

INTEGRATED CARE PARTNERSHIP
07 February 2024

ITEM 05

Report sponsor: Chris Clayton, Chief Executive Officer, NHS Derby and Derbyshire
Report author: Chris Clayton, Chief Executive Officer, NHS Derby and Derbyshire

Update from the Integrated Care Board

Purpose

- 1.1 To update the Integrated Care Partnership (ICP) on current priorities of NHS Derby and Derbyshire Integrated Care Board (ICB) and broader policy matters affecting the NHS.

Recommendation

- 2.1 The ICP is requested to receive the report for information and assurance.

Reason

- 3.1 The ICP is requested to receive the report for information and assurance.

Supporting information

Integrated Care Board Chair Appointment

- 4.1 Dr Kathy McLean OBE has been announced as the new Chair of NHS Derby and Derbyshire ICB. Dr McLean will stand down from her chair role at University Hospitals of Derby and Burton NHS Foundation Trust (UHDB) to take up her new post from 1 May 2024. The role will be alongside her existing role as chair of the NHS Nottingham and Nottinghamshire Integrated Care Board and Integrated Care Partnership. The two roles complement each other and are aligned to the development of the Combined Council Authority across Derby & Derbyshire and Nottingham & Nottinghamshire. There is no inference that this appointment is a step towards an ICB merger. Current Acting Chair Richard Wright will continue as Vice Chair of the ICB Board.

Chesterfield Royal Hospital appoint new Chair

- 4.2 Chesterfield Royal Hospital NHS Foundation Trust has appointed Mahmud Nawaz as their new Chair. He will take up his role very soon and will replace Dr Helen Phillips, who has been Chair since 2015. Mahmud brings varied and rich experience across roles in the public and private sectors.

2024/25 Planning & Finances

- 4.3 The ICB published the Derby and Derbyshire NHS 5-Year Plan (also known as Joint Forward Plan or JFP) on 30 June 2023. The JFP was the NHS' response to the Integrated Care Strategy and set out five guiding policies, which at the time of publication would require improvement actions to be allocated in due course:
1. Allocate greater resource to activities that will prevent, postpone, or lessen disease complications and reduce inequity of provision.
 2. Give the teams working in our localities, the authority to determine the best ways to deliver improvements in health and care delivery for local people.
 3. Give people more control over their care.
 4. Identify and remove activities from the provision of care which result in time and cost being expended but do not materially improve patient outcomes.
 5. Prioritise the improvement of the System's Intelligence Function and the capacity and capability of its research programme.
- 4.4 The plan identified the careful balancing act of managing immediate and short-term operational priorities with longer-term ambitions. 2023/24 has proved to be a year of significant operational challenge, with existing urgent and emergency care pressure overlaid by industrial action. Development of the improvement actions is now progressing in earnest and will initially feed the development of the 2024/25 Operational Plan.
- 4.5 The JFP represents a stable set of foundations to build on, particularly from a local perspective. From a national perspective, we expect the Department for Health and Social Care to publish a 5 year Major Conditions Strategy at some point in 2024 following a recent period of consultation. Based on what has been published to date via the consultation, it is agreed that there is a good fit between the MSC and the intent of our JFP. At the time of writing, this guidance has not arrived from NHS

England to support the 2024/25 Operational Plan. Whilst planning work continues in detail, affordability of plans cannot be confirmed.

- 4.6 A series of planning workshops are taking place across our delivery boards to identify the priorities for 2024/25 and beyond. These workshops will bring together programme leads, provider leads and system planning leads to develop 2024/2025 and medium-term plans. Engagement leads will also attend these workshops. The initial aim is to develop a shared understanding of the context for programme planning including:
- National planning requirements (noting these may be 2023/2024)
 - JUCD system planning approach and timeframe
 - JUCD strategic priorities and key planning objectives
 - Specific programme priorities
 - Population health data and specific health needs affecting the area in scope
 - Financial context and planning principles.
- 4.7 The workshops will also be seeking to agree the high-level objectives and priorities for the programme in 2024/2025 including measures of success
- Agree what a 'good plan' looks like
 - Identify any key interdependencies with other programmes, including where the programme will need to include actions to support other system priorities
 - Identify any support needs to complete next phase of plans
 - Agree further work, leads and timeframes to develop the plan.
- 4.8 At the time of writing, ICB year to date financial position at the end of Month 7 was a £49.2m deficit against a planned deficit of £11.5m. The main factors driving this continue to be industrial action, excess inflation, and the change in policy for the revenue cost of capital. The unmitigated, likely-case year end validated forecast for 2023/24 was a deficit of £47.3m which reflects these pressures that were not known at the time of planning and pressures on delivering the agreed plan, including planned efficiencies.

Integrated Care System (ICS) Assessment Regime

- 4.9 The Care Quality Commission has been working closely with integrated care boards, local authorities and patient groups to develop their new integrated care systems assessment regime. ICS leaders are supportive in principle of the regulator's ICS assessment role, which spans health and social care and welcome the opportunity to benefit from external insight to inform system-wide improvement. ICS leaders involved in the CQC's ICS assessment pilots so far have found it a useful experience and the process has helped to pull system partners together.
- 4.10 The Department of Health and Social had asked the CQC to [consult](#) on an annual fee for assessments, which the NHS Confederation has noted this would ultimately result in a reduction in available funding for ICBs and ultimately impact on patient care. As part of the consultation, which closed in December, it proposed two alternatives; that ICSs could usefully take part in peer review approach to

assurance, and that the Department of Health and Care might cover the additional costs of the assessment programme. The consultation continues.

Future commissioning of specialised services approved

- 4.11 NHS England has approved [plans](#) to fully delegate the commissioning of appropriate specialised services to integrated care boards (ICBs) in the East of England, Midlands and North West from April 2024. Joint commissioning arrangements in other regions will continue for a further year. This will enable more joined-up care for patients with a focus on population health management (PHM) and tackling health inequalities.

Right Care, Right Person

- 4.12 '[Right Care Right Person](#)' is a national agreement acknowledging Police are increasingly involved in responding to the public with a range of health or social circumstance needs including those having some form of mental health distress when they are not necessarily the most appropriate agency to respond. Nationally, this has led to the coroner attributing the cause of some deaths as avoidable where the police have been the only agency to get involved but are not formally trained to make "safe and well" decisions. Furthermore, when the Police do intervene, they are often not able to handover care to a more appropriate professional in a timely manner.
- 4.13 While there will always be cases where the Police need to be involved in responding to someone in a mental health crisis, the 'Right Care Right Person' approach will ensure the Police are only involved in mental health situations where necessary. This means that Police involvement will only occur where there is a real and immediate risk to life or serious harm, or where a crime or potential crime is involved. Given this, the impact on health providers and patients, whilst not yet fully quantified, will clearly be significant and requires a system wide response.
- 4.14 Further guidance has been emerging which we are reviewing across the system partners as we seek to understand implementation, which is anticipated by summer 2025. There is a working group in place with partners to oversee this programme, and a meeting has taken place with the Chief Constable.

East Midlands Combined Council Authority

- 4.15 Derby City Council and Derbyshire County Council have approved plans to become a part of the new [East Midlands Combined Council Authority](#) (EMCCA), along with Nottingham City and Nottinghamshire County Council. It is anticipated that the new authority will receive £4bn of devolved funding for transport, skills and adult education, housing, the environment and economic development. A public consultation on East Midlands devolution, carried out between November 2022 and January 2023, showed strong support for the plans among local residents, businesses and community groups. Should legislation come into force, the EMCCA would seek to elect the first East Midlands Mayor in May 2024.

DHU Healthcare "Outstanding" - CQC

- 4.16 DHU Healthcare's Chesterfield-based Urgent Care North out of hours service has been listed as 'Outstanding' by the Care Quality Commission following its most recent inspection. Based at Ashgate Manor, the service treats and cares for patients referred through DHU's own 111 service based on the symptoms they

describe, receiving an appointment at one of seven Primary Care Centres in the region or a home visit, depending on the needs of the individual patient. Following a three-day visit from assessors in October 2023, the CQC rated DHU's service as 'Outstanding' in terms of providing an effective, caring, responsive and well-led service for patients, 'Good' in terms of a safe service and 'Outstanding' overall. Congratulations to the DHU Healthcare team.

ICB Staff Consultation

- 4.17 The ICB concluded its formal consultation with staff on organisational structures on 7th January 2024. This consultation follows receipt of a letter from NHS England in March 2023 which set out a requirement for all ICBs to reduce running costs by a total of 30% by the end of the financial year 2025/26, with at least 20% of this saving by the end of the financial year 2024/25, and a further 10% in 2025/26.
- 4.18 The ICB is now governing the next steps in this process, and this will be discussed further with staff in due course.

Service Pressure

- 4.19 December and January continued to see sustained service pressure for the NHS system, driven in part by challenges ensuring patients were able to flow our services, exacerbated by periods of industrial action by Consultants and Junior Doctors. Frontline teams and management are thanked for their continued efforts to deliver safe care across our system and their relentless efforts to manage this challenging period.
- 4.20 Our continued forward planning for winter, and for the operational challenges raised by industrial action has been robust, and the system has seen the benefits of structural and strategic work undertaken during 2023 to ensure we are able to improve our position, especially on discharge planning and on ambulance handovers. There has been more community care available in Derby and Derbyshire this winter to support the flow of patients through their treatment and rehabilitation, and this is the result of focused and strategic work during the year. Whilst demand is still greater than supply, the increased flow has enabled improved handovers from ambulance crews at the hospital front door, which in turn supports the ambulance service efforts to reach people who require support more quickly in the community. The system has remained in escalation during these challenging periods but can see the results of our longer-term thinking bearing fruit.
- 4.21 Services have also seen increases in Covid-19 and influenza in the community; this has been managed in our hospitals by cohorting infected patients and current indications are that levels of infection are reducing in the community.

Provider Selection Regime (PSR) regulations now in place

- 4.22 Parliament has approved the Provider Selection Regime regulations confirming that from 1 January 2024 relevant authorities must follow the PSR when arranging healthcare services. The PSR is a set of rules for procuring health care services in England by organisations termed relevant authorities. These are: NHS England, Integrated Care Boards (ICBs), NHS trusts and NHS foundation trusts, local authorities and combined authorities. The PSR does not apply to the procurement of goods or non-health care services (unless as part of a mixed procurement), irrespective of whether these are procured by relevant authorities.

Workwell prospectus published

- 4.23 WorkWell, a joint pilot between the Department of Health and Social Care (DHSC) and the Department for Work and Pensions, is an early intervention assessment service which provides holistic support to overcome health-related barriers to employment. Local system partnerships of ICBs, local authorities and local Jobcentre networks can use the prospectus to apply for funding to deliver WorkWell services. The ICB is currently working on a submission to become a pilot area for the scheme.

More GP practice appointments than ever, thanks to 100s more health and care staff

- 4.24 The number of appointments at a GP practice in Derby and Derbyshire has grown 22% over the past four years, figures show. The increase has been achieved partly because hundreds of health and care professionals have been recruited since 2019 to support GPs in busy surgeries. Additional staff such as physiotherapists, nurses, paramedics, pharmacists and social prescribers also mean patients can be seen more quickly than if they had to wait for an appointment with a GP.

Expansion of mental health crisis services across Derby and Derbyshire

- 4.25 The range of local support services for people with immediate mental health needs has been expanded in Derby and Derbyshire. The expansion of mental health crisis services is part of a wider programme of partnership activity led by Joined Up Care Derbyshire which aims to improve outcomes for people with immediate mental health needs.

Radiotherapy team highly commended in prestigious national award for work to improve service for breast cancer patients

- 4.26 University Hospitals of Derby and Burton's Radiotherapy team who are based at Royal Derby Hospital won Highly Commended in a prestigious national award for its innovative work implementing tattoo-free radiotherapy and improving the patient journey for patients receiving treatment for breast cancer.

Further Diagnostic Services to Launch at Walton Hospital's Community Diagnostic Centre

- 4.27 As part of a £29.9m investment in 'one-stop-shop' Community Diagnostic Centres (CDCs) in Derby and Derbyshire, Walton Hospital's CDC opened two new services in December 2023 and further enhancements and developments are planned throughout 2024.

East Midlands Ambulance Service welcomes new Director of Quality Improvement and Patient Safety

- 4.28 Keeley Sheldon has been appointed as the new Director of Quality Improvement and Patient Safety at East Midlands Ambulance Service (EMAS). Keeley was formerly at Nottinghamshire Healthcare NHS Foundation Trust in the role of Deputy Director for Community Health Services and started her career in the NHS 24-years ago, when she joined an acute hospital trust as an adult general nurse.

- 4.29 ICB Board meetings take place in public bi-monthly. They are held on Microsoft Teams and streamed live via YouTube. To read papers for the meetings and to access the link to watch the meeting, please [visit the ICB's website](#).

Other Items of Interest

4.30 [NHS dementia diagnosis rates at three-year high](#)

The NHS is diagnosing tens of thousands more people with dementia since the start of the pandemic. A dementia diagnosis is the first step in assessing whether someone would be suitable for treatments, or whether they and their family need further support.

4.31 [NHS vaccination strategy](#)

The NHS vaccination strategy aims to improve access to vaccinations across the country. System leaders will have the flexibility to plan and deliver local services, with systems taking increased delegated responsibility by April 2025 for commissioning a vaccination delivery network tailored to the needs of their local population.

4.32 [NHS App reaches record users on fifth anniversary](#)

Three quarters of adults in England are now signed up to the NHS App. The total number of monthly logins has increased by 54% over 12 months, from 16.8 million in November 2022 to 25.8 million in November 2023 – the equivalent of 10 logins a second. Statistics also show that pensioners are the most active users of the NHS App.

Public/stakeholder engagement

- 5.1 The ICB is continuing to define the role of its Public Partnership Committee, which will oversee assurance on the delivery of our Engagement Strategy. This involves partnership working with a range of organisations across the health and care system.

Other options

- 6.1 None arising from this report.

Financial and value for money issues

- 7.1 None arising from this report.

Legal implications

- 8.1 None arising from this report.

Climate implications

- 9.1 None arising from this report.

Socio-Economic implications

10.1 None arising from this report.

Other significant implications

11.1 None arising from this report.

This report has been approved by the following people:

Role	Name	Date of sign-off
Legal Finance Service Director(s) Report sponsor	Chris Clayton, Chief Executive Officer, NHS Derby and Derbyshire	30/01/2024
Other(s)		

Background papers:
List of appendices: