

**Meeting of the Health Select Committee - 8<sup>th</sup> January 2024**

**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 and the development of integrated care pathways.

**Recommendations**

2. It is recommended that the position in relation to the future delivery of services provided by Dudley Integrated Health and Care NHS Trust and the development of integrated care pathways 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. This report provides the Committee on the current status of the options appraisal process.
4. The Committee will also be aware of work to develop integrated care pathways. This report provides an update on progress.

**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. At its last meeting the Committee was advised that decisions were still outstanding in relation to the services commissioned by the 6 Primary Care Networks. These issues have now been resolved.

### Recommendations

8. DIHC and the ICB have now approved the following:-
  - School Health Adviser Service – will transfer to Shropshire Community Health Services NHS Trust as part of the new contract awarded by the Council for 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 DGFT – to operate as part of the evolving place partnership arrangements.

- ARRS Staff – 3 PCNs (Dudley and Netherton; Brierley Hill and Amblecote; and Halesowen) – transfer to DGFT – to operate as part of the evolving place partnership arrangements. 3 PCNs (Stourbridge, Wollescote and Lye; Kingswinford; and Sedgley, Coseley and Gornal) – transfer to a lead practice within each PCN.
9. It should be noted that the ARRS pharmacists will all transfer to DGFT, alongside the former CCG Pharmaceutical Public Health Team, thus retaining a single, integrated team.
  10. The Committee will recall that a set of principles was agreed by the ICB and DIHC regarding the future arrangements for services. These recommendations meet the principles except for the primary care services where a small element – the LISs – will be provided by the PCNs, and 3 PCNs will employ their ARRS staff through a lead practice. This means that the primary care services in total will not be delivered by a single entity.
  11. The School Health Adviser Service will transfer to Shropshire Community Health Services NHS Trust on 1 April 2024. The timescales for the other transactions are to be determined, with the expectation that all will be completed by 30 June 2024.

#### Integrated Care Pathways

12. The development of integrated care pathways has now progressed to the point where the work previously overseen by the Integrated Care Pathways Group, reporting to the Health and Care Partnership Board, will transfer to the relevant body considered appropriate to oversee the work prospectively, with reporting to the Partnership Board continuing as necessary.
13. The precise destination for each pathway is being determined and an update will be provided at the meeting.

#### Finance

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

## **Law**

15. 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.

## **Risk Management**

16. No material risks have been identified.

## **Equality Impact**

17. Equality and Quality Impact Assessments have been carried out and no adverse impacts identified. These have been considered by both boards.

## **Human Resources/Organisational Development**

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

## **Commercial/Procurement**

19. None identified. A contract for the School Health Adviser service has now been awarded by the Council to Shropshire Community Health Services NHS Trust, following a Council led procurement exercise, conducted in accordance with the Council's Standing Orders and procurement regulations.

## **Environment/Climate Change**

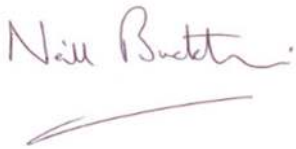
20. None identified.

## **Council Priorities and Projects**

21. 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.

22. 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*'



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