

# Policy Briefing | Integrated Care Systems

## DRAFT

This briefing provides an overview of proposals for the development of Integrated Care Systems (ICS), as outlined in the Department for Health and Social Care white paper on (DHSC) 'Integration and Innovation: Working together to improve health and social care for all', and the local and regional implications of proposals. The briefing includes:

1. Background
2. Benefits to Sutton's residents and local policy position
3. Development and delivery of ICS transition programme across South West London
4. Proposed timeline for South West London ICS

### 1. Background

The white paper sets the priorities for health and care over the next ten years. It also looks towards post-COVID-19 health and care needs to support recovery from the pandemic.

Central to the proposals, is the aim of achieving joined up care, enabled by 'all parts of the NHS, public health and social care system seeking out ways to connect, communicate and collaborate'<sup>1</sup>, to improve population health and care outcomes. In practice, this means that:

- From April 2021, all parts of the health and care system are expected to work together as an ICS, with legislation to establish ICSs as statutory bodies likely to be in place from April 2022, subject to parliamentary approval. An ICS will be comprised of two distinct parts:
  - **ICS Health and Care Partnership**, formed of the NHS (including GPs and primary care networks, NHS trusts and foundation trusts), local government, and voluntary and community partners, which will bring together systems and local leadership to address the population's health and social care needs through place-based planning; and
  - **ICS NHS Body**, formed by integrating distinct parts of the NHS: CCGs and non-statutory Sustainability Transformation Plans (STP)<sup>2</sup>, which will be responsible for the day to day running of the ICS). Although the ICS will take on many of the CCG functions, the proposals aim to bring together perspectives and skills from a wider range of partners. The ICS remit will be broader, and partners, as outlined above, will have active roles in leadership. Some current functions of the CCG could also be delegated within the system, aiming to increase collective decision making to improve care and help plan services that meet the needs of local people<sup>3</sup>.

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<sup>1</sup> Department for Health and Social Care (DHSC) (2021). Integration and Innovation: working together to improve health and social care. [online] gov.uk. Available at:

[www.gov.uk/government/publications/working-together-to-improve-health-and-social-care-for-all/integration-and-innovation-working-together-to-improve-health-and-social-care-for-all-html-version](https://www.gov.uk/government/publications/working-together-to-improve-health-and-social-care-for-all/integration-and-innovation-working-together-to-improve-health-and-social-care-for-all-html-version) [Accessed Mar. 2021].

<sup>2</sup> London Councils (2021). Health and Social Care White Paper: Integration and Innovation.

<sup>3</sup> NHS (2021). FAQs on ICS Legislative Recommendations. [online] nhs.uk. Available at:

[www.england.nhs.uk/wp-content/uploads/2021/02/C1127-faqs-on-ics-legislative-recommendations.pdf](https://www.england.nhs.uk/wp-content/uploads/2021/02/C1127-faqs-on-ics-legislative-recommendations.pdf) [Accessed Apr. 2021].

- Provider organisations are asked to step forward in formal collaborative arrangements that allow them to operate at scale;
- Strategic, cross-system commissioning arrangements will be developed, with a focus on population health outcomes; and
- Digital systems and data sharing will be used to enable system working, connect health and care providers, improve outcomes, and put people at the heart of their own care.

This will be supported by other proposals to; reduce bureaucracy and legislative barriers to integration; improve accountability and enhance public confidence; and additional measures to support social care, public health and the NHS<sup>4</sup>.

The council submitted an individual response to the proposals in January 2021, aligned with a regional response from South West London boroughs of Croydon, Kingston upon Thames, Merton, Richmond upon Thames, Sutton and Wandsworth, also submitted in January 2021, as outlined to Health and Wellbeing Board in January 2021 (Appendix A, pg. 3-4, and Appendices B and C of the report).

## 2. Benefits to Sutton's residents and local policy position

Sutton Council has a strong history of partnership working with the NHS. Working in this way is key to delivering for the community, and the council is supportive of the general policy direction of greater collaboration between NHS organisations and across the NHS and local government. The council has consistently sought to:

- Jointly plan and deliver services wherever possible, as exemplified by Sutton Health and Care;
- Involve the voluntary sector and community in the planning and delivery of services;
- Develop local services which are truly responsive to local communities;
- Empower residents, so they can make well informed choices about their own health and wellbeing.

There is a strong emphasis on place and partnership in the proposals, welcomed by the council. Through place development, the plans highlight opportunities for local government to shape the development of strong, place-based systems locally. The 'Strengthening Communities' programme of the ICS<sup>5</sup>, will enable decisions to be taken closer to communities. The council believes that 'place' should be clearly identified as Sutton.

The proposals aim to remove legislative barriers to collaboration, and highlight opportunities for integration between partners to overcome competing objectives, and separate funding channels/arrangements<sup>6</sup>. One purpose of this is to enable the NHS to contribute to economic and social recovery beyond COVID-19 through partnerships with councils where services (e.g. housing, leisure and employment services, as well as public health and social care) are key to population health and wellbeing<sup>7</sup>. This provides an opportunity to build on the increased partnership seen over the previous twelve months in response to COVID-19, and increase the capacity and self-reliance of voluntary and community organisations<sup>8</sup>.

Through consultation, the council has sought further clarification on how meaningful partnerships will be reflected in governance of ICS Boards, including local authority and elected member representation, and links to existing local democratic structures.

## 3. Development and delivery of ICS transition programme across South West London

South West London (SWL) ICS has developed a transition programme to enable operation in shadow form from October 2021, in preparation for full implementation from April 2022, subject to legislation. SWL ICS is

<sup>4</sup> London Councils, 2021

<sup>5</sup> London Councils, 2021.

<sup>6</sup> London Councils, 2021.

<sup>7</sup> NHS (2021).

<sup>8</sup> South London Partnership (2021). Health and Care. Report to South London Partnership Leaders' Board, unpublished.

committed to place-based partnerships through the delegation of decisions on functions carried out at different levels, resources, decision making, governance and accountability, as outlined below<sup>9</sup>.

Place transition teams comprising NHS acute, mental health, community and primary care leads, and local authority leads are being set-up in each area to build on the existing local partnerships. These teams will design place governance and decision making aligned with the local system, including Health and Wellbeing Boards, and the wider local democratic system.

The 'Strengthening Communities' programme will be led by local government to ensure places have the necessary system-level support, infrastructure and influence, whilst fitting into the wider ICS, and aligning with local government priorities, governance and accountability. It will also offer an opportunity to focus on collaborative local partnerships and approaches and to learn from COVID-19 in terms of local impacts and system responses.

#### 4. Proposed timeline for South West London ICS

- **April 2021:** Development plans in place which show how the system meets the current operating arrangement of an ICS, and planning requirements for the next phase of the COVID-19 response.
- **September 2021:** Implementation plans for the future roles of organisations within the system, adapted in light of legislation developments.
- **October 2021:** Planned operation of the SWL ICS.
- **April 2022:** Subject to government approval, implementation of legislation.

#### 5. Additional information - social care

Very broad brush, and as outlined above the white paper and Health and Care Bill is about the formal development of ICS's, and hence reorganisation of the NHS with driver outcomes being removing bureaucracy, joining the NHS up better, and supporting more integrated working within the NHS and wider strategic partners including Local Authorities etc. There is nonetheless an additional specific item that the Local Authority should note. This pertains to the commitment in the bill to introduce an improved level of accountability within social care, with a new assurance framework allowing greater oversight of local delivery of care, and improved data collection which will allow the government to '*better understand capacity and risk in the social care system*'.

Specifically the white paper says: *The govt wants to ensure the adult social care system is delivering the right kind of care, and the best outcomes, with the resources available....To achieve this, we want to work with LA's and the sector to enhance existing assurance frameworks that will support our drive to improve the outcomes and experience of people and their families in accessing high quality care and support, regardless of where they live*. To support these goals, the government proposes to introduce through the bill, a new duty for the Care Quality Commission (CQC) to assess LA's delivery of their adult social care duties (Care Act 2014). Linked to this duty, it is also proposed to introduce a power for the Secretary of State to intervene where, following assessment under the new CQC duty, it is considered that a LA is failing to meet their duties. The plan, as stated by the govt is to secure these provisions in primary legislation at a high level, prior to working with govt partners and the sector on detailed system design and practice, providing a long-term basis of consistent oversight with the goal of reducing variation in the quality of care.

Notwithstanding, the white paper states the legislative measures in the bill are just one element of a wider programme of reform for the adult social care sector, in that the govt reports a commitment to sustainable improvement of the adult social care system and thus will bring forward wider social care reform, with proposals to be published later this year.

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<sup>9</sup> South London Partnership (2021).

**Appendices**

Appendix	Title
A	<a href="#">Report to Health and Wellbeing Board: Integrated Care Systems consultation</a>