



Healthier Together Integrated Care System (ICS) monthly update

March 2021



1. Introduction

This monthly report provides an update on ongoing work in relation to the Healthier Together partnership – our Integrated Care System (ICS) for Bristol, North Somerset and South Gloucestershire.

Topics highlighted may vary from month to month. If you would like to receive an update on a specific area of system working, please let us know.

This month's report covers:

- Publication of the Government white paper: 'Integration and Innovation: working together to improve health and social care for all'
- ICS designation and formalising how we will work together
- Population health, prevention and inequalities workstream

2. Publication of the Government white paper: 'Integration and Innovation: working together to improve health and social care for all'

On Thursday 11 February, the Department of Health and Social Care published a white paper detailing the legislative recommendations for Integrated Care Systems (ICSs). The paper, ['Integration and Innovation: working together to improve health and social care for all'](#), sets out proposals for legislating for ICS. It reinforces the goal of joined up care for everyone and sets some key measures, including:

- Support for the NHS England and Improvement proposal to create statutory Integrated Care Systems.
- Scrapping mandatory competitive procurements by which NHS staff currently waste a significant amount of time on unnecessary tendering processes for healthcare services.
- Putting the Healthcare Safety Investigations Branch permanently into law as a Statutory Body so it can continue to reduce risk and improve safety. The Healthcare Safety Investigations Branch already investigates when things go wrong, so that mistakes can be learned from, and this strengthens its legal footing.
- Support for the NHS England and Improvement proposal to formally fold Monitor and the Trust Development Authority (i.e. NHS Improvement) into NHS England.
- A package of measures to deliver on specific needs in the social care sector. This will improve oversight and accountability in the delivery of services through new assurance and data sharing measures in social care, update the legal framework to enable person-centred models of hospital discharge, and improve powers for the Secretary of State to directly make payments to adult social care providers where required.
- The pandemic has shown the impact of inequalities on public health outcomes and the need for Government to act to help level up health across the country.



Legislation will help to support the introduction of new requirements about calorie labelling on food and drink packaging and the advertising of junk food before the 9pm watershed.

The paper builds on engagement that was undertaken by NHS England/Improvement in late 2020. As a system we jointly responded setting out our support for the principle of further developing ICSs, but recognised that questions relating to accountability would need to be addressed as the policy is further developed.

The white paper sets out a clear direction of travel that we have all been working towards for a number of years. One of its central aims is to remove outstanding barriers and fragmentation that exists in partnership working. While movement on this at a national level is crucial, we should not forget the amount of work we have already undertaken as a partnership locally, nor underestimate what else we have to do to help solidify our BNSSG Integrated Care Partnership further through 2021.

Further information regarding the white paper is set out in [NHSE/I frequently asked questions](#) and also a [letter sent out from Amanda Pritchard](#), Chief Operating Officer at NHSE/I to system leaders.

3. ICS designation and formalising how we will work together

We established Healthier Together as a partnership in 2016 to work together across the NHS, local government and social care to improve health and wellbeing for the people of Bristol, North Somerset and South Gloucestershire (BNSSG).

In December 2020, our Partnership was recognised as a 'maturing' Integrated Care System (ICS) by NHS England. This is welcome recognition of the progress we have made in developing collaborative ways of working and integrating services to deliver better outcomes for BNSSG residents.

Yet we recognise there is more work to be done to change how we operate to make best use of resources within an integrated system. This is timely given the great strides that have been made in cooperation and partnership working from across the system in response to the Covid-19 pandemic, and to prepare for the legislative changes that will require further integration by April 2022.

As a Partnership we have agreed to formalise how we will work together in our next phase of development as an ICS through a Memorandum of Understanding (MoU). This will be a series of documents that we will develop together so that we can build shared ownership and commitment to collaborative ways of working. It covers a range of topics, including; communications and engagement, organisational development and financial frameworks.

Our Chief Executives started this work in January 2021. The next step that we are currently working through is engaging with the leadership of each of our constituent organisations.

A timeline of next steps is broadly as follows:

| Date | Activity |
|------------------|--|
| February – March | Workshops to engage the leadership of each partner organisation to explore roles in the partnership and collect feedback |
| March – May | Functional experts develop and review key areas of agreement |
| July | Draft documents reviewed by the Partnership Board |
| September | MoU endorsed by the partners and signed off by the Partnership Board |
| Monthly | Touchpoints with CEOs through BNSSG Executive Group |

4. Population health, prevention and inequalities workstream

As we develop as an Integrated Care System (ICS) our system leaders have agreed to have a *‘shared ambition for the people of BNSSG via a collaborative approach to leadership that sees beyond and operates across organisational boundaries, holding the focus on the benefit and impact for the people we serve together; being person-centred and outcome oriented.’*

To achieve this ambition a focus on improved population health, prevention and reducing inequalities (PHPI) is required.

Population health is an approach that aims to improve physical and mental health outcomes, promote wellbeing and reduce health inequalities across an entire population. It is driven by the outcomes and experience that matter to the people we serve and so is shaped by population health management (data to help plan and deliver care for maximum impact), communications and engagement activities, value based health and care programmes and Building Healthier Communities (working with the voluntary and community sector).

The PHPI steering group has recently been expanded and includes representation from across the Partnership. It now reports directly into the Healthier Together Executive Group, which at its last meeting agreed the overarching strategic intent of the workstream:

1. To support and challenge partners across the system to embed a population health approach, share best practice and ensure that all programmes identify opportunities to prevent ill health, improve wellbeing and reduce inequalities in the delivery of their programmes;
2. To develop a work programme based on population need priorities and the achievement of population outcomes as agreed by the system in order to reduce inequalities and improve health;
3. To focus on the importance of place. This involves setting system-wide PHPI medium and long term objectives and outcomes whilst enabling place-based approaches to prioritisation and delivery, for example via Integrated Care Partnerships.

4. To focus on the impact of the wider determinants of health on outcomes; and enable system-wide focus and resource on tackling these to reduce inequalities across BNSSG and improve outcomes.

A recent example of work undertaken by the PHPI workstream is a high-level overview report of the health inequalities observed across the BNSSG population. It presents data from a range of sources, and mostly focuses on the part deprivation plays in health outcomes. The findings from this report will help to provide system oversight and further guide the priorities of our work programme.

The Healthier Together Office – If you have any questions or would like to see a specific topic covered in the next update, please contact bnssg.healthier.together@nhs.net.