

# Integrated Care Systems Lincolnshire ICS

June 2022



# Integrated Care Systems

## What is integrated care?

- Integrated care is about giving people the support they need, joined up across local councils, the NHS, and other partners including social care providers, voluntary and community enterprise sector and charities.
- Integrated care involves partnerships of organisations that come together to plan and deliver joined up health and care services to improve the lives of people in their area, improving population health and reducing inequalities.

## What are Integrated Care Systems?

- Integrated Care Systems are partnerships of organisations that come together to plan and deliver joined up health and care services to improve the lives of people in their area. They will be responsible for how health and care is planned, paid for and delivered.

# Local Change Agenda

## Lincolnshire ICS Organisational Change Agenda

To help establish a shared understanding and ambition for the development of the Better Lives Lincolnshire Integrated Care Board (ICB) a change agenda has been developed. An overview of this is set out below, with further detail on subsequent pages...

### *From...*

#### **A fragmented health and care system**



#### **WHICH FOR THE PEOPLE OF LINCOLNSHIRE MEANS:**

- *A lack of ownership of the overall, and continuing, health and care of people.*
- *A focus on reactive treatment, rather than proactive intervention and preventative action.*
- *People visiting different services, that are not entirely integrated and do not communicate with each other efficiently across the whole care cycle.*

### *To...*

#### **A thriving integrated care system**



#### **WHICH FOR THE PEOPLE OF LINCOLNSHIRE MEANS:**

- *Services organised around patients that span professional boundaries – fewer hand offs and less bureaucracy for people to manage*
- *Care and support is focused on delivering the outcomes that are important to people*
- *Care providers are collectively responsible for the full cycle of care - their key objective is 'how can we best deliver outcomes for people together'?*

*From...*

## A fragmented health and care system



### **Commissioning**

#### **Commissioning activity is transactional**

NHS Commissioners undertake a number of activities that are 'low value' and do not drive population health changes

#### **Separate health and social care commissioning**

Local Authority and CCG commission services separately and pool only very small amounts of funding associated with Better Care Fund

### **Provision**

#### **Limited integration across providers**

Good working arrangements, however integration across care settings, including with social care, remains limited

#### **Providers receive fees for services / parts of pathways**

Providers predominantly incentivised to deliver distinct service components through activity-based contracts



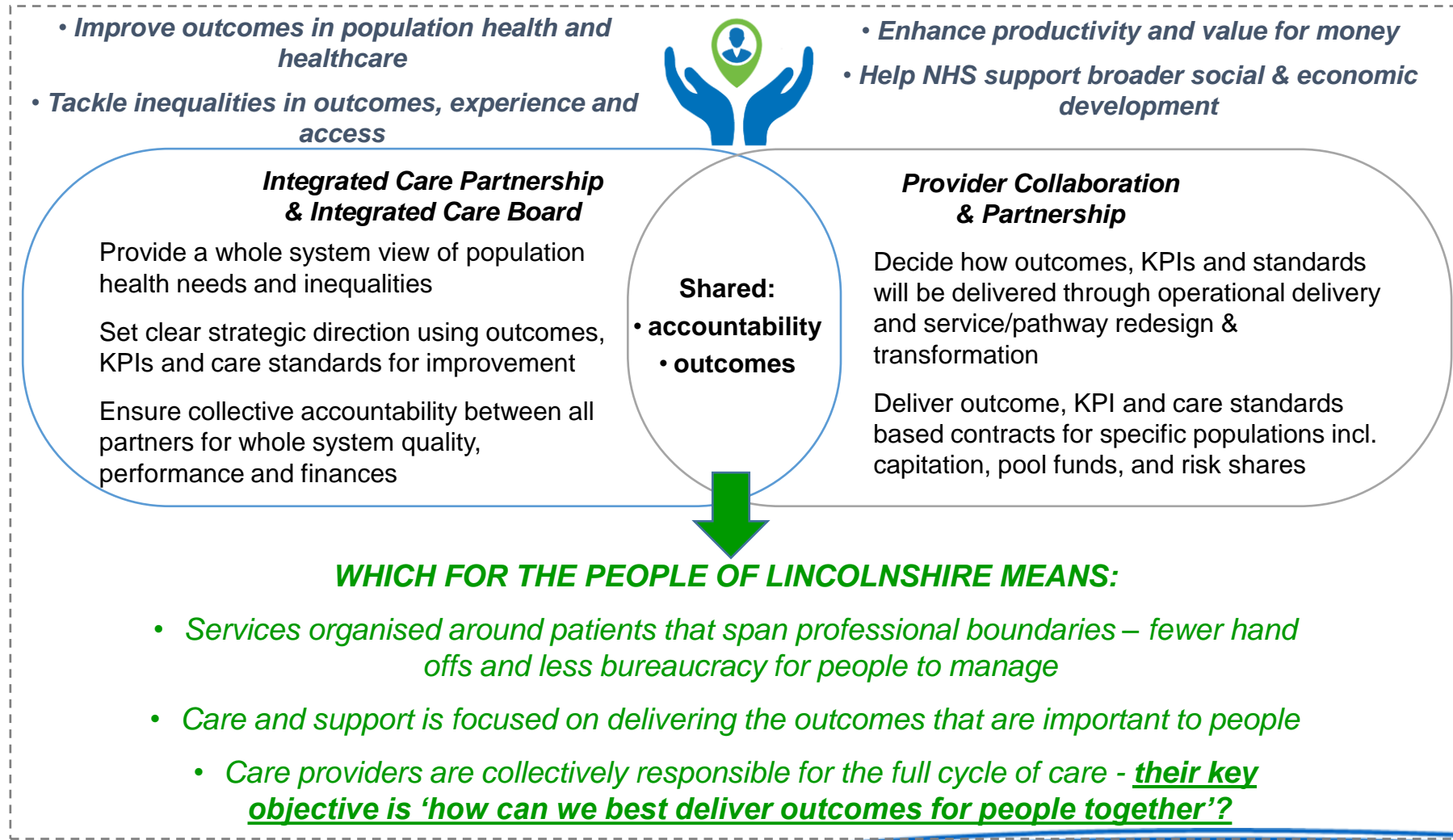
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# Lincolnshire ICS Organisational Change Agenda

## To...

### A thriving integrated care system



# Establishing statutory integrated care systems

Integrated Care Systems (ICSs) are partnerships of organisations that come together to plan and deliver joined up health and care services to improve the lives of people in their area.

The Health and Care Act 2022 establishes 42 ICSs across England. Each Integrated Care System will have two statutory elements, an Integrated Care Partnership (ICP) and Integrated Care Board (ICB).

- **An integrated care partnership (ICP)** - a statutory committee jointly formed between the NHS integrated care board and all upper-tier local authorities that fall within the ICS area. The ICP will bring together a broad alliance of partners concerned with improving the care, health and wellbeing of the population, with membership determined locally. The ICP is responsible for producing an integrated care strategy on how to meet the health and wellbeing needs of the population in the ICS area.
- **An integrated care board (icb)** - a statutory nhs organisation responsible for developing a plan for meeting the health needs of the population, managing the nhs budget and arranging for the provision of health services in the ics area. When icbs are legally established, clinical commissioning groups (ccgs) will be abolished.

The Act also enables NHS England to arrange for its functions to be **delegated or jointly delivered** with ICS Bodies. These changes were based on recommendations from the NHS that have been engaged on and were supported by stakeholders



# Provider Collaboratives

## Supporting system working

Provider collaboratives will be a key component of system working, being one way in which providers work together to plan, deliver and transform services.

## Identify shared goals, membership, governance and activities

ICS leaders, trusts and their system partners, with support from NHS England and NHS Improvement regions, should work together to identify shared goals, appropriate collaborative membership and governance and ensure activities are well aligned to ICS priorities.

## Become part of one or more collaboratives

- All trusts providing acute and mental health services are expected to be part of one or more provider collaboratives.
- Community trusts, ambulance trusts and non-NHS providers should be part of provider collaboratives where this would benefit patients and makes sense for the providers and systems involved.

## Collaboratives should have certain capabilities

**Partnership building:** Agree a common purpose aligned to the triple aim and agreed with ICSs and system partners to align with system priorities.

**Programme delivery:** Agree a set of programmes that are delivered on behalf of collaborative members and their system(s) and are well informed by people and communities where they will result in service changes.

**Shared governance:** Work within proportionate shared governance arrangements that enable providers to efficiently take decisions together that speed up mutual aid, service improvements and transformation.

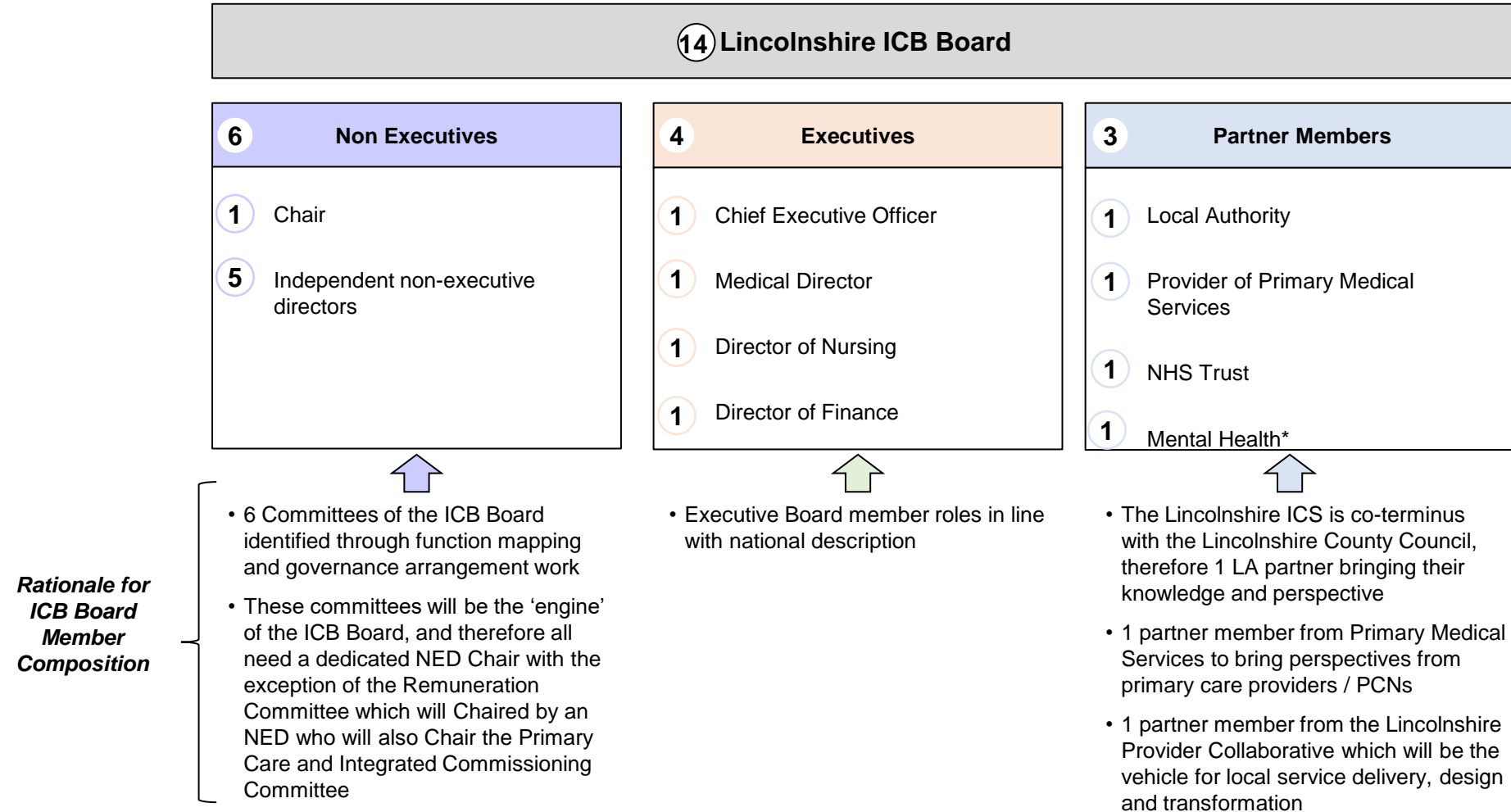
**Peer support and mutual accountability:** Challenge and hold each to account to ensure delivery of agreed objectives and mandated standards, through agreed systems, processes and ways of working.

**Joined up working:** Work with clinical networks, clinical support networks, Cancer Alliances and clinical leaders to develop strategies, agree proposals and implement changes.

**Quality improvement:** Drive shared definitions of best practice and the application of a common quality improvement methodology.

# NHS Lincolnshire ICB Board Composition

In light of the draft ICB Board committee and advisory group structure that has been co-created with stakeholders from across the Lincolnshire Integrated Care System, and reflecting discussions with system partners on ICB Board composition, a working draft of the Lincolnshire ICB Board membership has been developed in partnership with system stakeholders...

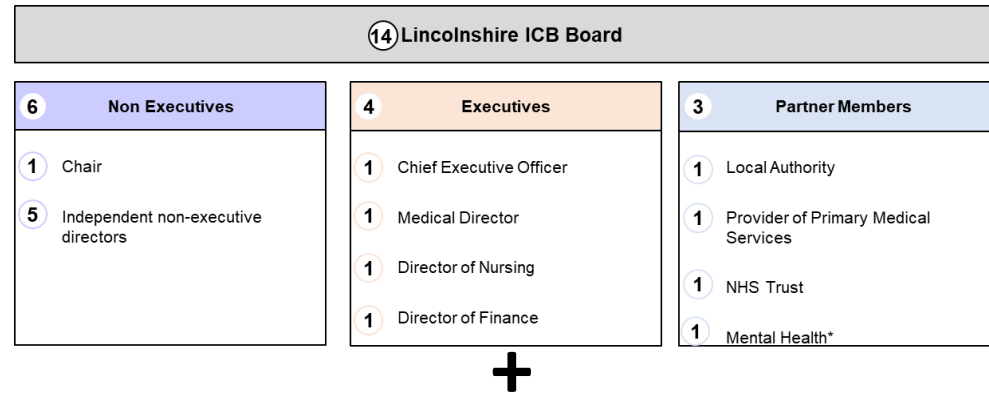


\* Requirement for mental health expertise on ICB Board added to legislation

## BLL - ICB Board Participants

In addition to the ICB Board members, 8 ICB Board participants have been identified...

*It will be a key role of the ICB Chair to safeguard against participants overly influencing board matters*



6 Participants	Rationale
Chair of Integrated Care Partnership	To ensure joint working between ICB and ICP, in particular the development and delivery of the ICB health plan and the ICP integrated care strategy
LA Director of Public Health	To inform the ICB Board's decision making and the discharge of its functions in relation to Population Health Intelligence and Strategic Planning and Integration
2 x ICB Executive Directors	To inform the ICB Board's decision making and the discharge of its functions in relation to Population Health Intelligence, Strategic Planning and Integration, Public Involvement and Engagement, Oversight and Assurance (Service Delivery and Performance, Quality and Financial/Resource Management) and functions delegated from NHSEI.
Representative of Healthwatch	To ensure the ICB Board's decision making and discharge of its functions involves consideration of the 'patient voice'
Representative of Voluntary and Community Sector	To ensure the ICB Board's decision making and discharge of its functions involves consideration of the Voluntary and Community Sector

# Health and Care Act and what it means

- ICP **integrated care strategy** will set out how the assessed needs for its area are to be met by the ICB, NHS England and responsible local authorities in exercising their functions
- The ICB has new duties to work with NHS trusts and FTs to deliver joint:
  - **Forward Plans** for integrated care over a five year period, but reviewable every year, and
  - **Capital resource use plans** each financial year.
- NHS England may set **joint financial objectives** for ICBs and their partner NHS trusts and NHS FTs
- NHS organisations have a new duty to have regard to the wider effects of decisions -NHS England Guidance
- Duty of co-operation has new wording to support the development of collaborative working between partners in an ICS
- Much greater flexibility for joint working and delegation of functions for all NHS organisations to enable joint decision making through joint committees
- And what is still to come...new regulations, procurement and changes foreshadowed in Integration White Paper?

# How will it feel Different from 1<sup>st</sup> July

- Fundamentally it won't
  - ICB will take on the functions of the CCG so new system will take time to evolve
  - Further Primary legislation scheduled – levelling up, integration
  - Secondary Legislation still in development - new regulations, procurement and further detail on delegation
- However
  - ICB are fundamentally different organisations to CCG's
  - Organisation will have a duty to collaboration with partners and regard the wider impact of their decisions
  - Greater flexibility for joint working, delegation and decision making to all NHS Organisation
  - NHSE can set system financial objectives