

Public Document Pack

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To: The Chair and Members of the Adults, Wellbeing & Health Scrutiny & Improvement Committee

Our Ref DemServs/

Your Ref

Contact: Sarah Connolly Directt line: 01642 444414

Friday, 12 April 2024

Dear Councillors,

ADULTS, WELLBEING & HEALTH SCRUTINY & IMPROVEMENT COMMITTEE: MONDAY, 22 APRIL 2024 – ITEM TO FOLLOW

Please find attached the following agenda item(s) that were marked as 'To Follow' on your original agenda.

6. Update on Local Health Structures- Presentation to Follow (2 - 13)

If you have any queries about this matter, please contact me on the number listed above.

Yours sincerely,

MR J SAMPSON
MANAGING DIRECTOR (HEAD OF PAID SERVICE)

CIRCULATION

All Members of the Council (for information)
Corporate Director for Resources
The Press [except for Confidential item(s)]



Integrated Care System arrangements in the North East and North Cumbria

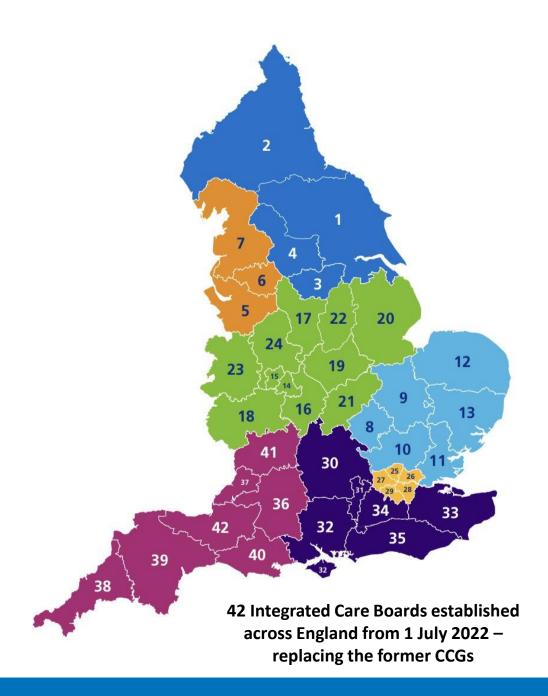
Martin Short Director of Delivery (Tees Valley)

What's an ICS, ICB and ICP?

Integrated Care System (ICS) – includes all of the organisations responsible for health and wellbeing working together across a region to plan and deliver services for our communities.

It is not an organisation but works through the following bodies:

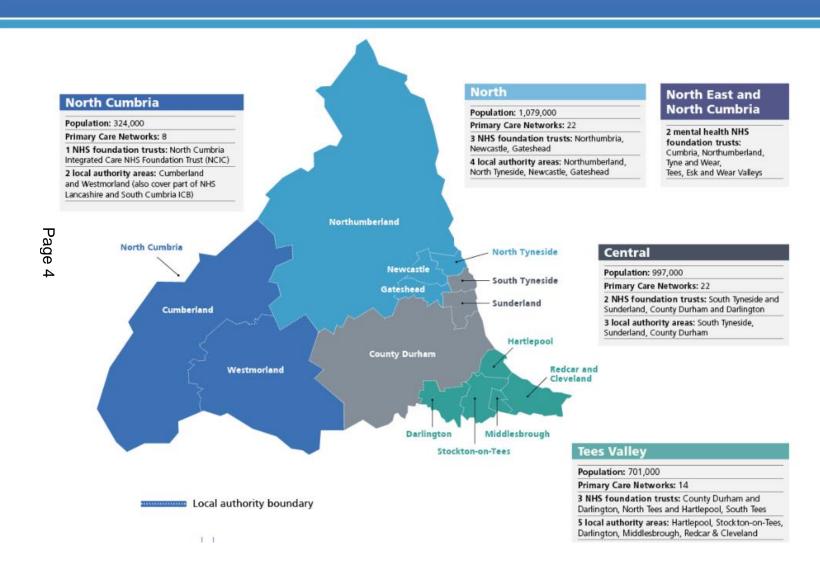
- Integrated Care Board (ICB) a statutory NHS organisation that took on the responsibilities of the former CCGs and some of the functions held by NHS England. The ICB will also work with a range of partners at 'place level' in each of the 14 local authority areas in our region.
- Integrated Care Partnership (ICP) a joint committee of the ICB and the 14 local authorities in the ICS area – plus other invited partners responsible for developing an integrated care strategy for the ICS.



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NHS North East and North Cumbria Integrated Care Board (ICB)





Our area

We are the largest of the 42 Integrated Care Boards in England. Since July 2022 we have reorganised eight clinical commissioning organisations and their Governing Bodies into a single organisation. Our new multi-professional and clinical structures reflect the size of our geography and our responsibilities.

Our role is to:

- Improve health and wellbeing and reduce health inequalities for the 3.1 million people who live in this area
- Plan and oversee how NHS money is spent our total budget is £6.6 billion
- Make sure health and care services work well, together and are of high quality

Most of our work happens at place where we work with:

- 13 local authorities a director post for each unitary tier local authority
- 11 NHS foundation trusts and 64 primary care networks place based teams working with local GP practices, social care teams and community-based providers

As part of an integrated care system we work with all partners to tackle regional issues at scale and pace to deliver our shared priorities.

Our Integrated Care Partnership is an alliance of organisations brought together by the NHS and local authorities which sets the strategy for improving the health of our communities in the North East and North Cumbria. See our integrated care strategy which sets out our vision and long term goals and a high level approach to achieving them.

Annual costs for the ICB for 2022/23:

- Total annual costs for the ICB for 2022/23 are forecast to be £6.6 billion
- Total annual costs to run the ICB (including staffing costs) are forecast to be £56m, which is less than 1% of total budget



Our model: one Strategic ICP and four Area ICPs



It was agreed by JMEG that our 'Area' ICPs would be best chaired by an elected member – e.g. a Health & Wellbeing Board chair or Lead Member

Whitehaven



Northumberland

Newcastle -

Darlington

North ICP: Cllr Lynne Caffrey – Chair of the Gateshead Health and Wellbeing Board



South Tyneside

Hartlepool

Redcar and

■Sunderland

Middlesbrough

Central ICP:
Cllr Kelly Chequer –
Healthy City cabinet
member on Sunderland
City Council



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Tees Valley ICP: Cllr Bob Cook, Leader of Stockton-on-Tees Borough Council

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Integrated Care Partnership



- The partnership brings together
 - local authorities,
 - hospitals,
 - community services,
 - primary care,
 - hospices,
 - voluntary, community and social enterprise organisations (VCSEs)
 - Healthwatch



Integrated Care Strategy

Better & health & wellbeing for all

A plan to improve health and care in the North East and North Cumbria



We want...



Longer and healthier lives

Reducing the gap between how long people live in the North East and North Cumbria compared to the rest of England.



Fairer outcomes

As we know not everyone has the same opportunities to be healthy because of where they live, their income, education and employment.



Better health and care services

Not just high-quality services but the same quality no-matter where you live and who you are.



Giving our children the best start in life

Enabling them to thrive, have great futures and improve lives for generations to come.

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Integrated Care Board - Directorate Structure



Chief Medical Officer

Medical Clinical policy and quidance Individual Funding Requests Medicines optimisation Population Healthier and SRO UEC Clinical leadership

Statutory &

standards

Lead roles Clinical outcomes Caldicott Prevention Health Inequalities **Immunisation** & vaccination Down Syndrome

Chief Nurse, AHP & People

Officer Nursing &AHP Quality & safety system CHC & case management Personal Health **Budgets &** Direct Payments Safeguarding Human resources & OD

SRO-Transfers of Care

Statutory and Lead roles CQC SEND Matemity Alliance Safeguarding & domestic violence Workforce & EDI FTSU

Chief Strategy Officer

Strategic planning System wide Transformation Programmes System Collaboratives PMO

Performance Management & oversight of ICB wide programmes

Clinical & Business intelligence. analytics & surveillance SCC & EPRR

System

convening &

Statutory and Lead roles NHSE regulation NECS Planned care Accountable Emergency Officer

Chief Delivery Officer

ICB Local Delivery Teams

SRO MH/I DA SRO CYP SRO End of Life care

SRO Community & Out of Hospital Care

Statutory and Lead roles Better Care Fund Integration and neighbourhoo d teams Primary Care

Chief Corporate Services

Officer Corporate Governance

Comms Involvement/ Experience Market Research CVSE Legal CEO & Chair's Office Administrative Services Complaints &

SRO Women's health SRO Innovation & Research

Feedback

Statutory and Lead roles Boards Political liaison System Anchor FOI & SAR

Chief Finance Officer

Finance Productivity & efficiency programmes Financial Planning

Statutory and

Lead roles

reporting and

management

Financial

Capital

planning

 Primary Care Optometry

Chief

Officer

provider

market

Procurement

Procurement.

oversight and

management

contracting and

& Contracting

Dental Pharmacy

Specialist Services

Provider Management & Oversight

Statutory and Lead roles Procurement Values Based Commissioning Chief Digital & Infrastructure Officer

Digital Technology Cyber Security Information **Standards** Sustainability **F**states Sustainability

Statutory and Lead roles SIRO Health & Safety

Executive Leadership Team

- ICB Chief Executive Samantha Allen
- Chief Medical Officer Dr Neil O'Brien
- Chief Nurse, AHP & People Officer -David Purdue
- Chief Strategy Officer Jacqueline **Mvers**
- Chief Delivery Officer Levi Buckley
- Chief Corporate Services Officer Claire Riley
- Chief Finance Officer David Chandler
- Chief Procurement & Contracting Officer Dave Gallagher
- Chief Digital and Infrastructure Officer Professor Graham Evans

Joint forward Plan 2023-2028





sufficient workforce



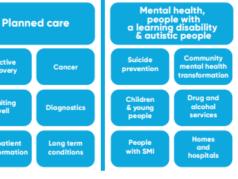


protecting the











- All Integrated Care Boards and partner NHS Trusts are required to publish a Joint Forward plan covering 5 years
- Joint Forward Plans will be reviewed, updated, and published again each year in March
- Aligned to system ambitions; building on existing plans; delivery focussed.
- Demonstrate how ICBs and NHS Trusts will:
 - arrange and/or provide NHS services to meet the population's physical & mental health needs
 - deliver the NHS Mandate and NHS Long Term Plan in the area
 - meet the legal requirements for ICBs.

Tees Valley

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- · Cover what will be happening locally to deliver improvement to health and wellbeing.
- Underpinned by close working between local authorities, health and social care providers, local communities, and voluntary, community and social enterprise sector organisations.



Tees Valley Priorities

- Over the past 2 years we have been working together as a Tees Valley ICP to develop a
 collective understanding of our plans and planning priorities "Planning to be different"
- We have collectively **identified a number of key pillars** that support delivery of our organisational, place and system plans
- Under these pillars we have identified the key programmes, initiatives and ambitions
 which we are seeking to deliver as an ICB with our partners
- Following feedback we have undertaken to more clearly align the pillars and programmes
 of work, to the core common elements of our collective Health and Wellbeing Strategies;
 - Start Well
 - Live Well
 - Age Well

Sustainability

Key:

Tees Valley Places Plan

Health and Wellbeing Strategy



Starting Well/Best Start in Life Living Well **Ageing Well** Children in care Admission Avoidance and Primary Care **Hospital Discharge** · Mental Health, Learning Maternity · Enhanced Health in Care Homes Disabilities and Autism Complex Needs · Elective Recovery · Urgent Community Response · Speech and Language (UCR) Personalised Care · Emotional Health and Wellbeing Falls Musculoskeletal services Children's Mental Health Palliative and End of Life Care Diabetes Neurodevelopmental pathway Prevention · Weight Management Cancer Respiratory · Cardio Vascular Disease (CVD) Reducing Health Inequalities/Fairer Outcomes **Improving Health and Care Services** Longer, Healthier Lives

Integrated Care Strategy

Tees Valley Pillars





Chief Delivery Officer

ICB Local Delivery Teams

SRO MH/LDA SRO CYP SRO End of Life care

SRO
Community &
Out of
Hospital Care

Statutory and Lead roles Better Care Fund Integration and neighbourhoo d teams Primary Care



- The preservation of well-established place-based working arrangements
- While ICSs/ICPs focus on strategic system enablers, place is the level at which most of the work to **join up budgets**, **planning and pathways** for health and social care services will need to happen.
- ICB to delegate some functions and budgets to Place-Based Partnerships
- Place-Based Partnerships typically focus on understanding and working with communities, joining up and coordinating services, addressing the social and economic factors that influence health and wellbeing, and supporting the quality and sustainability of local services
- The priorities of each place will vary depending on the vision and goals agreed locally through Health & Wellbeing Boards, while Place-Based Partnerships are then responsible for overseeing the delivery of this strategy, reporting to the HWB on a regular basis.