

Telford & Wrekin Health and Wellbeing Board

Meeting Date: 9th December 2021

Paper title: ICS update

1. Summary

Update on the progress with regard to ICS development and governance arrangements for Shropshire, Telford and Wrekin.

2. Recommendations

The board is asked to note the paper and accompanying slides.

3. Report

Context

This report is a summary update of the Integrated Care System (ICS) development programme in Shropshire, Telford and Wrekin, the proposed governance arrangements that are in development for the Integrated Care Board (ICB) and the progress in the context of the establishment of the ICB by 1 April 2022. It describes the statutory function of the ICS, how the infrastructure works together and in turn how services including children's services can be planned for and delivered in the future.

Principles and Aims

The SDP has been structured around the principles and aims of ICS development in STW and can be summarised as follows:

- ▶ Each ICS will have a statutory Integrated Care Partnership (ICP)
 - ▶ Our ICP will operate at a system level, constituting a broad alliance of organisations and representatives including from our Integrated Care Board (ICB) and local authorities.
- ▶ Each ICS will have a statutory Integrated Care Board (ICB) in April 2022
 - ▶ Our Shropshire, Telford & Wrekin ICB will lead integration within the NHS. Our ICB will bring together all those involved in planning and providing NHS services.
 - ▶ Our ICB will take a collaborative approach to agreeing and delivering ambitions for the health of our population.
- ▶ Each ICS will agree the governance and accountability arrangements for people and workforce functions in the ICS
 - ▶ Our people are our priority and our ICS has a well-established local People Plan to support and strengthen our health and care workforce. Our plan is aligned to the national NHS People Plan.
- ▶ Each ICS will recruit required members of the ICB Board, develop and submit an ICB constitution and develop a functions and decision map.
 - ▶ Our system has agreed our ICB structure, following a period of engagement across the system via a number key of forums.

- ▶ Our system has already started developing and determining a long-term approach to strategic commissioning; aligned to the national policy developments for all NHSEI commissioned services, and to the development of our future Operating Model.
- ▶ We have in place rigorous Quality oversight arrangements within our system.
- ▶ Each ICS will confirm their proposed Place-Based Partnerships for 2022/23.
 - ▶ Within our system we have Shropshire Integrated Place Partnership (ShIPP,) and Telford & Wrekin Integrated Place Partnership (TWIPP). Both ShIPP and TWIPP report to our CEO Group and have representation from our local authorities, local NHS trusts, PCNs and VCSE. Our current partnerships are well established and have a shared set of standards in place.
 - ▶ Although our IPPs are not developed as Place-based Partnerships in the context of NHSE guidance, they are built on developing relationships and delivering integrated care at Place.
- ▶ Each ICS will work to identify shared Provider Collaborative goals, appropriate membership and governance, and ensure activities are well aligned with ICS priorities.
 - ▶ As a system we have already seen the advantages of acute collaboration across our ICS boundaries, achieving mutual aid across our system and working on joint workforce initiatives. We continue to develop our provider collaboratives and collaborative capacity as a system.
 - ▶ A Collaborative Options paper has been presented to our ICS Board. Our key principles underpinning our collaborative approach, especially targeted at future Provider Collaboratives, focus on patient benefits, subsidiarity, form following function, simplicity, and an outcome-focus.
- ▶ All ICS and ICB leaders will agree an initial local framework and associated development plan for Clinical and Care Professional Leadership with partners.
 - ▶ A Clinical & Care Professional Leadership and Engagement Strategy; will create a compelling narrative, describing our collective ambition.
- ▶ All ICS partners should agree how to best engage with local people and communities.
 - ▶ We will involve people, staff, and communities when planning how we deliver services and ensure services are joined-up, to improve people's experience of health and care locally.
 - ▶ In developing our ICS's strategic direction, we have spoken to health and care staff, our local system partners and the voluntary, community and social enterprise (VCSE) sector. We have engaged with our community, and we have used this insight to develop our 10 ICS Pledges, including pledge 4 dedicated to enhance engagement and accountability
 - ▶ TWIPP and SHIPP are developing their own priorities, reflecting the different needs of each local population, and thinking about how it will work differently in the future.
 - ▶ We have strengthened our place-based working by establishing a Memorandum of Understanding (MOU) with VCSE, based on a number of shared ambitions. We have also developed a VCSE Alliance with our partners, linked to our ICS Board, to ensure inclusivity of VCSE as a strategic partner.
- ▶ All ICS partners will maintain a working principle of mutual accountability.
 - ▶ We are committed to increasing and ensuring our accountability to our citizens. We have an operational Performance Management and Accountability framework implemented across our ICS and we hold all our ICS Board meetings in public for full transparency.

- ▶ Our ICS Board have clear lines of accountability and responsibility for overseeing our 6 Big Ticket Item transformational programmes. We have Programme Leads, an SRO, a Clinical Lead, a highlight report, risk register and governance escalation route for each item.
- ▶ There are areas within our system that face significant challenges and are failing to meet NHS performance and quality standards. We take full accountability for improving this, and have put in place a number of programmes and monitoring mechanisms to ensure that CQC and Ockenden report findings are actioned as a priority.
- ▶ All ICBs will agree how the allocation of funds will be used to perform its functions.
 - ▶ Our ICS financial allocations are administered through the CCG. We will closely monitor our COVID-19 and winter expenditure on a monthly basis to ensure funding flows smoothly across the ICS.
 - ▶ We are progressing work to agree how our funding allocations and payment mechanisms apply to non-NHS partners, the suitability of our ICS financial risk and governance, as well as our financial plan refresh and standardised financial reporting and controls.
 - ▶ The CCG are actively developing policies/processes for safe financial system transition, utilising key learning and expertise from recently merging Shropshire CCG and Telford & Wrekin CCG. This process will also be informed by an ongoing due diligence exercise and transition planning.
- ▶ All ICS's must have a renewed digital and data transformation plan, detailing the roadmap to achieve 'What Good Looks Like' (WGLL).
 - ▶ The key themes of our system's digital transformation work and associated ongoing projects are - Empowering, Integrating, Optimising, Learning and Innovating.
 - ▶ Our developing projects & ICS Digital Strategy are closely aligned to the WGLL framework.
 - ▶ We are developing a ICS Digital and Data Transformation Plan to ensure we are reaching into relevant boards/committees, ensuring that digital/data conversations are centralised via programme managers and technical leads.

Governance and Planning

A number of supplementary slides have been included to provide further detail with regard to the development of proposed governance for the ICS and the intended structure of the ICB.



ICS development
update for T^0W HW