

Agenda Item 9

		THE HEALTH SCRUTINY COMMITTEE FOR LINCOLNSHIRE	
Boston Borough Council	East Lindsey District Council	City of Lincoln Council	Lincolnshire County Council
North Kesteven District Council	South Holland District Council	South Kesteven District Council	West Lindsey District Council

Open Report on behalf of Keith Ireland, Chief Executive

Report to	Health Scrutiny Committee for Lincolnshire
Date:	17 October 2018
Subject:	Integrated Care Providers Contract Arrangements - Consultation

Summary:

At its last meeting, the Committee was advised that on 3 August 2018, NHS England had launched a twelve week consultation on the proposed contracting arrangements for Integrated Care Providers (ICPs). The Committee indicated that it wished to respond to the consultation and established a working group to prepare a draft response. The working group is due to meet on 9 October and its draft response will be circulated as soon as possible after this date.

The consultation documentation details how the proposed ICP Contract would underpin integration between services, how it differs from existing NHS contracts, how ICPs fit into the broader commissioning system, and which organisations could hold an ICP contract. The deadline for submitting responses to the consultation is 26 October 2018.

The Health and Wellbeing Board has also agreed to submit a response to this consultation.

Actions Required:

To finalise the response of the Health Scrutiny Committee for Lincolnshire, following consideration of a draft response, prepared by the working group.

DRAFT RESPONSE TO BE CIRCULATED SHORTLY BEFORE OR AT THE MEETING

1. Background

Consultation Documentation

NHS England is currently consulting on proposals for an Integrated Care Provider (ICP) Contract. The twelve week consultation period began on 3 August and concludes on 26 October 2018. The consultation provides details on how the ICP Contract would underpin integration between services; how it differs from existing NHS contracts; how ICPs fit into the broader commissioning system; and which organisations could hold an ICP contract. The consultation includes twelve questions on which NHS England is seeking a response. The consultation questions are focused on the content of ICP contract and related arrangements, and not on the principle of ICPs.

In addition to the main consultation document (*Draft Integrated Care Provider (ICP) Contract – A Consultation, 41 pages*), there are 13 further supporting documents to the consultation, which include:

- Draft Integrated Care Provider (ICP) Contract – Easy Read Consultation – 22 pages
- Draft Integrated Care Provider (ICP) Contract - Consultation Package – Questions and Answers – 13 pages
- NHS Standard Contract (Integrated Care Provider) Particulars – 88 pages
- NHS Standard Contract (Integrated Care Provider) Service Conditions – 41 pages
- NHS Standard Contract (Integrated Care Provider) General Conditions – 98 pages

All the documentation is available at the following link: -

<https://www.engage.england.nhs.uk/consultation/proposed-contracting-arrangements-for-icps/>

Terminology

Previously, this draft ICP Contract was referred to as the draft accountable care organisation (ACO) contract. NHS England has stated it has changed this term in recognition that, as reported by the House of Commons Health and Social Care Committee, use of the term “accountable care” has generated concerns that what is being proposed is akin to models and organisations established in the United States under that name.

NHS England believes the term “integrated care provider” better describes its proposals to promote integrated service provision through a contract to be held by a single lead provider organisation.

Further Details

The proposals describe a new model of contract that NHS England is developing to support the commissioning of Integrated Care Providers for the NHS and (potentially) social care and public health services.

Key points include:

- In some parts of the country NHS, local authorities and voluntary sector organisations are coming together to form Integrated Care Systems (ICSs). There are already eight pilot areas and the Government is looking to learn from these quickly and share learning.
- The ICP contract will be based on population based care with an outcomes driven approach. The ICP will use a population based payment approach rather than individual contracting for individual services or procedures. An ICP contract may be awarded for a term of up to ten years
- Providers would receive a *Whole Population Annual Payment* in monthly instalments. The *Whole Population Annual Payment* will provide flexibility for the ICP to manage care more effectively across different settings and invest in services designed to improve the longer term health outcomes of the population.
- As a result of *Whole Population Annual Payments* and outcome focussed commissioning, the ICP will have to manage any increases in the demand for services it delivers over the duration of the contract.
- ICPs are not new types of legal entities or organisations; they are providers (new or existing) that have been awarded ICP contracts.
- GPs will be part of the ICP contract and model, though their participation will be voluntary; they may be employed by the provider organisation (a community trust, acute trust or even local authority or voluntary sector organisation). They will be a key part of wider multi-speciality teams.
- The ICP contract requires providers to address health inequalities, to target services; the contract is aimed at improving the health and wellbeing of the population – not simply treating new and existing disease.

Are There Any Implications for Health Overview and Scrutiny Committees?

The current legislative framework enables health scrutiny committees to "review and scrutinise any matter relating to the planning, provision and operation of health services in its area". A "responsible person" must provide health scrutiny committees "with such information about the planning, provision and operation of health in the area" as may be reasonably required to enable committees to discharge their functions. The definition of responsible person includes: -

- NHS England
- Clinical Commissioning Groups
- NHS Trusts and NHS Foundation Trusts
- Other relevant health service provider, effectively defined as an organisation which provides services commissioned by NHS England or Clinical Commissioning Groups.

As stated above, there is currently no intention that the ICP contracts will lead to the establishment of new types of NHS organisations, so the impact on the remit of health overview and scrutiny committees may be limited. However, this Committee's response may need to reflect the view that any organisation operating as an ICP should be included in the definition of responsible person, so that they would be required to provide information to and engage with health scrutiny committees.

2. Consultation

This item relates to a consultation by NHS England on its proposed arrangements for the ICP contract.

3. Conclusion

The Health Scrutiny Committee is being requested to approve a response to a consultation by NHS England on its proposals for the ICP contract.

4. **Background Papers** - No background papers within Section 100D of the Local Government Act 1972 were used in the preparation of this report.

This report was written by Simon Evans, Health Scrutiny Officer, who can be contacted on 01522 553607 or by e-mail at Simon.Evans@lincolnshire.gov.uk