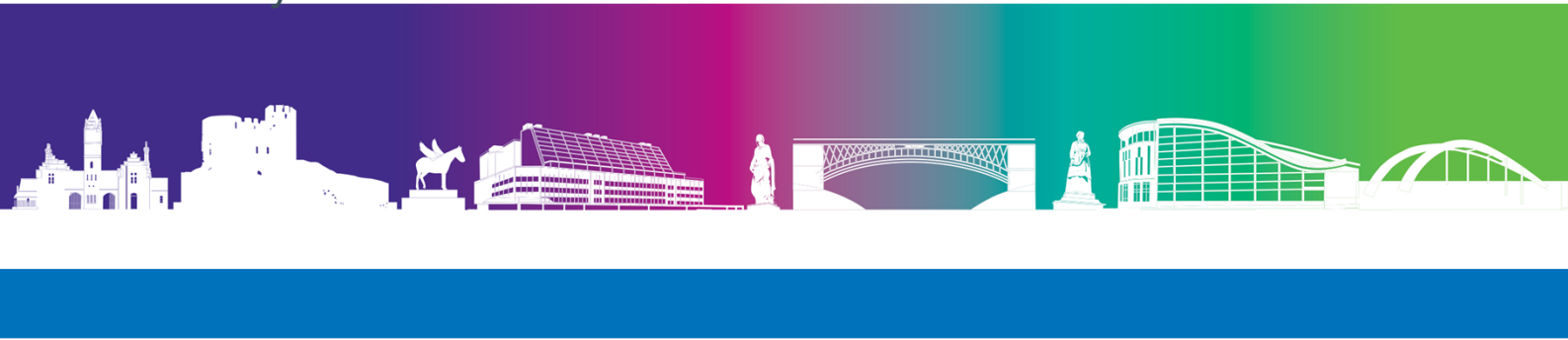


# Wolverhampton Health Scrutiny Panel

## Update on the development of the Black Country Integrated Care System

January 2024



# 1. Introduction

This report provides an update to the Health Scrutiny Panel on the development of the Black Country Integrated Care System.

The Black Country Integrated Care Board (“ICB”) was established in July 2022, as the successor organisation to the Black Country and West Birmingham Clinical Commissioning Group. We are a statutory NHS organisation responsible for developing a plan for meeting the health needs of 1.26m people in the Black Country. We manage the NHS budget for the Black Country and arrange for the provision of health services to meet the needs of local people. From April 2023 the ICB has also been responsible for commissioning of dental, optometry and pharmacy services.

The ICB works as part of the wider Black Country Integrated Care System – known as *Healthier Futures* - through which local partners collaborate to bring health and care services closer together to improve the health and wellbeing of citizens in the Black Country.

# 2. Integrated Care Partnership

The Black Country Integrated Care Partnership (“ICP”) is a statutory committee that brings together system partners to develop a health and care strategy for the Black Country.

Our Initial ICP Strategy, for the period 2023-2025, was published in March 2023 and can be access on the Healthier Futures website here [Our priorities :: Black Country ICS](#)

Membership of the ICP is drawn from the ICB, the four Black Country local authorities, West Midlands Fire Service, West Midlands Police, the University of Wolverhampton and the Community and Voluntary Sector.

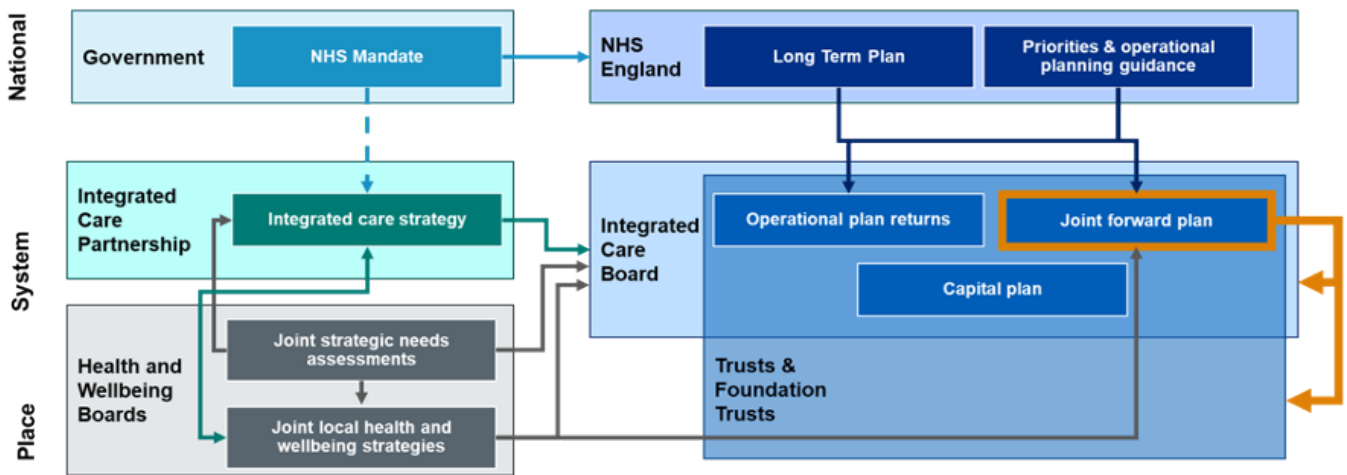
Local authority representation includes one person from each authority, including a Chief Executive Officer, Director of Adult Social Services, Director of Children’s Services and Director of Public Health. Wolverhampton is represented by John Denley, Director of Public Health.

Terms of Reference for the ICP will be approved at its next meeting on 19<sup>th</sup> January. It is proposed that meetings are held quarterly and are held in public.



### 3. Joint Forward Plan

ICBs and their partner trusts are required to prepare a plan setting out how they propose to exercise their functions in the next five years. These should take account of national guidance and local priorities as set out in the Integrated Care Strategy and Health and Wellbeing Strategies. The first Black Country Joint Forward Plan (“JFP”) was published in June 2023. The Wolverhampton Health and Wellbeing Together (“HWBT”) Board was engaged in its development to provide assurance that the priorities in the JFP align with the local Health and Wellbeing Strategy and the final JFP was presented to the HWBT Board in December. The figure below sets out the relationship between Joint Forward Plan and other key statutory organisations/partnership and documents.



The JFP will be reviewed and revised before the start of each financial year.

### 4. National Oversight Framework

The [NHS oversight framework](#) describes NHS England’s approach to oversight of Integrated Care Boards and NHS trusts and is aligned with the ambitions set out in the [NHS Long Term Plan](#) and the [NHS operational planning and contracting guidance](#)

A set of [oversight metrics](#) has been published, applicable to ICBs, NHS trusts and foundation trusts, to support implementation of the framework. These are used to indicate potential issues and prompt further investigation of support needs and align with the five national themes of the NHS oversight Framework: quality of care, access and outcomes; preventing ill health and reducing inequalities; people; finance and use of resources; and leadership and capability.

To provide an overview of the level and nature of support required across systems and target support capacity as effectively as possible, NHS England allocate trusts and ICBs

to one of four segments. A segmentation decision indicates the scale and general nature of support needs, from no specific support needs (segment 1) to a requirement for mandated intensive support (segment 4).

For ICBs and trusts in segments 1 and 2, overall support need is formally reviewed on a quarterly basis by the relevant regional team (in the case of individual organisations this will happen in partnership with the integrated care board) called the System Review Meeting.

For trusts and ICBs in segment 3, NHS England regional teams will work collaboratively with them to undertake a diagnostic stocktake to identify the key drivers of the concerns that need to be resolved.

Those in segment 4 enter the new [Recovery Support Programme \(RSP\)](#). The RSP replaces the previous financial and quality special measures programmes and will provide a collaborative, ICB-focused approach for supporting those trusts and ICBs with the toughest challenges. ICBs and trusts will get intensive support to use all their levers to address the often complex, historical problems they face, and embed lasting solutions.

The Black Country ICB is currently allocated to “segment 3”. At December 2023, 23 of the 42 ICBs in England were allocated to segment 3 (with one allocated to segment 1, fourteen to segment 2 and four to segment 4).

## 5. ICB Performance Framework

To assure itself against the key areas of delivery the ICB Board uses a combination of both NHS Oversight Framework measures Operational Planning requirements. These are combined in an ICB Performance Framework. This is published as part of the of the System Assurance Report which is presented to ICB Board.

The most recent System Assurance Report, presented to the ICB Board at its November meeting, is attached at Appendix One. The appendix to this report includes information on over 100 metrics and pages 6 and 7 show how the ICB uses the “making data count” approach to focus attention on areas of concern that require particular focus.

## 6. Office of the West Midlands ICBs

The six ICBs in the West Midlands have established arrangements for collaboration through an Office for the West Midlands ICBs hosted by Birmingham and Solihull ICB. The core purposes of the collaboration are:

- To commission a set of agreed functions at a West Midlands level on behalf of six ICBs through shared leadership and joint decision making.
- To identify shared priorities and goals, and clear projects and work programmes to deliver them.
- To bring together in a single host ICB the shared teams and staff supporting the Office of the West Midlands and their ICBs.
- To develop distributive leadership and expertise across an agreed range of functions/teams for the benefit of all ICBs.
- To provide a single coherent voice for the West Midlands ICBs where appropriate/a single point of contact/shared voice for change.
- To share learning and support improvement across the ICBs.
- To achieve best value and efficiency by working at scale where appropriate.

From April 2023 this collaboration has hosted the staff supporting the ICBs in the commissioning of dental, optometry and pharmacy services and from April 2024 Birmingham and Solihull ICB will also be the host for the team supporting all eleven ICBs in the Midlands in relation to a commissioning portfolio of delegated specialised services.

## 7. One Wolverhampton

The Operating Model for the ICS recognises the important role that the four Black Country Places have in the planning and provision of health and care services and wider strategies to improve health and wellbeing and tackle health inequalities for local people.

We are currently reviewing the Operating Model and anticipate that there will be a phased delegation of responsibilities to Place-based Partnerships, building on the strengths of local arrangements as they have developed over recent years.