



# ICS News



News and developments from the Integrated Care System NI

March 2023

Issue: 01

## Welcome

Welcome to the first edition of ICS NI News, our bi-monthly publication, aimed at updating staff about the development of the Integrated Care System for Northern Ireland.

## The need for change

Did you know the foundation of the work to build a new commissioning framework, ICS NI, can be found back in 2015?

For those who may not have been here at that time, a [review of our commissioning system](#) found it to be complex, overly bureaucratic and lacking in clarity of decision-making and accountability.

Responding to that report, the then Minister, Simon Hamilton, made the decision to close the Health and Social Care Board (HSCB) and move to a new commissioning model.

Importantly, that decision was reaffirmed by subsequent

Ministers, Michelle O'Neill and more recently Minister Swann.

To minimise any risk to services, a decision was taken to close the HSCB first then move to a new commissioning model. As you will be aware, the HSCB closed on 31 March 2022 and the functions were migrated to the Strategic Planning and Performance Group (SPPG) in what was a strategic step to bring responsibility for decision-making back to the Department. In the main there has been little change to individual roles, responsibilities or indeed functions and that is because the work of the HSCB as it was, is still valid and still needed. It is still necessary that

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SPPG staff undertake the responsibilities that they are charged with, within the terms and conditions of Health and Social Care.

The development of the Integrated Care System for NI (ICS NI) is the next step and where the real change happens. ICS NI will shape how we will all work together in the future, both within HSC and with our partners beyond.

# Why an Integrated Care System?

Our population continues to grow and change; people are living longer, and we are seeing more instances of longer-term multiple conditions. Demand for our services has never been greater and continues to grow.

Our focus for the future therefore must be on reducing that demand by keeping people well in the first instance and when that is not possible by providing timely coordinated care in the most suitable setting. To do this we need to look at the whole picture and not just at what care and services we deliver in acute settings.

Keeping our population well requires us to think and work differently as our health and well-being is influenced by factors, such as our environment, our income, our education. This means collaborating with partners outside of HSC. Likewise, we know there are opportunities for us within the HSC to be more integrated, to work better together to get results for those we care for. Our experience through Covid showed what can be achieved when barriers are broken down.

The Integrated Care System will provide us with the vehicle to work differently, across sectors and the HSC to provide an improved experience for those we care for, our staff and the wider population. Importantly, it is the vehicle that will allow us improve health and well-being outcomes and reduce health inequalities of our population.

## What is ICS NI?

ICS NI is the new commissioning framework; it describes one system but with distinct levels.

In line with the vision set out in [Delivering Together](#), local areas will be given responsibility for planning local services based on need and only those services that require a regional perspective will be planned regionally.

Local planning will be the responsibility of newly established Area Integrated Partnership Boards (AIPBs). These Boards will be made up of key stakeholders from across the HSC but will also include representation from Community Planning, the voluntary and community sectors and service users and carers.

The AIPBs, which will be coterminous with our HSC Trusts' geographical areas, will have responsibility for planning local services – this means they will identify the needs of their population, agree the key priority areas based on that need, and develop plans to meet that need.

To prioritise and plan effectively, they will be provided with information on existing local services, look at what is being achieved for the funding that is invested, collectively assess that against the population need, and determine if there is a better way to achieve improved outcomes.

Regional services will be commissioned through SPPG who will plan services based on the same underlying principles.

(continued...)

## Overseeing the system will be the Regional ICS Executive (RICSE)

RICSE will be the leadership team providing oversight and support for the entire Integrated Care System with a key role to ensure the ICS develops in line with the original vision.

With a membership from the AIPBs, SPPG, PHA, and regional providers, it will have a significant role helping to inform decision-making on priorities and promoting regional consistency. With a strong AIPB presence, RICSE will also help support local autonomy and local influence on regional strategies.

## What makes ICS NI different?

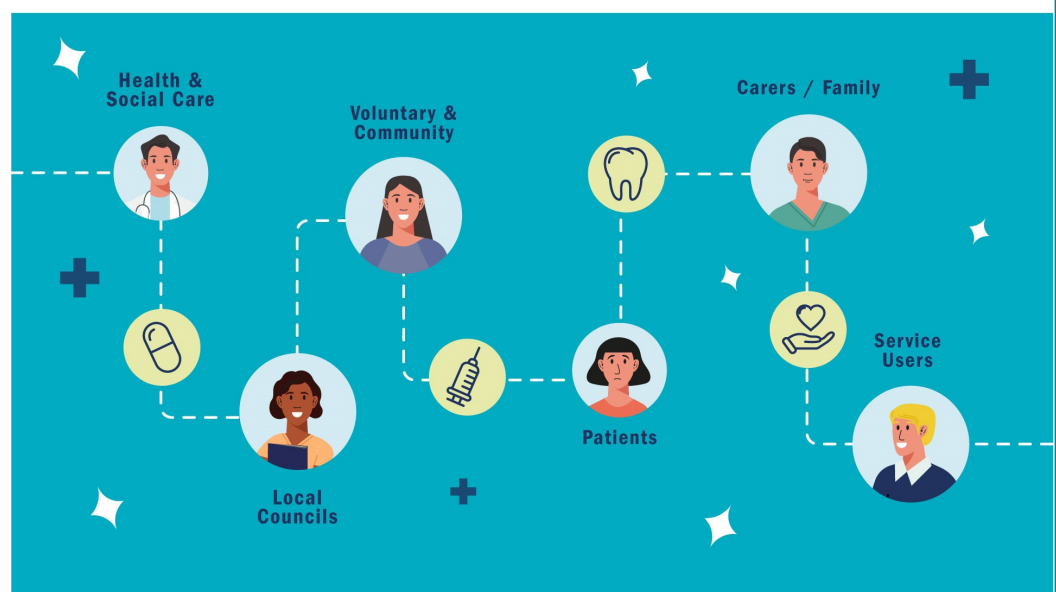
ICS NI brings together partners to take collective responsibility for planning health and social care services, improving health and well-being and reducing health inequalities in Northern Ireland.

At an area level, health and social care professionals, working with local councils, the voluntary and community sectors, patients, carers and service users, will plan the delivery of local services based on the needs of their local population and in line with strategic priorities.

What is different about the implementation of ICS NI is that this is about culture rather than structures.

In developing the new commissioning framework, we wanted to ensure that it wasn't overly complex and in many ways, you may see characteristics of models from previous years in this.

ICS NI, however, is focused on building the trust and integration that will make a difference. We need to get better at working as a system and understanding what integration looks like and commission services towards outcomes.



# Test AIPB planned for Southern Trust area



Southern HSC Trust area

Within ICS NI, five Area Integrated Partnership Boards (AIPBs) will be established within the same boundaries as Trust geographical areas.

Those AIPBs will bring together key stakeholders from within HSC, Community Planning Partnerships, the Voluntary and Community sectors, service users and carers and wider partners who will be responsible for planning to meet local needs.

The development of an integrated care model is a complex task. Time is required to build relationships and strengthen partnership working both within and across sectors.

With this in mind the decision has been taken to implement a test AIPB in the Southern area. A staged approach is being taken that will initially see the identification of members, the formation of the partnership and development of governance arrangements prior to testing the membership and functions of the AIPB.

A small project team has been established and is developing plans to implement the test site to launch in April 2023. The test will then be progressively rolled out across the other

four HSC Trust areas to accommodate the full implementation planned for April 2024 subject to legislative provisions.

A Regional Working Group (RWG) will be established to oversee the test AIPB and assess readiness ahead of implementation.

Specific queries regarding the testing can be submitted to the Project Team members:

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# Strategic Outcomes

ICS NI will aim to improve the health and wellbeing of the whole population, and will be underpinned by an Outcomes-Based Accountability (OBA) approach that will see the development of a suite of inspiring population-level strategic outcomes that will form the backbone of the strategic direction to the system.

Each of those outcomes, which are currently being developed based on people's perceived needs and priorities, will represent a condition of health and wellbeing that we will seek to achieve for everyone in Northern Ireland. They will be accompanied by population-level indicators, and together will form the Strategic Outcomes Framework (SOF).

This is a significant shift to how Ministerial and Departmental priorities were conveyed to the system in the previous commissioning setup via the Commissioning Plan Direction, and a change of culture and mind-set will be required across the whole HSC system.



The combination of adopting OBA and the over-arching population health approach across every level of ICS NI will ensure that the person - not the service - remains at the heart of the system, at the centre of everything we do.

The first draft of the SOF has been produced, with nine strategic outcomes developed as a result of a bespoke engagement programme. These outcomes are reinforced by key indicators which were developed and agreed with stakeholders across the HSC system.

Work is continuing to implement the various comments and feedback ahead of finalising a draft that will support the AIPB Test activities going forward.

## Commissioning Leaders Programme

Launched last year the HSC Commissioning Leadership Programme was created to complement the development of the Integrated Care System and focuses on the key areas of strategic planning, sourcing, performance monitoring and contract management for HSC professionals working in these areas.

September and December 2022 saw the first two intakes with over 30 colleagues participating from across Trusts, Public Health Agency and the Strategic Planning and Performance Group (SPPG) within the Department of Health.

The HSC Leadership Centre in partnership with Ulster University are working to accredit this programme to a Postgraduate Certificate in Professional Development.

Initial feedback has been positive and, with some updates, the programme will be open to new participants for the new term starting September 2023. Further information on how and when to apply will be published in a future edition of this newsletter.

## Meet the ICS Steering Board Members

Peter May, Chair	Permanent Secretary, DoH
Sharon Gallagher, ICS Programme SRO	Deputy Secretary, Head of SPPG
Chris Matthews	Deputy Secretary, Head of Resources and Corporate Management Group
Jim Wilkinson	Deputy Secretary, Head of Healthcare Policy Group
Professor Sir Michael McBride	Chief Medical Officer
Peter Toogood	Social Services Policy Group
Dan West	Chief Digital Information Officer
Maria McIlgorm	Chief Nursing Officer
Maria O’Kane	Trust Chief Executive Representative
Aidan Dawson	Chief Executive, Public Health Agency
Martina Moore	ICS NI Programme Director
Paul Cavanagh	Director of Commissioning, SPPG
Stephen Eames	Critical Friend, Humber and North Yorkshire Health and Care Partnership

## Meet the ICS Programme Leads

ICS Programme Board Co-Chairs	Martina Moore, Programme Director Paul Cavanagh, Director of Commissioning SPPG
Operational Delivery Group Co-Chairs	Martina Moore, Programme Director Paul Cavanagh, Director of Commissioning SPPG

## ICS Projects and Workstreams

Design Project	Allan Chapman
Implementation Project	Martin Hayes
Strategic Planning Project	Vincent Ramirez
Organisational Development Project	Alan Marsden
Data Intelligence Project	Gary Loughran
Financial Accountability and Funding Model Project	Fiona White
Service User and Carer Involvement Workstream	Co-Chairs: Martin Hayes and Brian O'Hagan
Voluntary and Community Sectors Workstream	Martin Hayes
Communications Workstream	Shirlie Murtagh
Programme Management Office	Gareth McKeown

## Further information

HSC staff updates on the ICS NI and the creation of AIPBs, including staff engagement opportunities, will be shared via: Insight, the SPPG intranet, Inside News, the SPPG staff ezine and SPPG Directorate Briefings; DoH Staff Hub and Pulse, the DoH staff ezine and other PHA and HSC Trusts internal communications channels.



Department of  
**Health**

An Roinn Sláinte  
Máinnystrie O Poustie



**Health and  
Social Care**



**Integrated Care  
System NI**