

County Durham Care Partnership



Integration Update for Health and Wellbeing Board

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Format

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- Guidance and Timeline
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- Summary



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Purpose

- To provide an update on discussions with partners about Integrated Care System (ICS) developments and progress with integration in County Durham
- To listen to your views and comments
- To answer questions



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The Health and Care Bill - Overview

- Designed to reform the delivery of health services and **promote integration** between health and care, repealing the 2012 Health and Social Care Act.
- Promotes **integration rather than competition** and includes the specifications of integrated care systems (ICSs), with distinct statutory functions for the integrated care board (ICB) and integrated care partnership (ICP).
- **Increases the Secretary of State's powers** over various aspects of the NHS's operation, notably including local service reconfigurations.
- **NHS England and NHS Improvement are legally merged** under the name NHS England (NHSE).
- Powers are introduced for **NHSE functions** (notably including commissioning functions) to be **exercised by ICS integrated care boards**.
- The government may direct NHSE to use funding for service integration.
- These reforms cannot be considered in - future of social care.



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Scale of our ICS

ICSs in the North - population in millions



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Guidance and Timeline

- Complex work developing quickly with partners working together
- NHSE guidance published – important role for Health and Wellbeing Boards (HWBB) at ICS and place levels
- Appointment of Chair – Professor Sir Liam Donaldson
- CE recruitment undertaken – announcement expected – other senior posts filled
- Followed by statutory appointments and set up of Shadow Board
- Groups set up to design new structures and financial arrangements
- Deadline for proposals to NHSE late November 2021
- Due diligence process required
- CCG remains statutory organisation till 1/04/22



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Integrated Care Boards (ICB)

- CCGs abolished - powers and resources transferred to ICBs and NHS
- ICBs - responsible also for commissioning a wide range of health services, including PC, ambulance, and potentially opticians and dental services
- ICBs will have a range of duties, including to promote the NHS Constitution, reduce inequalities, maintain patient choice and promote integration.
- ICBs must ensure public involvement in planning and decision-making.
- ICB functions can be exercised jointly with a place based partnership.
- ICBs must prepare and publish a plan setting out how they will exercise their functions in the coming five years – including how it will implement local joint health and wellbeing strategies.
- Each relevant HWBB should be consulted in the preparation of this plan.
- NHSE will assess the performance of each ICB consulting HWBBs.



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Integrated Care Partnership (ICP)

Integrated Care Partnerships

- ICBs and local authorities must establish an integrated care partnership (ICP) who will then create an integrated care strategy, considering the NHS Mandate, Secretary of State guidance and involve people who live in the partnership's area.
- ICPs are to consist of (a) one member appointed by the ICB, (b) one member appointed by each local authority, and (c) any members appointed by the integrated care partnership.

Joint working and delegation of functions

- NHS England, integrated care boards, NHS trusts and NHS foundation trusts can exercise functions jointly with local authorities and combined authorities.
- Joint functions can be exercised by (a) a joint committee or (b) by a specific organisation or joint committee through a pooled fund.
- Joint appointments can be made across NHS commissioners, providers and/or local authorities, subject to NHS England guidance.



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Provider collaboratives

- From April 2022 all Trusts to be part of a provider collaborative
- Provider collaboratives will agree specific objectives with ICBs
- Provider collaboratives will agree working relationships, representation with ICBs
- ICB can delegate commissioning to one or more provider working in a provider collaborative – lead provider
- ICB can form a Joint Committee with a Trust
- Confirms the major role for Trusts in the future



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Place-based partnerships

- **Place arrangements and leadership are for local determination** – partners within each ICS will decide how to work together to address the needs of places, **building from** an understanding of neighbourhoods and **primary care networks**.
- An ICB could establish any of the following place-based governance arrangements with local authorities and other partners:
 - **Consultative forum**, *informing* decisions by the ICS NHS body, local authorities and other partners
 - **Committee of the ICB (NHS body)** with delegated authority to take decisions about the use of ICS NHS body resources
 - **Joint committee of the ICB (NHS body)** and one or more statutory provider(s), where the relevant statutory bodies delegate decision making on specific functions/services/populations to the joint committee
 - **Individual directors of the ICB (NHS body)** having delegated authority, which they may choose to exercise through a committee
 - **Lead provider** managing resources and delivery at place-level under a contract with the ICS NHS body



Durham Place Based Working

- Aiming to keep as much decision-making and finance in County Durham as possible
- Need to inspire the confidence of the ICB to delegate to us and make a “positive” offer
- Building on the County Durham Care Partnership (CDCP) set up in 2018
- Revised the CDCP structures in 2021 in anticipation of these changes
- Now have an Executive in Common with the CCG and CDCP
- Working on the implications of a Joint Committee with delegated budgets with an ambitious aspiration to begin in April 2023
- All partners working together



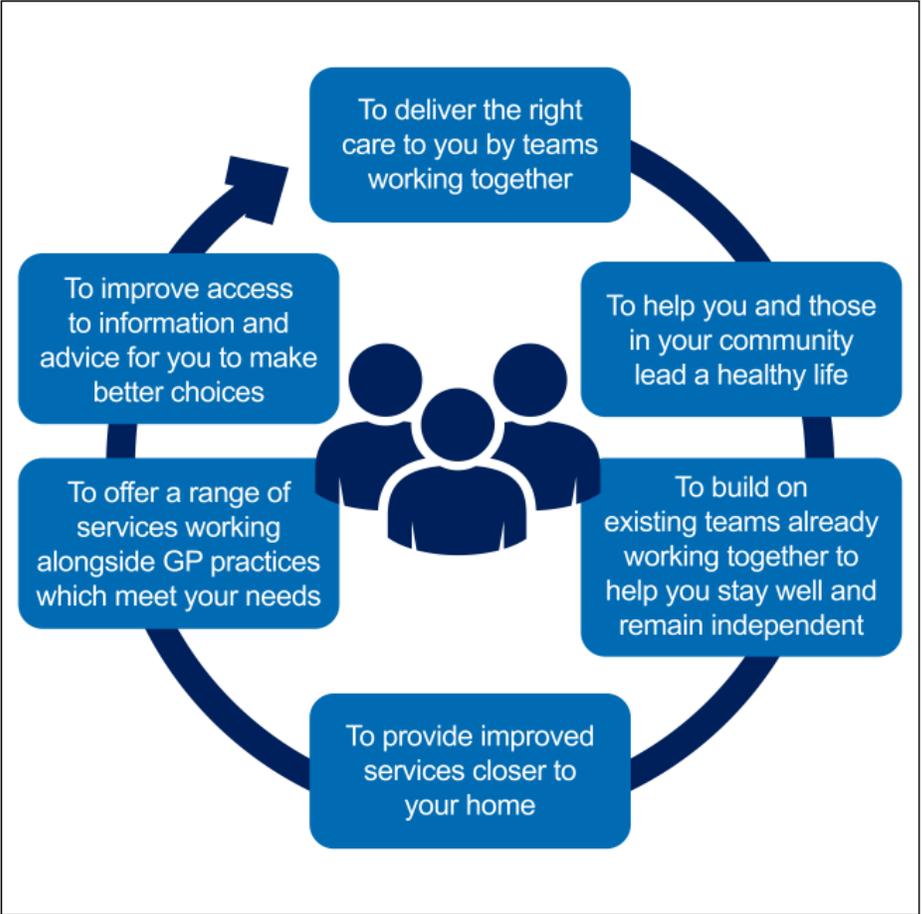
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Integration in Durham - Vision

Our vision for integrated care is:

To bring together health and social care and voluntary organisations to achieve improved health and wellbeing for the people of County Durham



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Integration in Durham - Principles

- Put the patient and service user first
- The right person in the right place at the right time delivering care to reduce handoffs, delays and duplication
- Promote integrity between primary, community and social care
- Deliver care closer to home
- Engage, share and develop our workforce together
- Share the benefits and successes
- Encourage leadership at all levels
- Get the best value from the resources available
- Innovate and make the most of opportunities together
- Respect our differences and promote a culture of integrated working



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Integration in Durham - Workstreams

- Workstreams agreed to make a difference for residents and progressing well
- Hospital Discharge – April 2022
- Crisis Response – April 2022
- Urgent/Emergency Care
- Therapies
- Quality and safety
- Customer contact
- Review of Teams Around Patients
- Digital
- Enhanced Health in Care Homes



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Summary

- Major changes in the Health and Care Bill
- CCGs abolished from April 2022
- Work underway about how services will be commissioned and the structures of the ICS
- Influencing on behalf of County Durham to keep as much finance and decision making at place
- In a strong position because of the CDCP – looking at Joint Committee – “positive” offer to the ICB
- Getting on with improving services in Durham through an Integration Programme
- Questions and comments



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