

# Agenda Item 8

		<b>THE HEALTH SCRUTINY COMMITTEE FOR LINCOLNSHIRE</b>	
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 Sandra Williamson Director of Health Inequalities, Prevention, & Regional Collaboration Lincolnshire Integrated Care Board

Report to	<b>Health Scrutiny Committee for Lincolnshire</b>
Date:	<b>18 January 2023</b>
Subject:	<b>Role of Lincolnshire Integrated Care Board in the Commissioning of Pharmaceutical, Optometry, and Dental Services</b>

**Summary:**

The purpose of the report is to provide a summary of the delegation agreement areas of responsibility and next steps for the NHS England services that will transition to the NHS Lincolnshire Integrated Care Board.

**Actions Requested:**

To consider and note the contents of the report.

## 1. Background

- 1.1 By delegating commissioning functions to Integrated Care Boards the aim is to break down barriers and join up fragmented pathways to deliver better health and care so that our patients can receive high quality services that are planned and resourced where people need it.
- 1.2 This paper aims to support understanding the delegation requirements in relation to the following NHS England services:
  - Primary Medical Services on 1 July 2022
  - Complaints functions associated with Primary Medical Services

- Primary Pharmacy, Optometry & Primary and Secondary Dental Services on 1st April 2023
- Complaints functions associated with Primary Pharmacy, Optometry & Primary and Secondary Dental Services on 1st April 2023

1.3 Delegation of these services is a national policy. In all cases the responsibility and liability for the planning, performance, finance, quality, and improvement will move from NHS England (NHSE) to Integrated Care Board (ICB) upon delegation. However, in all cases NHS England remains accountable to the Secretary of State for the services, which means that NHSE will have oversight, set standards and service specifications for the services.

1.4 To ensure that any transition is safe, effective and benefits are maximised, we have designed and developed a joint approach and through collaboration and co-production with NHSEI and ICB teams, working together to produce operating frameworks that maximise ICS decision making whilst retaining the specialist knowledge and skills of staff.

1.5 Through delegation ICB must:

- conduct all the required commissioning functions in respect of Primary medical service outline and defined in the delegation agreement;
- consider how it can meet its legal duties to involve patients and the public in shaping the provision of services, including by working with local communities, consider how in performing their obligations they can address health inequalities; and
- share information and best practice and work collaboratively to identify solutions and enhance the evidence base for the commissioning and provision of health services, eliminate duplication of effort, mitigate risk, and reduce cost.

## **2. Application for Delegation**

2.1 The Lincolnshire ICB working with East Midlands ICBs and NHSE team submitted the Pre-Delegation Assessment Framework (PDAF) to the NHSE Regional Team in September 2022 for the delegation of services for 1 April 2023 to the ICB.

2.2 Approval was received in October 2022 from the national pharmaceutical, optometry, and dental services PDAF Moderation Panel and acknowledgement of the collaborative process between the East and West Midlands ICBs and the NHSE team. Sign off by the NHS England Board was expected in December 2022.

## **3. Pharmaceutical, Optometry and Dental Services**

3.1 The operating model for the delegation of pharmaceutical, optometry and dental services will be through two primary care teams one East Midlands team and one West Midlands team to deliver the functions on behalf of the five East Midlands and the six West Midlands ICBs.

- 3.2 The Primary Care Pharmacy, Optometry and Dentistry workforce will be hosted on an East and a West footprint. The host ICBs have been approved by the ICB chief executive officers and are now subject to ICB board approval are as follows:
- East Midlands - Nottingham and Nottinghamshire ICB
  - West Midlands – Birmingham and Solihull ICB
- 3.3 The team will provide a clear and definable service detailed through a Memorandum of Understanding (MOU) to enable the pharmaceutical, optometry, and dental services delegated functions to be delivered. ICBs will provide the leadership and strategic guidance to ensure that the team can deliver the function effectively, including:
- **Collaboration between ICBs** will be key to ensure the team can fulfil day to day functions and agreement on use of the team when there are competing priorities for their capacity. Key to success will be the collaboration agreements between ICBs and a clear process for reporting and escalation to the ICB committees.
  - **Managing contractual relationships will be guided by nationally stipulated standardised frameworks**, but there remains a need for some local judgement and flexibility. Where standard procedures are not in place, and they cannot cover every eventuality, the teams will use their judgement and be guided by the culture, values and expected behaviours promoted by the ICBs working in collaboration to deliver these services
  - **Reserved NHSE Functions:** Most of the policy setting comes from the national team. The regional team’s function will be improvement, assurance, and oversight, to ensure the delegated functions are successfully being delivered and to design and deliver transformation programmes in support of national priorities
  - **Interdependencies:** This operating model focuses on the Primary Care Commissioning and contracting functions. The model will also apply to the complaints function that is being delegated from April 2023 and the primary care finance team, clinical advisor support and quality functions who will form part of the delegated function.
  - **Transformation and service improvement** in terms of service delivery will take place within the ICB within the structures and capacity developed as part of the ICB establishment
- 3.4 The oversight of complaints is still working through the national task and finish group. In the interim, NHSE and ICB teams have agreed that NHSE would continue to support the complaints’ function, working closely with ICB representative as further information becomes available.

#### **4. Next Steps: Transition for Pharmaceutical, Optometry, and Dental Services Delegation**

- 4.1 The ICB working with the NHSE Regional team have a clear transition programme in place to ensure that there is a smooth and safe delegation of the function. This includes fortnightly transition group meetings with the Governance, Finance and Workforce working groups to deliver the safer delegation checklist.
- 4.2 NHSE Regional team will continue to provide the leadership to support and deliver the ongoing development of the operating model including governance, workforce structures and clinical leadership. This will include integration with Joint Committees (including sub-committees) and ICB structures.
- 4.3 Governance workstream established, sponsored by ICB chief executives. Further work is required to test the proposed Joint Commissioning model on an East and West Midlands footprint, balancing multi-ICB decision making with ICB and opportunities for transformation and improvement. The pharmaceutical, optometry, and dental services specific governance will be delivered through pillar specific groups and an East and West Midlands Oversight and Assurance Group.
- 4.4 Clinical leadership currently exists within the pharmaceutical, optometry, and dental services team and will be maintained within the function for all three pillars to provide expertise to inform and enable strategic planning. This will be supported by ICB Chief Medical Officer together with our multi-professional leadership, PODs, are included in our Clinical and Care directorate, our care and clinical professional leadership forums.

#### **5. Consultation**

This is not a direct consultation item.

#### **6. Conclusion**

POD delegation is aligned with ICB plans including Health inequalities, quality improvement and their people and communities' strategies to ensure improved access through a multi pillar approach to service development and resource allocation

#### **7. Background Papers**

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

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