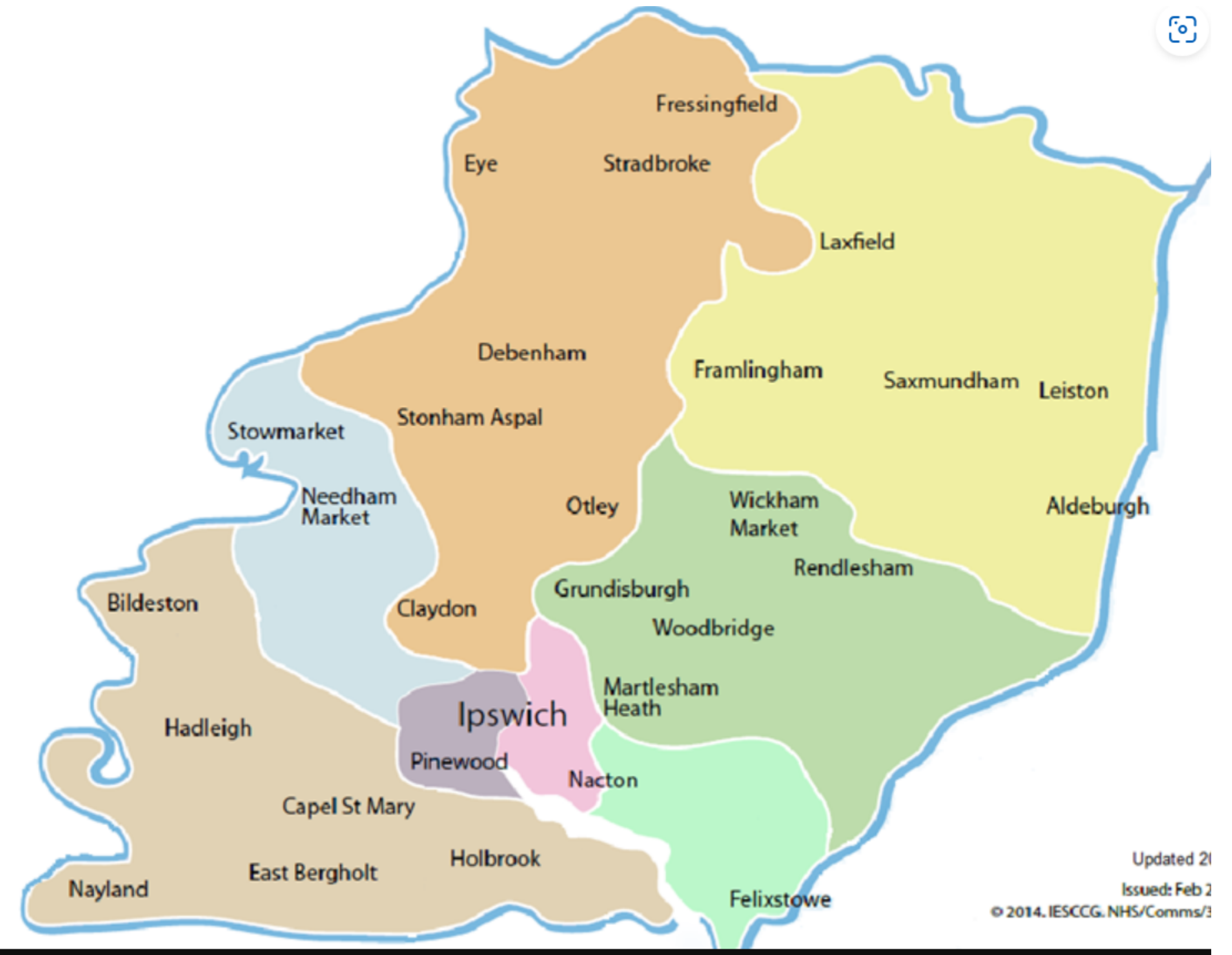
Ipswich & East Suffolk Alliance Delivery Plan 2024/25

Our Alliance in Action

Working Together with You

Where is Ipswich & East Suffolk Alliance



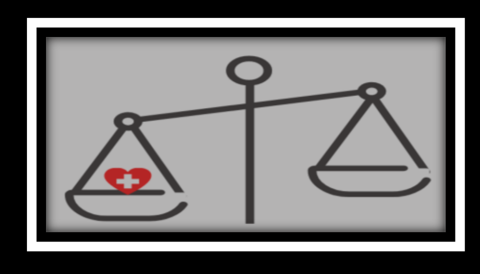
How our work is organised

Domain	Overall Outcomes
Start Well	Giving children and young people the best start in life
Feel Well	Support the mental wellbeing of our population
Be Well	Empowering adults to make healthy lifestyle choices
Stay Well	Supporting adults with health or care concerns to access support and maintain healthy, productive and fulfilling lives
Age Well	Supporting people to live safely and independently as they grow older
Die Well	Giving Individuals nearing end of life have choice around their care.

High Priority Issues to be Addressed Locally

- Reduce people with high blood pressure and better management

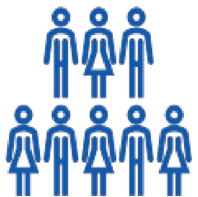
- Reduce fall and better frailty management



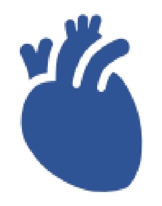
- Reduce Health Inequalities

- Children's Health

Data & Conversation to focus on community needs



414,449 people (Mid year estimates 2023)



Ipswich & East Suffolk have some of the highest cardiovascular related mortality rates in those aged 65+ within the East of England

31.9% of people in Ipswich & East Suffolk live in single person households

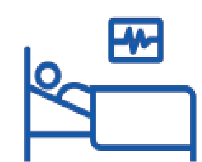
Over 23% of our population in Ipswich & East Suffolk are aged 65 and over, and 30% will have at least one fall a year

21.4% of children aged 4 to 5 are overweight or obese in Ipswich compared to 22.5% in East Suffolk where trends are increasing and getting worse

Over 80% of people report their health as good or very good but over 7% said day-to-day activities are limited by long-term physical or mental illness

Around 1% of people in Ipswich & East Suffolk report that they cannot speak English very well

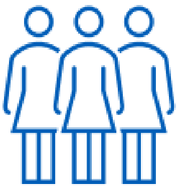
23% of adults aged 18-64 in manual occupations within Ipswich smoke compared to 20.1% in East Suffolk and 22.5% in the East of England region



Over 9% of people in Ipswich & East Suffolk provide unpaid care

Over 7% of our community are Asian, Asian British, Asian Welsh, Black, Black British, Caribbean, African or from a multi-ethnic group

Cervical screening rates in Ipswich are statistically lower than elsewhere in East of England



Over 20% of lower super output areas (LSOAs) in Ipswich & East Suffolk have an IMD decile of 1 or 2 (are within the top 20% deprived of wards in England)

Be Well - Stay Well

Be Well	Stay Well
All people living with long-term physical and mental health conditions can manage their own health and wellbeing based on supported self-management and optimise options to help address social needs – **achieved through social prescribing and community based support**	Increase uptake and quality of LD healthchecks Improve uptake and accuracy of GP LD Registers Increase uptake of cancer screening and immunisations
All people have choice and control over health and wellbeing care and support	Investment is increased in intensive, crisis and forensic community support
All people are enabled to make shared decisions in partnership with professionals and supported through effective and meaningful - Personalised Care and Support planning	Primary and / or community-based services are provided to keep people healthy in the community
Healthy Behaviours	Action will be taken to tackle the causes of morbidity and preventable deaths in people with a learning disability and for autistic people
Women's Health	Work with partner organisations to ensure that reasonable adjustments are being met for people with a learning disability as part of the Equality Act 2010
Dental & Oral Health	Improve consistency and continuity of care

We will assess our progress against 15 key deliverables in 2024/25

1. Felixstowe & Ipswich Place Based Plans designed, developed & concluded
2. Start Well – Full programme of work linked to NHSE Asthma Bundle developed and delivered
3. Start Well – Development of offer to support new parents to access community assets
4. Feel Well – Integrate Primary Care Mental Health Workers within our Integrated Neighbourhood Teams and/or Primary Care Networks
5. Be Well – Successful re procurement and commissioning of Connect for Health ensuring stronger links and opportunities with our Alliance partners
6. Be Well – Future Shift – looking in depth at how as an Alliance we can shift the focus of healthcare towards prevention as a crucial strategy for both saving lives and reducing costs.
7. Stay Well – Use PHM data to develop Alliance focused interventions / preventative actions to improve prevention, identification & management of hypertension
8. Age Well – Dementia Intensive Support Team integration and collaboration programme
9. Age Well – Implement Level 1 Falls pick up service across Suffolk
10. Die Well – Compassionate Companions in place in Care Homes
11. Meds Optimisation – Reduce medication wastage by reducing inappropriate ordering etc
12. Primary Care – Primary Care Strategy Launched and Action Plan Implemented
13. Primary Care – Co-develop, design & Implement blueprint for PCN Pilot with one PCN/INT
14. Dentistry, pharmacy and optometry leadership and locality-based integration plans in place
15. Estates – Improvements to primary care locations in Felixstowe

REDUCING HEALTHCARE INEQUALITIES

The **Core20PLUS5** approach is designed to support Integrated Care Systems to drive targeted action in healthcare inequalities improvement

CORE20
The most deprived **20%** of the national population as identified by the Index of Multiple Deprivation

20%

Target population

PLUS
ICS-chosen population groups experiencing poorer-than-average health access, experience and/or outcomes, who may not be captured within the Core20 alone and would benefit from a tailored healthcare approach e.g. inclusion health groups

CORE20 PLUS 5

Key clinical areas of health inequalities

1. **MATERNITY** ensuring continuity of care for women from Black, Asian and minority ethnic communities and from the most deprived groups
2. **SEVERE MENTAL ILLNESS (SMI)** ensure annual Physical Health Checks for people with SMI to at least, nationally set targets
3. **CHRONIC RESPIRATORY DISEASE** a clear focus on Chronic Obstructive Pulmonary Disease (COPD), driving up uptake of Covid, Flu and Pneumonia vaccines to reduce infective exacerbations and emergency hospital admissions due to those exacerbations
4. **EARLY CANCER DIAGNOSIS** **75%** of cases diagnosed at stage 1 or 2 by 2028
5. **HYPERTENSION CASE-FINDING** and optimal management and lipid optimal management

SMOKING CESSATION positively impacts all 5 key clinical areas