

Summary of the Model Integrated Care Board Blueprint

This document outlines the purpose, core functions, and strategic role of Integrated Care Boards (ICBs) (such as NHS NEL) in improving population health and delivering the 10 Year Health Plan in the NHS.

Integrated Care Boards (ICBs) Overview

ICBs were established in July 2022 to plan and arrange health services for their populations, holding accountability for NHS performance. They face challenges in clarifying their roles and responsibilities to effectively address health inequalities and improve care integration.

- ICBs are responsible for planning and arranging health services.
- They hold oversight of NHS services within their geographical footprint.
- Differing interpretations of ICB roles have emerged since their establishment.
- The Darzi review emphasizes the need for clearer roles to improve resource allocation and care integration.

Model ICB Blueprint Development

The Model ICB Blueprint was co-produced by ICB leaders and NHS England to clarify the future roles and functions of ICBs. It aims to support the delivery of the 10 Year Health Plan through strategic commissioning and improved population health management.

- The blueprint was developed collaboratively by ICB leaders across various regions.
- It outlines the critical role of ICBs as strategic commissioners.
- The focus is on improving population health, reducing inequalities, and enhancing care quality.
- Engagement with staff and stakeholders is planned for further refinement of the blueprint.

Strategic Shifts in NHS Operations

The NHS is shifting towards three strategic priorities: prevention over treatment, community-based care over hospital care, and digital transformation. These shifts are essential for ICBs to operate effectively and meet the health needs of local populations.

- Emphasis on preventative health initiatives to reduce the need for costly medical interventions.
- Transitioning care closer to home to minimize reliance on acute services.
- Leveraging technology and data to enhance care delivery and decision-making.

Core Functions of ICBs

ICBs focus on understanding local health needs, developing long-term health strategies, delivering these strategies through resource allocation, and evaluating their impact. These functions are essential for improving health outcomes and ensuring efficient use of resources.

- Understanding local context through population data and intelligence.
- Developing long-term population health strategies based on evidence.
- Delivering strategies through strategic purchasing and resource allocation.
- Evaluating impact through oversight of healthcare utilization and user feedback.

Enablers for Effective ICB Functioning

Several key enablers are necessary for ICBs to perform their core functions effectively, including robust data analytics, strategic planning capabilities, and strong partnerships with local authorities. These enablers will support ICBs in achieving their objectives.

- Development of healthcare data and analytics capabilities for informed decision-making.
- Effective strategy capability to synthesize information and develop actionable insights.
- Strong partnerships with local government and community organizations to improve health outcomes.
- User involvement and co-design to ensure services meet community needs.

Transition and Cost Reduction Plans

ICBs are tasked with delivering cost reduction plans while managing the transition to the new Model ICB design. They must create affordable plans within a revised operating cost envelope of £18.76 per head of population by the end of Q3 2025/26.

- The operating cost envelope is set at £18.76 per head of population.
- Cost reductions must be achieved by the end of Q3 2025/26 and recurrently into 2026/27.
- ICBs are encouraged to expedite changes to mitigate financial risks.
- Savings should not shift costs to providers unless overall savings are realized.

Support for Staff During Transition

A national support offer will be available to ensure fair treatment of staff affected by the transition, including guidance on voluntary redundancy and redeployment. Emphasis will be placed on transparent communication to maintain morale.

- National support will include advice on voluntary redundancy and redeployment.
- Emphasis on transparent communication to retain talent and maintain morale.
- Partnership with trade unions to implement changes for staff effectively.

Leadership Structures and Governance

ICBs are expected to maintain clear leadership and governance during the transition, streamlining boards and reducing headcount to focus on core functions. Effective governance structures will ensure accountability and safety.

- ICBs should streamline boards and reduce headcount at the executive level.
- Leadership structures must reflect core functions, including strategic commissioning and clinical governance.
- Strong non-executive presence is encouraged for oversight and transition delivery.

Managing Risks During Transition

To ensure a safe transition, ICBs should establish dedicated Transition Committees to manage risks and track progress. Central support from NHS England will facilitate consistency and best practices across systems.

- Establish Transition Committees to manage local risks and oversee change processes.
- Central NHS England program team will provide coordination and support.
- Focus on legal, operational, and workforce challenges during the transition.

Safe Transition of Transferred Functions

A gateway process will be implemented to assess readiness for transferring functions, ensuring clear governance frameworks and outcome metrics are in place. This is critical for the success of the new Model ICB design.

- A gateway process will verify readiness before transferring staff and functions.
- Clear governance frameworks and financial risk arrangements will be established.
- Performance management of providers will transfer to regions under the new design.

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