



Integrated Care System

Nottingham & Nottinghamshire

ICS Board Summary Briefing – August 2019

Please find below the Nottingham and Nottinghamshire Integrated Care System (ICS) update following the ICS Board on 8th August. Please ensure this is cascaded to Governing Boards/Bodies, Management Teams and other key stakeholders and teams across your respective organisations. Minutes from the ICS Board held on 12th July 2019 will shortly be published on the system's website – <https://healthandcarenotts.co.uk/about-us/ics-board/>

Introduction

The Chair of the ICS, David Pearson, welcomed a number of citizens and staff from across the system to Board meeting – reminding colleagues that the meeting was held in public and all the papers for the meeting are available at <https://healthandcarenotts.co.uk/about-us/ics-board/>. Patients, citizens and staff from organisations across the system are always welcome to the Board to hear the discussions.

Patient Story – Social Prescribing

The Board welcomed a patient and a clinical leader from the 'Live Well In Rushcliffe' programme – a 'vanguard' programme of social prescribing that has helped to shape the national thinking on this approach. Social Prescribing is the concept of enabling GPs, nurses and other primary care professionals to refer people to a range of local, non-clinical services. Social prescribing schemes can involve a variety of activities which are typically provided by voluntary and community sector organisations. Examples include arts activities, group learning, gardening, befriending, cookery, healthy eating advice and a range of sports. The Board was struck by the powerful positive impact this approach had obviously had for the patient who told their story. A series of simple non-clinical interventions had enabled this patient to avoid a medication solution for their potential depression and supported them to become a volunteer in the service that actually helped them in the first place. The Board also discussed how to make this approach available across the whole ICS area and secure ongoing funding for its delivery.

ICS Five Year Plan Update

Further to discussions in the public Board meetings earlier this year and at the Board's Development Session in July, the ICS's Director of Finance presented an update on the proposed approach for the development of the ICS's local system strategy in response to the NHS's Long Term Plan. The Board discussed and agreed the approach, noting the following;

- The team are working to ensure that all the expectations from NHS England / Improvement for our local plan are understood and met before the required submission in September (draft) and November (final).
- The ICS is keen to ensure that ICP priorities are clearly incorporated in the overall plan as well as existing thematic strategies (eg, Mental Health) as well as the national strategic direction. Triangulating between all these elements will not be straightforward.
- The development of the CCG's Commissioning Intentions will be incorporated into the local system strategy.

The Board also agreed the outline approach to approving the local system strategy when agreed, including the creation of an additional Board meeting in mid-November for final signoff.

ICS Workstream Review

Given the evolving nature of the ICS, its ICPs and the emerging expectations from the local five year plan, it was felt appropriate to review the ICS's existing workstreams. The Board approved the overall direction of travel, moving some workstreams into 'business as usual' and realigning some other work. The Board also asked for regular updates to the Board from each workstream lead, ensuring a higher level of visibility for the work that is being delivered.

ICS Memorandum of Understanding

Further to the discussion at the May and June meetings of the ICS Board, the Board received a final update on the Memorandum of Understanding between the ICS and NHS England/Improvement. The Memorandum of Understanding (MoU), which is refreshed annually, sets out the expectations from NHSE/I for the ICS to deliver and also includes a summary of what support (including the £5m Transformation Funds described below) and additional freedoms the ICS can expect to enjoy in return. The MoU has now been finalised and approved by the Chair of the ICS in late July. The Board noted the final contents of the MoU and members of the ICS agreed to ensure that their own Boards were aligned to its contents.

East Midlands Ambulance Service Update

Richard Henderson, Chief Executive of East Midlands Ambulance Service presented an update from EMAS. The Board noted and congratulated Richard and the rest of the team at EMAS on their recent 'Good' rating from CQC which included an 'Outstanding' rating for Caring. The presentation reaffirmed the intention of EMAS to be an integral part of the health system of the East Midlands and in particular the Nottingham and Nottinghamshire ICS. The Board welcomed and fully endorsed the proposal to pilot a new, differentiated, way of responding to 999 calls including using Specialist and Advanced Paramedic roles to get the right care and skills in the right place as quickly as possible. Given the proposed introduction of paramedic roles into Primary Care Networks (PCNs) in 2021/22, this gives the ICS a chance to be ahead of the rest of the country with these exciting new approaches.

Transformation Funds

Further to the discussion at the July meeting of the Board, the ICS's Director of Finance presented a further proposal to allocate the remaining Transformation Funds available to the system. There is a total £5m of Transformation Funding allocated to Nottingham and Nottinghamshire as part of the support package for being an ICS. Each ICP discussed this opportunity across May and June and the majority of the money was allocated to Place-based projects at the July Board. The remaining funding was offered out to system-wide projects and the proposed allocation of this funding was discussed and approved.

The two projects that will benefit from this funding are;

- The Clinical Services Strategy. £0.1m allocated to support the further development of the Strategy including clinical and public engagement activities, analytical work and overall programme management.
- Data, Analytics, Intelligence and Digital Technology (DAIT) Strategy. Following the approval at the July Board of an overall strategy for Data, Analytics, Intelligence and Digital Technology, a small working group has met and scoped the work, identifying that some initial funds (£0.1m) are needed to kick start the strategy development. These

funds will only be spent once all no-cost options have been exhausted, including drawing on local business and university expertise.

The full detail of the projects supported is in the public papers.

Governance and Risk Register

The ICS's Chief Nurse, Elaine Moss, presented an update on the Board's risk register and assurance framework. The ICS Governance Group, which has members drawn from all organisations involved in the system, continues to meet to manage and update the overall system risk register. The Board indicated that it was content with this arrangement but throughout the meeting had identified the need for an overall governance review as the system continues to mature. As part of this, the Board also agreed an approach to managing conflicts of interest, approved the Finance Group Terms of Reference and discussed some additions to the membership of the Board.

The Board meets again on 12th September

David Pearson,
Independent Chair, Nottingham and Nottinghamshire ICS

Deborah Jaines,
Deputy Managing Director, Nottingham and Nottinghamshire ICS