

**HEALTH AND WELL-BEING BOARD
23 FEBRUARY 2021****DEVELOPMENT OF HEREFORDSHIRE AND WORCESTERSHIRE
INTEGRATED CARE SYSTEM (ICS)**

Board Sponsor

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Priorities

Mental health & well-being

Being Active

Reducing harm from Alcohol

Other (specify below)

(Please click below
then on down arrow)

Yes

Yes

Yes

Safeguarding

Impact on Safeguarding Children

If yes please give details

No

Impact on Safeguarding Adults

If yes please give details

No

Item for Decision, Consideration or Information

Information and assurance

Recommendation

- 1. The Health and Well-being Board is asked to note the development and submission of the Herefordshire and Worcestershire Integrated Care System (ICS) application, seeking designation as an ICS from April 2021, and committing to work with health and care partners on its implementation.**

Background

- 2. At the HWB meeting in February 2020 members received a briefing on the NHS Long term plan (LTP). One of the commitments in the NHS LTP is for all health and care systems nationally to reach ICS status by March 2021. H&W Sustainability and Transformation Partnership (STP) made an application to NHS England and Improvement in December 2020 for designation as an ICS from April 2021. This paper outlines the focus of this work and describes some of the benefits to the local population.**

Integrated care systems

3. The purpose of integrating health and care is to improve health and wellbeing outcomes for all and to reduce the gap between those with the best and worst outcomes by working as equal partners to drive collaboration in NHS and Local Authority for the people we serve. This is delivered through the triumvirate of place leadership, provider collaboratives and system leadership, underpinned by the principle of subsidiarity. The Further information regarding ICSs can be found in the background papers, which contain the most recent NHS policy papers including NHS England and NHS Improvement proposals for legislative change.

Timeline for implementing integrated care

4. It is likely that a decision on the system application will be made nationally in March and in the meantime the local focus remains on delivery of the action plan that was developed as part of the application. Whilst this will formally designate the Herefordshire and Worcestershire health and care system as an ICS, 2021/22 will be a transition year with possible proposals for legislative change currently being developed with an anticipated implementation date of April 2022.

National ICS Implementation Programme

5. Herefordshire and Worcestershire has been nominated by Regional Team to join the National ICS Implementation Test programme, along with only 8 other emerging ICS's nationally. This programme will offer the opportunity to help shape the next steps guidance and benefit from being able to test ideas and plans with regional and national support. There will also be an opportunity to work with and learn from the other sites, all of which are from other NHS regions.

Improving health and care outcomes for the people of Worcestershire

6. ICS partners have developed a broad vision supporting the health and well being of the population, delivered through integrated working between all ICS partners. This has been broadened to encompass the social value that health and care partners can deliver to support improvement in the wider determinants of health for the local population. The role of the ICS leadership is to work with the HWB at place to deliver the local priorities, within the system vision.

Purpose of an ICS:	Improve health outcomes for all and reduce the gap between those with the best and worst outcomes by working as equal partners to drive collaboration in NHS and Local Authority for the people we serve. Delivered through the triumvirate of place leadership, provider collaborative and system leadership, underpinned by the principle of subsidiarity.
HW System Vision:	Working together to enable better health, fulfilment, and safety in our residents' lives

HW System objectives:	1.To ensure healthier, well connected and more resilient communities with targeted support to reduce health inequalities and prevent ill health	2.To provide high quality services through improving access to clinically effective treatments	3.To strengthen the local economy, employing local people, being exemplar employers and investing in local businesses wherever possible	4. To promote a healthier physical environment; reducing our carbon footprint through positive action around our buildings, working practices and digital transformation
2020/2021 focus	We will improve health and wellbeing outcomes by doing all we can to help people recover from the economic and health and wellbeing impacts of COVID 19			

7. As part of the Health and Well Being Board strategy refresh, we will work with local partners to ensure that there is good alignment between the two documents, updating the ICS strategy as appropriate to reflect any new or amended local priorities.

8. Section 7 to 9 provides some examples of where the ICS is supporting and accelerating improvements through the infrastructure and opportunities that are being developed through the programme of work.

Addressing health inequalities and inequities

9. Our development programme for Population Health Management (PHM) is supported by the linked health and social care data set that is being developed through our ICS Digital programme. This is consistent with the NHS long term plan aim to use data to enable sophisticated population health management approaches. This will enable proactive and anticipatory care to be delivered and our aim is to develop the infrastructure and capability across all tiers (ICS, Place, District and PCN). We are developing the roadmaps for making PHM ‘business as usual’ and specifying the critical functions required to make this happen (such as analytics, finance, contracting, care coordination, local assets to support personalised care interventions inc. VCSE partners).

10. COVID-19 has amplified existing health and social inequalities. The ICS approach to addressing health inequalities will focus use Population Health management approach to understand the specific needs across different segments of our population. The Health Inequalities and Prevention Collaborative will complement the focus enabled through the Health and Wellbeing Boards. The ICS group will prioritise prevention and addressing the health inequalities that we need to collectively address at system level, developing proposals and plans in response to these challenges across our system. As with all ICS groups, the Health Inequalities and Prevention Collaborative will subscribe to the principle that decisions should be taken as close as possible to the local population - unless there is clear rationale and benefit for operating at system and regional level.

Mental Health Development Plan

11. As part of our work on the National ICS Implementation Programme, a local plan is in the early stages of development to changing the way in which mental health services are organised within the ICS. The principles of this work are to plan to join up commissioner and provider functions in an integrated team, hosted by NHS Herefordshire and Worcestershire Health and Care NHS Trust. Within this arrangement, the “ICS” will develop an agreed outcomes framework that the provider is expected to work towards with an integrated

budget that amalgamates existing funding streams. This approach will improve patient care by joining up services in a way that puts more ability to “do what’s right for the person” in the hands of local clinicians and clinical leaders. Focus will be on mental health and well being in it’s widest sense – working with community and voluntary sector, employers, schools etc, not just the provision of health funded mental health services. The Initial focus will be on All-Age Mental Health services, with an intention to expand into Learning Disabilities, Autism and the Transforming Care Programme over time.

Digital and Data Programme

12. The last 12 months has seen a significant acceleration in digital transformation across the health and care system. Partners across the Integrated care System (ICS) have increasingly turned to digital solutions to enable them to respond to the challenge faced by the pandemic. This has seen the ICS Digital team deliver over 1000 laptops to primary care and other front line staff to support remote working and equip all GP practices to provide remote consultations by using video, SMS messaging and images with systems that integrate with EMIS. The focus for the next the 6 months is the delivery of phase one of the ICS Shared Care Record. A partner has already been procured, Intersystems, and a programme board involving all health and care partners and Healthwatch has been established. This will enable patients information to be shared not only across Herefordshire and Worcestershire but also Birmingham and Solihull and Coventry and Warwickshire STPs between clinicians, as part of the regional shared care record programme. This will support urgent care pathways, discharges, clinical decision making and in time our population health management programme. Funding of nearly £3m has been awarded to support this work in Herefordshire and Worcestershire.

Contact Points

County Council Contact Points

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Specific Contact Points for this report

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Supporting Information

- None

Background Papers

In the opinion of the proper officer (in this case the Director of Public Health) the following are the background papers relating to the subject matter of this report:

<https://www.england.nhs.uk/integratedcare/integrated-care-systems/>

<https://www.england.nhs.uk/publication/integrating-care-next-steps-to-building-strong-and-effective-integrated-care-systems-across-england/>