

## **BOARD MEETING**

Date of Meeting: 27 September 2022	Agenda item: 10
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Title of Paper: Approach to Five Year Forward Plan

Paper is for: (Please ✓)	Discussion		Decision		Information	✓
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# **Executive Summary and Implications**

This report sets out requirements on Integrated Care Board (ICB) and NHS Providers to develop the Five Year Forward Plan, how it fits with the Integrated Care Partnership's (ICP) Integrated Care Strategy (covered in Item 9), an outline timetable and planned approach.

The plan will be published by 31 March 2023. It must cover the ICB's statutory obligations such as addressing inequalities, quality of care and financial duties. Further guidance from NHS England will cover the operational planning requirements for 2023/24. The plan will set out the ICB's priorities. It will also detail the choices which we must make to ensure that finite resources are managed. Funding will need to be shifted between different areas and priorities.

The preparation of the plan will involve engaging with and, where relevant, formally consulting with the public.

### **Action Required**

The Board is asked to review the report and confirm the proposed approach, timescales and milestones for further Board input.

Date and Name of Committee at which Paper Reviewed: ICB Executive 12/09/2022

Author: Amanda Lyons Interim Director of Strategic Delivery and Partnerships

**Executive Lead/Senior Responsible Officer:** Amanda Lyons, Interim Director of Strategic Delivery and Partnerships

Date of Paper: 12 September 2022

### **Conflicts of Interest**

The development of the Five Year Forward Plan will set the priorities and context for the utilisation of the ICB commissioning allocation and highlight areas of service change that may need to be considered. This may impact on the organisations that our Partner members and Member for Mental Health (SMcM, SC, SJ and NB) work in. However, the perspective of these members is an important contribution to the development of the plan.

No conflict identified		
Conflict noted: conflicted party can participate in discussion and decision		
Conflict noted, conflicted party can participate in discussion but not decision		
Conflict noted, conflicted party can remain but not participate in discussion		
Conflict noted, supported paper withheld from conflicted party e.g. pecuniary benefit		
Conflicted party is excluded from discussion		



# APPROACH TO DEVELOPMENT OF FIVE YEAR FORWARD PLAN

#### Context

- 1. The National Health Service Act 2006 (as amended by the Health & Care Act 2022) requires Integrated Care Boards (ICBs) and their partner NHS trusts, and foundation trusts to prepare a joint forward plan (the Plan) before the start of each financial year. The first year following the ICB's establishment is a year of transition when the ICB is required to prepare the joint forward plan covering the five-year period commencing 1 April 2023 and publish it by 31 March 2023.
- The Health & Care Act 2022 also requires the Integrated Care Partnership (ICP) to prepare the ICS strategy which it will provide to the ICB. The ICB will take account of the ICS strategy as it prepares its joint forward plan. The ICP strategy needs to be completed by 31 December 2022.
- 3. The ICB is also required to provide the five Health and Wellbeing Boards across Buckinghamshire Oxfordshire Berkshire West Integrated Care System (BOB ICS) a copy of the draft plan for comment before publication.

## **Expected Requirements**

- 4. The 2022 Health and Care Act (the Act) provides details on the required content. The ICB is required to set how it plans to meet the physical and mental health needs of our population through the delivery and arranging the local health services. The plan needs to set out how we are going meet our statutory duties, including our financial duties, for example:
  - Improve the quality of services
  - Reduce inequalities
  - Promote public involvement in decision making
  - Promote innovation
  - Promote education and training
  - Compliance towards the Climate Change Act
- 5. There are two further duties which we will need to pay attention to. The first is to address the specific needs of children and young persons under the age of 25. The second is how the ICB proposes to address the needs of victims of abuse (including domestic abuse and sexual abuse, whether of children or adults). At the time of writing, the NHS England supporting guidance had not been published. This will provide further detail of the operational planning elements to be incorporated.
- 6. The interim Director of Strategic Delivery and the Chief Delivery Officer anticipates, based on previous experience, that NHS England will publish detailed operating planning guidance which builds on the NHS Mandate and the NHS Long Term. The Plan is likely to incorporate the 2023/24 detailed operating plan. Our preparation will include the developing a long-term financial model (both revenue and capital) and a detailed workforce plan in support of detailed operating plans which form the joint forward plan. The ICB joint forward plan will need to set out the priorities for BOB. It will also need to identify choices which may need to be discussed with our local communities.

7. In preparing the plan we are required, along with our NHS trusts and foundation trusts, to engage with our communities and population. We should also consult where it is considered appropriate. A draft must also be shared with the five Health and Wellbeing Boards within the ICS as well as the ICP and NHS England.

# Proposed approach and progress

- 8. The ICB five-year joint forward plan must be published by 31 March 2023 and will be updated annually. Appendix 1 sets out a high-level timeline detailing the core activities and phasing. We have started to discuss this with the NHS trusts' and foundation trusts' directors of strategy and have agreed to work together to prepare the plan. The plan also sets out when we intend to start our engagement with our communities and population. We are working closely to align, where possible, the work to support the development of the ICP strategy. For example; the ICB Interim Chief Delivery Officer is leading the ICP's demand management working group, which will evolve into the ICB planning group by the end of October for the development of the five-year forward plan.
- 9. We have set up a cross directorate planning group which is building on the ICP's Strategy to support the development of the five-year forward plan. The first step has been to pull together comprehensive baseline information which will be shared with the Board, our system partners, and the public, once finalised, but the paper contains some of the emerging headlines, particularly in relation to inequalities.
- 10. To meet the statutory requirements of the joint forward plan satisfactorily, each executive director will be responsible for different elements of the Plan. For example: the ICB Chief People officer will lead all requirements for workforce planning and strategic workforce development; the Interim Chief Finance Officer, the long-term financial model and capital and estates planning. The Chief Nurse will be responsible for quality and will work to ensure the ICB is able to set out its plans in respect of the new duties. The work will be undertaken across the NHS trusts and foundation trusts. The work already led by the interim Chief Information Officer on developing a BOB ICS digital strategy will be incorporated into the plans.
- 11. The approach we are proposing has four stages:
  - a. Data baselining including initial engagement with people and communities
  - b. Development of initial proposals including choices and recommended priorities for consideration both by the Board and with our people and communities
  - c. Preparation of detailed financial, activity and workforce models
  - d. Preparation of the Plan, noting the requirement for a review of the draft Plan by Health and Wellbeing Boards
- 12. The first stage of the development of the joint forward plan is the completion of a data baselining exercise. This work started in mid-June. The Executive Directors with the support of McKinsey are currently reviewing the publicly available data across seven domains to understand the opportunities and challenges for the ICB. The emerging messages are as follows: across BOB's population there is a lower prevalence of most long-term conditions compared with the national average. The population also has a higher life expectancy for both sexes than comparable ICSs. The proportion of years spent in good health for our population is greater. However, this has been declining since 2013.

- 13. Although most of our population experiences lower deprivation and has good health and higher life expectancy, inequalities across BOB exist. Our most deprived communities have worse healthcare outcomes. BOB patients from our most deprived communities are over-represented in admissions to hospital at a greater rate than peers and the national average. There is also a 50 per cent higher non-elective inpatient rate for our most deprived populations.
- 14. The operational and quality metrics highlights show BOB primary care has higher quality ratings with higher digitisation and workforce numbers than the national average; however, there is variation between funding per practice and performance which needs to be reviewed. The mental health sector performs relatively well despite lower than average spend and community contacts. When performance is compared across the NHS South-East region, there are longer waits for elective care in BOB. In Buckinghamshire, inpatient overall length of stay is high. Urgent Care remains a challenge nationally and BOB ICS is no different. Workforce metrics typically score in the upper quartile.
- 15. The Interim Director of Communications and Engagement has set out to the ICB Board a proposed strategic framework for engaging with communities and people. This framework will inform the approach being taken to engagement. We therefore propose to use an open engagement platform, draw on our local authority and trust partners' approaches and make use of the proposed citizen panel and suggested targeted qualitative methods to engage specific parts of our communities. We will also work with Healthwatch and voluntary, community and social enterprise organisations, building on the ICP strategy development already underway.
- 16. In developing the five-year forward plan, the Board will need to prioritise resources which may require choices to be considered with our people and communities. The long term financial and workforce modelling planned will inform these choices. The system delivery plan which the ICB received in its establishment Board set out a small number of current priorities: Urgent and emergency care, elective care and children and young people's mental health. The ICS inequalities Board also identified a small number of priorities and these are being considered in the preparation of the ICP strategy. The plan will need to set priorities and outline choices to ensure we manage our finite resources effectively and provide the necessary transformational capability across our most challenging issues.

## Asks of the Board or of members present

- 17. The Board is asked to note the requirement to prepare a joint forward plan including the summary timeline, the statutory duties and, in particular, the new duties in relation to children and people under 25 and the victims of domestic abuse.
- 18. The Board is also asked to consider the emerging engagement plans, and Local Authority and Trust partner members are requested to provide guidance and support to develop these plans in the ICB's first year.

### **Next Steps**

19. The Board will receive the finalised base line summary at its meeting in November. The Board will also receive initial themes gathered from engaging with communities and an outline of initial proposals for discussion by the Board and with broader stakeholders.