place Partnerships, Local Maternity Network and Children's and Young People's Alliance that the voice and insights of families, children and young people are central to strengthening our understanding of their needs and enable changes to services to be co-produced.
- Through our Place Partnerships and Local Maternity Network, working closely with our communities, the Maternity Voices Partnership and VCSE, enhance maternity care, to decrease inequalities in maternal and neonatal outcomes.
- Building on existing relationships and multiagency collaboration, take a strengths-based and coordinated approach to establishing family hubs across South Yorkshire, which have a focus on supporting families with the greatest needs. Maximise the opportunity through this approach to improve uptake of childhood immunisations.

- Through our Place Partnerships and Children's and Young People's Alliance, enable all our children to have the information, knowledge, skills and confidence to have good physical and mental health so that they are able to increasingly manage their physical and mental health and wellbeing, maximise their capabilities and have choice and control over their lives.
- Through our Place Partnerships and Mental Health Provider Collaboratives, take action to improve support and access to mental health and wellbeing services for children and young people.
- Maximise the benefit of the Bloomberg Harvard City Leadership Programme for South Yorkshire focused on addressing health inequalities, including targeting the use of national frameworks such as the Core 20 Plus.
- Barnardo's and the Institute of Health Equity, led by Prof Sir Michael Marmot, are partnering to shape the way Integrated Care Systems (ICSs) create health and address health inequalities among children and young people. In South Yorkshire we have been invited as one of three successful ICSs to be part of this Children and Young People's Health Equity Collaborative over the next three years.
- The development of a National Centre for Child Health Technology (NCCHT) at Sheffield Olympic Legacy Park, a global first centre will develop the world's most advanced and integrated healthcare system for children and young people.



Our Shared Outcomes

2

People in South Yorkshire live longer and healthier lives

AND the physical and mental health and wellbeing of those with the greatest need improves the fastest

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To live a healthy, long life I want support maintaining my general health and mobility; access to fitness classes that suit me; confidence in my GP; suitable housing, preferably near a family member in case support is needed; enough money to eat reasonably healthily and to heat at least one room of my home.

Quote from a South Yorkshire Citizen submitted as part of the What Matters to You exercise

Why is it important?

- People in South Yorkshire are living shorter lives than they should. Health inequalities arise because of the conditions in which we are born, grow, live, work and age. These conditions influence our opportunities for good health, and how we think, feel and act, and this shapes our mental health, physical health and wellbeing.
- People in South Yorkshire deserve better health and wellbeing.
- We want all citizens of South Yorkshire to benefit from an improvement in their health and wellbeing. We need to ensure that those with the greatest needs and /or most at risk from health inequalities see the biggest and fastest improvements.
- Taking a proactive approach, creating the conditions for good health and wellbeing to prevent problems and issues from arising in the first place, including creating streets and places that support every day physical activity and social connection.
- But where problems do arise, we need to focus on preventing them from escalating further, so that people can live happy, healthy, and fulfilling lives for as long as possible.
- Creating good health and preventing ill health is better for people, better for services and better for the planet.
- Consumption and choices are influenced by the commercial environment in which we live. An environment where these pressures, normalisation and exposure are reduced give people greater agency to make healthier options.

What are we doing about it?

To help improve physical and mental health and wellbeing and to reduce health inequalities action is being taken on a range of fronts:

- Partners are working together in every place with communities to take actions to improve the wider determinants of health such as education and skills, housing, employment opportunities, neighbourhoods and communities, air pollution, creativity and arts climate mitigation and adaptation.
- Our partners are working to identify where commercial actors disproportionately influence choices and behaviours towards unhealthy products, and use their powers to reduce those pressures. For example introducing measures to limit hot food takeaways around schools and reduce industry interference in alcohol and gambling educational materials.
- Place based Partnerships, including Primary Care Networks and the Voluntary Community and Social Enterprise (VCSE) sector, are working with communities to support a strengths-based approach to the development of vibrant communities (see later sections)
- Targeted actions are being taken on the main risk factors for the conditions that are leading to premature death – smoking, alcohol, obesity and hypertension. For example, each Place is working to reduce access to tobacco and support people to stop smoking and all trusts in South Yorkshire are implementing the QUIT Programme⁴. Place Partnerships and the Children and Young People's Alliance are working with schools to promote healthy weight for children and young people.



- Healthcare services, including Primary Care Networks, are taking steps to identify earlier, and improve the clinical management in line with evidence, of the main diseases that contribute to our mortality and premature mortality – cardiovascular disease (heart disease and stroke), respiratory disease, cancer and dementia – and of their risk factors (such as high cholesterol, high blood pressure and diabetes).
- We have a well established Cancer Alliance that is leading the way with its focus on health inequalities and early diagnosis using behavioural science techniques, working in partnership with communities, primary care and the Voluntary Sector with Voluntary, Community and Social Enterprise Sector.
- We also have regional Clinical Networks for Cardiovascular, Diabetes, Stroke and Respiratory Disease. Our places are all actively involved in delivering prevention and management initiatives linked into these Clinical Networks.

- Physical activity partnership arrangements are well established, supported by Health and Wellbeing Boards and Place Partnerships, including for example Sheffield's Move More and Get Doncaster Moving. The South Yorkshire Mayoral Combined Authority has made a commitment to enabling active travel.
- Place Based Partnerships and the Mental Health Provider Collaborative are working with communities and people with lived experience to improve mental wellbeing, by promoting the importance of mental health throughout every stage of life, identifying those at risk of poor mental health and reducing the factors that contribute to this, including social and economic factors.
- Proactively enabling early intervention to prevent more serious difficulties and preventing suicide.
- Supporting people with mental ill health to have better physical health and working with primary care to enhance the annual physical health check for people with serious mental ill health.
- Mental Health Trusts now have specialist Tobacco Treatment Advisors who are supporting people in contact with secondary care mental services to stop smoking.
- Adult social care services are helping people to live the life they want while keeping safe and well in their local communities, guided by the 'Making it Real' Framework⁵ focusing on what matters most to people.

- We are being guided by what is important to people, we know that this includes access to services, seeing the right professional, at the right time and getting the right support when they need it. To enable this, we are working together to improve access to services, understand and remove barriers and enable the integration of care. For example, Places are developing multidisciplinary teams, bringing together Primary Care Networks, community services, specialist community teams, social care and the VCSE sector.
- We have an effective health protection programme in South Yorkshire and will continue to work with the UK Health Security Agency (UKHSA) and NHSE to deliver health protection, including maximising delivery of routine adult and childhood vaccination programmes and ensuring effective delivery of covid and seasonal flu vaccination programmes. We will also continue to support delivery of health protection through Local Authorities, e.g. environmental health protection, outbreak management and addressing air pollution.
- Places are increasing their focus on addressing ethnic health inequalities.
 For example, improving access to social prescribing for ethnic minority communities.
- Partners are also developing their approach to the use of data and information from patients and communities to more effectively identify individuals and communities who

are at risk or are experiencing poor health outcomes and adapting the way care or broader interventions are delivered to improve patient experience, access and outcomes. For health care services, this is known as taking a population health management approach.

 Whilst progress is being made, if we are to prevent people living in South Yorkshire from having many years in poor health or from dying too early, we need a step change in the focus on wellbeing, prevention and the early identification and management of physical and mental ill health.

As a South Yorkshire Integrated Care Partnership we will:

- Through our Place Partnerships, working with the Mayoral Combined Authority Collaboratives and Alliances, ensure that community voice and insights are central to strengthening our understanding of our population needs and enable changes to services and local programmes to be co-produced with local communities and people with lived experience.
- Work through our Place Partnerships with local communities and the VCSE as equal partners to support local geographic and other communities to identify and address what matters most to them and ensure that prevention interventions are co-produced with local communities, delivered, and funded at sufficient scale to have real impact.



- Work through the Place Partnerships, Collaboratives and Alliances to accelerate the move from reactive care to proactive care, taking a whole-person approach and focusing on what matters most to people.
- Work together to ensure that people of all ages have the information, knowledge, skills and confidence they need to manage their physical and mental health and wellbeing, have choice and control in their own lives, and are able to use their skills, knowledge and experience to benefit the wider community.
- We will act differently together to deliver our ambition to strengthen and accelerate our focus on prevention and early identification. This will include a focus on improving access and the quality of care and support to reduce inequalities in access, experience and outcomes.
 - This will mean focusing on the four main modifiable risk factors – smoking, healthy weight, alcohol, and hypertension
 - Early identification and management of the three main causes of early death and unwarranted variations in care in South Yorkshire – Cardiovascular, Respiratory Disease and early diagnosis of Cancer.
- We will enhance rehabilitation for patients prior to cancer therapy and rehabilitation for people with cancer, cardiac and respiratory diseases and stroke. By doing this we can help to delay the onset of multimorbidity and frailty as well as premature death.

- We will take a personalised approach to support those living with multiple conditions and those with life limiting conditions, enabling choice and control and supporting end of life planning.
- We will work with communities and people with lived experience to improve mental health and well-being and to remodel and integrate mental health services to have a strong focus on prevention, early intervention, resilience and recovery and continue our focus on reducing suicides.
- We will work together to challenge mental health stigma and promote social inclusion and social justice for everyone affected by mental illness.
- We will work with:
 - People with serious mental health conditions and those with learning disabilities and autism to improve their physical health.
 - People with serious physical long-term conditions to enable them to have good mental health.
 - Ethnic minority communities to support improvements in physical and mental health.
- We will build on the work of our partners to identify where commercial actors disproportionately influence choices and behaviours towards unhealthy products, and identify opportunities to work together to use our collective powers to reduce those pressures.



- NHS partners will commit to increase the focus on reducing inequalities in healthcare using the 'Core 20 Plus 5', an NHS England health inequalities framework, to support local health services to focus action on:
 - People living the most deprived neighbourhoods (Core 20).
 - Locally identified priority groups (Plus).
 Our Places each identified their priorities groups. Examples include people from ethnic minority heritage, Gypsy, Roma and Traveller communities, asylum seekers, people with learning disabilities, homeless, LGBQTrans communities.
 - Five clinical areas that will impact significantly on health inequalities if we accelerate improvement: maternity, severe mental illness, chronic respiratory disease, early cancer diagnosis and hypertension and high lipids.
 - Decreasing smoking.
- We will increase our joint use of data and information to identify those at risk to target improvements in care, treatment and support. This is taking a population health management approach and will help us to support those who need it most.





Our Shared Outcomes

3

People are supported to live in safe, strong and vibrant communities GG

My health and wellbeing are severely affected by the environment in which we live. Clean air, green space access, safer roads, installation of renewable energy sources in public areas, improved public transport locally, more of it at affordable prices to encourage use.

Quote from a South Yorkshire Citizen submitted as part of the What Matters to You exercise

Why is it important?

- We have many strong, proud and vibrant communities in South Yorkshire, but many communities have seen the decline of their local economy and of their community assets and through this they experience a lack of connectivity to education, employment and opportunities.
- The physical environment where people live and work and how safe they feel in their communities are important in creating good health and health outcomes. Good health is supported by a sense of wellbeing. Many things contribute to our sense of wellbeing; having good relationships with friends and family, being connected to nature, hobbies and having access to activities and amenities, culture and art. There is evidence of the benefits of these factors, including creativity and health improvement, particularly in relation to mental wellbeing. Other factors can be detrimental to wellbeing such as feeling lonely and isolated, living in places that we find ugly, run-down or unsafe. So creating and investing in places and local environments that support good health and wellbeing is really important for population health. Transport, planning and how the local environment is shaped, influence our wellbeing by making it easier, or harder, to get around and connect with people, activities and amenities. They are also important in creating local places that people enjoy living in.
- People living in places with poor quality housing, high air pollution and traffic volumes, poor access to green space and poor active travel and public transport links to jobs, services, family and friends and leisure are far more likely to experience poorer health outcomes. Environments like these discourage every day physical activity and can increase social isolation. These differences in the quality and liveability of our communities and local places are key contributory factors to the health inequalities we see across South Yorkshire.
- Living in poor quality housing, or homes that you are unable to heat is known to contribute to both physical and mental health problems. We know that this is an issue in South Yorkshire, with the latest published data (2020) estimating around 18% of South Yorkshire homes were experiencing fuel poverty. This is significantly worse than the England average, and likely to have increased considerably with increasing cost of living challenges. Damp, mould and condensation are all becoming increasing issues linked to fuel poverty.

What are we doing about it?

- Health and Care Partnerships in every place are working together to address these wider determinants and support community development. Health and Wellbeing Boards in each place play a critical role in driving forward this work. Places are actively enabling the growth of community infrastructure, working to increase access to physical activity in communities, working closely with the VCSE sector and with communities to enable use of our estate.
- Place Partnerships are also working together to ensure sufficient warm, sustainable and affordable housing is built across South Yorkshire and linking housing improvement programmes to public health and wider social care agendas. Places are also aligning their plans to address housing issues related to fuel poverty and services for those with cold homes to address the key drivers of fuel poverty, income, energy efficiency and fuel prices.
- In each place organisations are working to leverage their local economic power to help create more accessible jobs for people in our communities and retain more of our public sector spend within our local areas to deliver additional social value for local people, including building wealth within our local communities through progressive procurement strategies. Progressive procurement is about making it easier for potential suppliers to bid for opportunities and to offer their goods and services to public sector organisaitons in a way that it benefits the local communities.
- Places are taking a strengths-based approach to build on the skills and strengths in different communities to enable positive and sustainable improvements.

- Places are working with local people and the VCSE sector to find solutions to local issues. Taking an asset-based community development approach is important in creating vibrant communities in which people feel happy, safe and proud. Putting more power and control in the hands of local people and local organisations helps to build stronger communities.
- This on the ground approach is enabling us to create more connected local communities. Being part of and feeling like you belong to a connected and resilient community, with opportunities to be physically active and participate in arts and culture, all contributes to people's mental as well as physical wellbeing.
- Work is underway to enable access to green space, leisure and sport facilities in our local communities, and to also enable access to cultural and creative opportunities, all of which positively contribute to health and wellbeing. Work needs to continue to improve health outcomes, including through interventions in the arts and a set of recommendations have been outlined to guide this in *"Improving health outcomes through culture, arts and heritage: Opportunities for the Integrated Care Strategy."*
- Strengthen our action on climate mitigation and adaption to unlock co-benefits for health and reduce health inequalities.

As a South Yorkshire Integrated Care Partnership, we will:

- Through our Place Partnerships, Collaboratives and Alliances we will actively support strength based community development, work to enable access to green space, cultural and creative opportunities and ensure decisions are made as close to communities as possible.
- In doing so we will promote physical activity and enable participation in meaningful activities to increase connectivity and reduce loneliness.
- Work through our Place Partnerships with local communities and the VCSE as equal partners to support local geographic and other communities to identify and address what matters most to them and co-produce solutions that address issues and enable community development in a way that contributes to safer, stronger more vibrant communities.
- Supporting place partnerships working together with housing providers to address key issues associated with fuel poverty, including condensation, damp and mould.

- Through our Place Partnerships, Collaboratives and Alliances, and together with our communities, to harness our collective role as anchor institutes to aid community development.
- Use our ability as a partnership to share learning and influence wider partners so that all are able to act as an advocate for safer and stronger communities.

Our Shared Outcomes

4

People with the skills and resources they need to thrive GG

My health is dependent on my financial stability. If I can afford to heat my home, eat well, socialize, and commute to work safely then I am starting from a good foundation.

Quote from a South Yorkshire Citizen submitted as part of the What Matters to You exercise

Why is it important?

- We know that being able to keep well, have choice and control and feel able to manage your own health and wellbeing is important to people in South Yorkshire. Equipping people with the skills and resources they need is vital so people have the information, knowledge, skills and confidence to keep well, manage and improve their own health and wellbeing and know when to seek support.
- To have a healthy society we need a range of building blocks in place as already described, these include stable jobs with good pay, quality housing, education and freedom from pressure towards unhealthy choices. As outlined socioeconomic factors such as education, employment and income all impact on our health and wellbeing.
- Together with a focus on the first 1,001 days, access to high-quality education will reduce inequalities in educational outcomes and enable children to maximise their capabilities and have control over their lives. It is also important that learning opportunities are available for adults of all ages to develop the skills and qualifications needed for employment and progression.

- Equipping people with the skills and resources they need to thrive, through formal education, informal life-long learning, adult and community education, enables people to maximise their potential, participate in their communities and secure stable employment or contribute in other ways. It also equips people with the ability to research, ask questions, think critically, be curious and access/find the information and knowledge they need about how to manage their own health and wellbeing behaviours, supporting the wider prevention agenda.
- Being in work is good for both physical and mental health and wellbeing. Currently 72% of South Yorkshire residents aged 16-64 are in employment and this is significantly lower than the England average. Sheffield has one of the lowest rates in the country at 69%. As well as having less people employed in South Yorkshire the average weekly earnings are only 91% of the England average.
- Sickness absence in South Yorkshire is also higher than England. Doncaster has one of the highest rates in England, at 3.1%. There is a relationship between health and productivity, healthy people are more productive in the workplace.
- Affordability has been identified by people in South Yorkshire as an area of challenge and a barrier to enabling them to manage their health and wellbeing. It is anticipated that this will increase further as the cost of living increases, resulting in more children, young people and adults in South Yorkshire living in poverty.



What are we doing about it?

- The South Yorkshire Mayoral Combined Authority is working with partners to enable delivery of the South Yorkshire Stronger, Greener, Fairer Strategic Economic Plan. The Strategic Economic Plan (SEP) sets out local leaders' blueprint to drive our post covid recovery and to transform South Yorkshire's economy and society for people, businesses and places. We are already working to develop an inclusive and sustainable economy. "An inclusive and sustainable economy is one that works for everyone, with no one being left behind. It also protects the needs of future generations by ensuring that these can be met within the means of our planet".
- To enable this, labour markets need to be inclusive and diverse so everyone can access good work with fair pay. The South Yorkshire Skills Strategy, which is in development, will help support lifelong learning and develop people with the appropriate skills to support the economy. Life-long learning and skills development is important at all ages and in ensuring that people working in unsustainable industries are able to transition into quality, good, green jobs.
- Partners in South Yorkshire are already working together to take forward a transport strategy, with a focus on affordable public transport and enabling a shift towards active travel.



- Health and care services are working together to enable people to have the information, knowledge, skills and confidence to improve their health and wellbeing and feel confident about taking control and looking after themselves. Healthy engaged people are more able to work and are more productive in the workplace and thus able to contribute to wider economic prosperity.
- Places are working with communities and the VCSE to understand what matters most to people in our communities and what we can do to help to mitigate the negative health and wellbeing impacts of the increasing cost of living, e.g. ensuring they have a single point of contact and streamlined access to welfare advice and support. Affordable public transport is identified as important to enhance access to services and jobs, reduce poverty and address inequalities.

As a South Yorkshire Integrated Care Partnership, we will:

- Strengthen our work together to ensure everyone in South Yorkshire can benefit from being in good work by harnessing the collective power of our anchor institutions and supporting the development of our health and care workforce.
- Take action with our partners to support those that may traditionally find it difficult to get into or stay in work or find other fulfilling ways to make a meaningful contribution, such as those with a physical or learning disability, or a long-term health condition. In South Yorkshire we have schemes in place such as Working Win, but we know we can do more to make a difference.
- Actively promote the development of inclusive labour markets by focusing on work and health, including local recruitment, supporting people to enter and stay in work, especially those with physical and mental health conditions, inclusion groups & in greatest need to address health inequalities.
- Partner with education and skills providers who offer skills development at all stages of the life-course, in both formal and informal learning settings, to enable people to develop the skills and acquire the knowledge and understanding to look after their own health and wellbeing where possible.

 Amplify, sharing learning and actively support the work underway in each of our places with local communities and the VCSE sector to reduce the impact of the increasing cost of living on people living in South Yorkshire, especially for those in the greatest need. Work together to understand those most at risk and to mitigate the impact of cost of living on access to health and care services and support.

GG

Being able to flex my employment around my health needs is the most incredible gift and I cannot thank my employer enough for that, I've had jobs in the past where disability and health have always been a barrier in the workplace but where I currently work the culture and support available is genuinely the best I could ask for.

Quote from a South Yorkshire Citizen submitted as part of the What Matters to You exercise

I think having a decent standard of living in many aspects such as financial health, whilst taking responsibility for own health is of upmost importance. Finance and health are linked in such a way where you can afford to eat healthy foods, something that has become a challenge in recent months. Everything is interlinked with Mental and Physical Health as well.

Quote from a South Yorkshire Citizen submitted as part of the What Matters to You exercise

Bold Ambitions

This strategy to better health, recognises the work already ongoing and set out in strategies and plans in each of our places and across South Yorkshire. Our intention is not to duplicate these but to build on them. This strategy sets out where, as a whole partnership working together, we can add value to go further faster with a targeted number of action focused **bold ambitions** which can only be achieved by the Integrated Care Partnership joining forces to practically align collective power and influence to enable delivery at pace and at scale. The next step is to do the work to agree together the specific actions we need to take to deliver on these ambitions.

1 Focus on development in early years so that every child in South Yorkshire is school ready

Raise the level of school readiness in South Yorkshire and close the gap in those achieving a good level of development between those on free school meals and all children by 25% by 2028/30

2 Act differently together to strengthen & accelerate our focus on prevention and early identification

With a focus on the four main modifiable risk factors, smoking, healthy weight, alcohol and hypertension and early identification and management of the main causes of premature mortality in South Yorkshire. Specifically acting together to strengthen our focus on reducing smoking to reduce the levels of smoking to 5% by 2030

3 Work together to increase economic participation and support a fair, inclusive and sustainable economy

Reduce the economic inactivity rate in South Yorkshire to less than 20% across our places by 2028/30

Reduce the gap in the employment rates of those with a physical or mental health long term condition (as well as those with a learning disability) and the overall employment rate by 25% by 2028/30

Enable all our young people that are care leavers in South Yorkshire to be offered the opportunity of good work within health and care by 2024

Establish a South Yorkshire Citizens Assembly for climate change and accelerate progress towards environmental statutory emissions and environmental targets

4 Collaborate to value & support our entire workforce across health, care, VCSE, carers, paid, unpaid. Developing a diverse workforce that reflects our communities

Develop a Workforce Strategy that will enable us to collaborate across South Yorkshire to educate, develop and support our entire workforce

For our statutory partners to accelerate progress towards a workforce that is diverse and representative of all our communities

Contribute to South Yorkshire becoming an anti-racist and inclusive health and care system through everything that we do and how we do it with our communities. Committing to real actions that will eradicate racism

Joint Commitments

To enable successful delivery of our strategy requires us to do things fundamentally differently for our communities. Our commitments underpin delivery of our Integrated Care Strategy. They are:

- To be **bold**, **generous**, **visible**, **creative and and collaborative in our leadership** for the people of South Yorkshire, doing things differently being courageous and taking risks where it improves outcomes or reduces health inequalities.
- To identify, recognise, and tackle systemic discrimination together with a focus on anti-racism.
- To reallocate our resources to where there is most need and where they can have the greatest impact on population health outcomes. This means reducing duplication, investing differently and earlier in people's lives. It means reallocating our collective resources towards prevention and those people and areas with the greatest needs.
- To join up service delivery and support between health and social care and VCSE where it makes sense to do so in our places and across South Yorkshire.
- To listen and facilitate co-production with people and communities.
- To create a culture of learning and innovation, where best practice is shared confidently and adopted quickly across communities, places and South Yorkshire as a whole.
- Develop and deliver inclusive enabling strategies which support delivery of our strategy to better health.

What do we mean by these commitments?

Bold Collaborative Leadership

- As a Partnership we are making a joint commitment to bold, visible and collaborative leadership which embraces and empowers leaders at all levels and across all partners working within a distributed leadership model.
- We will harness the power of our collective leadership across the Partnership, including VCSE. We will take an inclusive approach to develop leaders at all levels to reflect the communities we serve and develop a leadership culture which is inspiring and courageous.

Identify, recognise and tackle systemic discrimination with a focus on anti-racism

- As a Partnership we are making a joint commitment to identify, recognise and tackle systemic discrimination with a focus on anti-racism. We will identify and make systematic discrimination visible and work together to create the conditions to address it and to ensure fair and inclusive treatment and engagement.
- We are committed to supporting health and care systems, change levers and management leadership behaviours to tackle ethnic health inequalities and promote quality of care, safety, compassion and **a** fairer experience for patients, NHS staff and diverse communities alike.

Reallocate our resources

- As a partnership we are making a joint commitment to reallocate our resources to where there is most need and where they can have the greatest impact on population health outcomes. This means reducing duplication, investing differently and earlier in people's lives. It means reallocating our collective resources towards prevention and those people and areas with the greatest needs.
- To deliver this Strategy we know that we will need to be more flexible with the use of our financial resources, rebalancing our spend towards prevention and those with the greatest needs to address health inequalities. This will mean collectively challenging ourselves as partners to operationalise a different approach to allocating our resources. We are committed to working through this together, understanding each other's differing financial regimes, the national constraints we need to operate within and considering what we can do differently, including the scope of our pooled budget arrangements.
- We will continue to strive to make best use of our financial resources, to ensure value for money and work towards a financially sustainable health and care system.

Joined up service delivery & support

- As a Partnership we are making a joint commitment to joined up service delivery and support. Through our engagement work we know that people really value access to high guality health and care services that are easy to navigate, personalised and joined up in their delivery. In every place in South Yorkshire, we are already working to join up service delivery and support by integrating health and care services. General practices are working together as Primary Care Networks, with community health services, mental health, social care, community pharmacy and the VCSE sector. They are working together to integrate health and care services through the creation of integrated multidisciplinary neighbourhood teams to deliver more preventative and personalised care, treatment and support for people in their local communities.
- Across South Yorkshire Better Care Fund Plans supported integration by enabling joint planning and pooled budgets between NHS commissioners and Local Authorities. Section 75 is a key tool to enable integration and is well utilised in South Yorkshire. Through the Better Care Fund, we have enabled people to stay independent for longer and improved our hospital discharge pathways and reablement services.

 There is still much more we can do to better integrate health and care services, physical and mental health services in each place working with our communities, the VCSE and our developing Provider Collaboratives and Alliances. By joining up service delivery and support we will be able to better meet the needs of individuals and communities in South Yorkshire.

Listening and co-production with people and communities

- As a partnership we are making an ongoing commitment to listen consistently to, and collectively act on, the experience and aspirations of local people and communities.
- We will work creatively and accessibly to reach those whose voices / views / opinions/ experiences that are underrepresented, seldom heard, too often ignored or not sought, working closely with the Voluntary Community and Social Enterprise sector (VCSE) and using flexible methods.
- Understanding the insights and diverse experiences of people and communities from across South Yorkshire is essential to help us build on all the strengths within those communities, enabling us to co design services to address health inequalities and the other challenges faced by our health and care system and our places.

Creating a Culture of Learning and Innovation

- In South Yorkshire we want to create the conditions for a high learning and sharing health and care system, where best practice is shared confidently and adopted quickly across communities, places and South Yorkshire as a whole.
- We want to work together to strengthen our approach to research and innovation and bridging the gap between new knowledge, research and implementing evidence of what works to improve for all our local communities. There are a number of healthcare research and innovation organisations that operate in South Yorkshire that we are already connecting with, including University of Sheffield and Sheffield Hallam University and we have also partnered with the Academic Health Science Network to establish an Innovation Hub.
- We are committed to further forging partnerships between the NHS, Universities and Industry to contribute to improving the health and wellbeing of people living in South Yorkshire. Our aim is to:
 - Increase the pace of adoption and spread of impactful innovation
 - Make data, research evidence and insights more accessible
 - To support researchers and innovators and remove obstacles for those with potentially impactful solutions for health and care

- The South Yorkshire Integrated Care
 Partnership provides a refreshed opportunity
 to advocate for increased focus for
 innovation and research in the primary
 and social care sectors and explore new
 opportunities for socially focused research on
 challenges experienced by our communities,
 including the wider determinants of health.
- We will develop and use plans for an Academy for Population Health and Health Inequalities as a platform to connect people working across all sectors of our health, care and VCSE system to raise awareness and share knowledge. The academy will develop the confidence and capability of our workforce to enable cultural change to facilitate better collaboration and integration with the intent of reducing health inequalities and improving the health of people across South Yorkshire.



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How we will achieve our ambitions: Enabling plans and our partnerships

Inclusive Enabling Plans

Developing Our Workforce

- Our South Yorkshire health and care workforce is our greatest asset as an integrated care system. Over 72,000 people are employed across our NHS and care sectors, spanning over 300 diverse roles. In addition, our communities benefit from a strong Voluntary, Community and Social Enterprise (VCSE) sector. Our workforce has grown, but demand is now often outstripping supply and there are ongoing challenges which require us to work together differently as partners.
- In addition to our health and care workforce we also recognise the significant role of unpaid carers, which includes thousands of people providing unpaid care and support. Carers often experience poorer health outcomes themselves and report that the experience of care for their family member, and themselves could be improved.
- Volunteers play a substantial role in supporting the work of all sectors and communities across South Yorkshire, and we are working together to ensure that volunteers feel valued and supported, that opportunities to volunteer are inclusive, meaningful and varied, and that organisations working with volunteers collaborate to offer best practice in volunteer management and support.

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- Across South Yorkshire we operate a well-established Workforce Hub. The Hub has been developed in partnership with Health Education England and is aligned to the NHS South Yorkshire. It delivers a range of workforce transformation programmes across health and care to support education and training, recruitment, retention, health and wellbeing, equality, diversity and inclusion, and new ways of working.
- It has been agreed with our partners to develop a workforce strategy for South Yorkshire. This will enable us to:
 - Ensure that our workforce feels valued and supported by health and care organisations in South Yorkshire and the system as a whole
 - Drive parity of esteem across sectors and develop a sense of belonging
 - Continue to support the health and wellbeing of our existing workforce
 - Develop our future health and care workforce, supporting local people to enter health and care roles, and those that may traditionally find it challenging to enter and stay in work, such as care leavers or people living with a physical or mental health conditions
 - Develop creative leadership across the health and care sector working with the creative sector



- Recruit and develop a workforce that reflects the diversity of the communities we serve
- Deliver the NHS People Plan ambition for more people, working differently, in a compassionate and inclusive culture and to ensure our workforce and staff find fulfilment and enjoyment in their work
- Progress shared development of innovative new workforce roles to meet emerging needs
- Deliver on our commitment to the Sheffield Race Equality Commission recommendation to become anti-racist employers by 2024
- Work with partners to address health inequalities, especially where protected characteristics have increased those inequalities
- Put in place programmes to support unpaid carers which are coproduced to meet their needs.

Quality and Quality Improvement

 Access to high quality health and care is consistently identified as a key theme that is important to people in South Yorkshire.
 We know that seeing this through a Health Inequalities lens is critical to delivery of our goal of Fairer Outcomes for All. Our approaches to Quality and Quality Improvement need to build on the principles of fairness and equity. We have embedded an approach to continuous improvement and delivery of high-quality services as a fundamental principle of our collective delivery. We are keen to build on this and to continue to embed a culture of continuous learning and improvement across our Partners.

- Our Partners are committed to delivering high quality services that meet the needs of local communities and are evidence based, and to do this through embedding the voice of our citizens throughout our work; an area we are already progressing through our System Quality Group and our broader delivery programmes. Engaging with the power in the voices of local people, listening to their needs and being driven by high quality, timely, information is core to our continuous development.
- As well as being driven by continuous improvement, we will be responsive in our approach to quality management and understanding the key risks across the systems, working together to respond to pressures across the system, embedding a supportive culture and using our collective experience and expertise to ensure we mitigate any risks to service delivery.
- We have set out a series of key principles for Quality which we deliver through the work of the partnership:
 - We will work together to develop detailed clear standards defining what high quality care and outcomes look like, based on what matters to people and communities
 - Create a shared understanding of accountabilities for the delivery of quality and safety across the system.
 - Focus our resource and embed effective quality governance arrangements appropriately

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- Core to our approach will be to reduce health inequalities and minimise variations in the quality of care and outcomes across South Yorkshire to inform our ongoing improvement
- Embed a single, consistent approach to measuring quality and safety using KPIs triangulated with intelligence and professional insight
- Celebrate where we have got things right and share this learning widely to continue our development journey
- Focus on adopting innovation, embedding research and monitoring care and outcomes to provide progressive, high-quality heath and care policy
- As part of setting out our governance arrangements, we have embedded an approach to quality and monitoring, which will further develop to complement our work programmes and delivery of services. We recognise, within this, the important role of regulators including the Care Quality Commission (CQC) and Office of Standards for Education, Children's Services and Skills (OFSTED) in ensuring we meet requirements around safety and quality. We will continue to ensure that individually, and collectively, we work with agencies to learn and develop. This will include learning from good practices elsewhere both within and beyond the UK, embedding national policy and recommendations as well as learning from our local service delivery.

Improving access to services, care and support

- Access to health and care services is identified by people in South Yorkshire as important to them. Across health and care we know that there is variation in access and that there is more that we can do working with our local communities and VCSE to understand the barriers people face and how to enable these be overcome to facilitate more equitable access.
- Access to primary care is an area specifically identified. In recent years primary care has been challenged by increasing workload, both complexity and intensity and workforce challenges. The expectations of people and professionals are changing and with them the manner and scale in which services are delivered are being adapted, drawing on technology and digital solutions, balancing the need for face to face and remote consultations, whilst building capacity to enable us to meet increasing patient demand.
- The South Yorkshire Primary Care
 Provider Alliance brings together General
 Practice, Community Pharmacy, Dental
 and Optometry. It will develop a strategic
 plan for primary care which includes
 recommendations from the Fuller report
 published by NHS England. This will address
 the need to enable good access to services
 delivered at the right scale, whilst retaining
 the benefits of local neighbourhood services
 that offer continuity of care. NHS South
 Yorkshire will commission Community

Pharmacy, Dental and Optometry services from April 2024, creating an opportunity to play to the respective strengths of the providers of primary care services, including addressing issues with access to dentistry, widening the range of services available through Ophthalmic Opticians and increasing the role of community pharmacies in providing services and support to local populations.

What matters to me about my health and wellbeing is getting care for me & my family in a timely way when we need it be it an ambulance, a care home, a GP appointment.

Quote from a South Yorkshire Citizen submitted as part of the What Matters to You exercise



- Similar to the position nationally, waiting lists for hospital treatment in South Yorkshire have increased through the pandemic. Working through our Acute Provider Collaborative we have a strong focus on reducing waiting times such as through Community Diagnostic Centre developments. We are also working through Place Partnerships and our Urgent and Emergency Care Alliance to develop and implement plans for winter to increase capacity and support to deliver more personalised and preventative care and support for people in their own homes.
- The pandemic has also increased demand for mental health services, including children's and young people's mental health and neuro diversity services resulting in increased waiting times. We are working through our Place Partnerships and our Mental Health Provider Collaborative to take action to address this. Our aspiration is in line with 'No Wrong Door', a NHS Confederation publication that sets out a vision for mental health, learning disability and autism services in 2032 is that there will be no wrong door to access quality and compassionate care and support.

Estates

 Health and care services in South Yorkshire are delivered in a wide range of buildings and hubs across our communities. An Estate Strategy for South Yorkshire was developed by NHS South Yorkshire during 2021/22. The Estate Strategy is working towards ensuring that we have modern, fit for purpose, sustainable and high-quality estate for the people in South Yorkshire. It's purpose is to demonstrate how our estate Page 140

can be improved over time, for the benefit of patients, staff and the local community. This includes supporting a wide range of projects such as plans to upgrade hospital facilities, for example the redevelopment of Doncaster Hospital and working together as partners to invest in estate in town centre locations to improve access, increase footfall and maximise social value.

- We have been increasingly moving from a functional approach to managing our estate, to one which looks at the whole estate across South Yorkshire, building on the 'One Public Estate' approach and principles. The Estate Strategy embeds this approach and provides a strategic focus and added value via a collaborative and innovative approach to estates management, maintenance and efficiency; and strategic development and investment across the ICB footprint. It supports delivery of our clinical strategies and joint plans to maximise use of our assets through greater utilisation of existing estate, co-locating with other agencies and services where possible, creating a better patient environment and reducing the carbon emissions linked to our estate.
- Through this we are committed to taking a strategic approach to managing our estate to get the most out of our collective assets. That includes working with our communities to ensure that we plan and deliver integrated services that are in the right places and furthering our role as anchor institutions by supporting the use of our estate by VCSE and local communities contributing to social value.



Digital, data and technology

- In South Yorkshire we have an ambitious plan for digital transformation. Our vision is to promote and coordinate optimal use of digital tools, integration and interoperability of technologies (how technologies speak to each other and work together) to create a seamless digital experience for people and clinical staff with the aim of increasing safety, improving experience and reducing inequity.
- Our priorities are:
 - Working with communities VCSE and other anchor organisations / institutes to enable digital inclusion
 - Actively supporting improvements in partner digital maturity and digital transformation including delivery of electronic health records and shared care records. This will support joined up service delivery, improve access to data for health and care staff and improve reliability and cyber security
 - Implementing transformative technologies for our public to remotely interact with their care record, use new remote monitoring technologies to access health and care services and manage their own health and wellbeing
 - Develop a digital workforce strategy to improve digital and technical expertise and enable new ways of working

- We are committed to working with partners to co create a high-quality intelligence service for South Yorkshire to enable better use of data to understand our population health needs and health inequalities.
 Practically this means:
 - Supporting development of a dataliterate community across South Yorkshire to develop an insight-led health and care system
 - Provision of a South Yorkshire data platform, collating not only health and care data, but information integral to understanding wider determinants of health
 - Supporting, where legally appropriate, sharing of data and information with research partners
 - Expanding our analytical capability to use innovative tools, techniques and advanced analytics to deepen our understanding of outcomes and develop new integrated pathways of care
 - Building a strong analytical community to promote sharing of data management and analysis skills and expertise across the system

GG

What matters to me is staying healthy to enable me to stay independent and remain in my own home as long as possible.

Quote from a South Yorkshire Citizen submitted as part of the What Matters to You exercise

Sustainability

- A Sustainability and Green Plan was launched by the South Yorkshire Integrated Care System in 2022. It sets out a programme of work that focuses action on a number of areas including estates and facilities, travel and transport, supply chain, medicines and adaptations, alongside workforce and digital. Local priorities were also identified, including primary care. The agreed programme of work set out in the South Yorkshire ICS Sustainability and Green Plan enables us to exploit synergies between partners.
- Climate change and population health are closely linked, the actions needed to promote sustainability and tackle climate change are also those that contribute to preventing ill health and improving population health. Taking a more preventative approach to health also can reduce health sector carbon emissions. Recognising this interdependence, as an Integrated Care Partnership we will collaborate with existing programmes of work and strengthen our commitment as partners to work together and with others to have a wider impact. By joining up our work to raise awareness, educate our workforce and progress initiatives to deliver sustainable travel, active travel, reduce air pollution and other sustainability initiatives.
- Action on climate and the environment also can improve health and reduce health inequalities through other mechanisms.
 For example, improving the energy efficiency of homes results in warmer homes and helps reduce the cost of living, both which are related to better health outcomes and contribute to reducing health inequalities.
 The creation of good, accessible, green jobs could be targeted to those further away from the labour market and to those needing to transition from carbon intensive jobs.
- There are also many opportunities to boost the local economy collectively as anchor institutions by meeting South Yorkshire's net zero ambition, including the needs of the NHS, by supporting local innovation, local businesses and local jobs.





- Working with partners to support nature recovery will also benefit health by providing more options for nature connectivity for our communities and can also support climate adaptation by reducing flood risk and protecting against high urban temperatures.
- The NHS has committed to reaching carbon net zero. The Health and Care Act 2022 placed new duties on NHS to contribute towards statutory emissions and environmental targets. The South Yorkshire Mayoral Combined Authority and Local Authorities are moving at pace to develop tangible plans for how they tackle climate change, including the Mayoral manifesto commitment to establish a South Yorkshire Citizens Assembly for Climate Change and together this has fuelled our collective ambition.

Broadening & strengthening our partnerships

 As a Partnership we will only be able to achieve our bold ambitions and make progress in relation to our shared outcomes to improve the health and wellbeing of people living in South Yorkshire and reduce health inequalities if we work together as partners and broaden and strengthen our partnerships.

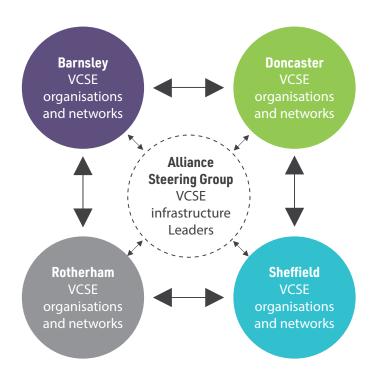
What matters to my health and wellbeing is having care systems that work for the patient. I have complex health needs so I need a health system that connects services together. In theory this happens but in reality it does not. I spend a lot of my time connecting the missing dots, sharing missed letters between professionals so we can have wider conversations about my health as one condition can affect another.

Quote from a South Yorkshire Citizen submitted as part of the What Matters to You exercise

Working with our Voluntary, Community and Social Enterprise Sector (VCSE)

VCSE Sector in South Yorkshire

 South Yorkshire is home to over 6000 diverse VCSE organisations undertaking wide ranging activities and services that impact positively on the health and wellbeing of our communities. This includes small grassroots community associations, community groups, voluntary organisations, faith groups, charities, not for private profit companies and social enterprises. It also includes the creative and cultural sector.



How will we work in real partnership with VCSE?

- We hugely value the contribution of VCSE organisations to our health and care landscape, and the Integrated Care System is committed to embedding and strengthening the role of the VCSE sector as an equal partner in our work, fulfilling its potential to collaborate on strategy, delivery, engagement and insight.
- To enable and support this, we are working with our VCSE partners to develop a VCSE Alliance. The Alliance will enable VCSE organisations across South Yorkshire (and Bassetlaw where appropriate) to participate in system work in meaningful ways including networking, information exchange, co-designing new opportunities and participating in South Yorkshire level ICS meetings. The Alliance will connect with VCSE organisations and networks in our Places, and will be guided by a Steering Group of VCSE infrastructure leaders (please see diagram).
- A new VCSE and ICS Memorandum of Understanding describes our relationship underpinned by shared values, principles, responsibilities and priorities. This has been co-designed by VCSE partners and conversations with NHS and Local Authority partners and will be adopted in 2022/23.
- Our 'enabling' priorities for partnership working include strengthening our VCSE commissioning and investment approach, enhancing communications, and building a culture of parity of esteem.



What will we do together?

- We will build on successful work already underway such as social prescribing and identify new opportunities and potential for collaboration across our system partners and transformation priorities.
- We have started a conversation about how we value and support the workforce both paid and unpaid across all sectors in South Yorkshire and will co-design a new workforce strategy with Voluntary, Community and Social Enterprise Sector partners.
- We will continue to utilise VCSE expertise in our work with VCSE, NHS and Local Authority partners to strengthen and support volunteering across South Yorkshire.
- We are scoping opportunities to understand how our Voluntary, Community and Social Enterprise Sector partners can work with us to improve outcomes on a range of pathways, including mental health, maternity and stroke.
- With our renewed commitment to enhancing population health and tackling health inequalities, we will harness VCSE expertise and knowledge of our local communities of geography and diversity. Building on our experience of and learning from collaboration during the Covid-19 pandemic, and as we look ahead to a cost of living crisis, this has never been more important.

Working with other agencies including Housing and Education

- Place Partnerships in South Yorkshire are already facilitating multi-agency collaboration that enables consideration of the physical, social, structural, cultural and commercial environments people live in that directly impact on their ability to lead a healthy life.
- To enable children and young people to have the best start in life we will build on the existing relationships to strengthen our work with education providers. Education is a key factor that influences the health and wellbeing of children, young people. Not being in education increases the risk of a range of negative outcomes for young people. Increasing access to a highquality education will reduce inequalities in educational outcomes and enable children to maximise their capabilities and have control over their lives.



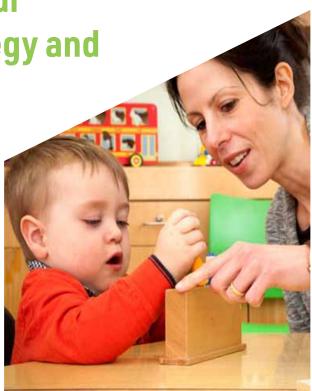
- To enable people in South Yorkshire to live longer healthier lives we will build on our existing relationships with adult focused education providers, including through the development of the South Yorkshire Skills Strategy. Life long learning is important to enable people to develop the skills to work and for career progression so we will work with Life-Long learning delivery partners and the VCSE to ensure people continue to learn the skills they need to thrive in the fast-changing world of the 21st Century.
- We will also build on existing relationships with housing providers to support people to access the right housing support they need, as the quality of housing, house tenure and affordability are all linked to health and wellbeing.
- As a South Yorkshire Integrated Care
 Partnership we will strengthen multiagency
 collaboration through our Place Partnerships
 and facilitate work with other agencies
 across South Yorkshire where it adds value
 to do so. This could be on planning for cross
 boundary housing developments, engaging
 with communities and public transport
 providers across South Yorkshire to improve
 links, walking and cycling routes and further
 developing sustainable and active travel.
- We will also build partnerships approaches with others, including working with the Police and Crime Commissioner. As part of this we are commencing partnership working with the violence reduction unit to prevent and reduce crime.

Harnessing our collective role as 'Anchor Institutions' - Working through our Partnerships to develop an Anchor System

- Health, Local Authorities, Universities and other large employing organisation in our communities are 'anchor institutions' which have an important presence in an area. This is usually through a combination of being largescale employers; the largest purchasers of goods and services; controlling large areas of land; and having relatively fixed assets. The term anchor is used because they are unlikely to relocate given their connection to their local community. They can make a real difference to social determinants and have a significant influence on the health and wellbeing of communities.
- In South Yorkshire we are committed to collectively harness our role as 'Anchor Institutions' across the NHS, Local Authorities, Universities, particularly maximising our collective contribution as large scale employers to support the health and wellbeing of our staff, develop the health and care workforce for the future, creating a more inclusive and sustainable economy.

Enabling delivery of our Integrated Care Strategy and measuring success

- To enable delivery of our Integrated Care Strategy we will develop a delivery plan overseen by our Integrated Care Partnership.
- The NHS South Yorkshire Five Year Joint Forward Plan to be developed by March 2023 will be a key delivery vehicle for our Integrated Care Strategy.
- We will also develop an outcomes framework to inform and monitor our progress towards our goals and vision.
- The framework will include the multiple levels at which we need to track our progress as reflected in this strategy. We will develop a dashboard to present the selected measures which will comprise:
 - an assessment of the health needs of the South Yorkshire population. This has been largely completed and was used as the basis of this strategy
 - metrics that reflect the high level goals that underpin our vision
 - the ambitions we have set ourselves where we will work differently as a partnership



- the metrics that reflect our shared outcomes. These are largely based on existing place plans and outcomes frameworks
- the measures and metrics (or proxy measures) that are used by each partner in the partnership to inform and monitor their input to our shared outcomes, ambitions and vision
- An initial set of proposed metrics are set out in the appendix but will be developed further alongside the progressing of the partnership and partner delivery plans to make sure our actions can be linked to the outcomes we want to achieve

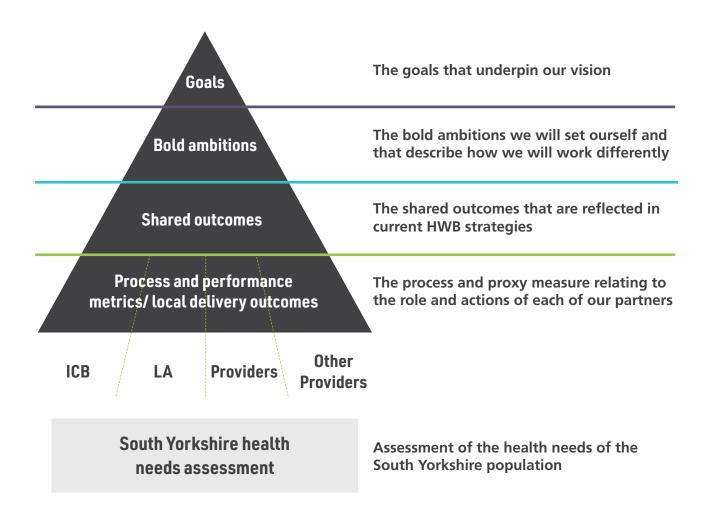




GG

Having a work life balance is crucial to my health and wellbeing, working keeps me well as I love what I do, but on the flipside sharing quality time with my friends and family really makes my heart sing.

Quote from a South Yorkshire Citizen submitted as part of the What Matters to You exercise



My health is central to my hopes, ambitions and opportunities.

Quote from a South Yorkshire Citizen submitted as part of the What Matters to You exercise



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Appendices

Full Engagement Report:

https://syics.co.uk/application/files/7516/7094/4690/Final_phase_2_report.pdf

South Yorkshire Population Health Needs Assessment: https://syics.co.uk/download_file/2837/0

Developing our Outcome Framework: https://syics.co.uk/download_file/2836/0

Appendices

Strategy/Plan	Place	Link
Health & Wellbeing Strategies in South Yorkshire	Barnsley	Barnsley Health and Wellbeing Strategy 2021 – 2030:
	Rotherham	rotherham-joint-health-and-wellbeing-strategy (rotherhamhealthandwellbeing.org.uk)
	Doncaster	051115 i9 HWB_Strategy update 2015 Ap4.pdf (moderngov.co.uk)
	Sheffield	Joint Health Wellbeing Strategy 2019-24.pdf (sheffield.gov.uk)
Place Health and Care Plans	Barnsley	Barnsley Health and Care Plan Refresh 22/23
	Rotherham	Rotherham Integrated Care P Place Plan appendix. pdf
	Doncaster	DCCG-Place-Plan-Refresh-2019-22-web-FINAL. pdf (doncasterccg.nhs.uk)
	Sheffield	Shaping-Sheffield-Main-Doc-Final.pdf (sheffieldhcp.org.uk)
South Yorkshire Strategic Five Year Plan	South Yorkshire Strategic Five Year Plan	Five Year Plan (2019 - 2024): SYB ICS (syics.co.uk)
	South Yorkshire Green & Sustainability Plan	South Yorkshire Green & Sustainability Plan
South Yorkshire Strategic Economic Plan	South Yorkshire Strategic Economic Plan	SCR_SEP_Full_Draft_Ja (southyorkshire-ca.gov.uk)
South Yorkshire Housing Prospectus	South Yorkshire Housing Prospectus	Home I Yorkshire Housing
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South Yorkshire Integrated Care Partnership Membership Nominations

	Barnsley	Doncaster	Rotherham	Sheffield	South Yorkshire Wide
Health and Wellbeing Board Chairs and other elected members	Councillor Caroline Makinson	Councillor Rachael Blake Councillor Nigel Ball	Councillor David Roche	Councillor Angela Argenzio	
Local Authority Chief Executive		Damian Allen, Chief Executive DMBC	Sharon Kemp, Chief Executive RMBC		
ICB Executive and Non-Executive Members					Pearse Butler, ICB Chair Gavin Boyle, ICB Chief Executive (Vice chair) Will Cleary-Gray, ICB Executive Director of Strategy and Partnerships Christine Joy, ICB Chief People Officer David Crichton, ICB Chief Medical Officer Cathy Winfield, Chief Nursing Officer Wendy Lowder, ICB Executive Place Director
Public Health		Rupert Suckling, Director of Public Health		Greg Fell, Director of Public Health	
Adult Social Care				Alexis Chappell, Director of Adult Heath and Social Care	
Children and Young People	Carly Speechley , Director of Children and Families				Suzie Joyner. Strategic Director Children services, Rotherham (TBC)



	Barnsley	Doncaster	Rotherham	Sheffield	South Yorkshire Wide
Voluntary, Community and Social Enterprise Sector		Dolly Agoro Co-chair Doncaster inclusion and fairness forum	Kate Davis Chief Executive Crossroads, Rotherham	Helen Steers Director of Strategic Partnerships, VAS	
Hospitals	Sheena McDonnell, Chair - Barnsley Hospital		Richard Jenkins, Chief Executive Rotherham and Barnsely Hospitals		
Primary Care			Dr Jason Page GP Primary Care		
Housing	Kathy McArdle, Service Director - Regeneration and Culture			Juliann Hall Co-Director of Care, Health and Wellbeing, SYHA	
Education					
South Yorkshire Mayoral Combined Authority					Oliver Coppard (Chair)
Workforce					
Mental Health	Adrian England, Independent Chair – Mental Health, Learning Disability and Autism Partnership				

Glossary

ICS	Integrated Care System	Statutory Integrated Care Systems (ICSs) are being set up to bring local authorities, NHS organisations, combined authorities and the Voluntary, Community and Social Enterprise Sector together with local communities to take collective responsibility for planning services, improving health and wellbeing and reducing inequalities.	
ICP	Integrated Care Partnership	A statutory committee jointly convened by Local Government and the Integrated Care Board, to bring together the NHS with Local Authorities, Combined Authorities, the Voluntary, Community and Social Enterprise Sector and other partners. The ICP is set up to facilitate joint action to improve health and care outcomes and experiences across their populations and reduce health inequalities.	
ICB	Integrated Care Board	An NHS organisation responsible for planning and funding NHS services, in our case NHS South Yorkshire established in July 2022. NHS South Yorkshire has been established with Partner Board Members including Healthwatch, Mental Health and the Voluntary Care Sector representation.	
SYMCA	South Yorkshire Mayoral Combined Authority	A formal partnership of our four local authorities in South Yorkshire: Barnsley Metropolitan Borough Council, Doncaster Council (City of Doncaster Council from January 2023), Rotherham Metropolitan Borough Council and Sheffield City Council. It covers the same population and is led by an elected Mayor.	
VCSE	Voluntary, Community, Social Enterprise Sector	VCSE sector is a term that refers to the voluntary, community and social enterprise sector, as all working with a social purpose.	
LE	Life expectancy	Life expectancy (LE) is an estimate of how many years a person might be expected to live, whereas healthy life expectancy (HLE)	
HLE	Healthy life expectancy	is an estimate of how many years they might live in a 'healthy' st. Both of them are key summary measure of a population's health.	

Core20 Plus 5	Core20 Plus 5 Framework	The 'Core 20 Plus 5' an NHS England health inequalities framework to support local health services to focus action the most deprived neighbourhoods (core20), locally identified groups (plus) and Five clinical areas that will impact significantly on health inequalities if we accelerate improvement: maternity, severe mental illness, chronic respiratory disease, early cancer diagnosis and hypertension and high lipids. Alongside decreasing smoking.
РНМ	Population Health Management	Population health management (PHM) is an approach that uses data and insight to help health and care systems to improve population health and wellbeing, by identifying those individuals and communities who are at risk or are experiencing poor health outcomes and adapting the way we support and care or broader interventions are delivered to improve patient experience, access and outcomes.
BCF	Better Care Fund	The Better Care Fund is a programme that supports local systems to successfully deliver the integration of health and social care in a way that supports person-centred care, sustainability and better outcomes for people and carers.
CQC	Care Quality Commission	The Care Quality Commission, CQC is the independent regulator of health and adult social care in England.
OFSTED	Office of Standards for Education, Children's Services and Skills	Ofsted is the Office for Standards in Education, Children's Services and Skills. They inspect services providing education and skills for learners of all ages.
MSK	Musculoskeletal	Musculoskeletal (MSK) is a medical condition that can affect your joints, bones and muscles. They can range from minor injuries to long term conditions. It is estimated that over 30 million working days are lost to MSK conditions every year in the UK.
CVD	Cardiovascular disease	Cardiovascular disease (CVD) is a general term for conditions affecting the heart or blood vessels. CVD includes all heart and circulatory diseases, including coronary heart disease, angina, heart attack, congenital heart disease, hypertension, stroke and vascular dementia.
SMI	Serious Mental Illness	Serious Mental Illness (SMI) is a term used to describe people with psychological problems that are often so debilitating that their ability to engage in functional and occupational activities is severely impaired. Schizophrenia and bipolar disorder are often referred to as an SMI.

Our thanks

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- Barnsley College, Dark Nights
- Barnsley Parent Carer Forum
- Barnsley Youth Council
- Beacon Coffee Morning (Carers)
- Breathing Space Rotherham
- Chilypep
- Citizens Advice Event, Barnsley Library
- Doncaster District Deaf Society, Happy Hands
- Doncaster Health Ambassadors
- Healthwatch South Yorkshire
- KickBack Recovery
- Newlife
- Roshni Asian Sheffield Women's Group
- Rotherham Ethnic Minority Alliance
- Safeguarding Event, Barnsley Market
- Salvation Army Goldthorpe Foodbank
- Sheffield Mansel Primary School
- South Yorkshire Stroke Survivor and Carer Panel
- Speakup for Autism
- SY Military Veterans support
- TransBarnsley
- Umbrella Winter Wellbeing

SOUTH YORKSHIRE INTEGRATED CARE PARTNERSHIP STRATEGY

Working together to build a healthier South Yorkshire our Initial Integrated Care Strategy

March 2023

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