



Meeting:	ICS Board
Report Title:	Acute, Community and Primary Care Services Clinical & Community Services Strategy
Date of meeting:	Thursday 13 June 2019
Agenda Item Number:	7
Work-stream SRO:	Tracy Taylor and Dr Nicole Atkinson
Report Author:	Duncan Hanslow and Angela Potter
Attachments/Appendices:	Enc. D2 Clinical & Community Services Strategy
Report Summary:	
<ol style="list-style-type: none"> 1. The ICS Board commissioned this clinical strategy in recognition that we need to clearly define our longer term vision for service delivery. There is a compelling case for change in terms of the changing demographics and needs of our population, workforce recruitment and retention challenges along with the need to develop new roles and ways of working and the clear financial challenge that the system faces. This strategy has been developed to support the delivery of the triple aim identified in the NHS Five Year Forward View and reiterated in the NHS Long Term Plan – <i>improving health and well-being; care and quality and financial sustainability</i>. 2. The Clinical & Community Services Strategy has been developed through an open and inclusive process that brings together the expertise of both clinicians and care professionals with patients and citizens in determining the future shape of services across the system. To date over 250 clinicians, professional staff, patients and citizens have been engaged in the work. Citizen and patient engagement is a key part of the service reviews detailed in point 5 below and the numbers involved will grow as this work develops. 3. It was presented as a working draft to the Clinical Services Strategy Board in May 2019 and is now presented as a working document to the ICS Board for further engagement and development prior to being re-presented for sign off. 4. This strategy document does not sit in isolation. It is a key piece of work that sits alongside the ICS Mental Health Strategy, Population Health Management work, development of an Outcomes Framework and the developing ICS Five year Strategic plan which is due for submission later this year. 5. The next phase of the overall strategy development process has already commenced with a programme of detailed service reviews being commissioned. A process of prioritisation has been undertaken by the Clinical Services Strategy Board which has supported an overall programme of approximately 20 service reviews with the first six commencing from April 2019. These include – CVD (Stroke); Respiratory (Asthma and COPD); Frailty; Children and Young People; Colorectal services and Maternity and Neonates. 	



6. The Board is asked to discuss and provide comment to help continue to shape this strategy prior to approval.

Action:

- To receive
- To approve the recommendations

Recommendations:

1. To discuss and provide comment on the development of the strategy

Key implications considered in the report:

Financial	<input type="checkbox"/>	
Value for Money	<input type="checkbox"/>	
Risk	<input type="checkbox"/>	
Legal	<input type="checkbox"/>	
Workforce	<input type="checkbox"/>	
Citizen engagement	<input type="checkbox"/>	
Clinical engagement	<input type="checkbox"/>	
Equality impact assessment	<input type="checkbox"/>	

Engagement to date:

Board	Partnership Forum	Finance Directors Group	Planning Group	Workstream Network
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Performance Oversight Group	Clinical Reference Group	Mid Nottinghamshire ICP	Nottingham City ICP	South Nottinghamshire ICP
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Contribution to delivering the ICS:

Health and Wellbeing	<input checked="" type="checkbox"/>
Care and Quality	<input checked="" type="checkbox"/>
Finance and Efficiency	<input checked="" type="checkbox"/>
Culture	<input checked="" type="checkbox"/>

Is the paper confidential?

- Yes
- No

Note: Upon request for the release of a paper deemed confidential, under Section 36 of the Freedom of Information Act 2000, parts or all of the paper will be considered for release.