



The importance of place in the success of integrated care systems

GGI webinar

Wednesday 11 November 2020

Briefing paper to prompt discussion

Integrated care systems (ICS) are central to delivering the ambitions of the NHS Long Term Plan (LTP), with commitment to achieving full ICS coverage in England by April 2021.

At the heart of the LTP is the implementation of a new service model that seeks to deliver properly joined-up care at the right time in the right place. These developments are a response to challenges presented by demographic changes and resource constraints, as well as the ambition to improve health and wellbeing outcomes for local communities.

In delivering these aims, many systems in the English NHS are committed to the principle of subsidiarity focused on the idea of 'place', often embodied through the vehicle of an integrated care partnership (ICP).

There are increasing signals from NHSE/I relating to the structure of systems, including NHS England Chief Executive Simon Stevens indicating that new legislation will create a 'legal form' for ICSs, and the Phase 3 letter emphasising collective decision-making and the need for clearly defined arrangements for provider collaboration, place leadership and ICPs.

The concept of place in the context of health and care means different things to different people. GGI posit the following working definition for consideration:

Place-based care involves NHS bodies, local authorities and other partners working together on planning, generative and transformation programmes and tackling the wider determinants of inequalities. Primary care networks (PCNs) are included as the unit of delivery for primary care. Place becomes the locus for adoption of local care pathways and regeneration. Authentic engagement with citizens, the voluntary and independent sectors is a core function of place-based working.

Primary care is strengthened through PCNs working across practices and health and social care, and drawing on resource across community, voluntary and independent sectors, as well as other public services to play a proactive role in improving population health and prevention.

The 11 November webinar provides an opportunity to explore these issues, and to hear about examples of emergent place-based working from across the country. Key questions to address include:

- i. How do we balance flexibility and variety in place-based working with clear accountability for delivering improved local outcomes?
- ii. Does collaboration change what you need to know about partners?
- iii. What are the implications of an absence of coterminous NHS boundaries with local government?
- iv. What is the interplay with place-based working and service pathways which may exist across a larger geography, such as provider collaboratives?
- v. How do we clarify the difference between forums for *participation and engagement*, and those tasked with *taking decisions*?

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