

Our transition to an Integrated Care System (ICS)

March 2022 update



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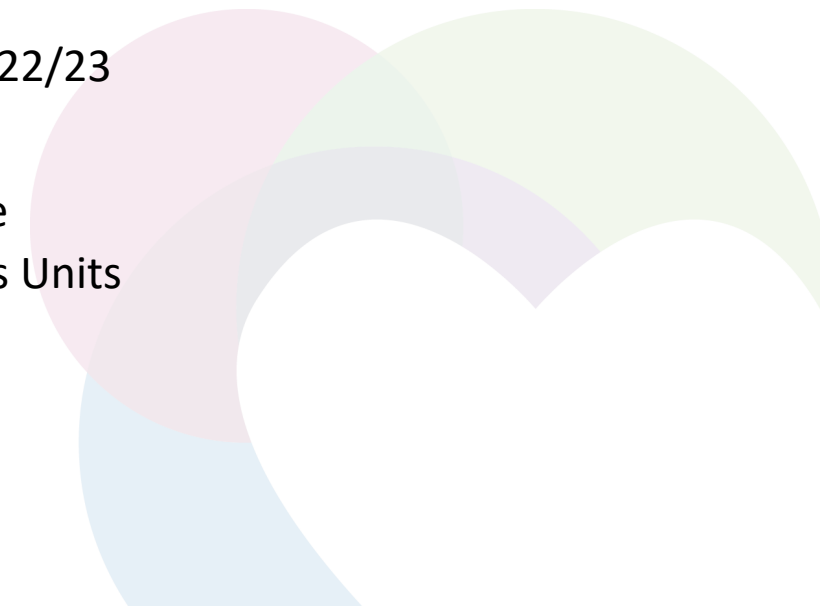
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Update from our Chair Designate

Thank you for your participation in our recent System Partnership Board. We usefully reflected on some progress towards the establishment of the ICS. It was also an opportunity to identify our forward agenda in the next, immediate period, including:

- Our collective work, in the next couple of months, to develop Operating and Financial Plans for 2022/23
- Linked to those, the need to develop our approach to the Medium-Term Plan as an initial focus for the Integrated Care System from its inception at the beginning of July
- The work of our Improvement Programme, which underpins all our plans for 2022/23 and beyond
- Our propositions on the structure of the Integrated Care Board and its governance structure, the ICS Executive Team and the planned cohort of Accountable Business Units



Update from our Chair Designate cont.

- 🌀 The processes for recruiting Non-Executive Members to the Board and for members of the ICS Executive Team by the end of March
- 🌀 Plans for shadow and preparatory activity by the Designate Integrated Care Board between May and July, working closely with the existing CCG members
- 🌀 Formally starting joint engagement with Accountable Business Units (ABUs) in the Most Capable Provider (MCP) process by the end of March.

There is, of course, a significant amount of activity that we need to get through over the next three to four months and I remain very grateful to all partners for the positive engagement that they have shown in helping work through this agenda.

Thank you,

John

John O'Brien
Chair Designate of Cambridgeshire & Peterborough ICB

Joint Accountable Officer (AO) update





Successes and updates

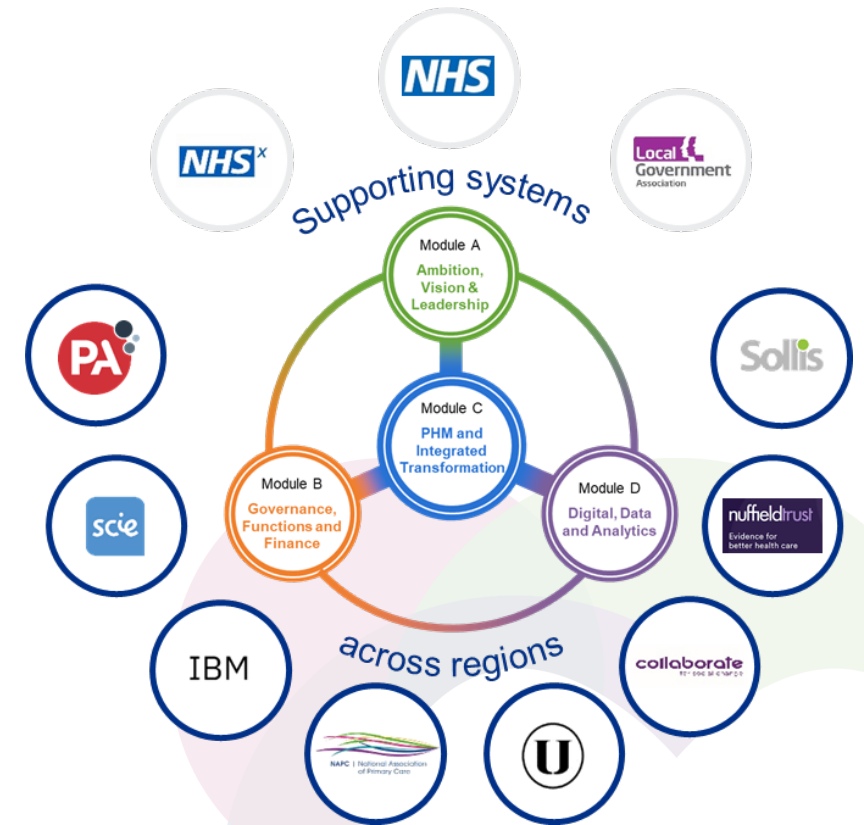
- 🌈 This month our update has a focus on our two place based partnerships. This includes an update on North and South place being selected to join an exciting ICS Population Health and Place Development Programme alongside priority programmes North and South are working together on following the publishing of the 2022/23 Operating and Planning Framework including Virtual Wards and the Urgent Community Response programme.
- 🌈 On the structure front, as our ICB Chair Designate has outlined work is progressing well on developing system plans to make sure all is ready for 1 July, and interim steps between now and then.
- 🌈 Our [Chief of Staff for the Integrated Care Board \(ICB\)](#) is now out for recruitment, closing on 14 March. This is a key role, working together with the Chief Executive and the Chair of the ICB as well as with providers, to ensure that the Integrated Care System makes a real positive impact on residents across our area.
- 🌈 Recruitment and interviews continues through March for the other ICB executive roles and Non-Executive Member (NEM) roles. Once concluded we will announce our full ICB membership.
- 🌈 We have also successfully recruited our Director of Performance and Assurance, Director of ICS PMO and are currently recruiting for our ICS Sustainability Programme Manager.



North and South Place development

The North and South Places has been selected to join an exciting ICS Population Health and Place Development Programme, funded and led by NHSE/I and NHSX in partnership with the LGA. This will enable each Place to have access to bespoke, specialist support to help us deliver the best possible population health outcomes for their respective populations.

-  The support available has been designed to accelerate and embed the adoption of Population Health Management across Integrated Care Systems (ICSs). This locally led, nationally supported programme of practical support, is being offered to selected Places across systems. Through action-based learning, the support is aimed to equip us with practical tools, techniques and approaches that embed and deliver effective Population Health Management (PHM). It has been specifically created to bring together ICS and local Place leaders from primary and secondary care, local government, social and community services, and the voluntary and charity sector.
-  It is also being supported by a consortium of expert organisations who will help guide the support available to us. They are: PA Consulting, Collaborate, IBM, NAPC, The Nuffield Trust, Optum, SCIE, Sollis, UHS.
-  The support will help us respond to the specific priorities for the North and South. It has been developed around four, complementary and interconnected, core modules – building a leadership team with a shared vision to drive predictive Population Health Management, underpinned by best practice approaches and practical tools for data analytics, digital platforms, governance, finance, and ways of working.
-  The kick off for North and South is March 2022.



North and South Place – Joint Priorities

Following the publishing of the 2022/23 Operating and Planning Framework, North and South place are working together to focus on the following main programmes of work:

Virtual Wards

- Virtual Wards feature heavily in the Operating Framework for 2022/23. There is an expectation that we build at pace Virtual Wards to accommodate 15% of patients who otherwise would be delayed in hospital or admitted into an Acute Trust.
- The aim is to fulfil the national directive for the provision of Virtual Ward beds (500 across C&P) by December 2022, by reviewing the current provision and aligned resources for those service already providing Virtual ward type care across primary and secondary care organisations and develop a delivery plan alongside a supportive business case to formalise Virtual ward care and the required governance, operational structures, digital platform and workforce requirements

Urgent Community Response

- 2 hour urgent community response (UCR) is a key element of the national Ageing Well programme, and the planning guidance for 2022/23 sets out a number of priorities to focus on in the coming year.
- We are establishing a Working Group to scope and co-design solutions to optimise the integration and productivity of UCR services across the ICS system in order to care for people safely in their own home and prevent unnecessary or unplanned ambulance conveyance and Hospital attendance or admission.
- We expect the UCR model to integrate with the Transfer of Care Hub model to support collaborative working between health, social care and VCS partners in a multi-agency and multidisciplinary way to ensure that people can get the right care, in the right place, and at the right time.

North and South Place – Joint Priorities cont.

Integrated Discharge Hub/ Transfer of Care Hub

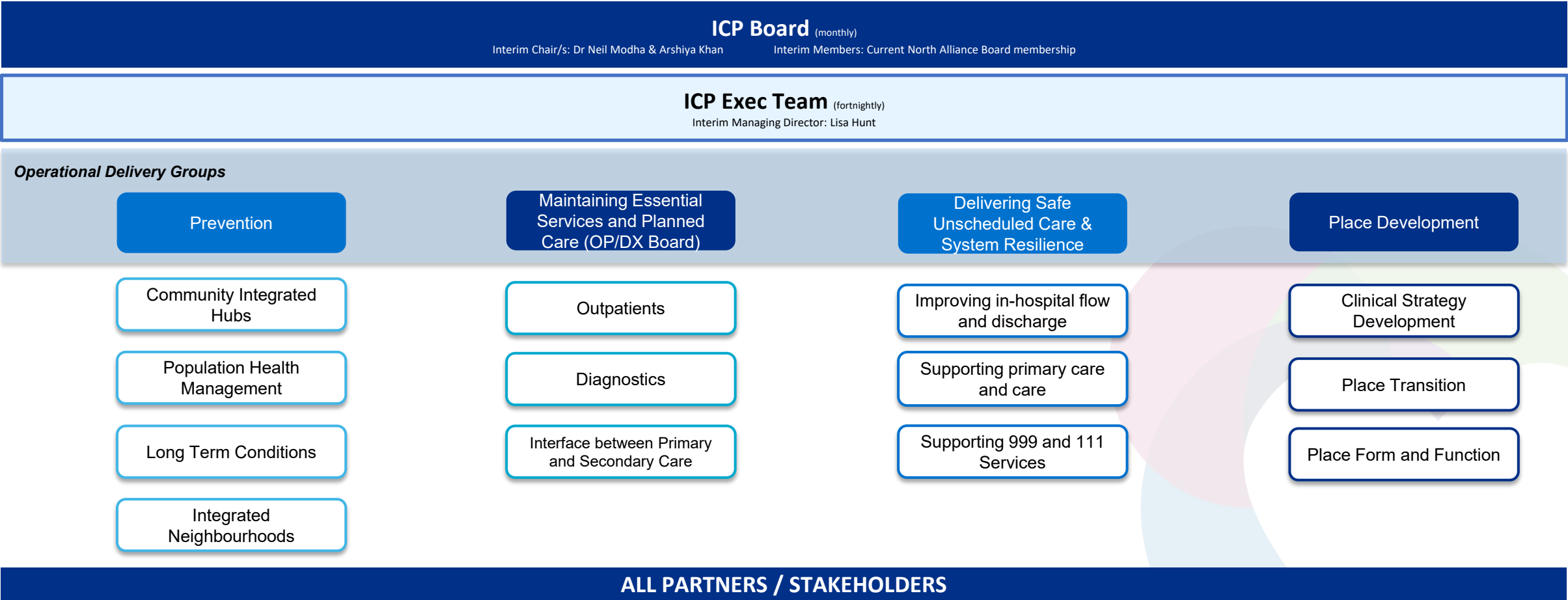
- The planning guidance for 2022/23 requires systems to apply the Discharge to assess criteria and to facilitate flow from acute providers through the system.
- In order to do this we propose to develop an Integrated Discharge Hub. The aim of the work stream is to scope, develop and begin to implement a Transfer of Care Hub model in Cambridgeshire and Peterborough. With health, social care and VCS partners working closely together in a multi-agency and multidisciplinary way to ensure that people can get the right care, in the right place, and at the right time.
- The discharge guidance sets out the immediate actions that need to be taken to enhance discharge arrangements and the provision of community support to deliver safe and rapid discharge for people who no longer need to be in a hospital bed. Developing and Integrated discharge hub at pace over the coming three months – will, in part enable us to achieve this ambition.

Demand and Capacity (D2A)

- Cambridgeshire and Peterborough has been using the national Hospital Discharge Funding to provide additional care and workforce capacity to support patient flow. This funding is non-recurrent and will only support until 31 March 2022 and new discharges form early March. Lessons learnt from operational and commissioning colleagues during the Discharge Silver has highlighted a shortfall in both capacity and options to support discharge. The Delivery Executive have requested that North and South Place undertake a review and inform future plans.
- The aim is to complete an initial demand and capacity model of D2A pathways 1, 2, and 3 before the end of March 2022 to support the 2022/23 financial planning round. The project will bring together business intelligence, finance, and operational colleagues, across the system, and with the involvement of the Emergency Care Improvement Support Team (ECIST) to ensure that the approach will withstand scrutiny with comparable approaches elsewhere in the country. It will also improve our shared understanding of demand and capacity using a national methodology which has been used elsewhere.

North Place – Overview

In Q3, the North Place were focused around four programmes of work. These are the same as agreed in July 2021 with the ICS, however, the work streams have been categorised slightly differently to reflect better alignment with the programmes; Prevention, Managing Essential Services and Planned Care, Delivering Safe Unscheduled Care and System Resilience and ICP Development, each of which with a number of initiatives falling under each programme as set out below:



North Place – Areas of Focus

To support the ICS Transformation Improvement Plan, North are focused on three programme areas:

Community Integrated Hubs - Doddington

- Developing new ways of delivering outpatient services, focusing on 'one stop' clinics, surveillance and monitoring and fully utilising new technology and virtual ways of working at Doddington Hospital. The site went live in November 21 with outpatients and wrap around services all based on site. The Omicron Wave meant that this was paused and through February services have begun to go live once again.
- The purpose of the Doddington Community Hub is to significantly improve access to key services within the Fenland area.
- The aim is to provide one-stop integrated services for patients, including relevant diagnostics and broader preventative support (e.g., health coaching) and specialist nursing support to these patients. This will allow us to improve secondary prevention, supporting more patients to manage their conditions in the community and thus reduce the need for emergency admissions.

Integrated Neighbourhoods

- The aim is to launch all Primary Care Networks into active Integrated Neighbourhoods, in conjunction with community, acute and social care. In the North we currently have four wave 1 Integrated Neighbourhoods; BMC Paston, Central and Thistle Moor, South Peterborough and Wisbech. Recruitment underway for Integrated Neighbourhood Programme and Project Managers to support wave 1 and 2 of launch.
- Integrated Neighbourhoods vision is that local care provision should be proactive/anticipatory care, in the right place and make a difference for the local population following the implementation of Integrated Neighbourhoods to drive integration across all partners and provide a system to address health inequalities, improve outcomes and deliver the care sensitive to the needs and characteristics of individual areas.

Long Term Conditions/Population Health Management

- The aim of the programme is to improve patient outcomes by ensuring care is equitable across the North and delivering an integrated care pathway for long term conditions using Population Health Management (PHM). The projects within this programme will look to put in place pathways and interventions for the prevention and management of LTCs for the North covering Respiratory Care, Diabetes, Cardiovascular Disease (CVD) and Frailty
- Population Health Management (Optum) programme is mobilising - first data due 1st week April 2022. 85% of sign up achieved in the North to support roll out. Alignment to Place Development Programme has been completed with clear direction of how they complement each other.
- HCA Long Term Condition Pilot – Initial pilot work has seen 400 patients with improvements in diabetic care. Additional non-recurrent funding secured for expansion to all PCNs and for more conditions e.g. Asthma.

South Place – Overview

In Q3, the South ICP was focused on bringing together three key programmes of work with our partners. These are the same as agreed in July 2021 with the ICS, however, the work streams have been evolved in response to better shared understanding and in response to system pressures. The key workstreams we are focusing on in Q4, and into 2022/23 are outlined in the diagram below.



South Place – Areas of Focus

To support the ICS Transformation Improvement Plan, South are focused on four programme areas, two of these are the Urgent Community Response and Integrated Discharge Hub/ Transfer of Care Hub programmes outlined in the earlier slide on joint priorities. In addition, we are focused on:

Integrated Neighbourhoods

- We are supporting the development of Integrated Neighbourhoods, with PCNs working in collaboration with their local voluntary, community, acute and social care partners to design and deliver integrated models/pathways/approaches. In the South, five of our nine PCNs have launched as Integrated Neighbourhoods: Granta, Cantab, Ely South, Ely North and Meridian.
- Recruitment is underway for Integrated Neighbourhood Programme and Project Managers to work with the local partners to develop sustainable Integrated Neighbourhood teams.
- We are developing a 'Target Operating Model' for Integrated Neighbourhoods that will be underpinned by development and integration plans that address the needs within the population and services in each Neighbourhood. Our *draft* vision is that we want our people to live healthy, resilient and independent lives, with simple access to support and care when needed, as close to home as possible. We will organise care with, and for, the people living in our communities so that they experience the health and wellbeing outcomes that matter to them.
- We are also working to improve the interface between primary and secondary care, including through our Primary Care Liaison Office and projects to improve letters and communication about patients.
- Finally, we are working with HealthWatch to develop Community Champions who have just commenced their first project to capture people's experiences of using urgent and emergency care services. For more information, see <https://www.healthwatchcambridgeshire.co.uk/news/2022-02-23/health-champions-survey-underway-addenbrookes>

Ageing Well

- We are developing a programme of work that addresses the local and national aspirations around supporting our people to age well, including access to urgent care in the community, working with Care Homes, and developing proactive multidisciplinary models to support people at risk of developing, or currently experiencing, frailty and falls.
- As a first step we are developing a project that aims to prevent a second or subsequent fall for people who have previously fallen and required an ambulance attendance, attended ED, or been admitted to hospital as a result.
- In parallel, we are building our shared understanding of existing services that aim to prevent or address both frailty and falls across the South Place so that we can identify opportunities for integration, and address gaps in timely service provision, that would allow more people to be cared for and stay living in their own homes.

NHS Leadership Academy features our ICS as case study of best practice

Creating a Care Professional and Clinical culture to underpin the delivery of Integrated Care

- 🌈 The NHS Leadership Academy for the East of England recently featured our work as a regional case study of **best practice**
- 🌈 Focused on our initiative to create a Care Professional and Clinical culture to underpin the delivery of Integrated Care, this case study explores how we used an integrated approach to deliver strong outcomes and gained invaluable learning and insights
- 🌈 As a result of this work we have agreed the following outcomes that will be central within the ongoing development of our ICS:
 - 🌈 Create a new deal with residents to ensure those who need health and care can own their experience
 - 🌈 Work with partners and stakeholders across the area to **improve opportunities and outcomes**
 - 🌈 Supersize **implementation and integration of digital**
 - 🌈 Create an environment where **staff can bring their full self to work**
 - 🌈 Build a clinical majority executive leadership team who can foster a culture of **clinically led innovation and sustainable improvement**

Communications and Engagement

An update

- Last month we shared our values with you, which if you recall are as easy as A,B,C,D,E.
- We continue to welcome your thoughts on how we can bring these values to life and instil them in all elements of our partnership working.

Our Values



Be Authentic



Be Balanced



Be Compassionate



Be Determined






Be Extraordinary

Communications and Engagement

An update cont.

- Our brand guidelines have been finalised and distributed to ICS partner Communications Teams. If any partners required our brand guidelines, logos, or templates please email capccg.contact@nhs.net.
- We have been promoting the extension to the [Health Inequalities Challenge Prize](#). Entries are now being welcomed until 1 May 2022.
- Our priority this month is the new ICS website, which will go live on 31 March. The website will include information about the ICS and ICB, and is the first phase of the website to go live, with the Health and Care Professionals and Intranet sections to go live in advance of the ICS launch (with all information housed on the CCG website until then).
- We've also been focusing on making sure all documents we create and publish meet our statutory requirements for accessibility. We are rolling out a training programme for staff, and ensuring we have the software to support our work in this area. This will ensure we address inequalities on our website and digital platforms, by opening the content up to more people.
- The first draft of our People and Communities (Engagement) Strategy will be ready by the end of March, and throughout April we will be focusing on reaching out to our partners to gather their feedback to further refine and update the strategy before finalising in advance of 27 May deadline.

Let's keep talking...

-  We will continue to release a monthly slide-deck to keep colleagues updated on ICS developments whilst the C&P ICS website is in development
-  What information would you like to know about?
-  Please share your views, comments and suggestions by emailing us at: capccg.contact@nhs.net

