



Meeting:	ICS Board			
Report Title:	Local priorities for inclusion in the 19/20 MOU with NHS England & Improvement			
Date of meeting:	Thursday 13 June 2019			
Agenda Item Number:	10			
Work-stream SRO:	Wendy Saviour			
Report Author:	Tom Diamond			
Attachments/Appendices:	None			
Report Summary:				
<p>This report concerns the progress made since the discussion at the 9 May ICS Board meeting. The purpose of this paper is to provide a further iteration of local priorities for inclusion in the 2019/20 MOU.</p> <p>As well as the expectations set in line with national policy and guidance, in particular the NHS Long Term Plan, nine local priorities are proposed for the 2019/20 MOU.</p> <p>It is expected that the MOU for 2019/20 will be agreed locally with the regional NHS England and Improvement team. The ICS MOU will be devolved to the Nottinghamshire ICPs for delivery.</p>				
Action:				
<input type="checkbox"/> To receive <input checked="" type="checkbox"/> To approve the recommendations				
Recommendations:				
1.	The Board are asked to consider the suggested local priorities for inclusion in the 2019/20 ICS MOU.			
Key implications considered in the report:				
Financial	<input type="checkbox"/>			
Value for Money	<input type="checkbox"/>			
Risk	<input type="checkbox"/>			
Legal	<input checked="" 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 type="checkbox"/>
Performance Oversight Group	Clinical Reference Group	Mid Nottinghamshire ICP	Nottingham City ICP	South Nottinghamshire ICP
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Contribution to delivering the ICS high level ambitions of:				
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?	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <p>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.</p>	

Local priorities for inclusion in the 19/20 MoU with NHS England & Improvement

13 June 2019

Introduction

1. A Memorandum of Understanding (MOU) between the Nottingham and Nottinghamshire ICS and NHS England and NHS Improvement (NHSE&I) was agreed for 2018/19. The agreement outlines key objectives and deliverables for the Integrated Care System (ICS).
2. These objectives and deliverables were largely set centrally in line with national policy and guidance. However there was an opportunity for a small number of local deliverables to be set that were specific to the Nottingham and Nottinghamshire ICS. For 2018/19 a total of eight local objectives were agreed.
3. It is anticipated there will be an MOU for 2019/20, once again with the majority of objectives and deliverables being set centrally in line with national policy and guidance (the NHS Long Term Plan in particular) with the opportunity to agree a small number of local priorities.

Current position

4. An overview of progress made in 2018/19 against the key deliverables was considered by the ICS Board at the 11 April meeting. The Board considered the following key areas to accelerate progress:
 - a. Whilst the resilience of the system was improved, challenges remain with the overall system priority of achieving the 4 hour target in Greater Nottingham.
 - b. At the 15 March ICS Board meeting the ICS mental health strategy was agreed. Commissioners and ICPs have now commenced the development of delivery plans to implement the strategy.
 - c. An interim oversight model has been agreed between the ICS and Regional Team for 2018/19. However, further consideration will need to be given to this in 2019/20 as the ICS, ICP and PCN structures become more established. A progression model and oversight framework is in development, by the ICS and regulators, which will include transitional progression steps for integrating oversight as the system matures and develops, under the combined joint regulatory processes.
5. ICS Board considered early proposals for the priorities to be included in the 2019/20 MOU at the 9 May ICS Board meeting. Board members asked that the following points be addressed:
 - a. More emphasis be given to priorities which will demonstrate tangible changes rather than an emphasis on structure and governance. Suggested that structure and governance priorities could form one overarching priority to reflect this.



- b. Red rated performance issues such as urgent care should be stated as local priorities for the system.
 - c. Further work is needed to cross reference with the ICP priorities.
 - d. Emphasis on system architecture should be to conclude rather than to develop further.
 - e. Implementation of the mental health strategy and its impact should be incorporated.
 - f. Priorities should be ordered as “big ticket” items, how the system is organised, and local priorities.
 - g. Priorities should be reflected in the ICS Board workplan.
6. The process to develop an MOU for 2019/20 is yet to be initiated by NHSE&I, however, early discussions have been held.
 7. Board are asked to note that the ICS MOU will be devolved to the Nottinghamshire ICPs for delivery.

Issues

8. Issues raised at the 9 May Board have been reflected in this report for discussion.
9. Board is asked to consider the proposals overleaf for local priorities to be incorporated into the 2019/20 MOU.



Nottingham and Nottinghamshire ICS 19/20 MOU local priorities

'Big Ticket'

1. Urgent and Emergency Care

Continue to redesign the emergency and urgent care system, including integrated primary care models, to ensure timely care in the most appropriate setting and delivery of key performance indicators (4 hour A&E Standard, ambulance response times, length of stay and delayed transfers of care). Ensure that the hospital discharge processes are designed to deliver to benefits of a fully functioning discharge and reablement process

2. Proactive and Personalised Care

Improve support to people at risk of and living with single and multiple long term conditions and disabilities through greater proactive and personalised care - thereby reducing exacerbations and crises and the demand on emergency and emergency care services

3. Mental health

Reshape and transform services and other interventions so they better respond to the mental health and care needs of the population by implementing the ICS's all age mental health and social care strategy – this will support the delivery of key performance indicators (CYP service access, IAPT access, EIP concordant compliance and inappropriate out of area placements)

4. Cancer

Ensure performance against the cancer access standards is improved and consistently delivered including the new 28 day referral to diagnosis target being introduced in 2019

Local

5. Clinical services strategy

Commence implementation of agreed service changes identified in the outputs of the initial phases of the clinical services strategy

6. Alcohol

Reduce alcohol related harm across the ICS through continued delivery of the agreed eight point plan developed by the Nottinghamshire Alcohol Pathways Group

ICS development

7. System Level Outcomes Framework

Embed the ICS System Level Outcomes Framework by developing a coherent approach to measuring and reporting the outcomes within the framework at an ICS Board, ICP and PCN level

8. System architecture

Deliver key actions which conclude the development of the ICS organisational and governance architecture, including: integrated oversight, integrated provider structures, integrated planning and delivery by ICPs and PCNs, integrated capacity planning, a final form for the strategic commissioner and strengthening the role of non-NHS organisations within

Recommendations

10. The Board are asked to consider the suggested local deliverables and objectives set out above for inclusion in the 2019/20 ICS MOU.