<u>Independent review of Integrated Care</u> <u>Systems</u>

- New independent review of Integrated Care Systems to improve health outcomes across the country
- Former Health Secretary the Rt Hon Patricia Hewitt, Chair of NHS Norfolk
 Waveney Integrated Care Board has been appointed as Chair

The government has announced a new independent review into oversight of Integrated Care Systems (ICSs) to reduce disparities and improve health outcomes across the country, following record investment in health and social care.

The review will be led by former Health Secretary the Rt Hon Patricia Hewitt who is currently Chair of NHS Norfolk & Waveney Integrated Care Board, and will explore how to empower local leaders to focus on improving outcomes for their populations.

This includes giving them greater control and making them more accountable for performance and spending, reducing the number of national targets, enhancing patient choice and making the healthcare system more transparent.

The Health and Care Act established 42 Integrated Care Systems across England in law on 1 July. The new systems are a crucial part of the government's vision to bring together the NHS and local government to jointly deliver for local communities and boost access to care.

Yesterday's Autumn Statement also announced up to £8 billion more for the NHS and adult social care in England in 2024-25 on top of record funding, ensuring the NHS can address the most pressing issues facing the health service this winter. This includes continuing to provide care to the most vulnerable, reducing the backlog of those waiting for elective surgeries and improving access to emergency and primary care.

Health and Social Care Secretary Steve Barclay said:

I'm focused on supporting the health and care system through what we know will be a challenging winter but also crucially making the changes that will better prepare us for the future.

Rather than a one-size-fits-all approach dictated from a ministerial office, local leaders are best placed to make decisions about their local populations and I want to empower them to find innovative solutions to tackle problems and improve care for patients.

Fewer top-down national targets and greater transparency will help us deliver this aim and I am grateful to Patricia Hewitt for agreeing to lead this vital review to help us get this right. I look forward to reviewing her findings.

Rt Hon Patricia Hewitt, Chair of NHS Norfolk & Waveney Integrated Care Board said:

I am delighted to have been asked to lead this review of how Integrated Care Systems can best be empowered and supported to succeed.

By bringing together local government, the NHS and the voluntary, community and social enterprise sector, ICSs provide the biggest opportunity in a generation to improve health outcomes, transform health and care services and reduce health inequalities. Despite the many challenges we face, I am excited by how much has already been achieved in many different systems, including in Norfolk and Waveney, and optimistic about what our partnerships can do in future as we respond to the different needs of our own communities.

This review will focus on how national policy and regulation can most effectively support and enable local systems to solve problems locally. It will build on the welcome work already done by NHS England to develop a new operating model.

I look forward to working with colleagues from all 42 ICSs as well as DHSC, NHSE, colleagues in local government and others as we respond to the Health Secretary's and the Chancellor's invitation to help create a system of regulation and accountability based on the principle that change should be locally led and nationally enabled.

Richard Meddings, Chair of NHS England:

As a health service we are focused on delivering the best possible care for all our patients, as well as value for taxpayers.

With both the economy and the NHS facing tough challenges ahead, it's absolutely right that we continue to find more innovative ways to ensure all our systems are working as efficiently as possible. We also need to continue to provide the tools to help local systems solve the problems they face on the ground — building on the operating model we have already set out.

That's why we welcome this week's announcement of a new independent review and will work closely with its chair, the Rt Hon Patricia Hewitt, to help the NHS to continue to deliver for patients, as well as the public purse.

The review will consider:

- The scope for a smaller number of national targets to empower local health and care leaders and enable greater autonomy, so they have the time and resource to focus on innovating and tackling local challenges and priorities.
- How local performance could be better monitored and any local targets set, with a focus on transparency.
- How to ensure new ICSs are held robustly to account, both locally and nationally.
- The relationship between ICSs, and central bodies, such as NHS England and the Care Quality Commission (CQC), as well as the CQC's role in oversight of ICSs.

An interim report is expected before the end of the year, with a final report in the new year, which will inform the NHS's objectives and planning.

The review will draw upon the expertise of ICS leaders, NHS England and other experts including in academia, government and relevant thinktanks, as well as local government, voluntary sector and patient representatives.

Background

- Each ICS has an Integrated Care Board (ICB), a statutory organisation bringing the NHS together locally to improve population health and establish shared strategic priorities within the NHS. They include representatives from local authorities, primary care and NHS trusts and are accountable for the performance of the NHS across their area.
- Each ICS also has an Integrated Care Partnership (ICP), bringing together a wider group of partners to set the strategy for the system as a whole, focusing on the four goals of ICSs: improve outcomes in population health and healthcare; tackle inequalities in outcomes, experience and access; enhance productivity and value for money; and help the NHS support broader social and economic development.
- The terms of reference will be published in due course.