



North East and
North Cumbria

Our first year...



Annual report summary

2022-23

Our first year

On 1 July 2022, we brought eight clinical commissioning groups (CCGs) together to form our new North East and North Cumbria Integrated Care Board (ICB). Take a look at what we have achieved, in partnership with others, across our region in a busy first year.

3,200,000
people to care for



BUDGET
£7B

3 year plan

Better health and wellbeing for all

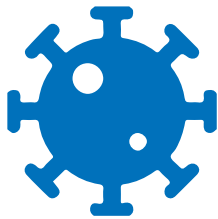


North East North Cumbria Health & Care Partnership



Developed a new region-wide partnership

Made plans to invest **£35M** over three years, to improve the health of some of our most deprived communities across the North East and North Cumbria



Delivered our biggest flu and COVID-19 vaccination programmes with 2.3 million jabs

16,000 women treated for uncomplicated urinary tract infections in local pharmacies - resulting in improved access and

47% reduction in antibiotic prescribing




Worked across the region to improve the transfer of care for patients



£29m additional government funding to start this process of change in health and care organisations across the region


Improved access to primary care services:




1.5 million appointments every month and an increase in the number of evening and weekend slots

Worked collectively to tackle waiting times and recovery from the pandemic



Reduced waits for hospital treatment 

 **Increased diagnostic capacity**

New community diagnostic centres for north Cumbria, Gateshead, and Stockton-on-Tees



Agreed **59min** limit on ambulance handovers which has saved lives



New technology to improve GP telephone systems and triage

Continued to work with our Provider Collaborative which includes our 11 NHS foundation trusts and ambulance services

4 KEY GOALS

- Longer and healthier lives for all of our communities
- Fairer outcomes for all
- Better health and care services
- Giving children and young people the best start in life

75%

of primary care appointments were face to face against a national target of 70%



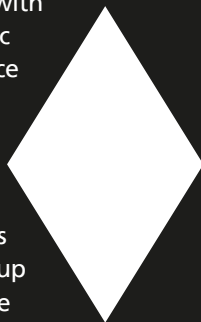
We have continued to innovate and do things differently...



Matched the funding of our 12 councils to support quit smoking projects and programmes

A new health and life science pledge

and plan to create a 'northern diamond' of innovation and research in partnership with our Academic Health Science Network (AHSN) - more than 70 organisations have signed up to this pledge



New involvement and engagement strategy ensuring community voices are heard



Launched plan to become England's greenest region by 2030



New learning and improvement community, securing

£250,000

from The Health Foundation to be **the best at getting better**



Playing our part to get more resources for our region, for health and care and wider economic & social development



Extra support for clinically and socially vulnerable people waiting for surgery, so they have the best chance of a good outcome from their treatment

While we must deal with the here and now, we will be doing our communities a disservice if we don't build on the momentum and commitment we have made to tackle the long-standing inequalities and poor health. The action we take now will impact on our future generations.

**Samantha Allen,
Chief executive**

Chair's foreword

**Professor
Sir Liam Donaldson**



Over the past few years, I've seen first-hand the passion and commitment of people across our health and care organisations who are all focused on doing the very best for our region.

I joined the region almost two years ago as chair of the Integrated Care System (ICS) and then as chair for the Integrated Care Board (ICB). Earlier in my career, I was responsible for the NHS in the former Northern Region, that had a very similar geographical footprint to our present ICS. It has given me a unique opportunity to continue a longstanding passion and commitment in serving the people of the North East and North Cumbria.

Main achievements

So it is with particular pleasure that I introduce this report which sets the main achievements of our first nine months as a new organisation, as well as the challenges we have faced. We are very proud of our strong partnerships and collaborative working. These have been built on over many years and are pivotal to our journey of delivering a fundamental change – not just to help people to live longer, but to increase their quality of life by making those extra years a time of health and freedom from serious illness.

It is well documented that our region has high levels of unemployment, low levels of decent housing, and significant areas of deprivation.

These adverse conditions contribute to some of the starkest health inequalities, early death rates and highest sickness levels in England, driving much of the pressure that health and social care services struggle to manage.

Partnership

This year we established our Integrated Care Partnership (ICP) - a committee of the ICB and the 14 local authorities from across the North East and North Cumbria which brings together local councils, hospitals, community services, primary care, hospices, and voluntary, community and social enterprise (VCSE) organisations and Healthwatch. Through this partnership we launched a new and far-reaching plan called 'Better health and wellbeing for all'. It sets out how we are working together to help people to stay healthy by addressing the causes of ill health and preventing diseases in the first place, and to improve mental health and wellbeing.

We have set demanding goals for 2030 to tackle the key causes of early death in our region - such as smoking, alcohol, obesity, heart disease, substance misuse and suicide. These goals include raising healthy life expectancy, reducing suicide rates, and cutting smoking levels from 13 per cent of adults to five per cent by 2030, as well as giving our children and young people the best start in life.

Ambitious vision

No organisation can tackle these deep-seated problems alone but with the strength of our NHS, local authorities, VCSE organisations and other partners, we know we can make a real difference. We have set out an ambitious

vision that foresees all our communities are able to live healthier and longer lives. We are now poised to bring this plan to life and really make it happen, with the ICB and ICP creating a new momentum to do this.

More innovations

We also want to drive forward even more innovations and harness the pioneering spirit that already exists here. A new research and innovation partnerships forum will help us to do this whilst working in partnership with the National Institute for Health and Care Research, Applied Research Collaborations (NIHR ARCs) and many more.

We are determined to create a 'northern diamond' of innovation, research, and regional economic impact, formed between the university cities of the north, to rival the dominance of the 'golden triangle' of Oxford, Cambridge, and London in the south. We have already launched and signed up to a

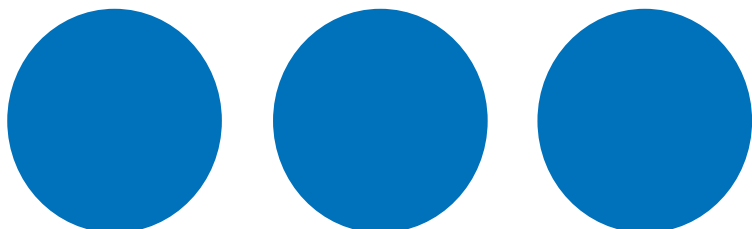
Health and Life Science pledge for our region and this year's Bright Ideas in Health awards showcased the immense talent and creativity that we have here.

It was moving and inspiring to see so many practical and innovative solutions being developed and bringing benefits to help transform health and care for today's patients.

Deepest gratitude

Finally, I wanted to express my deepest gratitude to all our health and care teams both within the ICB and across the region for their support to get us to where we are now, and as we embark on delivering our plan in the years ahead.

I am incredibly proud to be part of a region which has such a rich history of joint working, and a passion and commitment for doing the very best for the people we serve.



Chief executive's statement

Samantha Allen



As I write this, our new organisation – the Integrated Care Board (ICB) – is almost one year old, having launched on 1 July 2022.

While we said that things wouldn't change overnight, and our first year would be one of transition for our new organisation, we have much to be proud of and have achieved a lot together in a short space of time.

Early on we set out some key ambitions and values for our organisation which continue to be at the heart of what we do - many of which I hope you can start to see reflected in this report.

A year of challenges

While we knew this year would be a challenging one, as we began our recovery from the pandemic, I don't think we imagined we would face a period like the one we have just experienced.

It has been one of significant and sustained pressures on health and care services which hit its peak in the winter, and more recently we have had the challenges of industrial action too.

While we were prepared, and our health and care teams worked tirelessly to ensure the very best care, we know these pressures will inevitably have had an impact on the

experiences of our patients and on the wellbeing of our workforce.

I would like to pay tribute to all our teams across health and care, and all the unpaid carers in our communities, who have provided care and support to their families, friends and neighbours. All have gone above and beyond, and their efforts have been extraordinary. We are grateful for the support they all provide and to those who volunteer their time, fundraise, volunteer and make charitable donations to support our NHS and community and voluntary organisations.

Change

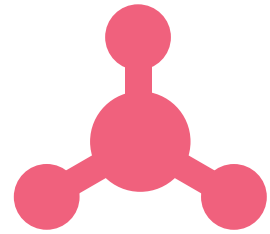
Organisational change is also not without its challenges - moving from eight clinical commissioning groups, each with its own established ways of working, to create one organisation, takes time and resilience. My thanks to colleagues who have been part of creating the Integrated Care Board and all who work in it.

I would also like to acknowledge the contribution of colleagues who have moved on to new futures as part of these changes. We are now focused on the development of a new multi-professional clinical leadership strategy which we will drive through our evolving senior leadership team, and the setting up of all the new processes we need to have in place to operate together as an organisation.

Despite these challenges and demands we have made inroads to reduce waiting times, improve access to primary care, innovate and do things differently across the region.

Better health & wellbeing for all...

Our integrated care strategy for the North East and North Cumbria



Our four key goals...



Longer & healthier lives

Reducing the gap between how long people live in the North East and North Cumbria compared to the rest of England



Fairer outcomes for all

As not everyone has the same opportunities to be healthy because of where they live, their income, education and employment



Better health & care services

Not just high-quality services but the same quality no matter where you live and who you are



Giving children and young people the best start in life

Enabling them to thrive, have great futures and improve lives for generations to come

Our supporting goals...



Reduce the gap in life expectancy for people in the most excluded groups



Halve the difference in the suicide rate in our region compared to England



Reduce smoking rates from 13% of adults in 2020 to 5% or below by 2030



Increase the number of children, young people and adults with a healthy weight



Reduce alcohol related admissions to hospital by 20%



Reduce drug related deaths by at least 15% by 2030



Reduce social isolation, especially for older and vulnerable people



Increase the percentage of cancers diagnosed at the early stages

We will do this by...



Supporting and growing our workforce



Harnessing new technology and making best use of data



Making the best use of our resources



Being England's greenest region by 2030



Listening to and involving our communities

This is a summary of our strategy - the full document is on our website:
www.northeastnorthcumbria.nhs.uk/integratedcarepartnership

Our plan

People in our region still die younger and live with illnesses for longer than in other parts of the country. It's a situation we know has been exacerbated by the pandemic and the cost-of-living crisis, and it is having the greatest impact on those living in our most deprived communities.

Reducing health inequalities

One of the core purposes of our Integrated Care Board is to reduce health inequalities and improve outcomes through the lens of their access to and experience of healthcare services. To do this we need to work in partnership with all, which is why a new Integrated Care Partnership for the North East and North Cumbria has been formed. Part of its early work has been to develop a plan about what we are going to focus on in our first year and beyond.

Ambitious plan

So, together with our Integrated Care Partnership we launched our new ambitious plan called 'Better health and wellbeing for all' - which our chair, Professor Sir Liam Donaldson, covers in more detail in his introduction. This plan sets out the key actions we will take to enable our communities to live longer and healthier lives.

Alongside this we have made a commitment to invest £35 million as part of a three-year programme to improve health in some of our most deprived communities.

Working with our directors of public health and local authorities we have a system-wide and multi-agency approach to co-ordinate our efforts to prevent ill health, tackle inequalities and support the NHS to play a greater role in economic regeneration and addressing the social determinants of health.

In our first year we are investing £13.6m to support a range of initiatives across the region, including extra support for the Deep End, a network of GP practices in our most deprived communities, as well as programmes to reduce the harm caused by alcohol and smoking.

Helping people quit smoking

Supporting our communities to quit smoking remains one of the single biggest things we can do to improve people's health in our region. This year we joined forces with our directors of public health and agreed to match the funding of 12 local councils to help create better outcomes for people and support programmes to reduce smoking.

Support for patients

We have also launched an innovative programme to provide extra support for people waiting for surgery who are from clinically and socially vulnerable groups. This waiting well programme helps patients make changes to have the best chance of a good outcome after surgery. It's been a truly collaborative programme and shows how we can make innovative use of data to target support for patients who need it the most.

We want to put improvement at the heart of everything we do; tackling the biggest challenges and priorities with an improvement and learning approach. Importantly, building on the outstanding history of our region to make a difference. Together we can be the best at getting better.

**Samantha Allen,
Chief executive**

Quality and learning

Working with partners, we are continuing to look at how we can work together to raise standards so that all services are high quality and delivered safely and effectively at the right time and in the right place. There is learning for us all from national inquiries such as the Ockenden Review and East Kent Maternity Report, as well as cases and issues which are closer to home including recent reviews and inquiries into quality of care.

Safety and quality

In the past year, a number of reports have been published about care provided by Tees, Esk and Wear Valleys NHS Foundation Trust. This included an independent system-wide report into concerns and issues raised relating to the safety and quality of child and mental health services at West Lane Hospital and independent investigations into the care of Christie, Nadia and Emily.

Following an inspection by the Care Quality Commission (CQC), care provided in wards for adults with a learning disability were rated as inadequate. It is heart-breaking to read these reports and clearly devastating for patients and their loved ones. I know those working in mental health services also feel sad when reflecting on these and have been determined to make the improvements required.

Opportunity to learn

These reports do provide us all with an opportunity to learn and take action to improve people's experience and their outcomes and that is the focus of the trust.

Our thoughts continue to be with the young people's families, as well as staff who we know are also deeply affected by these incidents.

More to be done

We are continuing to work together across the region, as there is always more to be done, to ensure everyone gets the right care and is treated with respect and dignity. This includes delivering our children and young people's mental health strategic transformation plan.

Shaping a culture of openness, transparency and a focus on learning and improvement has been a priority for us this year and we will continue to work together with our providers and collaboratives across the region.

Working hard

The CQC also published separate inspection reports on the North East Ambulance Service and South Tyneside and Sunderland NHS Foundation Trusts. Both organisations were rated as requiring improvement. I know the teams in both organisations have been very responsive to the feedback from the CQC and are working hard to deliver the improvements required.

This is why we really do want to be 'the best at getting better'. In September we launched a new learning and improvement community which brings together people with a passion for improvement, innovation and change in health and care. I believe this network is the start of something with the potential to make a huge difference for our patients, communities and colleagues.

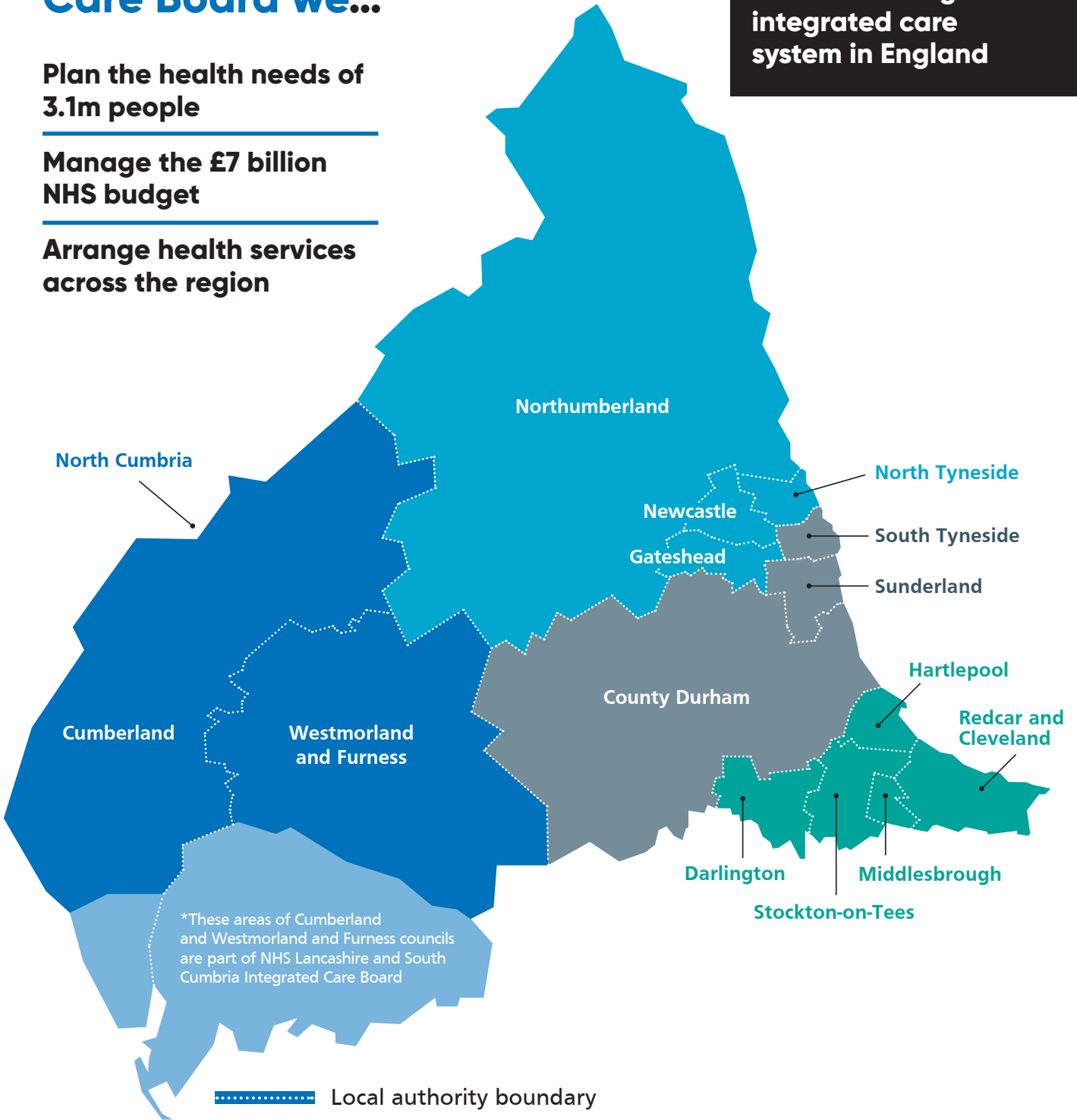
As an Integrated Care Board we...

Plan the health needs of 3.1m people

Manage the £7 billion NHS budget

Arrange health services across the region

We are the largest integrated care system in England



Our wider role in communities

We also hold a much wider role in supporting the economic, social and environmental wellbeing of all our local communities. This year we launched our green plan which sets out our ambitions to be the greenest region in England by 2030, recognising that a healthier planet means healthier people.

With our partners, we are also playing our part in supporting our communities through the cost-of-living crisis, as we know this is impacting on their physical and mental health. I was very open about my concerns, which were raised with Ofgem, about the potential disruption of energy supplies for some of our most vulnerable communities including those who use medical equipment.

As part of this we launched a joint campaign with the Association of Directors of Public Health for the North East and our NHS trusts, to encourage people to join their energy supplier's priority services register.

Engagement and involvement of our communities

The voice of the public, patients, families, and carers is vital in all work we do, as are their lived experiences. Healthwatch continues to enable these voices to be heard and we are delighted to welcome their membership of the ICB.

We are also pleased to share that we've secured funding to support Healthwatch across our region for the coming year. This support is very much welcomed as the ICB continues to embed engagement and involvement in everything we do.

The best place to train and work

Across our region there is more to do to recruit and retain our staff, ensuring equality for all and supporting our diverse workforce with their physical and mental wellbeing.

Work is underway across the region to encourage local people to take up careers in health and social care, with a particular focus on providing equality of access and opportunity.



Our year ahead

As we move from a year of transition to one of delivery, our work will not be without its challenges - but there are also many opportunities for us.

Further responsibilities

We are taking on further responsibilities including the commissioning of pharmacy, dentistry and optometry services previously managed by NHS England.

Running cost reduction

As ever we will need to manage our resources wisely and this includes the wellbeing of our workforce. This year will be tougher with an ask that we reduce our running costs in the Integrated Care Board by 30 per cent.

30% ICB running cost reduction requirement

This is against a backdrop of inflation and agreed pay increases. We have worked with our NHS partners to agree a financial plan with NHS England which will see our system with a deficit plan of £49.9m for 2023/24.

We also have some unique challenges in our region which have left us in a position of greater health and care need, made worse by the

pandemic and more complex geography which make it more expensive to provide services. The formula for allocation of growth funding means we have seen a reduction in this too - despite the complexities of our region.

Realistic plan

Our priority now is to develop a realistic plan and continue our work to develop a medium and long-term financial recovery plan over the next three to five years. We will make the most of opportunities presented through wider public sector reform, greater collaboration between our NHS providers and engaging our wider partners and communities to support more effective and efficient use of healthcare services.

Hewitt Review

It's good to see that the themes and aspirations for the future of integrated care systems set out in the recent Government's Hewitt Review are already captured in our plans and ways of working. Over the months ahead we will consider this report and seek views from our area integrated care partnerships, Integrated Care Board members and wider partners on how it may influence and determine the way we work.

Looking to the future

This year we have celebrated the NHS's 75th birthday and as we reflect on how far we have come; we will be looking to the future too.

We have a balance to strike. While we must deal with the here and now, we will be doing our communities a disservice if we don't build on the momentum and commitment we have made to tackle long-standing inequalities and poor health. The action we take now will impact future generations in the region. This will be a key focus in the years ahead.

Thank you

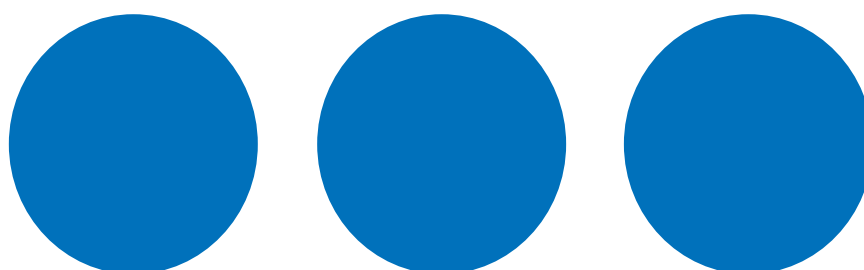
Finally, I would like to give a special mention to our predecessor organisations, our eight clinical commissioning groups. While many of their staff are now part of our new organisation, I would like to thank them for all they have done to care for our communities and for the strong foundations they have built with partners across the region over the past decade.

I have spent a lot of time meeting people and visiting places across the region. What has stood out for me is people's commitment, passion and drive to improve health and care for our communities.

I would like to thank all our staff, health and care teams and partners, including the voluntary, community and social enterprise sector, for the vital roles they all play and for their ongoing support.

Special thanks are reserved for our patients and the people who live in our region. I look forward to working with you all in the years ahead.

Samantha Allen
Chief executive




Performance and improvement

GP practice appointments

Our region's GP surgeries provide more than 1.5 million appointments a month and on one of our busiest days there were a staggering 90,000 appointments. Despite this, data shows for March that around 75 per cent of appointments were face to face compared to 70 per cent nationally - with many patients preferring phone or online options where these are right for their needs.

Around half of all appointments are with GPs, with wider practice staff like nurses, healthcare assistants, physiotherapists, social prescribers and pharmacists also providing appointments and helping many more patients. This clearly shows the move to a multidisciplinary model of working within general practice in our region.

**Our GP surgeries
provide over**
1.5M
**appointments
a month**



Improving access

There's been a huge amount of work across the region to improve access to primary care. Groups of local practices known as primary care networks (PCNs) have added extra appointments outside normal working hours – increasing the number of evening or weekend slots by up to 30 per cent in some areas since autumn last year.

Other innovations to improve patients' access including better telephone systems and triaging, and more online video appointments, seven days a week including early mornings, evenings, and weekends.

Pharmacy services

Across our pharmacies we are seeing more services being developed that people would have traditionally gone to their GP surgery for.

Most recently this has included treatment for urinary tract infections (UTIs) with more than 15,000 women treated by community pharmacists and a reduction in antibiotic prescribing by 47 per cent. This project has been adopted nationally as part of NHS England's Primary Care Recovery Plan, and the evidence and evaluation from our pilot was a key part of it.

Integrating primary care

This year saw the publication by NHS England of the Fuller report and the subsequent Primary Care Recovery Plan, which outlines the next steps for integrating primary care focusing on improving access, experience, and outcomes for our communities.

We welcome these reports and have been working through their recommendations as we further develop the way we work. What is clear is that general practice and primary care is a vital and integral part of our health and care system for our patients and there is a clear consensus from this report about what we can do differently.

Planned hospital care

In planned hospital care, we have virtually eliminated two-year waits for treatment and made significant reductions to the number of people waiting more than 78 weeks. Overall, we perform well compared to other parts of the country for other waiting times such as the A&E four-hour standard and faster diagnosis for cancer.

Significant pressures

That said, these are still areas of significant pressure, and we are not where we want to be, with more to do in areas such as neuro-developmental disorder, mental health and ambitious plans to improve the diagnosis time for cancer.

Although media attention has been on delays in ambulance handovers and long waits in A&E, we know these are a symptom of pressure across the health and care system which includes delays in the time it takes for patients to leave hospital after their treatment.

More than
15,000
women treated
by community
pharmacists
for UTIs

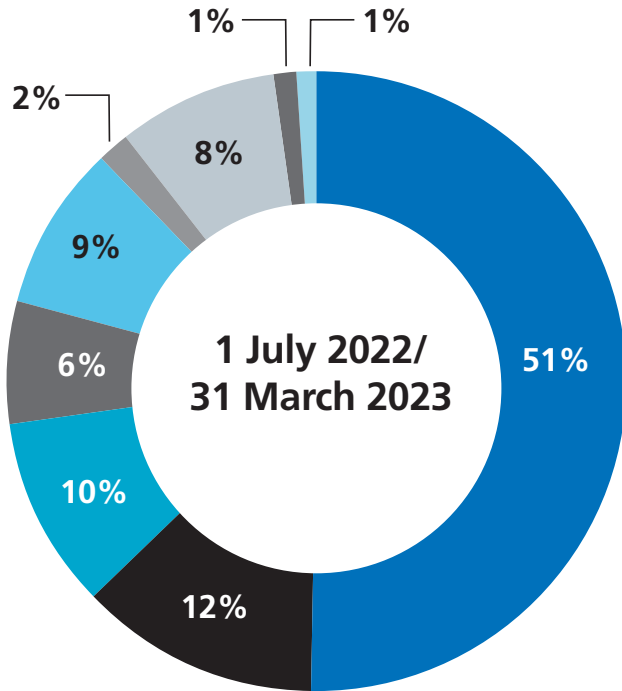


We have virtually
eliminated
2 YEAR
waits for treatment



Our finances

Where the money goes:



- Acute services: £2.61bn
- Mental health services: £644m
- Community health services: £522m
- Continuing care: £319m
- Prescribing: £454m
- Primary care: £86m
- Primary care delegated: £430m
- Other services: £63m
- Running costs: £42m

In our first year, the ICB demonstrated a strong financial performance by fulfilling all financial duties for 2022/23.

We achieved an overall surplus of £2.74 million, due to spending less on administration expenses. This has enabled us to allocate extra funds to essential frontline healthcare services, as we offset deficits in NHS provider trusts within the system.

£2.74m

**ICB overall surplus
supporting NHS
provider overspend**

£48.46m
of efficiencies
implemented



Efficiencies

We implemented various efficiencies totalling £48.46m, including improvements in medicines optimisation and in the delivery of individual care packages.

ICS financial position

Collaborating with other system partners, a surplus of £56.16 million was achieved at an Integrated Care System (ICS) level. This surplus was primarily the result of additional income received by one of the provider trusts following a court case related to building quality issues.

Capital expenditure met

The ICB did not receive direct capital resources, however, overall capital expenditure across the ICS was managed within the funding allocation and a joint capital resource plan for 2023/24 has been agreed.

Challenges ahead

Looking ahead, the coming year poses challenges as the ICB is set to receive below average growth funding, along with increased cost pressures and regional complexities.

To address this, a deficit of £50 million for the ICS in 2023/24 has been agreed with NHS England and we are actively developing a financial recovery plan over the next three to five years.

£50m
ICS deficit agreed
with NHS England
for 2023/24



Want to know more?

If you would like to find out more about the North East and North Cumbria Integrated Care Board and would like to view our annual report and accounts in full, please go to: [northeastnorthcumbria.nhs.uk/publications](https://www.northeastnorthcumbria.nhs.uk/publications)

