

ICS Board Summary Briefing - November 2020

Please find below the Nottingham and Nottinghamshire Integrated Care System (ICS) update following the ICS Board on 12th November. 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 meetings held earlier in the year are always published on the system's website – https://healthandcarenotts.co.uk/about-us/ics-board/

Introduction

The Vice-Chair of the ICS, Jon Towler, welcomed the Board to a shortened public meeting due to the resurgence of Covid-19 across the county.

Jon also welcomed a number of citizens and staff from across the system to the virtual Board meeting, streamed live on YouTube – reminding colleagues that the meeting was always 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.

Covid-19 Pandemic Situation Update

Dr Andy Haynes, ICS Executive Lead, summarised the current position of the pandemic response and the impact on health and care services. The position continues to evolve but based on that data reported at the Board, there were 456 beds occupied by Covid+ patients (at 3rd November), which represents 50% more people with Covid in our hospitals than at the start of April in the peak of the first wave. There were 56 deaths in hospitals our area in the seven days to 4th November – for comparison, the whole of July and August saw just two deaths. Detailed weekly updates using the publically available information on the impact on health and care services can be found each Friday on the CCG's website here: https://nottsccg.nhs.uk/news/.

Dr Haynes also highlighted the lessons learnt across the system from the first wave of the pandemic. These include the fact that we know more about the disease, there are improved treatments and outcomes for patients, the Local Resilience Forum cell structure is agile and responsive and health and care organisations have supported each other in times of pressure.

Various Board members highlighted the following elements of the ongoing response;

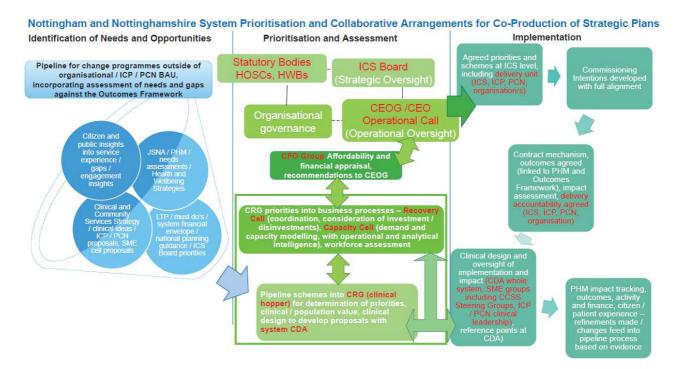
- The valuable contribution of health and care staff across the patch and thanks to them for their resilience.
- A welcome focus in this second wave on maintaining the availability and quality of services not related to the Covid-19 response.
- A strengthening of the system approach to the pandemic response including working even more closely between NHS and Local Authority teams.

The Board agreed to write to staff across the system to thank them for their efforts over the last few months and as we go into Winter.

Commissioning Intentions

Amanda Sullivan, Accountable Officer for Nottingham and Nottinghamshire CCG, updated the Board on the proposed future approach to Commissioning of services in the context of the establishment of the CCG as the system's Strategic Commissioner. Commissioning is the process of planning, buying and monitoring services. The local approach and priorities reflects the national NHS strategy and our local ICS strategy. In 2020, the traditional commissioning process has not been required as all resources have been controlled centrally by the NHS due to the pandemic. Moving forward into 2021/22, it is anticipated that there will be more local flexibility but given the way that the system has been working more collaboratively during and because of the pandemic response (as noted above) a different approach is proposed.

Amanda therefore outlined a more collaborative approach to priority setting and strategic planning, drawing on resources and approaches from all across the system. This new approach is represented in this diagram, which can be found at full size in the papers, following the link above.



In summary, the new approach;

- Ensures that citizen / patient involvement underpins all stages
- Retains and respects all statutory requirements of organisations as currently described within ICS partnership arrangements
- Includes all statutory bodies in the prioritisation and design processes, with a no surprise approach as schemes progress to sign off
- Builds on agreed system principles, which are equitable and demonstrate clinical and cost effectiveness
- Mandates that quality and safety of care underpin decisions at all stages
- Addresses inequalities as a priority within each scheme
- Incorporates prevention into the planning and prioritisation processes
- Prioritises overall System benefit over organisational interests, with parties agreeing approaches to manage organisational impacts
- Delivers on National must-do's and planning guidance
- Works on a multi-year basis, with implementation priorities spread over a period of time

 Confirm that tactical in-year resource decisions to manage in-year pressures would be discussed through the Capacity Cell and Recovery cell to maintain integrity between tactical and strategic decision making and a system approach to in-year problem solving.

Board discussed and agreed the new approach, noting that this approach would want to include the possibility of joint commissioning of services and also emphasising the importance of focussing on inequalities.

The next ICS Board meeting is scheduled for 10th December.

David Pearson, Independent Chair, Nottingham and Nottinghamshire ICS

Dr Andy Haynes, Executive Lead, Nottingham and Nottinghamshire ICS