

Health and Wellbeing Board (HWB) Paper

1. Reference Information

Paper tracking information	
Title:	Health and Social Care Integration White Paper Overview
HWBS Priority - 1, 2 and/or 3:	All
HWBS Outcome(s)/System Capability:	All /focus on Integrated Care system capability
Priority populations:	All
Civic level, service based and/or community led interventions:	All
Author(s):	Mairéad Rooney - Health Policy Advisor, Surrey County Council: 07866186449; Mairead.Rooney@surreycc.gov.uk
Board Sponsor(s):	Tim Oliver - Leader of Surrey County Council and HWB Chairman
HWB meeting date:	16 March 2022
Related papers:	<p>This white paper is part of a wider set of mutually reinforcing reforms:</p> <ul style="list-style-type: none"> the adult social care reform white paper the Health and Care Bill, and reforms to the health and care system <p>It sets out measures needed to make integrated health and social care a universal reality for everyone across England regardless of their condition and to level up regardless of where they live.</p>
Annexes/Appendices:	<ul style="list-style-type: none"> Annex 1 - Questions for Implementation

2. Executive summary

The Government published the Health and Social Care Integration White Paper “Joining up care for people, places and populations” on 9 February 2022. The white paper sets out the government’s ambition to accelerate the delivery of joined-up health and social care at ‘place’ level. In the white paper there are proposals for a single accountable person, shared outcomes, and ambitions for increasingly pooled NHS and social care budgets at ‘place’ level. The white paper asks a series of

questions about the approach to the proposals at place level. Feedback from the Board will inform a response on behalf of the system.

3. Recommendations

The Board is asked to note the following:

1. That the Integration White Paper is in line with Surrey's ambitions to integrate health and local government services where doing so will help improve outcomes for our residents and deliver the Community Vision for Surrey by 2030.

4. Reason for recommendations

For the Board to ensure that our approach to implementation of proposals in the Integration White Paper is aligned to Surrey's ambitions.

5. Detail

Overview

The Integration White Paper builds on both the Health and Social Care Bill and the Adult Social Care paper and follows the announcement of plans for tackling elective care waiting lists. The integration white paper focuses on integration arrangements at place and envisions that while "ICS will be responsible for strategic, at-scale planning; place will be the engine for delivery and reform." Children's social care is not included within the scope of the white paper, and it is left to places to consider the integration between and within children and adult health and care services. Key proposals in the white paper include:

- a single accountable person for place and place-level governance arrangements
- shared outcomes frameworks,
- increasingly pooled NHS and social care budgets at place level.

The white paper also covers other enablers of integration, including workforce, digital and data.

Governance and accountability

Single person accountable

One of the key measures outlined in the Integration white paper is that there will be a single person accountable for the delivery of the shared plan and outcomes in each place or local area (e.g. an individual with a dual role across health and care or an individual who leads a place-based governance arrangement). This person will be agreed by the relevant local authority or authorities and Integrated Care Board (ICB).

Place Governance

All places will be required to adopt a governance model by spring 2023, which must include a clear, shared plan against which delivery can be tracked and which should be underpinned by pooled and aligned resources. The guidance for the governance model and accountability processes have been deliberately made flexible so that they can be locally determined dependent on place-based priorities. Local places and areas will have autonomy to organise their own arrangements recognising diversity of place. The document reasserts that there are no national plans for further changes to ICS (Integrated Care System) boundaries. The white paper states that it will be important for all relevant partners to agree suitable, proportionate, complementary governance arrangements at place and system. The white paper clarifies that in the small number of cases where systems and places are effectively the same geography, national government would not expect both place-based and ICS arrangements to be set up as that would be bureaucratic and unhelpful.

Leadership

Health and Social Care Leadership Review will be published in early 2022. Government will develop a national leadership programme, addressing the skills required to deliver effective system transformation and local partnerships, subject to the outcomes of the upcoming leadership review.

Finance and budget pooling

Pooling budgets

NHS and local government organisations will be supported and encouraged to do more to align and pool budgets. Government will review existing pooling arrangements (such as Section 75, NHS Act 2006) with a view to simplifying the regulations for commissioners and providers across the NHS and local government to pool their budgets.

Plans for scope of services and spend:

In addition to clarity of governance, all places will need to develop ambitious plans for the scope of services and spend to be overseen by 'place-based' arrangements.

Oversight

Shared Outcomes

Government will set out a 'Shared Outcomes' framework with a small and focused set of national priorities and an approach from which places can develop additional local priorities. This will come into force in April 2023. Local leaders will be responsible for working with partners to develop their priorities. National priorities will be formulated in a way that prevents overlap with existing regulatory/oversight regimes and with a focus on outcomes rather than outputs. Local partners and ICSs will be responsible for identifying and addressing issues and barriers to delivery. The Government will also review alignment with other priority setting exercises and outcomes frameworks to preventing duplication of oversight and regulation.

Care Quality Commission

Care Quality Commission and other regulators will be required to consider the planning and delivery of outcomes agreed at place level as part of their assessment of ICSs.

Digital and Data

The white paper sets a new ambition for each organisation in an ICS to have a base level of digital capabilities (as defined by the “what good looks like” framework). It also reiterates existing expectations:

- All health and care providers in an ICS to be connected to a shared care record by 2024 (the previous deadline for shared care records was March 2023)
- ICSs have already been asked to develop a plan that sets out digital investment priorities (ahead of fully costed plans required by June 2022).
- ICSs must work with partners to achieve 80% adoption of digital social care records among CQC registered social care providers by March 2024.
- Each ICS will need to implement a population health platform with care coordination functionality to support joined up data for proactive population health management by 2025
- Taking an ‘ICS First’ approach the Department of Health and Social Care (DHSC) will encourage organisations within an ICS to use the same digital systems
- The Government will develop a suite of standards for adult social care, designed with the sector, to enable providers across the NHS and adult social care to share information with consultation on this set to commence at the start of 22/23

Workforce

The white paper proposes that Integrated Care Systems will be required to support joint health and care workforce planning at place level, working with both national and local organisations. In the white paper DHSC also commits to:

- increase the number of healthcare interventions that social care workers carry out by developing a national delegation framework of nursing interventions.
- review regulatory and statutory requirements that prevent the flexible deployment of health and social care staff across both sectors
- provide funding to deliver Care Certificates, alongside significant work to create a delivery standard recognised across the social care sector.

The white paper also reiterates the government’s intention to introduce integrated skills passports.

6. Timescale and delivery plan

Proposals from the Integration White Paper such as the Shared Outcome framework, single accountable person and governance model will be implemented by Spring 2023.

7. Next steps

The white paper sets out a series of questions (see Annex 1) on the approach to implementing shared outcomes, financial frameworks, accountability and oversight arrangements, workforce, and data at place level. Government engagement runs from 10 February 2022 for eight weeks.

ANNEX 1: Questions for implementation

Outcomes

1. What role can outcomes play in forging common purpose between partners within a place or system – and can you point to examples of this?
2. How can we get the balance right between local and national in setting outcomes and priorities?
3. How can we most effectively balance the need for information about progress (often addressed through process indicators) with a resolute focus on achieving outcomes (where data can lag)?
4. How should outcomes be best articulated to encourage closer working between the NHS and local government?
5. How can partners most effectively balance shared goals / outcomes with those that are specific to one or the other partner – are there examples, and how can those who are setting national and local goals be most helpful?

Financial

1. How can we improve sharing of best practice regarding pooled or aligned budgets?
2. What guidance would be helpful in enabling local partners to develop simplified and proportionate pooled or aligned budgets?
3. What examples are there of effective pooling or alignment of resources to integrate care / work to improve outcomes? What were the critical success factors?
4. What features of the current pooling regime (section 75) could be improved and how? Are there any barriers, regulatory or bureaucratic that would need to be addressed?

Accountability

1. How can the approach to accountability set out in this paper be most effectively implemented? Are there current models in use that meet the criteria set out that could be helpfully shared?
2. What will be the key challenges in implementing the approach to accountability set out in the white paper? How can they be most effectively met?

Workforce

1. What are the key opportunities and challenges for ensuring that we maximise the role of the health and care workforce in providing integrated care?
2. How can we ensure the health and social care workforces are able to work together in different settings and as effectively as possible?
3. Are there particular roles in the health or adult social care workforce that you feel would most benefit from increased knowledge of multi-agency working and the roles of other professionals?
4. What models of joint continuous professional development across health and social care have you seen work well? What are the barriers you have faced to increasing opportunities for joint training?

5. What types of roles do you feel would most benefit from being more interchangeable across health/social care? What models do you feel already work well?

Digital and data

1. What are the key challenges and opportunities in taking forward the policies set out in this paper, and what examples of advanced / good practice are there that could help?
2. How do we best ensure that all individuals and groups can take advantage of improvements in technology and how do we support this?

This page is intentionally left blank