Essex Integrated Care Board (ICB) Population Health Improvement Plan (PHIP) and Neighbourhood Health

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‘Making health services better in Essex’



Purpose of the PHIP for Essex

- Sets out NHS Essex ICB's five-year **strategic ambitions**, one-to-two-year (2026-2028) **commissioning intentions**, and **delivery plans**
- Sets out the **'what, why and how'** we will commission NHS services for our two million Essex residents to ensure we:
  - Improve health outcomes
  - Reduce inequalities
  - Deliver sustainable high-quality services for Essex's population

- Sets out how investment will shift over time, including a planned movement of activity and resources from acute settings into neighbourhood and preventative services
- Built from existing strategies across Essex, including Health and Wellbeing Board strategies
- Aligns with the NHS 10-Year Plan shifts:
  - Hospital → Community
  - Analogue → Digital
  - Treatment → Prevention

Outcome ambitions for the population

Reducing Health Inequalities

We will…

- Understand what health inequalities exist in experience, access and outcomes across Essex.
- Plan and deliver ways to address specific inequalities experienced by individuals and communities.

So that people in Essex have…

- Improved life expectancy and healthy life expectancy in deprived communities
- Narrower gaps in access, waiting times and outcomes for protected and priority groups
- Better performance against Core20PLUS5 indicators
- Strengthened patient experience and engagement among those who face the greatest health barriers

Start Well

We will…

- Support babies, children, young people and families to build strong foundations for lifelong health and wellbeing through early help, prevention and joined-up support from conception through to adulthood.

So that people in Essex have…

- Improved outcomes and experience
- Safer maternity and neonatal care
- Better early childhood development
- Reduced inappropriate prescribing
- Strengthened mental health support in schools
- Better access to high-quality, inclusive services for those with SEND and neurodiversity

Live Well

We will…

- Help people to stay well and manage their health and health conditions so that they can maintain independence and make informed choices to live longer, healthier lives.

So that people in Essex have…

- Increased healthy life expectancy
- Higher uptake of prevention programmes
- Better management of long-term conditions
- Reduced lifestyle-related risks
- Timely access to primary, community and elective services
- Strengthened personalised and community-based support for people with complex needs, learning disabilities and autism

Feel Well

We will…

- Offer good mental and emotional wellbeing for all, improve access to mental health services in the community and reduce reliance on inpatient and inappropriate out of area beds
- Improve access to care that meets people's mental health needs when they need it most, including in an emergency

So that people in Essex have…

- Improved access to timely and effective psychological therapies
- Reduced premature mortality and suicide
- Increased uptake of physical health checks
- Expanded community-based and school-based mental health support
- Greater access to employment for people with severe mental illness
- Reduced inappropriate out-of-area placements
- Fewer inpatient admissions for people with learning disabilities or autism

Age Well

We will…

- Support people to remain active, independent and as healthy as possible as they grow older
- Ensure services promote healthy ageing, reduce avoidable ill health and hospital admission, particularly for those who are living with frailty

So that people in Essex have…

- Better identification of frailty and dementia
- Reduced avoidable hospital admissions and readmissions
- Fewer falls
- Strengthened community-based nursing support
- Improved outcomes for people living in care homes

Die Well

We will…

- Support people of all ages to live well until the end of their life, with clear care plans to support them to die in their preferred place through delivery of personalised, compassionate care plans

So that people in Essex have…

- Better identification of people approaching the end of life
- Reduced avoidable hospital admissions
- Increased advance care planning
- Increase in people supported to die in their preferred place

Respond Well

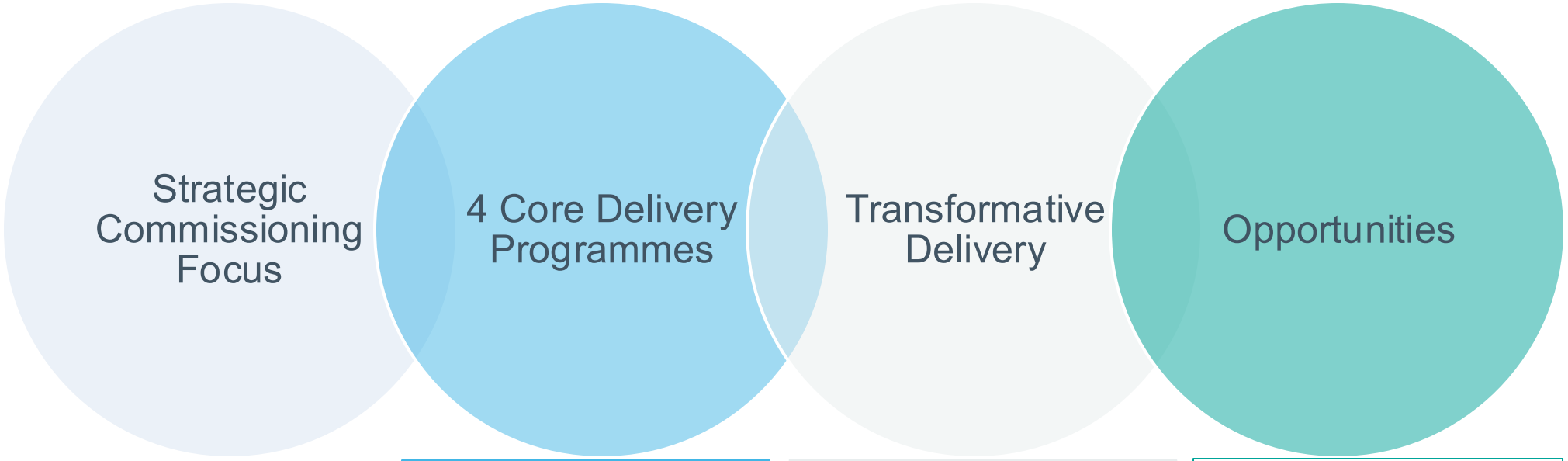
We will…

- Ensure people receive the right care, at the right time, in the right place through coordinated services that people can access when they are needed urgently, or in an emergency to prevent further escalation

So that people in Essex have…

- Faster access to A&E, ambulance and same-day primary care services
- Reduced avoidable non-elective hospital use and delayed discharges
- Increased community and virtual ward capacity
- More effective integrated urgent care pathways
- Improved stroke care through faster diagnostics and timely specialist treatment

NHS Essex ICB's approach to Transformation



- Shift from system wide delivery to targeted strategic commissioning across all services
- Clear focus on what we commission, how we invest, and population outcomes

- The four programmes will drive transformation
- Five-year vision
- One-to-two-year delivery plans
- Work with partners to understand population needs, service gaps and improvement opportunities
- Outcome metrics at project, programme and strategic level

- Respond to the three national shifts
- Use population health management data to inform decisions, model impact, value and outcomes
- Manage the transition to the Model ICB Blueprint
- Demonstrate how learning and best practice will be scaled

- Review and align commissioning across Essex
- Spread best practice and innovation
- Introduce a consistent review framework for clinical, quality, financial and commercial assurance

Delivery Programmes

Neighbourhood Health

- Developing and commissioning effective Neighbourhood Health services
- Improving access to and the quality of services across primary and community care
- Using new and innovative models of commissioning and contracting to support the transformation of care delivered closer to home

Sustainable Hospital Services

Planned Care:

- Improving access to and quality of elective, diagnostics and cancer care services
- Targeted efforts to reduce waiting lists, support early diagnosis of cancer and provision of more diagnostic services in the community
- Deliver 'left shift' of elective care, particularly outpatients, out of hospital and into more community locations

Unplanned Care:

- Developing integrated services that provides access to urgent and emergency care when people need it most
- Delivery of integrated same day services with access to urgent support when it needed

Mental Health & Neurodiversity

- Will bring together an all-age focus on mental health commissioning
- Delivery of strategic commissioning of services to support people with mental health conditions and neurodiversity
- Supporting prevention and early intervention through effective community services to reduce the need for inpatient services, particularly those that are out of area.
- Continue to support improvements in inpatient services, including the quality of care and reduced length of stay

Complex Care

- Brings together a range of services commissioned to support core patient groups: Babies, Children and Young People, Learning Disabilities and Autism (all age), All Age Continuing Care
- Focused on commissioning services that will improve outcomes for each group of patients through a focus on more integrated and personalised care for individuals

Priority work programmes for 2026/27

Multi-disciplinary projects for 2026/27:

1. Developing the Neighbourhood Health Service model for Essex, with a specific focus on frailty in 2026/27
2. Undertaking a system wide strategic commissioning review of community services across Essex
3. Reducing long waiting lists for elective care, including children's services and neurodiversity diagnoses
4. Improving cancer outcomes across Essex, with a plan to focus on earlier diagnosis
5. Developing an approach to Urgent Care across Essex – including Mental Health Urgent and Emergency Care (MH UEC) to support people in crisis
6. Procuring Talking Therapies and Psychological Therapies for people with Serious Mental Illness (SMI)
7. Undertaking a quality review of perinatal services
8. Delivering an Estates strategy, including Community Hospitals, Neighbourhood Health Centres and Primary Care
9. Establishing the new organisation, including external relationships

A simple way of organising the system

We propose a clear three-level model:

Essex wide (doing things once where it makes sense)

- Set overall priorities and outcomes
- Allocate NHS resources across Essex
- Commission services where scale is required
- Provide shared infrastructure (e.g. data)
- Deliver core statutory functions (e.g. safeguarding)

Multi-neighbourhood (MN) (five place geographies – where most change happens)

- Joint service planning and commissioning
- Align budgets where possible
- Commission integrated services for local populations
- Accountability for improving outcomes
- Primary level for future commissioning (multi-neighbourhood contracts)

Single neighbourhoods (SN) (38 across Essex – focus on delivery)

- Multi-disciplinary teams supporting local populations
- Coordinate services and improve access
- Focus on prevention and early intervention
- Service delivery level (not governance)
- Delivered through contracts commissioned at neighbourhood level

Neighbourhood priorities

Health inequalities narrowing year on year

- Reduction in premature mortality from CVD, cancer and respiratory disease in our most deprived communities.
- Improvement in Core20PLUS5 indicators.
- Improved school readiness and early years outcomes in our most disadvantaged areas.

A decisive shift towards neighbourhood care delivery and prevention

- 2.5%+ shift of acute expenditure into neighbourhood care over the life of the plan, including a significant shift of outpatients.
- Reducing crisis events through improvement in frailty and end of life identification, care planning.
- Higher uptake of screening and vaccinations.
- Improved long-term condition management, initially focusing on cardiometabolic optimisation.

Timely access and excellent outcomes across services

- Delivery of national standards for elective, diagnostic and cancer pathways by the end of the planning period.
- Reduction in long waits for mental health, community, children's and neurodiversity services.
- Increased patient experience and access scores across NHS services.

Financially and clinically sustainable services across Essex

- In balance over the life of the plan.
- Reduction in high-cost institutional care.
- Specialising and rationalising services where required.
- Commissioning for productivity and value for money.
- Modernised estates.

NHS Essex – Directorate Objectives

Our mission: Making health services better in Essex

Directorate: Neighbourhoods

Primary programme(s):
- Neighbourhood Health

Objective 1: Commission neighbourhood-based models of care

Measured by:
- New neighbourhood health service contractual arrangements

Objective 2: Improve access to primary and community services

Measured by:
- Improved access to primary care
- Improved experience of accessing GP services
- Reduced waits for community services
- Increased levels of activity delivered in neighbourhood settings

Objective 3: Strengthen population health management in neighbourhoods

Measured by:
- Improved hypertension control rates
- Increased uptake of screening and vaccinations
- Increased delivery of diabetes care processes
- Improved uptake of health checks for priority groups

Objective 4: Improve care for frailty and end-of-life

Measured by:
- Increased number of people on the frailty register
- Reduction in avoidable emergency admissions for over 65s
- Increased preferred place of death achieved
- Increased number of people on the end-of-life register

Thank you

Questions and feedback polls

