

**Cambridgeshire and Peterborough**  
Integrated Care System

**System Partnership Board Report**

<b>Meeting</b>	System Partnership Board Meeting in Public		
<b>Date of Meeting</b>	Wednesday 15 September 2021		
<b>Agenda item:</b>	2.1		
<b>Title:</b>	Joint Accountable Officer Update for System Partnership Board		
<b>Lead:</b>	Jan Thomas and Roland Sinker, Joint Accountable Officers		
<b>Author:</b>	Sharon Fox, Director of Governance, CPCCG		
<b>Report purpose</b> <i>(Please mark one in bold)</i>			
APPROVAL	DECISION	ASSURE	<b>INFORM</b>
<b>Committees/groups where this has been presented to before</b> <i>(including date)</i>			
N/A			
<b>Purpose of the paper</b>			
<p>The purpose of this report is to provide an update to the System Partnership Board on key matters in relation to our transition to an Integrated Care System (ICS).</p> <p>It also provides a brief update on other matters for the System Partnership Board's (Board) attention.</p>			
<b>Recommendation</b>			
The Board is asked to note the Joint Accountable Officer Update.			

## 1. Covid 19 Response and Mass Vaccination Programme

- 1.1 We continue to maintain robust arrangements to respond to the ongoing COVID-19 Pandemic and delivery of the Mass Vaccination Programme which continues to be managed as a Level 3 Incident (Regional Co-ordination). Whilst the frequency of some of our command control and co-ordination structures have stepped down, the Local Resilience Forum's Strategic Co-ordination Group and Tactical Co-ordination Group continues to meet. We are also required to maintain our Incident Co-ordination Centre functions which are manned from 8.00 am to 6.00 pm seven days a week.
- 1.2 We continue to see COVID-19 admissions to hospital. The level of staff sickness and staff self-isolating continues to see an impact on delivery. We are working as a system to ensure that there is a consistent approach across the system for dealing with this and we are monitoring impacts through the system Health Gold meetings.
- 1.3 At the time of writing this report, we continue to deliver the Mass Vaccination Programme. During Phase 1 and Phase 2 of the Programme, 77.3% of our population have received their first dose, with 70.1% having also received their second dose.
- 1.4 The Vaccinators on Tour campaign was set up to encourage people aged 28 and under to get their COVID-19 vaccinations. We set up our own website in-house – [www.thevaccinators.co.uk](http://www.thevaccinators.co.uk) which has had over 41,000 website visits to date - and run a social media campaign which has been seen 623,463 times and generated 20,222 engagements (clicks, shares etc...). We have also trialled new targeted advertising for local people aged 16-28 in our local area which has seen over 50,000 via Spotify, 176,000 via YouTube, and over 1 million times on Snapchat. We continue to refine and push forward the approach for people aged under 18, supported by some NHSE Regional funding
- 1.5 We will update the Board on the latest position at our meeting.

## 2. System Performance

- 2.1 As we have reported to the Board previously, demand for services – emergency, elective and non-elective, alongside primary care, community and mental health services and NHS 111 remains very high across Cambridgeshire and Peterborough, and nationally. We want to assure system partners that we continue to work tirelessly to address this situation and it is clear that we need to continue to deliver significant actions on admission avoidance and supporting workload in all areas.
  - 2.1.2 Acute Trusts activity levels remain significantly high which is in line with the regional and national picture. A&E attendances are also high with significant impact on ambulance delays, compounded by issues with flow across the hospitals. COVID-19 admissions have been increasing slightly which has also impacted on bed availability and red/green areas.

- 2.1.3 We continue to focus on initiatives to address the sustained and significant demand across the system which continues to impact on 111 and Emergency Departments. This is currently being led jointly by Place and the CCG's Operations Team as we progress the transition work to an ICS.
- 2.1.4 All Trusts continue to experience significant staffing issues across all areas of workforce. These are being driven by annual leave, sickness and COVID-19 related sickness and isolation. Staff fatigue is also impacting on the ability to backfill staff due to bank and agency shifts not being filled. These issues are impacting on the quality and safety of services with some services being postponed or cancelled to enable redeployment of staff to essential areas. The CCG's Quality and Patient Safety Team is working with all Quality Teams across the system to identify any harm or potential harm that has occurred as a result of the pandemic, and ensure actions are put in place ensure quality and patient safety remains the focus.
- 2.1.5 Operational Teams across our system partners are continuing to build on the initial "mutual aid" work which will see the system starting to address the waiting lists of patients who have now had their treatment delayed by the COVID-19 Pandemic. An in-county Acute Provider Collaborative has been formed and will be picking up the lead on the Elective and Diagnostic recovery work over the coming weeks.
- 2.1.6 Maternity services remain under significant pressure locally and nationally. This has unfortunately led to our three maternity units being closed on a number of occasions. A daily maternity system call is in place to facilitate mutual aid and a system response to the pressures. Recognising the national pressures in maternity, NHSEI have published an eight point plan to support delivery of services; which are currently being implemented.
- 2.1.7 Looking ahead, we are finalising the system wide Winter Plans alongside a detailed Communications and Engagement Plan for winter to help with demand management of the system through the busiest of months.

### **3. Finance**

- 3.1 A detailed Financial update at Month 4 is provided elsewhere on the Agenda. In summary, the system is ahead of plan but the forecast position for H1 (Quarters 1 and 2) remains on plan.
- 3.2 Work continues at pace across the system, led by the Chief Operating Officer Group and FPPG to finalise the Medium Term Financial Plan. This is ahead of our next meeting with the NHSE/I National Chief Finance Officer on 20 October 2021. We will keep the Board update on progress.

### **4. System Oversight and Assurance Group**

- 4.1 As we reported in July, a System Oversight and Assurance Group (SOAG) has been established to provide an integrated approach to the principles of the NHSE/I System Oversight and Assurance Framework. SOAG is a key element of the leadership and governance arrangements for the ICS and is expected to encompass some of the regulatory roles currently performed by the NHSEI East of England (EoE) regional team.

4.2 The first meeting of SOAG was held on 31 August 2021. An update on the outcomes of the meeting will be presented to the System Partnership Board on 14 September 2021.

## **5. ICS Development**

### **5.1 Development Plan**

5.1.1 We are required to report on progress against our Development Plan at the end of Quarter 2, along with a review of our Readiness to Operate Statement (ROS) and checklist. This is a high-level statement to confirm that all legally required, and operationally critical elements are in place ready for the establishment of each ICB as a statutory body on 1 April 2022. A separate paper to the Partnership Board presenting the progress and associated risks is included elsewhere on our Agenda.

5.1.2 Other updates of note are provided below.

### **5.2 Leadership**

5.2.1 Shortlisting for the ICS Chair took place on 7 September 2021, and interviews will be held on 30 September 2021. One to one meetings with ICS Accountable Officers will be arranged with shortlisted candidates between 13 and 27 September 2021, ahead of the Stakeholder Panels on 30 September 2021 in the morning and formal Interview Panels in the afternoon.

5.2.2 The process for appointing the ICB Chief Executive designate commenced on 1 September 2021 with the advert closing at 23:59 on 26 September 2021. Interviews will be held on 25 October 2021.

5.2.3 Our Joint Clinical Group is currently consulting with System Leaders and System Partners on the model of clinical leadership that we want to instil within the ICS. Once proposals are finalised, we will bring the outcome to the System Partnership Board.

### **5.3 Governance**

5.3.1 As set out in the Guidance, CCGs will be legally responsible for the development of the Integrated Care Board (ICB) Constitution although it is expected that the process will be led by the designate ICS Chair and Chief Executive Officer. However, as swift progress will be required once the designated leadership is in place, a Constitution Task and Finish Group has been established to begin early discussions on the requirements set out in the 'Model Constitution'. This Group will progress the development of the draft C&P ICB Constitution, as well as providing a steer on the framework for engagement with partners across the ICS so there can be wider engagement on its content. The current membership of this Group includes three members of the CCG Governing Body, as well as members from the CCG Governance team and the ICS transition team. The first formal meeting of the Group was held on 7 September 2021, and focussed on:

- Early options for the composition of the ICB Board; and
- Development of the ICS Partner Memorandum of Understanding and initial discussions on the establishment of the Integrated Care Partnership.

5.3.2 Other areas for consideration at a later date will include:

- Proposed governance arrangements across the ICS and what this means for individual partners; and
- System-wide functions and decisions map.

5.3.3 We are taking forward our work on the Constitution and ICS Partner Memorandum of Understanding in parallel as this will ensure that we take a fully coordinated and aligned approach, and that we are able to fully articulate how the ICS will work to achieve our shared vision. We are also using our regular ICS Governance meetings with System Governance and Corporate Affairs Leads to further ensure that our partners are able to contribute to this work throughout the development phase.

5.3.4 It is anticipated that outline proposals on ICB and ICP membership and the framework for engagement will be ready for wider consideration by System Leaders in October 2021. Based on our draft indicative ICS establishment timetable, formal proposals and recommendations on the draft Constitution should be ready for system consideration at System Leaders Partnership Board in December 2021 ready for submission for review by NHSE/I later that month, followed by formal final submission in February 2022.

## **5.4 CCG Transition**

5.4.1 The work involved in ensuring a safe transition from the CCG to the ICS cannot be under-estimated and is being managed alongside maintaining the effective operations of the CCG to ensure that it continues to meet its statutory duties and functions.

5.4.2 The CCG Transition Plan focusses on three key areas of activity:

- a. those which pertain to the safe and legal transition of the CCG functions into the Integrated Care Body (ICB).
- b. those which directly affect how the ICB will operate in its new form and with its system partners
- c. those which are required to ensure the Integrated Care System (ICS) matures and is effective in delivering better outcomes for the health and wellbeing of our defined population.

5.4.3 The CCG's Transition Board, as part of its Strategy and Planning Committee, is continuing to oversee delivery of the transition process. Two key documents govern the readiness for CCG dissolution and ICB implementation:

- a. Due Diligence (DD) Tracker. This provides a process and checklist for due diligence to underpin the transfer of property and people. It outlines the legal transfer through a Staff and Property Scheme and further outlines the legal establishment of the ICB through an Establishment Order and dissolution of the

CCG. The CCG Accountable Officer must provide written assurance to the ICB's Chief Executive that robust due diligence has been undertaken.

- b. Readiness to Operate Statement (ROS). This is provided to ensure C&P ICS has the key elements in place to operate effectively from the point of establishment. It brings together the 'must dos' from all functional areas and is a combination of legal and policy requirements. It further builds on the ICS Development Framework, System Progression and Development tool and System Development Plans. The ROS will be jointly signed off by the ICS Chief Executive and NHSEI Regional Director.

5.3.3 We will keep the Board updated on these key pieces of work.

## **5.4 Developing Integrated Care Partnerships**

5.4.1 Interim Governance Arrangements are being finalised to support the development of our North and South Integrated Care Partnerships for 2021/22. Details were presented to System Leaders on 7 September 2021.

5.4.2 Development work continues to ensure robust transitional arrangements, alongside strong leadership and development. Key areas of focus include strategy and planning, planning and performance, workforce allocation, leadership and finance and contracts. We will continue to update the Board on progress.

## **6. Other Issues**

### **6.1 Healthwatch Cambridgeshire and Peterborough**

We would like to take this opportunity to say thank you to Val Moore, Chairman of Healthwatch Cambridgeshire and Peterborough who is retiring from her role after she has reached the end of her second and final term. We also welcome Stewart Francis who becomes the new Chairman from 1 October 2021.

### **6.2 Health Service Value (HSJ) Value Award: Winner – North Alliance**

We would like to offer our congratulations to all those in the North Alliance whose work on integrated working and system approach to resetting and delivering outpatients, diagnostics and clinical pathways which was received the overall winner of the HSJ Value Award of the Year.

## **7. National & Regional Developments**

7.1 We have received a suite of national guidance from NHSEI which we are reviewing and applying to C&P ICS. The guidance can be found at: <https://www.england.nhs.uk/publication/integrated-care-systems-guidance/> A publication list has also been collated by the region and has been circulated to System Partners. An infographic of this is set out below

## Forward plan for product publications



- Key documents to be published on NHSEI website; all documents to be made available via NHS Futures Platform
- Communications to be minimised by grouping products as below and only communicating once all products within a group are approved

	Group 1	Group 2	Group 3
	Guidance and supporting materials to support <b>legal establishment and operational readiness</b> for 1 April 2022	Further guidance on <b>effective partnership working</b> within Integrated Care Systems	<b>Further resources</b> to support implementation and ongoing development of ICSs
	<ul style="list-style-type: none"> <li>• HR Framework ✓</li> <li>• Interim Guidance on ICB Functions and Governance: including: ✓                             <ul style="list-style-type: none"> <li>- Draft model constitution, and</li> <li>- List of statutory CCG functions to be conferred on ICBs</li> </ul> </li> <li>• ICS People Function ✓</li> <li>• ICS Establishment Guidance (Due Diligence) ✓</li> <li>• ICS Readiness to Operate Statement (ROS) and Checklist ✓</li> <li>• Direct Commissioning predelegation assessment framework ✓</li> </ul>	<ul style="list-style-type: none"> <li>• Thriving Places (<i>plus Solace report on Good practice guide to working in collaboration with Local Government</i>) ✓</li> <li>• Clinical and Care Professional Leadership within ICSs</li> <li>• ICSs and the Voluntary, Community and Social Enterprise Sector</li> <li>• Guidance on working with People and Communities</li> <li>• ICS 'What Good Looks Like' Framework (Digital &amp; Data) ✓</li> </ul>	<ul style="list-style-type: none"> <li>• Guidance on deployment of ICB resources</li> <li>• ICB Financial Governance &amp; Reporting guides:                             <ul style="list-style-type: none"> <li>- Sample ICB finance and resource committees ToR</li> <li>- ICB scheme of delegation</li> </ul> </li> <li>• Model profiles for Dir. of Finance, Dir. of Nursing and Medical Director</li> <li>• ICS Establishment example timeline</li> <li>• How-to guide: on developing pop-based blended payment models</li> <li>• Draft guidance on ICP*</li> </ul>
<b>Approvals:</b>	13 <sup>th</sup> August	27 <sup>th</sup> August	10 <sup>th</sup> September
<b>Publication:</b>	19 <sup>th</sup> August	2 <sup>nd</sup> September	16 <sup>th</sup> September

**Notes:**

\* Subject to progress by DHSC. Publication expected by 16<sup>th</sup> September

Provider trust governance consultation documents to be published on separate timescale due to different approval requirements

✓ = Approved

✓ = Published

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