

Appendix 1

Report Title:	Independent Review and ICS Board decision to Confirm the Number of Integrated Care Providers (ICPs) in Nottingham and Nottinghamshire
Report Author:	Deborah Jaines, Deputy Managing Director Nottinghamshire ICS
Report Summary:	
<p>At the 15 February ICS Board meeting, members considered the outputs of an independent review concerning the optimal configuration of Integrated Care Providers (ICPs) for the Nottingham and Nottinghamshire ICS. This piece of work was commissioned following the decision in November 2018 to no longer progress with the development of LICPs – a construct that was unique to Nottinghamshire. (The National construct for parts of the new system is ‘Primary Care Network’ which are grouping of patients organised around primary care at scale with populations of 30-50,000 people, ‘Integrated Care Provider’, groups of providers responsible for the needs of patients in a place covering 250-300,000 people and ‘Integrated Care System’, responsible for at least 1,000,000 people.)</p> <p>The paper considered at the ICS Board meeting on 15 February, which built on the independent review, concluded that there should be three ICPs for the Nottinghamshire ICS:</p> <ul style="list-style-type: none">- An ICP for the City of Nottingham- An ICP for the area of Nottinghamshire covering Broxtowe, Gedling and Rushcliffe- An ICP for the area of Nottinghamshire covering Ashfield, Mansfield, Newark and Sherwood. <p>The review included a review of the emerging evidence base at this time.</p> <p>The ICS Board considered whether any additional information might change the recommendation and concluded that it would not. This is because the national guidance on population size and the importance of place is of such significance.</p> <p>On the basis of the recommendation of the independent review, the paper and the Board discussions, the ICS Board agreed through a vote that the preferred number of ICPs in the Nottingham and Nottinghamshire ICS would be three.</p> <p>Consistency of approach, principles and behaviours will be important to secure efficiency and effectiveness (in particular for those organisations that provide services across the whole of the city and county such as Nottingham University Hospitals NHS Trust and Nottinghamshire Healthcare NHS Trust). Therefore the ICS Board agreed that this decision be reviewed in 12 months' time to support good governance and to provide assurance that ICPs are operating in line with agreed principles behaviours and guidelines. Arrangements to secure a consistent set of principles, and behaviours for the operation of the ICPs within the ICS context will be put in place by the end of March 2019.</p> <p>Nottingham City Council Executive Board is asked to consider this report and confirm support for three ICPs for Nottingham and Nottinghamshire.</p>	
Action:	

To note

To agree

To agree the recommendation/s (see details below)

Recommendations:

- | | |
|----|---|
| 1. | Consider this report. |
| 2. | Confirm support for three ICPs for Nottingham and Nottinghamshire |
| 3. | Note that representatives on the ICS Board from Nottingham City Council will be asked to provide a verbal update following this decision. |

**Independent Review and ICS Board decision to Confirm the Number
of Integrated Care Providers (ICPs) in Nottingham and
Nottinghamshire**

Executive Board

April 11th 2019

Background

1. Up until November 2018, the direction of travel was that of establishing and resourcing two Integrated Care Providers (ICPs) (one in Mid Nottinghamshire and one in Greater Nottingham). This was on the basis of the Deloitte commission on our system architecture, which was agreed by the STP Leadership Board on 17 August 2018. The Deloitte work focused principally on the allocation of functions across the new system architecture, and did not form a view on ICP numbers.
2. On November 12 and November 13 2018, a timeout was held with system leaders to firm up arrangements for future system working, at which it was acknowledged that the Nottinghamshire architecture had created an additional 'tier' of system architecture (the Locality Integrated Care Partnerships – or LICPs) that was an addition to the national model at the time and the model that was subsequently reiterated in the Long Term Plan. (This model being ICS, ICP and Primary Care Networks (PCNs)). A collective decision was therefore reached that the Locality Integrated Care Providers (LICPs) should not be progressed.
3. Consequently, the Nottingham City CCG, Nottingham City Council and City PCNs urged the ICS to reconsider the proposal for two ICPs and to consider establishing a south Nottinghamshire ICP and a Nottingham ICP in addition to the Mid Nottinghamshire ICP in order to retain the benefits of place based and population-focused working. This argument is predicated on the distinct and different needs and characteristics of the City population. In view of the decision about LICPs and the clarity afforded by the Long Term Plan about the anticipated population scales for places, the Nottingham City CCG and Nottingham City Council further articulated the importance of focus on its specific population. ICS partners reconsidered the conclusions that were reached by the Deloitte work about the number of ICPs and considered establishing a Nottingham City ICP in addition to the two already proposed.
4. All of the other outputs of the Deloitte commission remain extant and should be referred to in conjunction with this paper. Whilst the functions of the LICP no longer exist in isolation, they will be delivered through partnership working between ICPs and the forming PCNs.

Independent Review to Confirm the Number of Integrated Care Providers

5. PWC were commissioned to undertake an independent review of the best arrangements for ICPs in the Greater Nottingham footprint, which included interviews with system leaders and an assessment of the emerging evidence base and best practice.
6. The outcomes of the PWC commission on ICP options have now been concluded and shared with those system partners specifically engaged in the review.
7. The ICS Board considered the findings of the review at its meeting on 15 February. Key decisions were made at this meeting for the constituent organisations to consider further:
 - ICS Board agreed through a vote that to maintain pace, no further work should take place on the review of ICPs. The review included a comprehensive review of the emerging evidence base and at this time, there is no further evidence to support decision making.
 - ICS Board agreed through a vote that the preferred number of ICPs in the Nottinghamshire ICS is three. The County Council agreed the recommendation with an addendum that a further piece of work be completed to explore how consistency will be maintained across ICPs.
 - ICS Board agreed that this decision be reviewed in 12 months' time to support good governance and to provide assurance that ICPs are working in line with principles and guidelines.
 - ICS Board agreed the proposed principles for ICPs to work within and that a workshop be facilitated to ensure common understanding of what these principles mean in theory and practice. By the end of March, a consistent set of principles, objectives and behaviours for the operation of the ICPs within the ICS context will be formulated.

Recommendations

8. The Executive Board of Nottingham City Council are asked to:
 - Consider this report.
 - Confirm support for three ICPs for Nottingham and Nottinghamshire
 - Note that representatives on the ICS Board from Nottingham City Council will be asked to provide a verbal update at the next ICS Board

**Deborah Jaines
Deputy Managing Director
25 February 2019**