



**Integrated  
Care System**  
Nottingham & Nottinghamshire

# Nottingham City ICP

Update for HWB

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# Nottingham City ICP progress update

- Overview of ICP and PCNs purpose
- City ICP development so far
- Emerging governance
- Priority activities
- Areas requiring further clarification
- Long Term Plan overview

# Reminder – the why



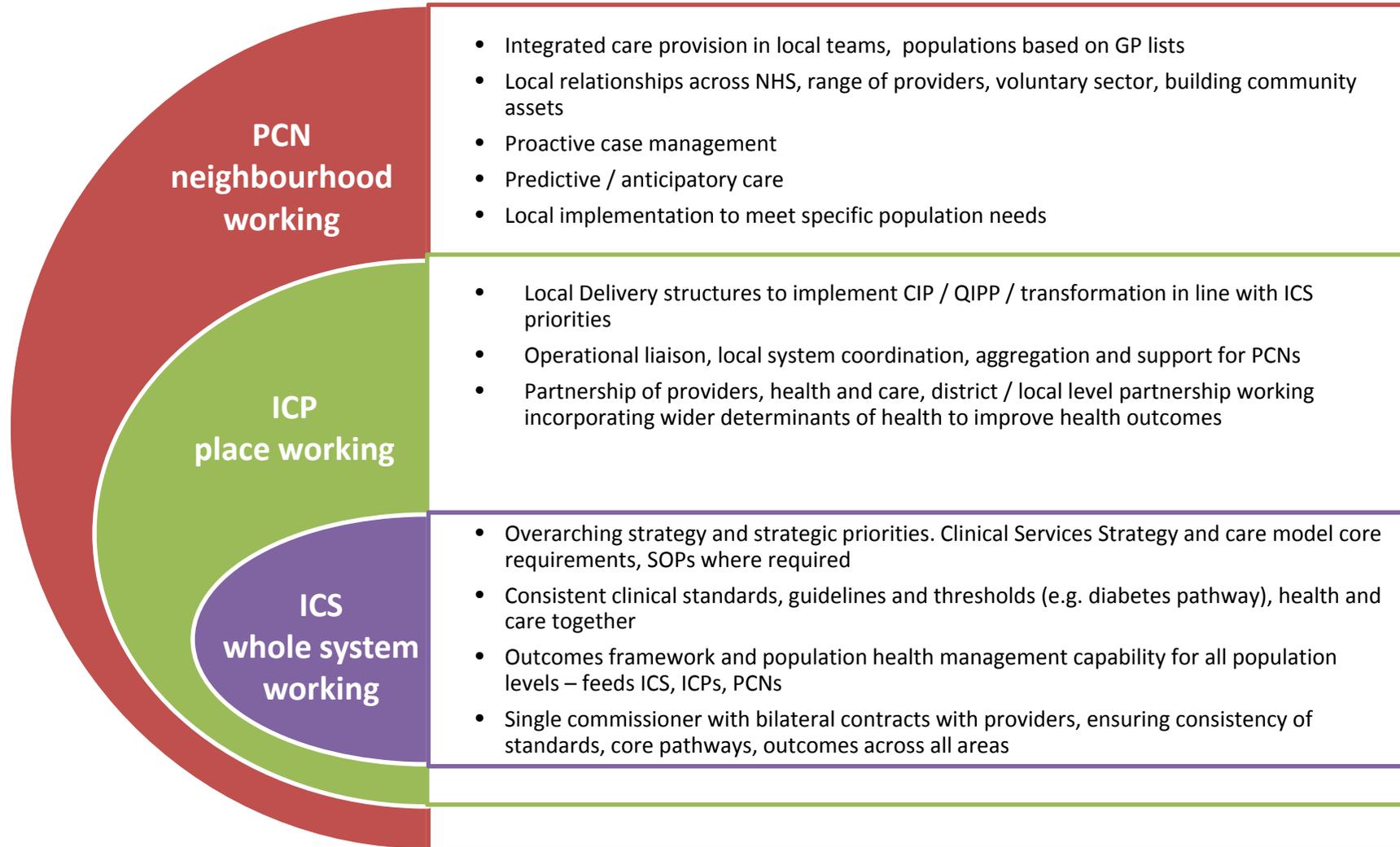
- NHS remains a great success
- Many citizens are living longer - but now live with multiple long term conditions
- Expectations & capabilities also rising
- Creates significant demographic and financial pressures with a Do nothing gap locally of £xxx million over 5 years
- Also requires more holistic, preventative and integrated approaches to get better outcomes
- The model of the Nottingham ICS, ICPs and PCNs is a locally owned response to these pressures and the associated national directives

# Primary Care Networks ("The Neighbourhoods")



- Stabilise, support and improve resilience in General Practice
- Improve primary care capacity – new workforce & skill-mix
- Build relationships with local health and social care providers
- Crossing the primary/secondary care divide, community partners
- Identifying local health inequalities and building services to address them – build trust by doing
- Including feedback 'upstream' to commissioners/system when service gaps identified

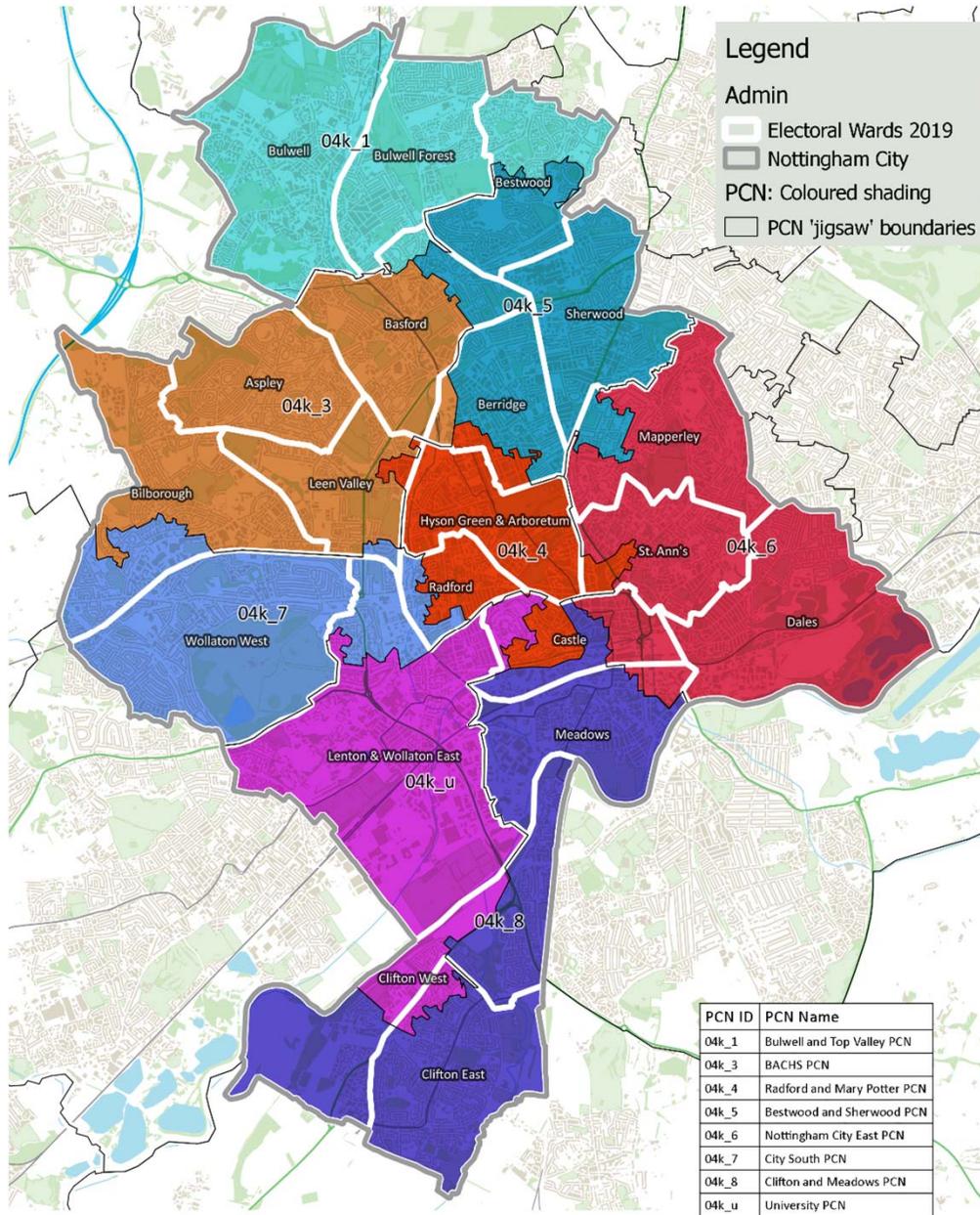
## Working at system, place and neighbourhood population levels: what should happen where (right task for the right population level)



# PCNs and City Wards 2019



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# 8 City PCNs established



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Produced by Nottinghamshire County Public Health Analysts (LB 20190906)

# City ICP development group

- ICP has brought partners together in an inclusive development group
  - NHS, Social Care, Housing, VCS and commissioning
  - Development Group becoming Executive Management Team (chair Ian Curryer)
  - New Partnership Forum (Board) being agreed to start end October
  - Workforce Launch event on 7<sup>th</sup> November
  - Appointed all 8 Clinical Directors for the PCNs, started July 2019
  - Appointed full time Programme Lead starting 4<sup>th</sup> November
- 
- Adult Social Care
  - NUH
  - Public Health
  - Framework Housing Association
  - CCG City Locality
  - City PCN representation
  - CCG Strategic Commissioning
  - CityCare
  - NHT
  - Nottingham City Homes
  - Nottingham VCS
  - City GP Federation
  - ICS Senior management
  - City Council Commissioning

# City ICP Programme Priorities

Programme Priority
<b><u>“Grip the City and confront the brutal facts”</u></b> - Financial and Performance grip on City as single view of ICP
<b><u>“Manage Now and sharpen our prioritisation and focus”</u></b> - Leadership of the City Health and Care development activities
<b><u>“Set the rules of engagement and decision making”</u></b> - Establish great governance at the City and local PCN level
<b><u>“Get behind the vision”</u></b> – Focus on Change Management relentlessly
<b><u>“Build the team and lead the future”</u></b> – Identify roadmap for full population health management

# City ICP focus areas 19/20 in more detail



- Support PCNs around Social prescribing - consistent model
- Improve non cancer End of life
- Reduce Smoking
- Improve Childhood flu vaccination uptake
- Help excluded and vulnerable groups such as homelessness
- Help flow – special focus on Homecare capacity and models
- Mental Health inc mental health in children in schools

## Expectation of PCNs

- Integral component of City ICP
- Clinical Director membership of ICP Exec Management Group
- Clinical Director representative on the ICS Board

# But we also mustn't forget



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Its also about strengthening relationships and trust

- Across primary, community and secondary care
- Across Health and social care
- Across providers inc CVS
- Across providers and citizens

*As we know to really change the 'system' and create a sustainable health and care model in the City we need to build trust at all levels*

# For clarity -what the ICP isn't



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- It isn't a means to an end in itself
- It isn't about privatization of the NHS
- It isn't about creating the ground for corporations to come in and run the NHS
- It Isn't about professional protection
- It isn't a model to try and avoid scrutiny or local democratic oversight

# Areas requiring further clarification

- Getting the Interface between three ICPs needs to be resolved (GNTB into ICS Interface group ?)
- Role of the HWBB could develop
- CCG resources to be aligned to the City
- Partners contributions to the ICP need to be determined

# NHS Long Term Plan (LTP) Goals (1)



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The **NHS Long Term Plan** is a new **plan** for the **NHS** to improve the quality of patient care and health outcomes:

- A new service model for the 21st century
  - boosting out-of-hospital care
  - Emergency care services will also be expanded and reformed
  - Give patients more control over their own health and more personalised care when they need it
  - digitally-enabled primary and outpatient care
  - focus on population health
- More NHS action on prevention and health inequalities
  - To cut smoking
  - To reduce obesity
  - To limit alcohol related A&E admissions
- Further progress on care quality and outcomes
  - Children and young people
  - Better care for major health conditions including cardiovascular and respiratory conditions, learning disability and autism.

# NHS Long Term Plan (LTP) Goals (2)



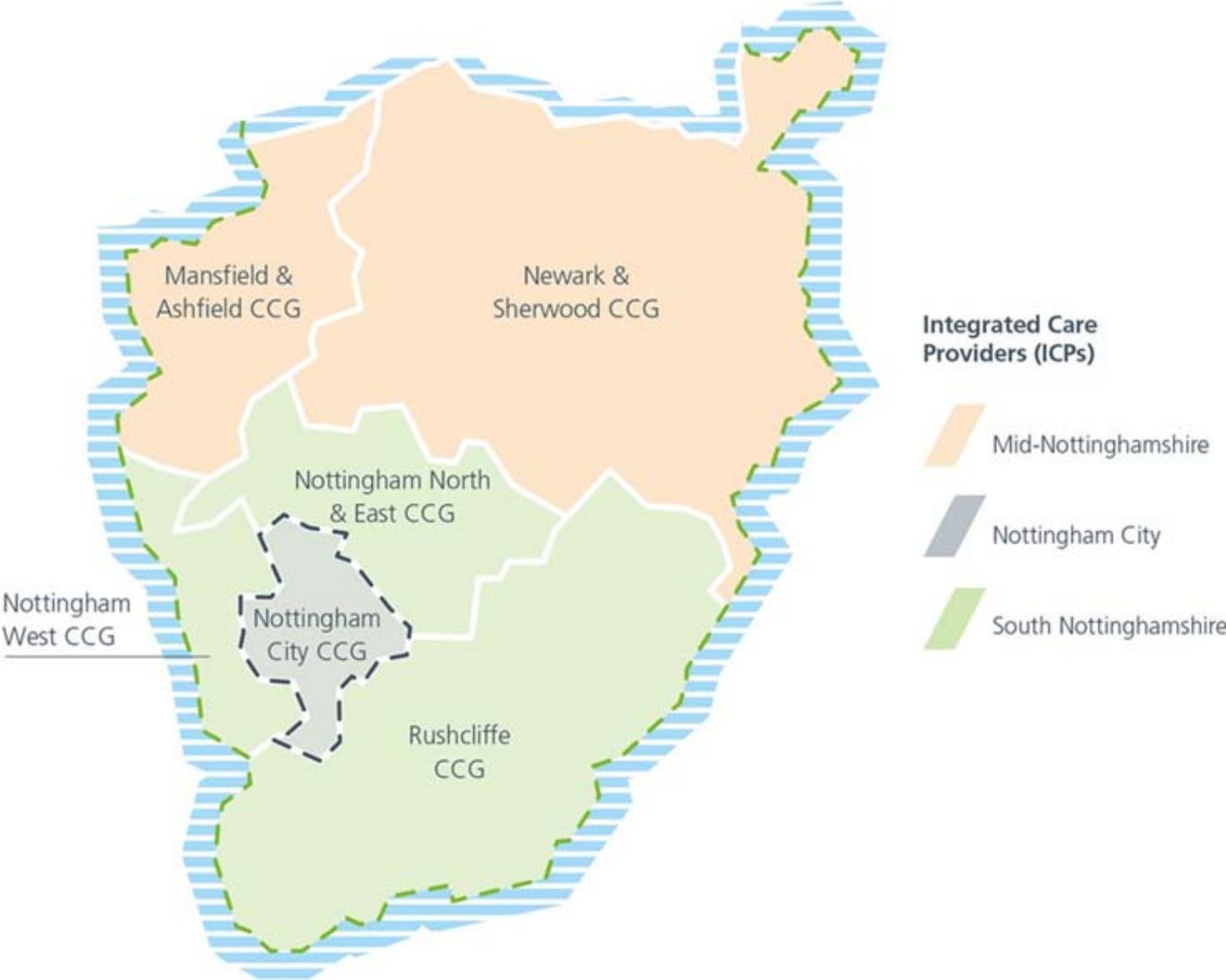
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- NHS staff will get the backing they need
  - A comprehensive new workforce implementation plan
  - Expanding the number of nurses, midwives, AHPs and other staff
  - Growing the medical workforce
  - International recruitment
  - Supporting our current NHS staff
  - Enabling productive working
  - Leadership and talent management
  - Volunteers
- Digitally-enabled care will go mainstream across the NHS
- Taxpayers' investment will be used to maximum effect
  - Test 1: The NHS (including providers) will return to financial balance
  - Test 2: The NHS will achieve cash-releasing productivity growth of at least 1.1% per year
  - Test 3: The NHS will reduce the growth in demand for care through better integration and prevention
  - Test 4: The NHS will reduce unjustified variation in performance
  - Test 5: The NHS will make better use of capital investment and its existing assets to drive transformation



- Spare slides

# Nottingham & Nottinghamshire Integrated Care System Map



# Integrated Care System ("The System" – Notts)



- Overarching strategy and response to NHS Long Term Plan
- Develop associated ICS outcomes framework
- Single increasingly strategic commissioner
- Consistent Clinical Strategy & Standards
- Develop Population Health management model and associated data / analytic capabilities
- Work with national agenda around workforce
- Responsibility for system financial balance (Long Term Plan)

# Integrated Care Partnership ("The Place" – Nottingham City)



- Citywide Partnership of all Health & Social Care Providers inc CVS
- Also has local ( tactical) commissioning capabilities
- Bring providers and health and social care towards operating as one unit with set of aligned incentives
- Implement ICS strategy and response to LTP
- Locally deliver ICS outcomes framework – but set City priorities
- Working to improve health outcomes and critically for the City reduce inequality
- Support to PCNs to deliver this



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What actually will they do ?

# The immediate 'Asks' in 19/20



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- ICS** - Improve Urgent Care performance
  - Financial Balance
  - Focus on Mental Health
  
- ICP** - Demonstration of effectiveness as a “place”
  - Delivery of services – with local intelligence
  - Quality Improvement activity to support ICS strategy – via central transformation funding
  
- PCNs** - Establish PCNs
  - identify development needs
  - develop and start to deliver vision

# What is the asks for PCNs / ICPs beyond 19/20?



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- Plethora of guidance, inference and assumptions!
- How do we make sense of all this?
  
- National – NHS Long Term Plan
- National – regulator asks
- Local – ICS priorities and outcomes framework
- Local – ICP expectations of PCNs supporting place
- NHS England/Improvement Ambitions and Expectations of PCNs

# ICS Priorities & Enablers



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