

# Integrated Care System arrangements in the North East and North Cumbria

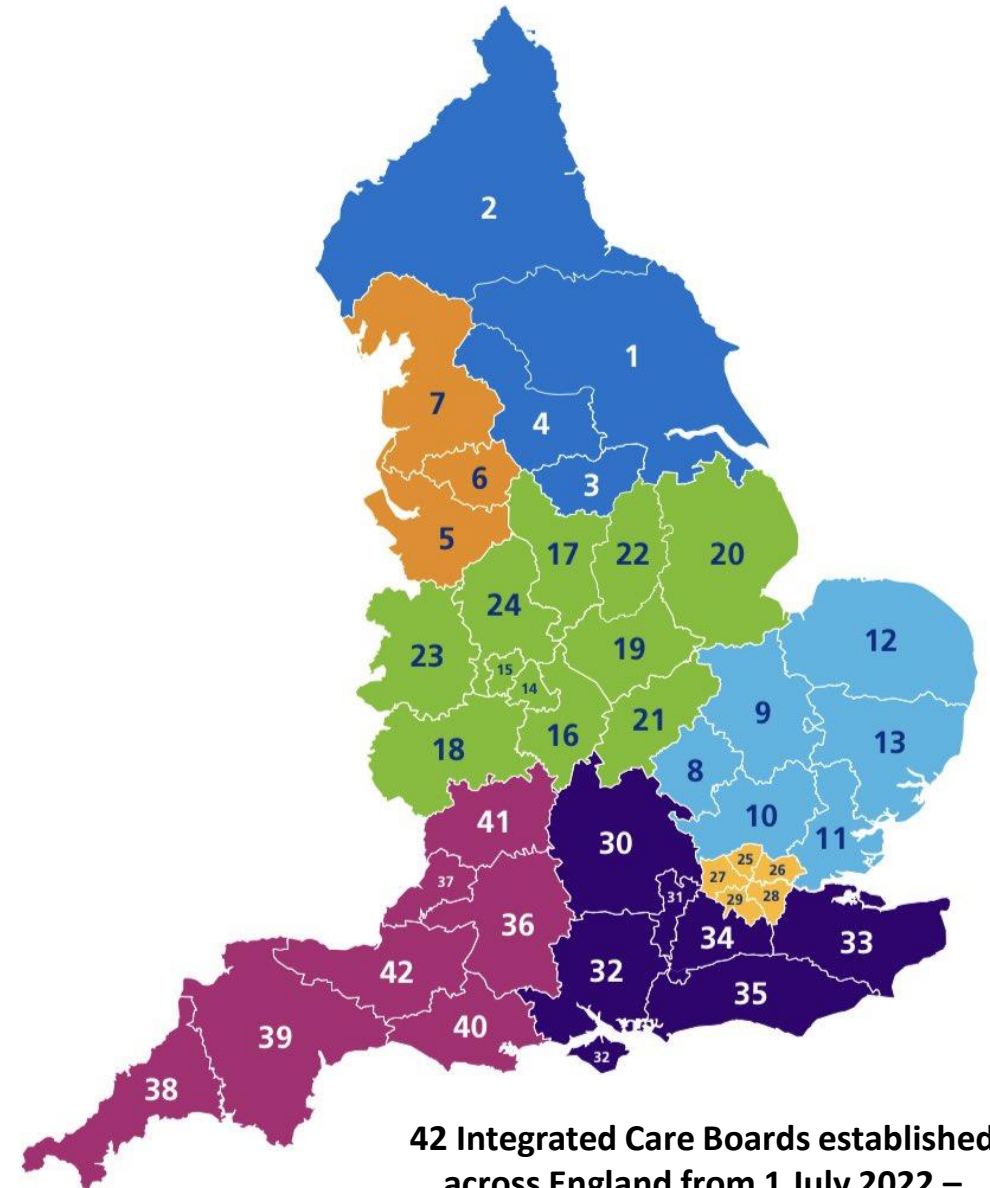
**Martin Short**  
Director of Delivery (Tees Valley)

# 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.

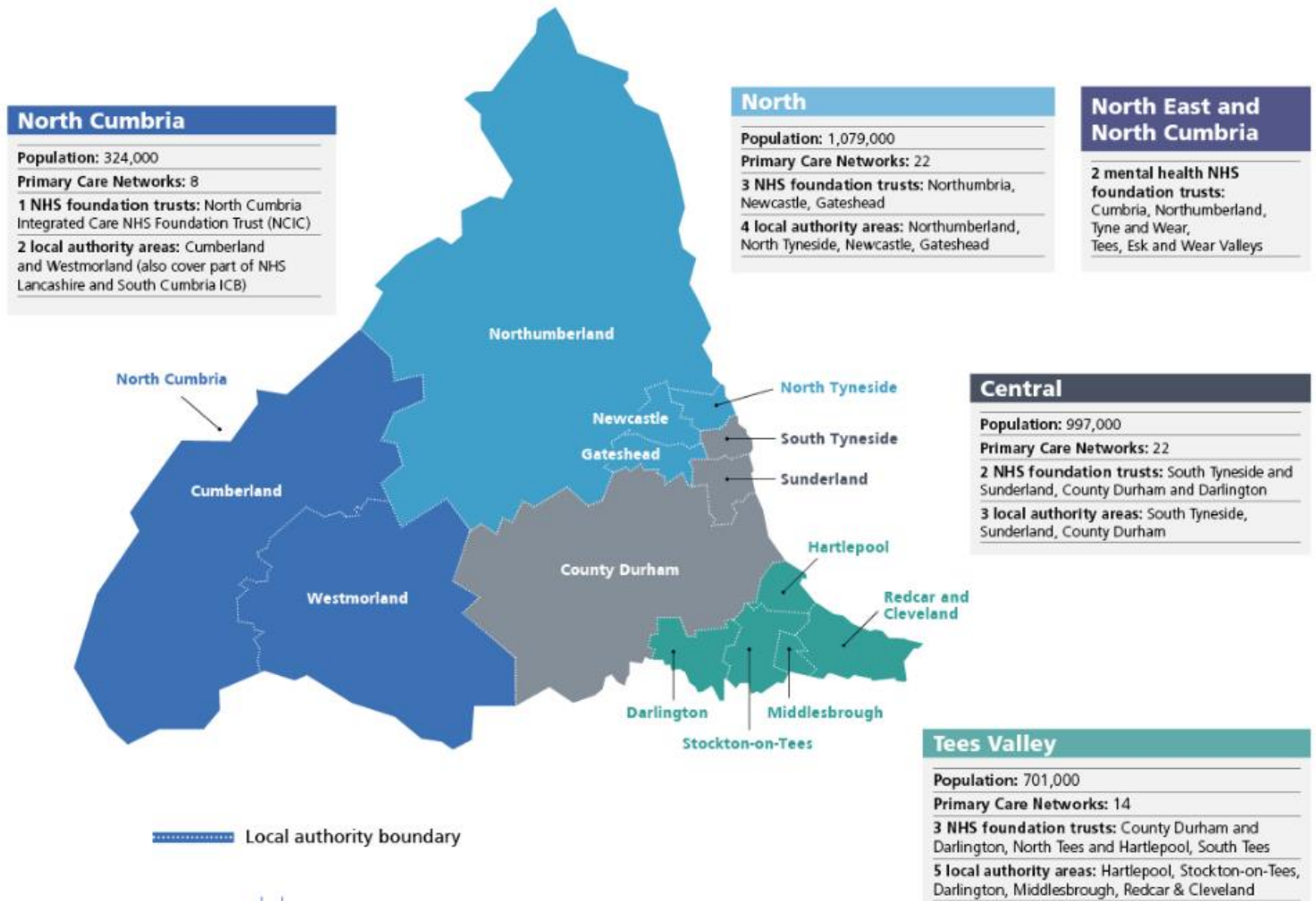
It is not an organisation but works through the following bodies:

- **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.



42 Integrated Care Boards established across England from 1 July 2022 – replacing the former CCGs

# 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



**North Cumbria ICP:**  
Cllr Mark Fryer  
leader of  
Cumberland Council



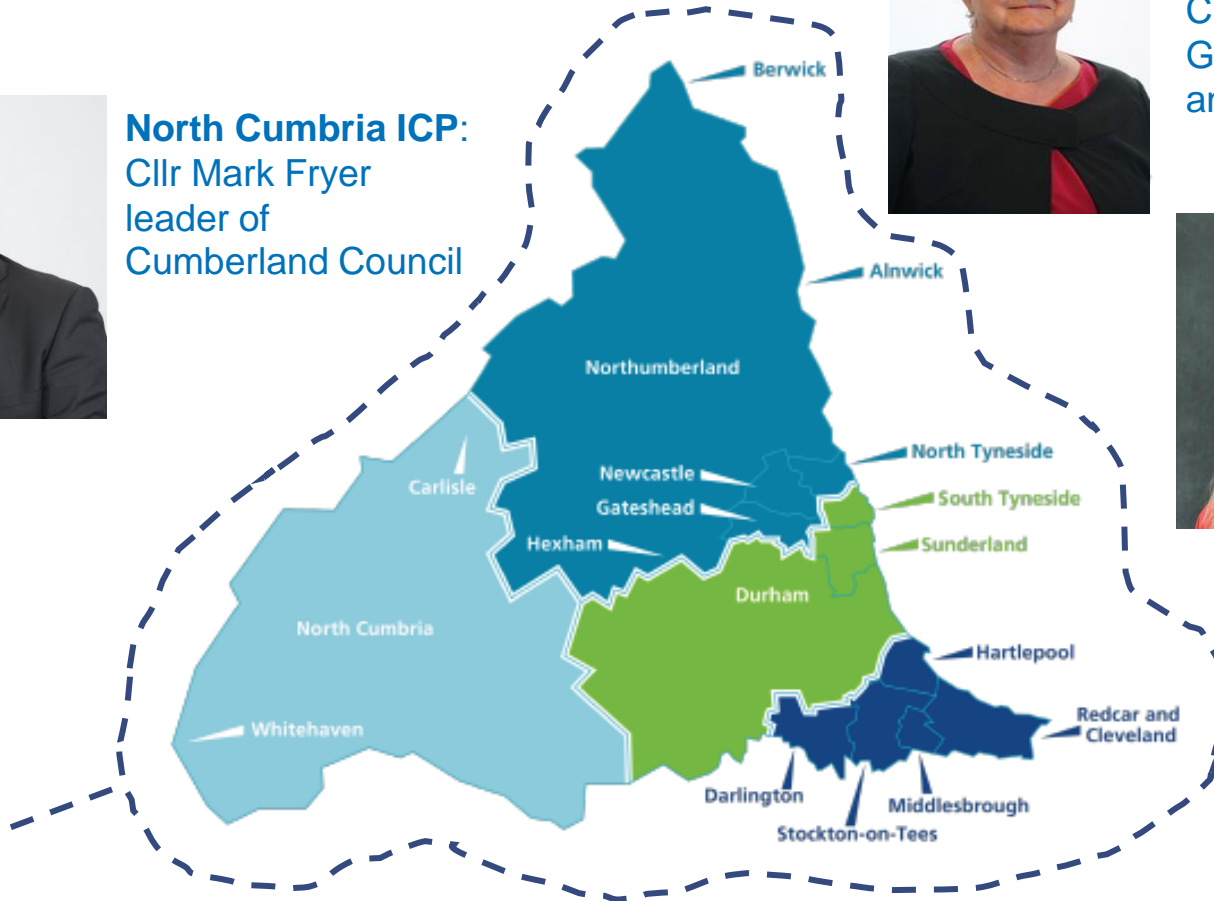
**North ICP:**  
Cllr Lynne Caffrey –  
Chair of the  
Gateshead Health  
and Wellbeing Board



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



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



**North East and North Cumbria Integrated Care Partnership**

# 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.

# Integrated Care Board – Directorate Structure



North East and North Cumbria

<p><u>Chief Medical Officer</u></p> <p>Medical Clinical policy and guidance Individual Funding Requests Medicines optimisation Population Health Healthier and Fairer SRO UEC Clinical leadership standards</p> <p><u>Statutory &amp; Lead roles</u> Clinical outcomes Caldicott Prevention Health Inequalities Immunisation &amp; vaccination Down Syndrome</p>	<p><u>Chief Nurse, AHP &amp; People Officer</u></p> <p>Nursing &amp; AHP Quality &amp; safety system CHC &amp; case management Personal Health Budgets &amp; Direct Payments Safeguarding Human resources &amp; OD</p> <p>SRO – Transfers of Care</p> <p><u>Statutory and Lead roles</u> CQC SEND Malemity Alliance Safeguarding &amp; domestic violence Workforce &amp; EDI FTSU</p>	<p><u>Chief Strategy Officer</u></p> <p>Strategic planning System wide Transformation Programmes System Collaboratives PMO Performance Management &amp; oversight of ICB wide programmes Clinical &amp; Business intelligence, analytics &amp; surveillance SCC &amp; EPRR</p> <p><u>Statutory and Lead roles</u> NHSE regulation NECS Planned care Accountable Emergency Officer System convening &amp; leadership</p>	<p><u>Chief Delivery Officer</u></p> <p>ICB Local Delivery Teams</p> <p>SRO MHLDA SRO CYP SRO End of Life care</p> <p>SRO Community &amp; Out of Hospital Care</p> <p><u>Statutory and Lead roles</u> Better Care Fund Integration and neighbourhood teams Primary Care</p>	<p><u>Chief Corporate Services Officer</u></p> <p>Corporate Governance Comms Involvement/ Experience Market Research CVSE Legal CEO &amp; Chair's Office Administrative Services Complaints &amp; Feedback</p> <p>SRO Women's health SRO Innovation &amp; Research</p> <p><u>Statutory and Lead roles</u> Boards Political liaison System Anchor FOI &amp; SAR</p>	<p><u>Chief Finance Officer</u></p> <p>Finance Productivity &amp; efficiency programmes Financial Planning</p> <p><u>Statutory and Lead roles</u> Financial reporting and management Capital planning</p>	<p><u>Chief Procurement &amp; Contracting Officer</u></p> <p>Procurement, contracting and provider oversight and market management for:</p> <ul style="list-style-type: none"> <li>• Primary Care</li> <li>• Optometry</li> <li>• Dental</li> <li>• Pharmacy</li> <li>• Specialist Services</li> </ul> <p>Provider Management &amp; Oversight</p> <p><u>Statutory and Lead roles</u> Procurement Values Based Commissioning</p>	<p><u>Chief Digital &amp; Infrastructure Officer</u></p> <p>Digital Technology Cyber Security Information Standards Sustainability Estates Sustainability</p> <p><u>Statutory and Lead roles</u> SIRO Health &amp; Safety</p>
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## 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 Myers
- 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

North East and North Cumbria



Longer & healthier lives



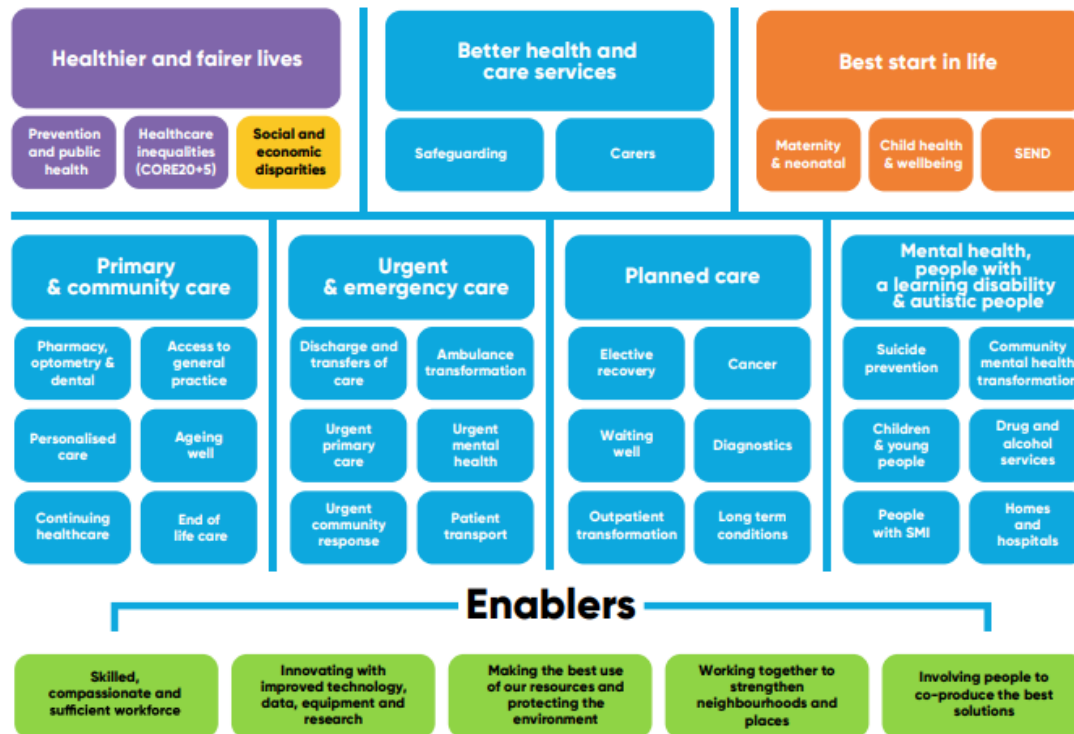
Fairer outcomes for all



Better health & care services



Giving children and young people the best start in life



- 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

# Working locally.....

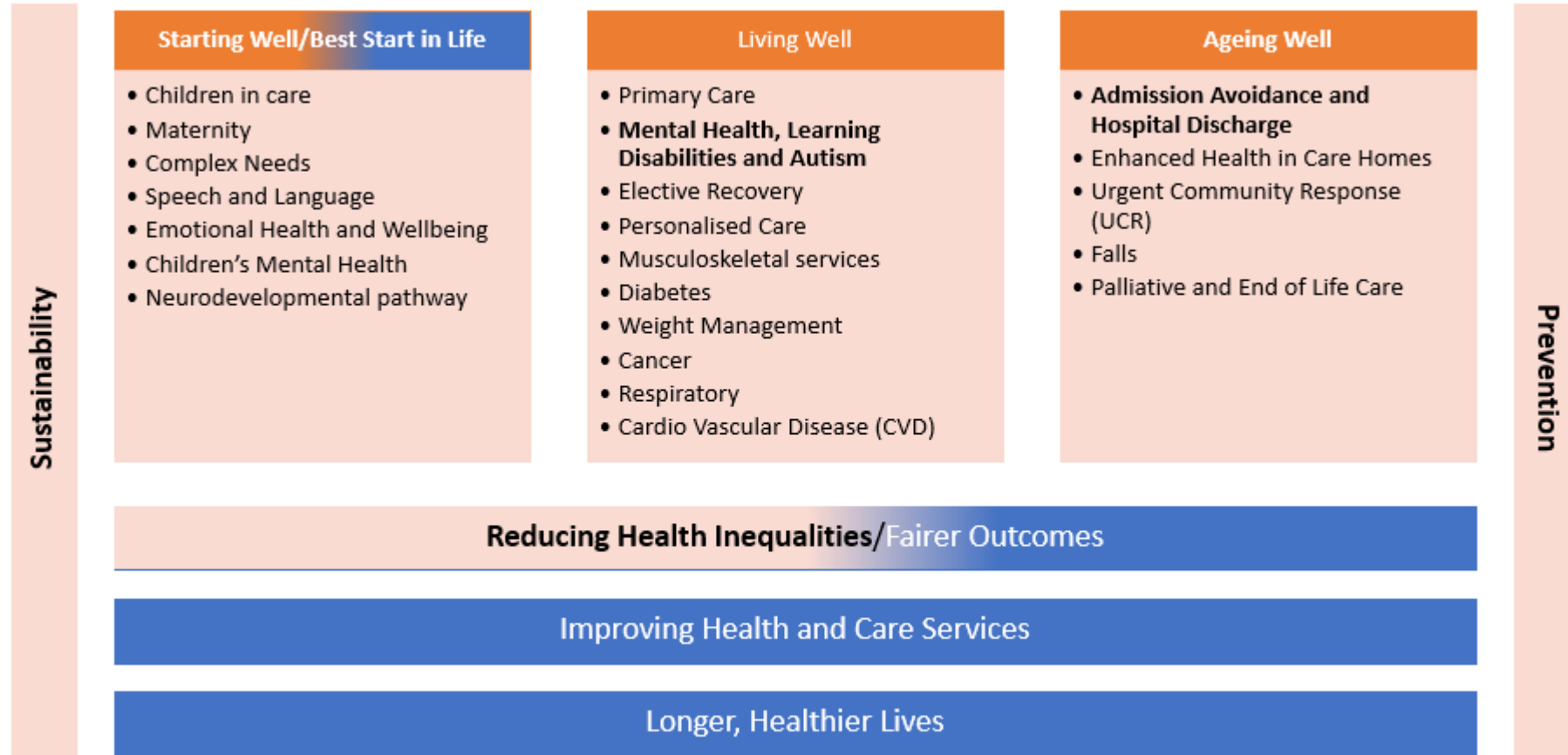


- Our Joint Forward Plan also includes ‘place plans’
  - Cover what will be happening locally to deliver improvement to health and wellbeing.
  - Underpinned by close working between local authorities, health and social care providers, local communities, and voluntary, community and social enterprise 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**

# Tees Valley Places Plan



Key:  Health and Wellbeing Strategy  Integrated Care Strategy Bold Tees Valley Pillars

# Local Delivery Team

Chief Delivery Officer

ICB Local Delivery Teams

SRO MHLDA  
SRO CYP  
SRO End of Life care

SRO Community & Out of Hospital Care

Statutory and Lead roles  
Better Care Fund  
Integration and neighbourhood 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 co-ordinating 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.