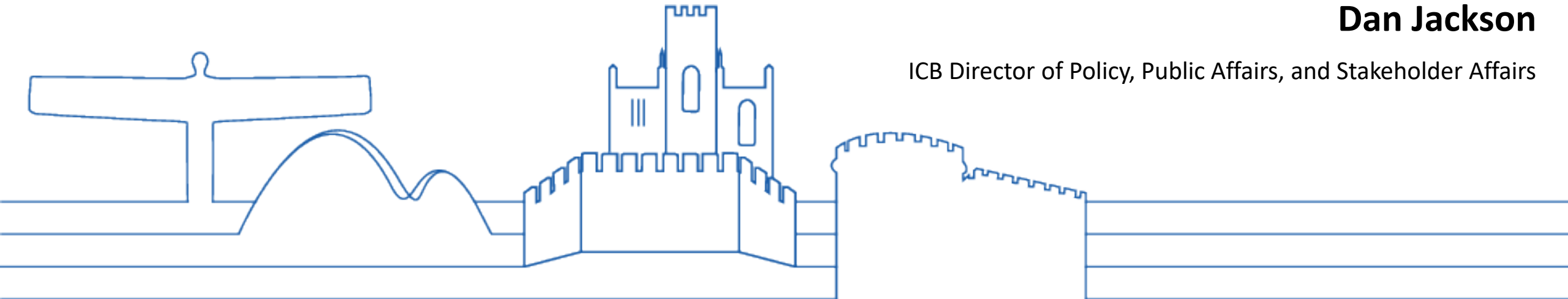


# North East and North Cumbria - system context and need

**Dan Jackson**

ICB Director of Policy, Public Affairs, and Stakeholder Affairs

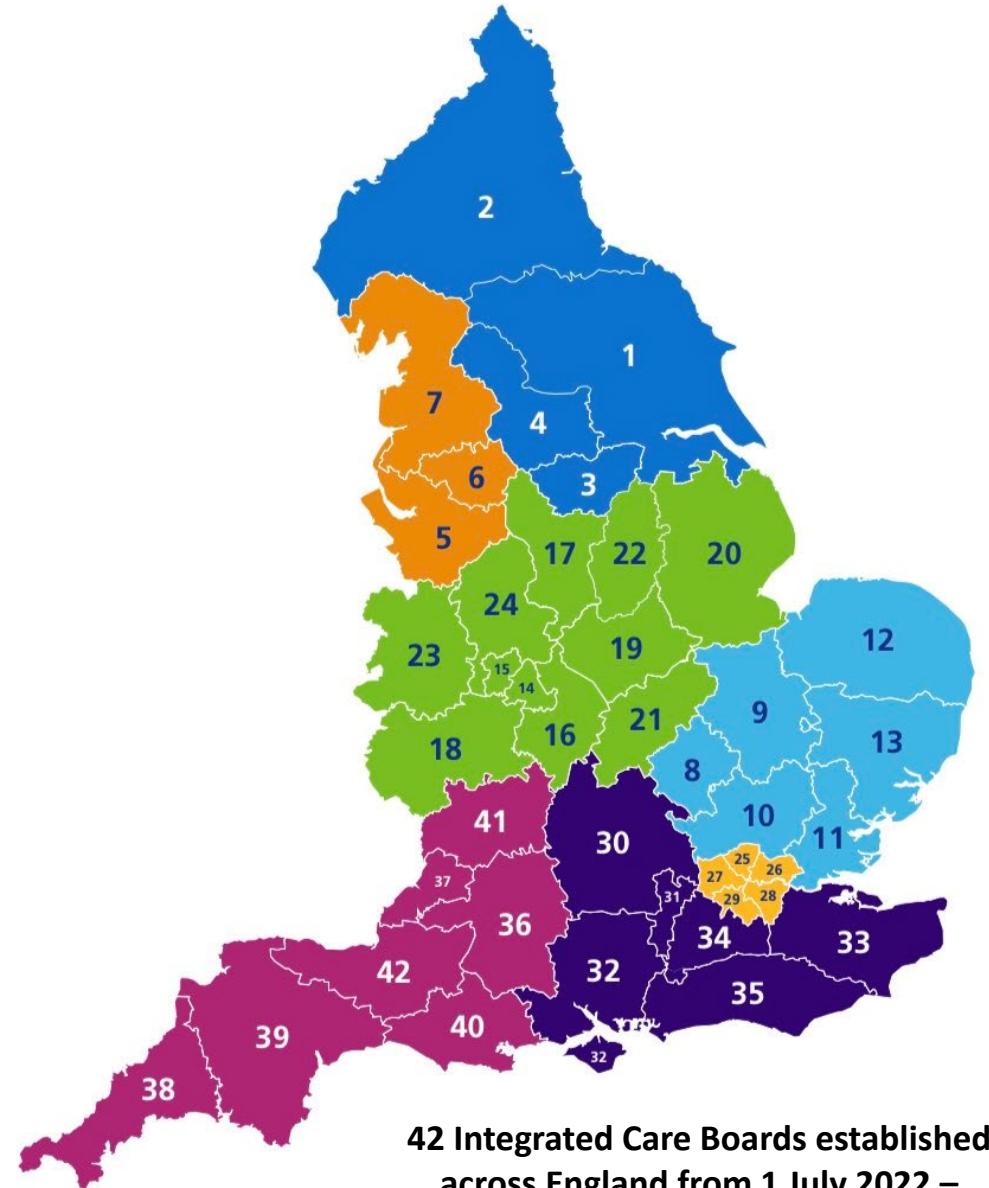


# What's an ICS, ICB and ICP?

**Integrated Care System (ICS)** – includes all of the organisations responsible for health and wellbeing working together across a region to plan and deliver services for our communities.

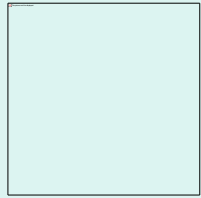
It is not an organisation but works through the following bodies:

- **Integrated Care Board (ICB)** – a statutory NHS organisation that took on the responsibilities of the former CCGs and some of the functions held by NHS England. The ICB will also work with a range of partners at 'place level' in each of the 14 local authority areas in our region.
- **Integrated Care Partnership (ICP)** – a joint committee of the ICB and the 14 local authorities in the ICS area – plus other invited partners - responsible for developing an **integrated care strategy** for the ICS.



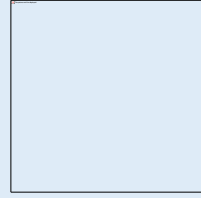
**42 Integrated Care Boards established across England from 1 July 2022 – replacing the former CCGs**

# Strategic aims of ICBs set by government



## 1 Improve outcomes in population health and healthcare

Continue to raise standards so services are high quality and delivered effectively making sure everyone has access to safe quality care whether in the community or in another setting.



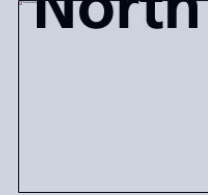
## 2 Tackle inequalities in outcomes, experience and access

Maximise the use of evidence-based tools, research, digital solutions and techniques to support our ambition to deliver better health and wellbeing outcomes in a way that meets the different needs of local people.



## 3 Enhance productivity and value for money

Working with partners in NHS, Social Care, and Voluntary and Community Sector organisations at scale on key strategic initiatives where it makes sense to do so. Harnessing our collective resources and expertise to invest wisely and make faster progress on improving health outcomes.



## 4 Help the NHS support broader social and economic development

Focus on improving population health and well-being through tackling the wider socio-economic determinants of health that have an impact on the communities we serve.

# NHS North East and North Cumbria Integrated Care Board (ICB)



North East and North Cumbria

## North Cumbria

**Population:** 324,000  
**Primary care networks:** 8  
**1 NHS foundation trust:** North Cumbria Integrated Care (NCIC)  
**1 ambulance NHS trust:** North West Ambulance Service  
**2 local authority areas:** Cumberland and Westmorland and Furness (also cover part of NHS Lancashire and South Cumbria ICB\*)

## North

**Population:** 1,079,000  
**Primary care networks:** 22  
**3 NHS foundation trusts:** Northumbria, Newcastle, Gateshead  
**1 ambulance NHS foundation trust:** North East Ambulance Service  
**4 local authority areas:** Northumberland, North Tyneside, Newcastle, Gateshead

## North East and North Cumbria

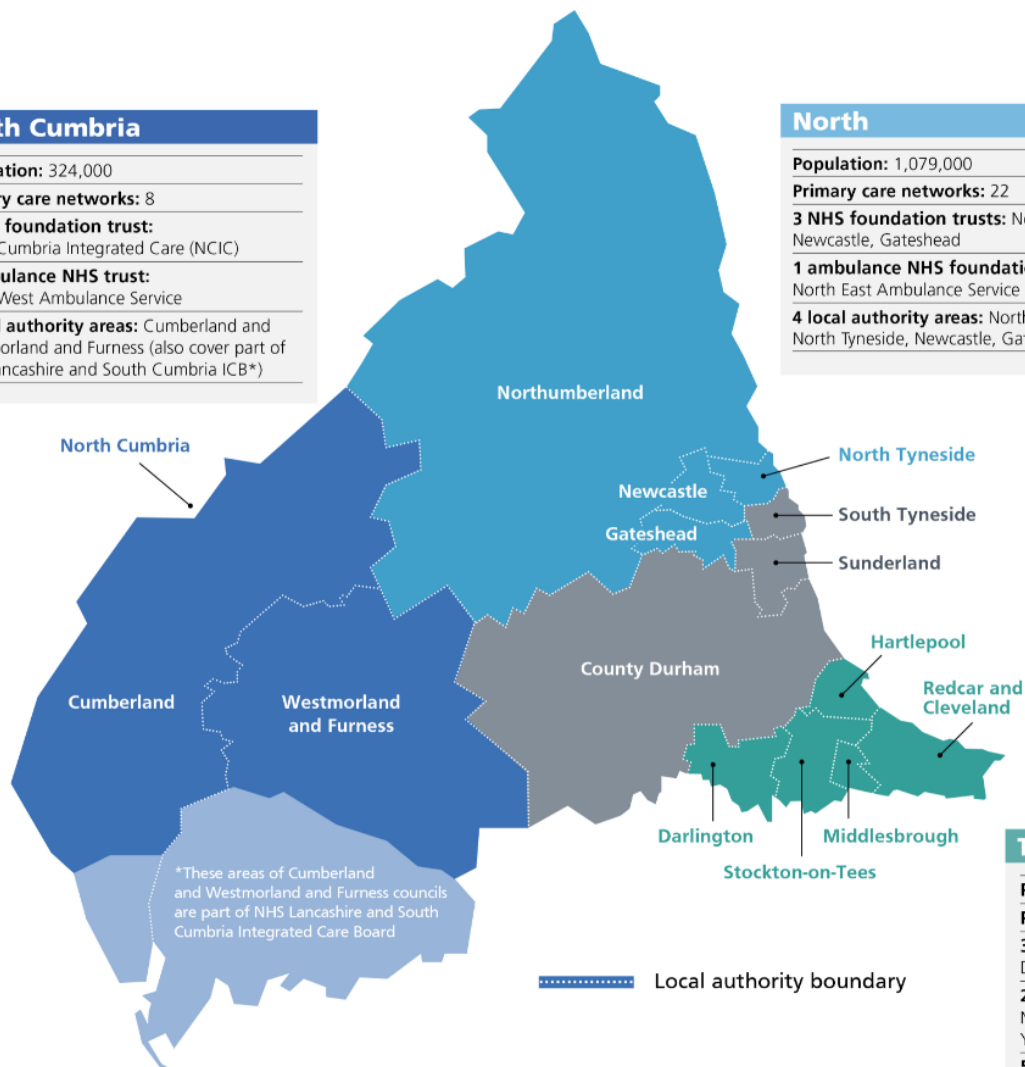
**2 mental health NHS foundation trusts:** Cumbria, Northumberland, Tyne and Wear, Tees, Esk and Wear Valleys

## Central

**Population:** 997,000  
**Primary care networks:** 22  
**2 NHS foundation trusts:** South Tyneside and Sunderland, County Durham and Darlington  
**1 ambulance NHS foundation trust:** North East Ambulance Service  
**3 local authority areas:** South Tyneside, Sunderland, County Durham

## Tees Valley

**Population:** 701,000  
**Primary care networks:** 14  
**3 NHS foundation trusts:** County Durham and Darlington, North Tees and Hartlepool, South Tees  
**2 ambulance NHS trusts:** North East Ambulance Service (FT) Yorkshire Ambulance Service  
**5 local authority areas:** Hartlepool, Stockton-on-Tees, Darlington, Middlesbrough, Redcar and Cleveland



## Our area

We are the largest of the 42 Integrated Care Boards in England. Since July 2022 we have reorganised eight clinical commissioning organisations and their Governing Bodies into a single organisation. Our new multi-professional and clinical structures reflect the size of our geography and our responsibilities.

### Our role is to:

- Improve health and wellbeing and reduce health inequalities for the 3.1 million people who live in this area
- Plan and oversee how NHS money is spent – our total budget is £6.6 billion
- Make sure health and care services work well, together and are of high quality

### Most of our work happens at place where we work with:

- 13 local authorities – a director post for each unitary tier local authority
- 11 NHS foundation trusts and 64 primary care networks – place based teams working with local GP practices, social care teams and community-based providers

As part of an integrated care system we work with all partners to tackle regional issues at scale and pace to deliver our shared priorities.

Our Integrated Care Partnership is an alliance of organisations brought together by the NHS and local authorities which sets the strategy for improving the health of our communities in the North East and North Cumbria. See our [integrated care strategy](#) which sets out our vision and long term goals and a high level approach to achieving them.

### Annual costs for the ICB for 2022/23:

- Total annual costs for the ICB for 2022/23 are forecast to be **£6.6 billion**
- Total annual costs to run the ICB (including staffing costs) are forecast to be **£56m**, which is less than 1% of total budget





# Better health & wellbeing for all

A plan to improve health and care  
in the North East and North Cumbria



## We want...



### Longer and 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

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



### Better health and care services

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



### Giving our children the best start in life

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



## And that's not all...

We will be working together to help people to stay healthy by addressing the causes of ill health and preventing diseases in the first place, and also to improve mental health and wellbeing, so that our communities live healthier and longer lives.

We have set clear goals to tackle the key causes of early death in our region - such as smoking, alcohol, obesity, heart disease, substance misuse and suicide.

### Our supporting goals by 2030 are to:

- reduce smoking from 13% of adults in 2020 to 5% or below
- reduce alcohol related admissions to hospital by 20%
- halve the difference in the suicide rate in our region compared to England
- reduce drug related deaths by at least 15% by 2030
- ensure 75% of cancers are diagnosed at an early stage so that more people who have cancer will live for at least five years after their diagnosis

### We also want to:

- reduce the number of children, young people and adults who are an unhealthy weight
- reduce social isolation, especially for older and vulnerable people
- reduce the gap in life expectancy for people in some of the most excluded groups within our communities, such as homeless people.



## The health of our region...

Across the North East and North Cumbria, we have made advances in health and social care. We have much to be proud of thanks to the strong partnerships and collaborative working which has been built on over many years. But despite this, we still have some of the poorest health outcomes in the country and there is more we can do to improve health and care services.

In nine of our 13 council areas, healthy life expectancy (meaning life without the burden of a chronic condition or disease), is less than 60 years. There are only four such council areas in the whole of the south of England. Other facts about the health and wellbeing of people in our region make for very uncomfortable reading:



**Highest rate of drug related deaths in England (North East)**



**Men spend almost a quarter of their lives in ill-health**



**2nd highest rates of heart disease in the country**



**Some of the highest rates of suicide in the country**



**Respiratory disease rates are much higher than the national average**



**28% of children live in low-income families – England average 19%**



**Rates of child poverty are double the England average in some areas**



**2nd highest rate of liver disease in the country**

Behind these numbers are individuals and communities. They are people who could be enjoying longer and healthier lives. They are children who could be thriving – not just surviving.

This is why we are so determined to work together across health and care to achieve better health and wellbeing for all.