

Subject:	Report from the Chair
Presented by:	Rt Hon Patricia Hewitt, Chair, Norfolk and Waveney ICS
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Submitted to:	The interim Integrated Care System Partnership Board, 5 August 2021
Summary:	
The Chair report covers the two months since the last meeting in public of the Interim ICS Partnership Board	
Recommendation:	
The interim Integrated Care System Partnership Board is asked to: <ul style="list-style-type: none"> • Note the report. 	

Becoming an Integrated Care System : Boundaries

The Secretary of State for Health has now announced that there will be no change to the existing ICS boundaries in the East of England. This means that we can now accelerate our planning to become a statutory ICS from April 2022 on our existing footprint of Norfolk and Waveney.

Before making the decision, the Health Secretary received a report from the regional director of NHSE which made no recommendation but examined the opportunities and risks of both the status quo and a move to county-based ICS's, together with appropriate mitigations. Thanks to the excellent work of Andy Vowles and other consultants from Tricordant, I believe the report provided a full and balanced account of the views of NHS and local government partners in all four East of England systems potentially affected by a change to align boundaries with upper tier local authorities. The engagement process was overseen by a small review group, chaired by the regional director, on which I represented the four ICS chairs, as well as attending various meetings about our own system boundary.

Now that we know what our boundaries will be, Melanie and I will be meeting our partners at both Suffolk County Council and Norfolk County Council to ensure that, within our statutory ICS, the NHS and local government work as effectively as possible with each other, and with other partners, for the benefit of local residents.

Councillor Matthew Hicks, the Leader of Suffolk CC and Chair of the Suffolk Health and Wellbeing Board, has asked Cllr Rebecca Hopfensperger to represent him on our ICS Interim Partnership Board and I look forward to welcoming her to our meetings.

Following the decision on boundaries, recruitment for the independent chairs of ICS's has now begun and will be followed by recruitment of chief executives/accountable officers once independent chair-designates are appointed.

Becoming an Integrated Care System: Other

The NHS Bill, which will place Integrated Care Systems on a statutory footing, has now been published and received its Second Reading in July. As expected, the Bill establishes two statutory entities that, together, will make up each ICS: an Integrated Care Board, which will take over the responsibilities of the existing Clinical Commissioning Group and be responsible in particular for NHS performance and finances, and an Integrated Care Partnership that will bring together a wider group of partners with a particular focus on health inequalities and wider determinants of health. Following the guidance from NHSE on the design framework for ICS's, further guidance is expected on statutory ICS's both from NHSE and from the Ministry of Housing, Communities and Local Government.

Now that the boundaries issue has been decided, we need to accelerate our planning to become a statutory ICS from next April. A key element is how we work even more effectively at local level. I have therefore been closely involved in the work on Localities and chaired the recent online meeting where we heard an update on the extensive discussions that have been taking place with district and borough councils, PCNs and other partners. I am very grateful to Jossy Pike for chairing the steering group, and all her members, as well as to Chris Williams, Andy Vowles, Gary Heathcote and Anne Borrows for all their work on this important issue.

Melanie and I had a helpful and interesting meeting with Wendy Herber, chair of Healthwatch Suffolk and their chief executive, Andy Yacoub.

I take every opportunity to attend national webinars and other events organised by NHSE, the NHS Confederation and others on ICS development as well as having weekly meetings with the other five ICS chairs in our region and informal discussions with other ICS chairs from other parts of the country. These all provide invaluable opportunities to learn from other systems and share our own experience, including the great success of our vaccination programme and our proactive approach to population health management. I have spoken at various events on ICS development, including a panel session at the NHS Confederation national conference in June and a webinar organised by Public Policy Projects (PPP), chaired by Phil Hope and Stephen Dorrell, to launch their new report on Integrated Care.

Equalities, Diversity and Inclusion

Over the last few months, I have attended two excellent sessions on combatting racism, organised by the region, the second being the launch of the regional NHSE anti-racism strategy. As a result, I have established a reciprocal mentoring relationship with Onika Patrick-Redhead, Equalities Diversity and Inclusion Manager at the Royal Papworth Hospital FT. Although our work has only just started, I am enjoying our meetings very much and learning a great deal.

I am attaching a letter from Dame Gill Morgan on behalf of the NHS Confederation about a proposed seminar for chairs and NEDs on Equalities that will be led by Dr Bola Owolabi, NHSE's Director of Equalities. I hope you will agree that this would be a valuable opportunity for us to join a small number of other systems to focus on this critical issue.

Primary Care

Melanie and I continue to hold regular meetings with Primary Care Network (PCN) Clinical Directors. These are very helpful in getting views from primary care where over 90% of contacts

between the NHS and patients take place, and also provide an opportunity to emphasise our thanks to GPs and all our primary care colleagues as they cope with exceptionally high levels of need.

Because PCNs will be a key element in our ICS, we have included an update on PCNs' work on the Interim Partnership Board agenda and invited two of the clinical directors to attend the meeting.

Community Health Care

Last month I attended the meetings in public and in private of the NCHC Board and was able to present on ICS developments and discuss them with Board members. As always, it was a pleasure to meet the Board and I am grateful to Geraldine Broderick for her warm welcome. I am looking forward to visiting the Trust, in person, in the next month or so and meeting some of the staff who work so hard to care for people in their own homes.

Norfolk and Waveney Acute Hospitals Group

I attended both the June and July meetings of the Acute Hospitals Group Committees-in-Common. It is very encouraging to see how the Tri-Board meeting held in May has deepened the commitment of all three Trust Boards to working together as a Group for the benefit of patients throughout Norfolk and Waveney.

Melanie and I joined the Chairs and CEO's of the three Trusts for a review meeting with Ann Radmore and Sean O'Kelly at NHSE East of England Region. Ann and Sean warmly welcomed the progress being made.

I was delighted to be able to visit NNUH in person recently - the first time since before Covid - and to have the opportunity to meet several of the Virtual Ward team and see a demonstration of this excellent in-house innovation that enables patients who have been in hospital to be safely sent home while being monitored and supported by staff remotely, with community back-up if needed. I look forward to hearing the results of the evaluation. It was also a pleasure to see the excellent work being done on the respiratory ward, including the introduction of e-Observations tools that will save staff time and help to improve patient safety. I'm most grateful to David White and Sam Higginson for the time they spent with me as well as to all the staff I met and look forward to attending the Trust's Board meeting soon.

I look forward to visiting QEHL later this month and am arranging to visit JPUH shortly.

Future meetings

This week, Melanie and I are meeting David Edwards, chair, and Alex Stewart, chief executive, of Healthwatch Norfolk. I would particularly like to thank David who has been chair of Healthwatch Norfolk for the last three years and will be stepping down shortly. I am grateful to him for all his work on behalf of local residents and patients and look forward to meeting his successor, Patrick Peal.

I am also looking forward to opening the new education centre for the Norfolk Hospice Tapping House later this month as well as to my further meeting with Robert Carter, chair of the Priscilla Baker Hospice, and his colleague Sandra Dinneen, to discuss their plans.

While continuing to be very careful about Covid-19 guidance, I am delighted to be able to return to in-person visits and meetings - although, after 18 months of almost entirely online meetings, it is a challenge to organise 'blended' diaries. I would welcome the views of IPB members on the balance they would like to see in coming months.

Governance	
Meetings that this report has been, or is going to be, discussed at:	This report has not been discussed at any other boards, committees or meetings.