

**Report for:** Joint Sub-Committee of the Islington and Haringey Health & Wellbeing Boards

**Title:** NHS Long-Term Plan and Implications for Development of Integrated Care

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## 1. Purpose

This paper provides a summary of the NHS Long Term Plan with a particular focus on its implications for the development of Integrated Care Systems in both boroughs.

## 2. Describe the issue under consideration

In 2018, the NHS was tasked with producing the Long-Term Plan as a blueprint for the NHS's ambitions over the next 10 years. The resulting Plan was published in Jan-19 and focusses on building an NHS fit for the future by:

- Enabling everyone to get the best start in life;
- Helping communities to live well;
- Helping people to age well.

The Plan sets out its ambitions for improving patient care in 5 categories:

- *Transforming health and care* through greater collaboration at a local level between GPs, their practice teams, community health and social care through integrated care;
- *Investing in prevention and tackling health inequalities*: The NHS will increase its contribution to addressing the causes of ill health such as smoking, unsafe alcohol consumption and developing diabetes, particularly for those groups most affected;
- *Creating a workforce that meets demand* through improving recruitment and training of more professionals, particularly clinical and medical staff;
- *Making better use of data and digital technology* through greater use of tools, shared patient records and improvements to analytics to support service planning and delivery;
- *Getting the most out of taxpayers' investment in the NHS*: Working with health and care professionals to identify ways to reduce duplication, make better use of the NHS's combined buying power and reduce spend on administration.

The details of the NHS Long Term Plan are summarised in Appendix A. Many of the expectations set out in the plan are in line with the current direction of travel and are already being addressed through actions at borough and STP level. Although there will be challenges in meeting expectations in some areas, such as digital and financial balance across the system.

The focus for the joint board is particularly on the outlined new model of care and requirements within the Long Term Plan for the development of Integrated Care Systems. It is timely to reflect on the Inter-Great simulation events in both boroughs and to consider, drawing on insights from these events, how members of the joint board would want to shape the development of integration for our boroughs.

### **Expectations set within the Long Term Plan for the development of Integrated Care Systems**

A range of expectations are outlined for Integrated Care Systems:

- Integrated care and place based systems will be consolidated in the establishment of ICSs in each STP area.
- The level for an ICS is not set. However, there is an expectation that there will be one CCG per ICS.
- There is an expectation that ICSs will provide a plan of their approach for NHSE by April 2019.
- ICSs will agree system wide objectives with NHSE / Improvement Regional Directors
- Each ICS will have a partnership board, drawn from a representing commissioners, trusts, primary care networks and – with the clear expectation that they will wish to participate – local authorities, the voluntary and community sector and other partners
- A non-executive chair (locally appointed, but subject to approval by NHS England and NHS Improvement)
- Sufficient clinical and management capacity drawn from across their constituent organisations to enable them to implement agreed system-wide changes
- Full engagement with primary care, including through a named accountable Clinical Director of each primary care network;
- Greater emphasis by the Care Quality Commission (CQC) on partnership working and system-wide quality in its regulatory activity, so that providers are held to account for what they are doing to improve quality across their local area;
- Contributions of partners to ICS goals will potentially be backed up by longer term contracts in which there is a duty of collaboration between partners

### **Health and care budget alignment**

Councils and CCGs will be supported in bringing health and social care budgets together where there is agreement. A range of potential ways of doing this are outlined but there are no set expectations:

- voluntary budget pooling between a council and CCG for some or all of their responsibilities;

- individual service user budget pooling through personal health and social care budgets;
- the Salford model where the local authority has asked the NHS to oversee a pooled budget for all adult health and care services with a joint commissioning team; or
- the model where the CCG and local authority ask the chief executive of NHS England to designate the council chief executive or director of adult social care as the CCG accountable officer.

### **Primary Care Networks**

Primary Care Networks feature strongly within the Long Term Plan as a unit of organising primary care, community health, care and navigation/social prescribing at a local level. There is an expectation of clinical leadership at this level, with contract payments for additional services being paid at a network level rather than to individual practices. Within London there is likely to be an acceptance that networks may be larger than the specified 30-50,000 population. Within North Central London it is likely that primary care network configuration will, wherever possible, be in line with existing network/CHIN/locality configurations.

NHS England see 2019/20 as a transitional year in which local NHS and care partners have the opportunity to shape local implementation for their populations over the next 5 years. NHSE anticipate there will be a number of iterative steps to local planning between local CCGs, NHS providers and Council who will be expected to collaborate to:

- Develop plans for implementing the Plan's commitments in 2019/20 (for April 2019, though no detailed guidance has as yet been released);
- Develop more considered plans for a five-year system plan (for September 2019).

### **3. Recommendation**

The joint board is asked to discuss responses to the Long Term Plan and to consider learning and insights from the InterGreat events.

It is not clear yet what responses on the development of integration will be required from boroughs. However, the joint board is asked to note that Haringey and Islington will be continuing to work 'on the ground' through our prototypes and will also be starting to set out at borough level, our proposed and preferred models for integration. These can then contribute towards an NCL response. The joint board is asked to approve that these responses should be developed collaboratively and brought to a future joint board meeting for consideration.