

Meeting of the Health Select Committee

Report of the Dudley Managing Director – Black Country Integrated Care Board (ICB)

Development of Dudley’s Integrated Model of Health and Care

Purpose of report

1. To advise the Committee of the current position in relation to the future delivery of services provided by Dudley Integrated Health and Care NHS Trust.

Recommendations

2. It is recommended: -

The position in relation to the future delivery of services provided by Dudley Integrated Health and Care NHS Trust be noted.

Background

3. The Committee will be aware from previous reports of the ICB’s decision that it did not see a future for Dudley Integrated Health and Care NHS Trust (DIHC) as a free-standing NHS Trust and the subsequent work to identify options for the future delivery of services it currently provides.
4. This report provides the Committee on the current status of the options appraisal process.

Current Service Provision

5. DIHC currently provides the following services:-
 - Commissioned by the Council – School Health Adviser Service
 - Commissioned by the ICB – Talking Therapies/Primary Mental Health Care, primary care services (High Oak Practice, Chapel Street

Practice, Enhanced Health in Care Homes Service, Special Allocation Scheme, Local Improvement Schemes), former CCG functions (commissioning, primary care development, NHS Continuing Care/Intermediate Care, Pharmaceutical Public Health, corporate support functions)

- Commissioned by the 6 Primary Care Networks (PCNs) – Additional Roles Reimbursement Scheme (ARRS) staff – a number of roles that support primary care including pharmacists, social prescribers, physicians’ assistants etc..)

Options Appraisal

6. The potential options for these services have been reviewed through a process overseen by a Project Board, the membership of which includes representation from the Council.
7. A set of principles was agreed to inform this process as follows:-
 - No service change for patients, at the point of transfer
 - Double TUPE transfer should be avoided
 - Service moves would need to create an “equal or better” scenario for patients, residents or staff
 - All services will have a “safe landing”
 - Where possible services that currently sit well together should be considered to transfer together
 - Surety of timescales to end date should be as certain as possible
 - ICB commissioned Primary Care services should be delivered by a single entity
 - The integration of the DIHC/ ARRS pharmaceutical public health team should be retained if possible
 - The integrated NHS CHC/ Intermediate Care Team should be retained
 - Protecting employment for staff should be a priority
 - Communications to staff is timely, appropriate and sensitive

Recommendations

8. Recommendations have been made to the ICB and DIHC as follows:-
 - School Health Adviser Service – will transfer to a new provider as the result of the current procurement exercise, being led by the Council, to determine a provider of 0-19 services.
 - Talking Therapies/Primary Mental Health Care – transfer to Black Country Healthcare NHS Foundation Trust.

- Local Improvement Schemes (LISs) – transfer to PCNs.
 - Other ICB commissioned primary care services and ARRS staff – transfer to Dudley Group NHS Foundation Trust (DGFT) – to operate as part of the evolving place partnership arrangements.
 - Former CCG functions - transfer to Dudley Group NHS Foundation Trust (DGFT) – to operate as part of the evolving place partnership arrangements.
9. These meet the principles except for the primary care services where a small element – the LISs – will be provided by the PCNs. This means that the primary care services in total will not be delivered by a single entity.
 10. In terms of the ARRS staff, their transfer to DGFT is dependent upon agreement of the associated management and governance arrangements between the PCNs and DGFT. If agreement cannot be reached, these staff will be employed and managed directly by the relevant PCN.
 11. At the time of preparing this report, discussions have commenced between the PCN Clinical Directors and DGFT. These are scheduled to conclude by 31 October 2023, prior to further reports being considered by the ICB and the board of DIHC. An update will be provided at the meeting.

Integrated Care Pathways

12. Work on the development of integrated care pathways continues. There is no further update for this meeting.

Finance

13. There are no direct financial implications arising from this report.

Law

14. Any service transfers and transactions will be managed in accordance with the requirements of the NHS Acts and associated NHS England/NHS Improvement guidance. The Council led procurement has been conducted in accordance with the Council's Standing Orders and procurement regulations. Legal Services will be instructed for advice in respect of any transfers or transactions prior to proceeding.

Risk Management

15. No material risks have been identified.

Equality Impact

16. An Equality and Quality Impact Assessment process is taking place on these proposals, the output will form part of the reports to be considered by the ICB and the board of DIHC.

Human Resources/Organisational Development

17. These are being managed in accordance with established principles and TUPE regulations.

Commercial/Procurement

18. None identified. As indicated, the School Health Adviser service is currently part of a Council led procurement exercise, being conducted in accordance with the Council's Standing Orders and procurement regulations.

Environment/Climate Change

19. None identified.

Council Priorities and Projects

20. An integrated model of health and care can be aligned to both the Council Plan and Borough Vision. Future delivery of these services will ensure we are striving to achieve against our council plan priority 'Dudley the borough of opportunity' and work towards achieving the following outcomes:
 - Children and young people benefit from the best possible start in life in our Child Friendly borough.
 - Everyone, including our most vulnerable, have the choice, support and control of the services they need to live independently.
 - All residents benefit from access to a high quality, integrated health and social care.
21. Through the golden thread, the council plan is linked to the Forging a Future For All Borough Vision. The Borough Vision is made up of seven aspirations for how the borough should be by 2030, with this work aligning to the aspiration '*A place of healthy, resilient, safe communities where people have high aspirations and the ability to shape their own future*'

Neill Bucktin

Neill Bucktin
Dudley Managing Director
Black Country Integrated Care Board

Telephone: 01384 321925

Email: neill.bucktin@nhs.net