



Integrated care system senate update

Introduction

Our integrated care system (ICS) is a partnership of health and care organisations that have come together to plan and deliver integrated services to improve the health of people who live and work in our area.

ICS's exist to achieve 4 aims:

1. Improve outcomes in population health and healthcare
2. Tackle inequalities in outcomes, experience and access
3. Enhance productivity and value for money
4. Help the NHS support broader social and economic development.

Following several years of locally led development and based on the recommendations of NHS England and NHS Improvement (NHSEI), the Government has set out plans to put ICSs on a statutory footing (bill recently passed its second reading in Parliament).

To support this transition NHSEI is now publishing guidance and resources, drawing on learning from all over the country. We are working through this guidance now, with the ambition to be live for a statutory start to our Cornwall and Isles of Scilly NHS integrated care boards (ICB) on 1 April 2022, subject to final legislation.

Collaborating as an ICS will help our health and care organisations tackle complex challenges, including:

- improving the health of children and young people
- supporting people to stay well and independent
- acting sooner to help those with preventable conditions
- supporting those with long-term conditions or mental health issues
- caring for those with multiple needs as populations age
- getting the best from collective resources so people get care as quickly as possible

Core components in the bill (subject to final legislation)

1. The ICS is the whole partnership system across health and care.
2. NHSEI will cease each clinical commissioning group (CCG) statutory body in England on 31 March 2022.
3. NHSEI will set up new statutory boards (ICBs) from 1 April 2022 in 42 areas across England. Ours covers the Cornwall and Isles of Scilly ICB.
4. Each ICS is required to set up an ICS partnership forum (that places a statutory duty on the NHS, councils, and its partners to work collaboratively).

Consideration is to be given to integrating our ICS forum with the council's health and wellbeing boards at a future date.

5. The councils to formulate their health and wellbeing boards and its relationship to the ICS.
6. Place, partners, and citizen engagement to be at the heart our ICS.

Key items and timelines

1. ICS partners have agreed, at our ICS systems board, a formal memorandum of understanding that sets the blueprint for our ICS constitution and makeup (subject to NHSEI sign off and legislation). This memorandum of understanding will evolve as we gain more insights into NHSEI guidance and develop our formal ICB constitution and ICB make-up as a result.
2. Transition from CCG statutory body to ICB on 1 April 2022 (and cessation of CCG).
3. NHSEI have announced the appointment of the Cornwall and Isles of Scilly designate chair of the NHS ICB: John Govett. John will also continue as the independent chair of the current ICS partnership board or forum, for the foreseeable future.
4. Formal appointment process of the 42 ICS chief executive officers across England is being overseen by NHSEI, including Cornwall and Isles of Scilly ICS.
5. Looking to agree:
 - governance and appointment processes for the new ICB statutory body, as in the bill, for the appointment of:
 - ICB and ICS executives (chief executive officers, chief finance officer, chief medical officer and chief nursing officer)
 - ICB independent non-executive directors and ICB partner representatives
 - place, partners, and primary care representation on the ICB board
 - to have in place by 1 April 2022, the ICBs new constitution and scrutiny ICB committees, ranging from the usual board governance committees to primary care, workforce, and citizen engagement
6. Clinically led prioritisation will be at the heart of our new ICB decision making as we go forward (and we will be institutionally agnostic). Thereby ensuring we act in the interests of our citizens; within the financial envelope we can afford.
7. To focus on prevention, population health and the health and care of our people.
8. Ensure the smooth transfer of CCG staff to the appropriate parts of the NHS or the new ICB body on 1 April 2022 (subject to legislation).
9. ICB constitutional, corporate, and regulatory matters, contracts, leases, and commercial agreements to be in place for transition.
10. ICB quality governance and approach to estates and digital transfer arrangements are made.
11. Financial planning readiness for the ICS and ICB 4-year long term plan.
12. Relationship between Cornwall Council and Council for the Isles of Scilly re their potential merging of their own health and wellbeing boards.
13. Consideration of the merging of the new health and wellbeing boards and the new ICS partnership forum, ideally to be resolved by the end of the year.
14. Ensure new ways forward regarding provider collaboratives are in place for delivery.
15. Having the new ICB board recruited and in place to perform its statutory duties from the 1 April 2022.