



Shropshire, Telford & Wrekin
Sustainability and Transformation Partnership

Update and Outline ICS Roadmap

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Key Points from the White Paper

- ▶ Integrated care systems (ICSs) are to be established on a statutory footing through both an 'NHS ICS board' (though this will also include representatives from local authorities) and an ICS health and care partnership. The ICS NHS body will be responsible for the day-to-day running of the ICS, NHS planning and allocation decisions. The partnership will bring together the NHS, local government and wider partners such as those in the voluntary sector to address the health, social care and public health needs of their system.
- ▶ A duty to collaborate will be created to promote collaboration across the healthcare, public health and social care system. This will apply to all partners within systems, including local authorities.
- ▶ There will be new powers for the Secretary of State for Health and Social Care over the NHS and other arm's-length bodies (ALBs). Under the proposals, the Secretary of State will be able to intervene in service reconfiguration changes at any point without need for a referral from a local authority. The Department of Health and Social Care will also be able to reconfigure and transfer the functions of arm's-length bodies (including closing them down) without primary legislation.
- ▶ Certain new duties on the Secretary of State will also be introduced. This will include a statutory duty to publish a report in each parliament on workforce planning responsibilities across primary, secondary and community care, as well as sections of the workforce shared between health and social care (such as district nurses).



Key Points from the White Paper

- ▶ There will be significant changes to procurement. It is proposed that section 75 of the Health and Social Care Act 2012 (including the Procurement, Patient Choice and Competition Regulations 2013) will be repealed and replaced with a new procurement regime. However, it is important that we avoid ending up with local monopolies and continue to work effectively with the independent and voluntary sector.
- ▶ The white paper does not address other key areas where reform is expected. Reforms to social care and public health will be dealt with “later in 2021” outside the Health and Care Bill addressed in the white paper, with some minor exceptions
- ▶ The new statutory powers for integrated care systems should not overlap and duplicate with the statutory powers of NHS trusts and foundation trusts, and further clarity is needed on how the NHS ICS board will operate alongside the wider health and care partnership board that will involve local government.



Four Core Purposes

- ▶ Improving outcomes in population health and healthcare
- ▶ Tackling inequalities in outcomes, experience and access
- ▶ Enhancing productivity and value for money; and
- ▶ Helping the NHS to support broader social and economic development



10 System Pledges

The STW ICS application submitted on 11th January contained 11 pledges that were subsequently refined to 10:

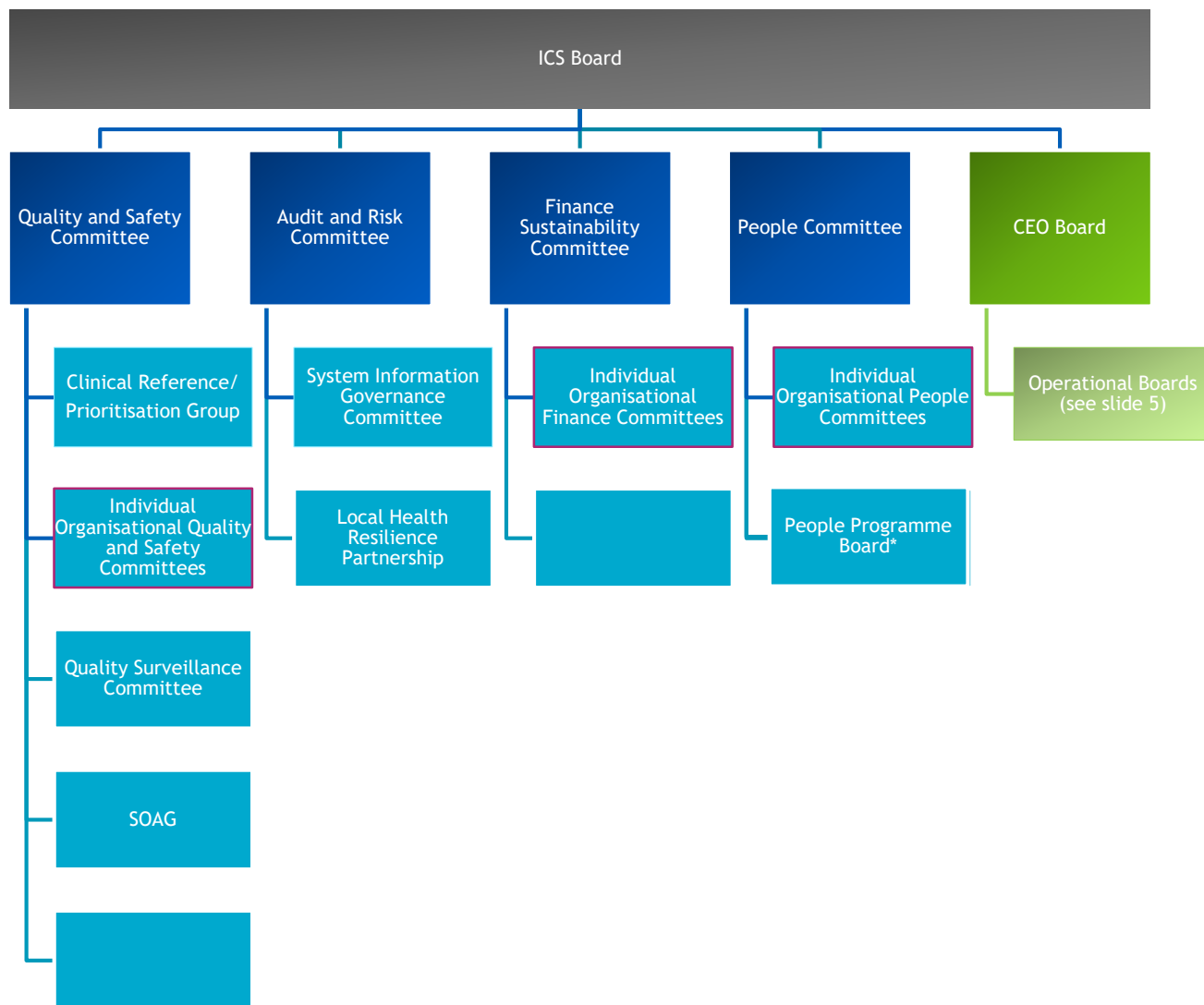
- ▶ **Improving safety and quality**
Making sure our services are clinically safe throughout the system, delivering the System Improvement Plan and tackling the backlog of elective procedures as a system. Specifically this pledge commits us to ensure SATH is rated 'Good' by CQC and that the Ockenden Review's findings are implemented. Across all of our services we aim to use digital innovation and data to enable our workforce to drive improvements in quality and safety and improve outcomes.
- ▶ **Integrating services at place and neighbourhood level**
Integrating services at Place and Neighbourhood level - developing local health and care hubs to improve not just the physical but mental health of people, build on the principles of one public estate and the assets of individual communities, better manage the volume of hospital admissions and establish new models of care to best serve all our communities.
- ▶ **Tackling the problems of ill health, health inequalities and access to health care**
Working with our voluntary and community sector, and the public, we will agree measurable outcomes for accelerated Smoking Cessation, improving respiratory health, and reducing the incidence of type 2 diabetes and obesity. We will have a strategy for the implementation of segmented population health management (PHM) approach by April 2021 and undertake a post COVID-19 review of access to all services by September 2021.
- ▶ **Delivering improvements in Mental Health and Learning Disability/Autism provision**
Through our transformation programmes, working through whole system approaches, we will deliver improvements in quality of life for people with learning disabilities by March 2022 and meet the national milestones for mental health transformation by 2023/24.



10 System Pledges

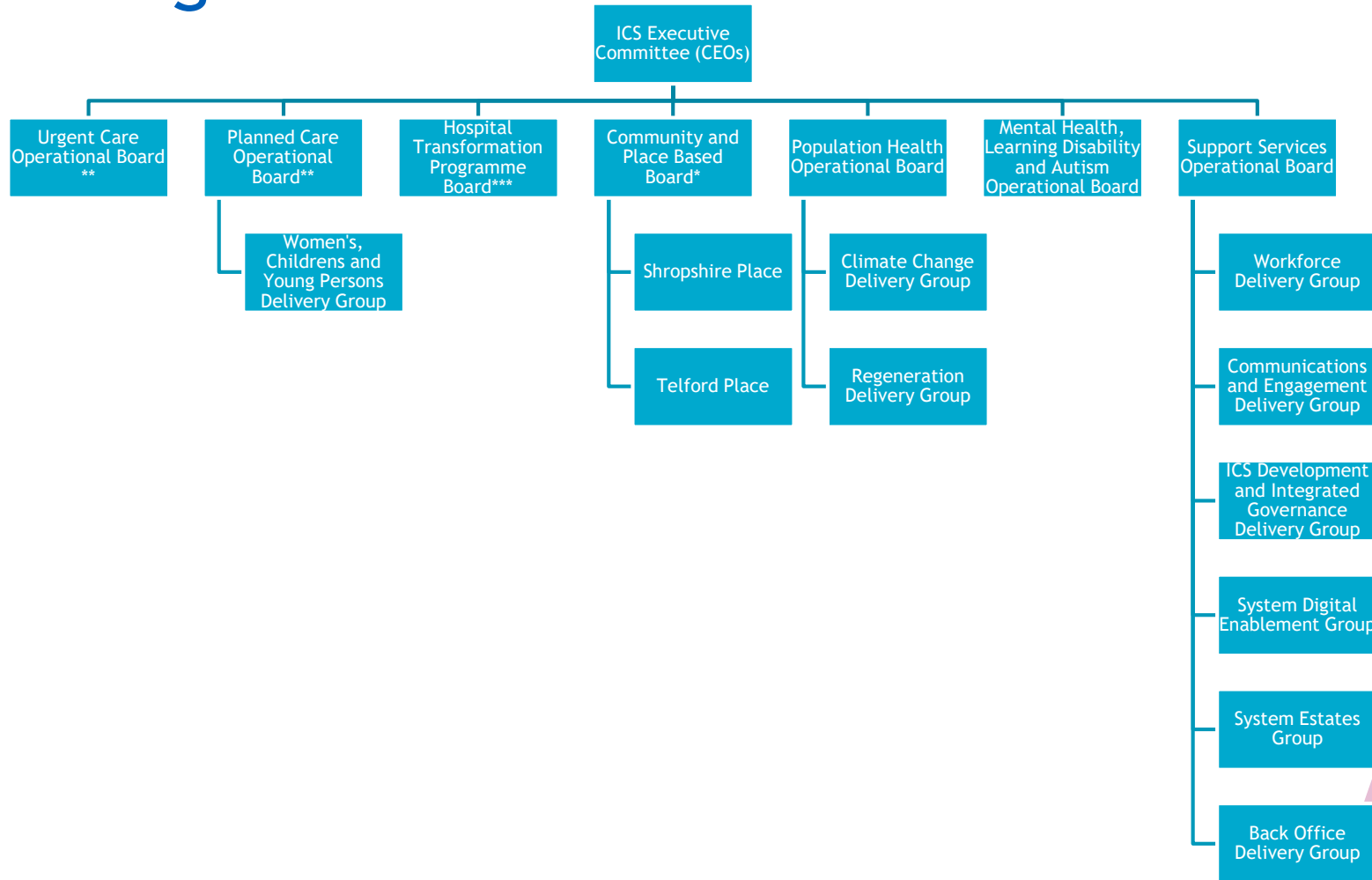
- ▶ **Economic regeneration**
We recognise that economic regeneration will be essential throughout the pandemic and thereafter. For the citizens of Shropshire, Telford and Wrekin we aim to harness the potential of the health and care system together with wider public services to contribute to innovation, productivity and good quality work opportunities. In turn this will create economic prospects that will help improve the health and wellbeing of our population.
- ▶ **Climate change**
We will consult on a multi agency strategy setting out our response to the threat of climate change by 30th June 2021. This will be designed to create a social movement across our system by agreeing and delivering carbon reduction targets.
- ▶ **Leadership & Governance**
We recognise that how we deliver and make decisions needs strengthening throughout and therefore we will review and revise our ICS Governance arrangements with a particular emphasis on place, neighbourhood and provider collaborative arrangements by 1st April 2021.
- ▶ **Enhanced engagement and accountability**
We will increase our engagement, involvement and communication with stakeholders, politicians and the public and develop a plan for this by March 2021. This will include ways of making the ICS more accountable to the citizens of Shropshire, Telford and Wrekin including committing to an annual report by September 2021 and starting to hold ICS Board meetings in public.
- ▶ **Creating system sustainability**
Building upon the work included in our LTP, we will produce a sustainable ICS Financial Recovery plan by April 2021 alongside a System People Plan committing to recruiting and retaining the best people in a supportive working environment. This Pledge will ensure we have system wide arrangements agreed for financial control and future financial allocations.
- ▶ **Workforce**
Making our system a great place to work by creating environments where people choose to work and thrive and by building system leadership and a flexible co-operative workforce.

STW ICS Sub-committee and Operational Meeting Framework - Proposed Assurance Structure





STW ICS Sub-committee and Operational Meeting Framework - Proposed Operational Meeting Structure





Indicative Timetable



By end Q1 2021/22

- ▶ Confirm senior appointment process and issue model constitution
 - ▶ National process
 - ▶ Local work

- ▶ Systems update SDPs and confirm:
 - ▶ Constituent partner organisations
 - ▶ Place based arrangements
 - ▶ System Transition Plan

By end Q2 2021/22



- ▶ Confirm Designate appointments to ICS Chair and Chief Executive roles (Accountable Officer/CFO)
- ▶ System confirm proposed arrangements for health and care partnership governance and board of the ICS NHS body

By end Q3 2021/22



- ▶ System confirm designate appointments to other ICS NHS Body senior executive leadership and ‘non-executive’ roles, including place level leaders

By end Q4 2021/22



- ▶ Systems confirm designate appointments to any remaining senior ICS roles
- ▶ Complete due diligence arrangements for staff and property (assets and liabilities) transfers from CCGs to new ICS bodies
- ▶ Submit ICS NHS Body constitution for approval and agree ICS 'MOU' with NHSEI

1st April 2022



- ▶ Establish new ICS bodies with staff and property (assets and liabilities) transferred and boards in place