



## **NEWS BULLETIN**

Buckinghamshire, Oxfordshire and Berkshire West Sustainability and Transformation Partnership Integrated Care System (Shadow)

May 2019

## **Refreshed Priorities Agreed**

The Chief Executives' Group has agreed the set of refreshed priorities (and associated workstreams), which will form the foundation of its work to develop a five year strategy and the collective response to the requirements of the NHS Long Term Plan (see overleaf).

By developing a longer term strategy, leaders will be better able to work effectively to address health and care challenges in a more efficient and effective way – making best use of the public funds invested across Buckinghamshire, Oxfordshire and Berkshire West.

The NHS Long Term Plan has at the heart of its ambition the delivery of person centred care through joined up health and social services that are based on the needs of individuals and shaped by the circumstances and priorities of local communities (a place-based approach). It describes how people will get more options for their care, better support and properly joined up care at the right time, in the best place.

There is broad agreement that NHS organisations, councils and the voluntary and community sector need to work better together to make the best use of limited resources together to secure the best outcomes for the people they serve.

The Long Term Plan sets out to further cement this progress by creating Integrated Care Systems everywhere by April 2021; stating that they will grow "out of the current network of Sustainability and Transformation Partnerships (STPs)". BOB STP is now transitioning to a shadow Integrated Care System (ICS) and hopes to achieve ICS status by April 2020.

All three health and care systems (Buckinghamshire, Oxfordshire and Berkshire West) will continue their focus on delivering, high quality, integrated care through local partnerships, and will come together to work collectively when it is more efficient and effective to pool expertise and resources across BOB.

Over the past year, experience of delivering more integrated health and care within the BOB ICS has helped to further develop the thinking about how communities and their needs are best served. This includes consideration of what size of population is needed to organise, deliver and manage a range of health and care services, working to the agreed principle that effort should be focussed at the level where it will be most efficient and effective to achieving the best outcomes. This can best be described by showing how integrated care will be planned and delivered in the diagram on page two.

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## **Planning for and Delivering Integrated Care**



Taking this triangle as the organising principle for BOB, there is collective agreement by the Chief Executives' Group about the framework to plan and deliver the BOB priorities.

They have considered what the role of the BOB shadow ICS should be – ranging from planning and delivering across Buckinghamshire, Oxfordshire and Berkshire West, through to encouraging and supporting local organisations to come together as a community of practice to share approaches and solutions. The following page shows this framework in more detail. It describes the level of involvement that the BOB shadow ICS will have in planning for and delivering the agreed priorities. This includes workstreams, which have a Chief Executive Sponsor.

The setting of priorities and agreeing the associated delivery framework provides the foundation for the development of the BOB ICS strategy. Next steps will include engagement with a broad range of stakeholders, including clinicians, local authorities, patient representatives, community and voluntary groups on the content of the strategy.

| ICS role   | Description  | Priority  |
|--|--|---|
| System design<br>& delivery  | Design approach to<br>a problem at ICS<br>level. Deliver<br>solution at ICS level  | Population & Acute collaboration  Strategic planning, system design & resource allocation  Partnerships & Fig. 19   |
| System design<br>& place/org<br>delivery                             | Design approach to<br>a problem at ICS<br>level but leave<br>places/<br>organisations to<br>deliver                                    | Population & economic growth  Acute collaboration  Strategic planning, system design & resource allocation  Workforce  Capital & estates  Primary care inc. Primary Care Networks  Financial balance & efficiency  Capital & health                             |
| Set or confirm<br>ambition and<br>hold to<br>account                 | Agree ICS ambition<br>(or confirm ICS signs<br>up to nationally set<br>ambition) and hold<br>places to account<br>for/support delivery | Population & economic growth  Acute collaboration  Strategic planning, system design & resource allocation  Workforce  Capital & estates  Primary care inc. Primary Care Networks (PCNs)  Urgent & emergency care  Cancer  Cancer  Cancer  Maternity  Maternity |
| Coordinate,<br>share good<br>practice,<br>encourage<br>collaboration | Bring places/<br>organisations<br>together as a<br>community of<br>practice to share<br>approaches and<br>solutions                    | Research & Children & young people  Personalised care  Prevention & reducing inequalities  Population health  |

|   | ICS Workstream                                |  |  |
|---|---|--|--|
|   | A core function led by Fiona Wise, Shadow ICS |  |  |
|   | Executive Lead                                |  |  |
| _ | Delivered by the Financial Oversight Group    |  |  |
|   | Delivered in place                            |  |  |