

New ICB responsibilities - Delegation of Pharmacy, Optometry and Dentistry

- From 1 April 2023 NHS England will delegate responsibility to all ICBs for pharmaceutical, general optometry and dental (primary, secondary and community services) – known as PODs. This means that there is an agreement between NHS England and NHS South East London Integrated Care Board (SEL ICB) that enables the ICB to take on the responsibility for delivering these NHS England functions for our population.
- This decision has been taken following a national Autumn pre delegation assessment process and the subsequent agreement of both the SEL ICB Board and NHS England to the planned 2023/24 delegation.
- The aim of the delegation is to provide ICBs with the responsibility and opportunity for managing local population health needs, tackling inequalities and addressing fragmented pathways of care. It is hoped that, through delegation, ICBs will be able to support approaches to designing services and pathways of care that better meet local priorities. Delegation should also provide greater flexibility to integrate services across care pathways, ensuring continuity for patients, improved health outcomes for the local population and optimised use of resources.
- Certain functions will be retained by NHS England such as national contract development and negotiations, performers list management, wider aspects of professional regulation and national transformation programmes.
- The delegation relates to the following contracts and related budgets: 220 dental contracts with a value of £159m, 191 general ophthalmic contracts with a value of £15m and 43 community pharmacy contracts with a value of £31m.
- Due to the nature of the single regional team currently working across London to support PODs services commissioning, London's ICBs have agreed to work collaboratively across their five systems for this delegation to ensure the best use of this limited resource is secured through the retention of a single team for London. This team will be hosted by North East London ICB.
- The delegation arrangements will be underpinned by signed agreements setting out respective roles and responsibilities between the SEL ICB and NHS England and across the five London ICBs.

Pharmacy, Optometry and Dentistry (PODs) (1)

Immediate priorities

A safe landing - the SEL ICB has been working with NHS England and other London ICBs to plan for delegation, with a first key objective of ensuring a safe landing for these new ICB responsibilities from 1 April 2023. This includes retaining the expertise residing in the London PODs commissioning team through the establishment of a host and lead ICB arrangements, plus underpinning governance including a new London PODs Board that will oversee and coordinate the delivery of these delegated functions going forward.

Managing our pharmacy, optometry and dentistry service portfolio - ICBs inherit a wide ranging service and contractual portfolio related to PODs from 1 April 2023 and a key year one focus will be on ensuring the effective management of this service portfolio.

Understanding the detail of the delegated services – we have worked over 2022/23 to develop an enhanced understanding of our POD service portfolio, including contractual and financial related requirements. We plan to use year one of delegation to further develop this knowledge and understanding, including a specific focus on developing relationships with our PODs providers and their representative bodies. We will also be working with our communities and patients to understand their perspectives to support the development of responsive, coproduced plans and approaches for the future.

A forward look – further opportunities

Access – we already know that access is a key issue related to the provision of NHS dentistry locally and are keen to understand demand and capacity and develop an access improvement plan for dental services. In addition we will consider access to PODs services more broadly from the perspective of enhancing our community based care offer and supporting the establishment of clear, streamlined care pathways across primary and secondary care.

Integrated neighbourhood teams – we will be seeking to embed our PODs services within our wider thinking and development of integrated neighbourhood teams, to support a more holistic, joined up service offer for residents. We will also use this opportunity to ensure we can enhance the infrastructure support available to PODs services to enable them to grow and develop their service offer.

Population health and inequalities – we are keen to expedite the opportunities offered though the delegation of PODs services to support our ambition around improving population health and outcomes and reducing inequalities, recognising that there are opportunities across each of community based pharmacy and optometry and wider dental services to do so.

Levering funding, contractual and service development opportunities – we will be seeking to lever available flexibilities and opportunities to secure a responsive service offer that enables us to build on our ambitions around integrated neighbourhood care, population health improvement and inequalities.

Pharmacy, Optometry and Dentistry (PODs) (2)

Pharmacy, optometry and dental services are key components of general health and wellbeing, with deep rooted connections and synergies to prevention, primary care and community services – we hope to join up key pathways of care, leading to better outcomes and experiences for patients, and less bureaucracy and duplication for clinicians and other staff. Some key opportunities for further development are shown below.

Pharmacy

Maximising the connections that pharmacies have to their local communities to tackle health inequalities. Our experience of working directly with pharmacies as part of an integrated vaccination offer has highlighted the reach that many pharmacies have into communities that are traditionally underserved by mainstream services. We have been building on these connections through the roll-out of new services within pharmacies, such as blood pressure monitoring. There are significant opportunities to maximising the role of pharmacies in reducing health inequalities by further integrating key prevention and long term condition management services into these very local assets as part of an integrated partnership approach to deliver Core 20 plus 5 and the Vital 5 as part of an integrated prevention.

Optometry

Improving the utilisation of local optometry services for minor eye conditions to reduce demand on our urgent and emergency care and secondary care planned care services represents a further opportunity. Whilst minor eye condition services are already commissioned across South East London, delegation could support us in improving local relationships and links between optometry providers and our wider system and building optometry providers into work underway within our Local Care Partnerships to design integrated urgent care pathways as part of implementing Fuller Review.

Dentistry

There are evidenced links between tooth decay / poor dental health with broader physical health condition. We will be considering how to bring together work on healthy lives – including weight management, smoking cessation and alcohol use – with oral health promotion at a very local level, using a think family approach and Making Every Contact Count (MECC). By integrating our preventative approach and messaging and utilising the full range of health and care professionals across our system we hope to be able to increase our impact.

New ICB responsibilities - Delegation

Specialised services

- ‘Specialised services’ – a portfolio of 154 hugely varied services - have been commissioned by NHS England since 2012.
- Some of these services look after a handful of patients with rare conditions a year, while others, like radiotherapy or neurosurgery treat tens of thousands each year as part of wider pathways of care that also span primary, community and other secondary care services currently commissioned by ICBs.
- Within south east London, Guy’s and St Thomas’ and Kings College Hospital provide a wide range of specialised services, with geographic flows spanning south east London, London, Kent and beyond.
- Since 2018, NHS England has been working with local commissioners to develop more integrated planning for specialised services to maximise the opportunity for joined up, high quality and equal care for patients.
- The Health and Care Act 2022 formalised these approaches, by allowing ICBs to take on delegated responsibility, where appropriate, for the commissioning specialised services within a framework of continued national accountability, national standards, national service specifications and national clinical policies.
- This new legislative framework presents the opportunity for specialised services and patients to fully benefit from the focus of ICBs on local population health and ensure that the specialised elements of pathways are part of the integrated design and delivery of care to patients.
- It has been agreed nationally that commissioning responsibilities for an agreed sub-set of the specialised services portfolio will be delegated to ICBs from April 2024.
- 2023/24 represents a transitional year as systems gear up for taking on their new responsibilities.
- South East London, working with South West London ICB colleagues and NHS England London Region, has been undertaking significant preparatory work over the last two years and will be at the forefront of testing the new model prior to go live in April 2024.
- The specialised services portfolio covers mental health as well as acute services but mental health has been subject to earlier delegation from NHS England through lead provider arrangements – in south east London mental health providers have been working as part of the South London Partnership which has had delegated responsibility for a range of agreed specialised services for a number of years.

Specialised services

2023/24 transition and preparation

Joint Working Agreement (JWA) – all ICBs will agree JWAs with NHS England for 2023/24 to secure joint oversight of specialist services as part of agreed transition arrangements. This will include being part of a joint London Committee across the five London ICBs and NHS England.

Care pathway transformation pilots - South London has developed pilots to test opportunities and benefits around integration, financial and service benefit and reducing inequalities.

- Three 2 year pilots commenced in 2022/23 – neurology, cardiac and Blood Borne Virus testing. Year 1 evaluation shows positive results and learning that we will apply for our future care pathway planning
- 3 new pilots are being developed for 2023/24 – specialist paediatrics, renal care and haemoglobinopathies, identified London priorities, which also resonate from a local population perspective.

Pathfinder pilot – we are working with partners in south west London to take part in a pathfinder programme. This will test on behalf of the national team, some of the key processes around delegation and develop a ‘playbook’ of processes and products for adoption by Regions and ICBs for full delegation in April 2024. As well as the national benefit, the pathfinder programme will provide key learning locally about what is needed to ensure safe delegation of services.

Pre-delegation assurance process – we will be participating in this national process during the summer of 2023, to test readiness for taking on these new delegation responsibilities.

Planning for 2024/25 delegation

Safe landing - the JWA, pre delegation assurance process and pathfinder pilot will help support an effective transition to enable a safe landing from 1 April 2024. South east London is well placed to secure this, given its lead role in the pathfinder pilot.

Developing our specialised services programme - we are also developing our knowledge and expertise to enable us to develop an agreed set of local objectives for delegated specialised services for 2024/25 onwards, thereby integrating these services in our wider strategic planning.

Financial and service improvement and sustainability - planned shifts in national funding to population based budgets will drive a number of financial challenges that we will need to meet to ensure we are able to secure a sustainable specialised services offer for residents going forward. We will also need to identify and deliver opportunities for improved productivity and efficiency to do so.

Contracting, payment and funding flows – the pathfinder pilot will help us understand the complexities around ICB delegation and develop mechanisms to support effective and streamlined contracting and payment arrangements thereby protecting funding flows in the future.

End to end pathway integration and transformation - building from our 2023/24 pilots we will apply learning to our future transformation programmes, whilst also ensuring a consideration of end to end pathway opportunities to reduce over time our reliance on specialised services through prevention, earlier detection and interventions.

Cardiac – Outpatient Parenteral Antimicrobial Therapy (OPAT)

Achievements in 2022/23

- New OPAT service that commenced in September 2022.
- Saved 635 bed days in 12 weeks, plus reduced cost.
- Established a weekly neurosurgical multi disciplinary team to support antimicrobial stewardship and OPAT referral.
- Worked with medical teams to establish admission avoidance schemes, using OPAT.

Areas of focus for 2023/24

- Widen communications strategy to ensure all suitable patients are discharged on OPAT.
- Focus on education and cultural change in early decision making and confidence referring to OPAT. This will include targeting clinical areas for OPAT review ward rounds and shortening the referral criteria to facilitate discharge of patients on short courses of antibiotics.
- A dedicated pharmacist as part of the team to enable a focus on long term courses of antimicrobial therapy and use pharmacy data to identify cohorts of patients suitable for OPAT.
- Increase the rate of self-administration to further reduce delivery costs.

Cardiac – aortic stenosis

Achievements in 2022/23

- Focus on reducing inequalities in access aortic stenosis treatment.
- Completed patient and public engagement study with Mabadiliko.
- Delivered a ‘Your Heart Matters’ event in conjunction with Heart Valve Voice.
- Agreed a community based clinic model in Lewisham.
- Recruited and appointed a clinical nurse specialist and echocardiographer to run the mobile valve clinics and provide education to GP practices and clinicians across the Network.
- Partnered with researchers in KCL to undertake evaluation study.
- Established a monthly Valve Inequity Steering Group with key stakeholders.

Areas of focus for 2023/24

- Develop an action plan from Mabadiliko community engagement findings and implement through the Valve Inequity Steering Group. The findings from the community engagement will directly influence the education sessions with GPs and referrers.
- Widen communications strategy with primary care colleagues to continue to work on strengthening relationships across Lewisham to develop and mobilise a number of community based valve clinics.
- With KCL, develop a research proposal and strong data collection methodology.

Blood borne virus testing in Emergency Departments - HIV and Hepatitis

HIV achievements in 2022/23

- Launched HIV testing at the Princess Royal Hospital site.
- Increased uptake of HIV tests across South London, from an average of 56% in April to an average of 77% in November.
- Collected demographic data for newly diagnosed patients.
 - Characteristics of people diagnosed via ED are different to those diagnosed in sexual health centres; higher proportion of heterosexual Black women for whom the risk of late diagnosis is higher.
 - There is strong correlation with people diagnosed via ED and living in areas of multiple deprivation.
- Engaged with World AIDS Day.

Hepatitis achievements in 2022/23

- Launched hepatitis ED testing at GSTT and KCH in November.
- Diagnosed 57 people with hepatitis B and 10 people with hepatitis C since November in south London.
- Engaging with a different demographic that would otherwise not reach testing services – patients have been much older than expected.
- 29 of the 57 hep B cases identified were unknown to liver services
- Work to capture the demographic of patients across South East London to monitor health inequalities.
- Set up blood-borne virus testing groups in south east London.

HIV area of focus for 2023/24

- Re-engage a higher proportion of long term follow up patients into care.
- Assess the impact of the peer support funding.
- Ensure a consistent level of HIV testing across all sites.
- Block repeat testing across all sites.
- Work with labs and data teams to ensure data accuracy.
- Ensure consistency of practice across region
- Explore other opportunities to diagnose patients earlier i.e. on elective care pathways, in GP setting and other support for patients i.e. mental health services.
- Develop the South London HIV network with clinical leads.

Hepatitis areas of focus for 2023/24

- Roll out testing across all sites in South London (a further 7 hospitals)
- Work across partners to bring down high test costs in SE London.
- Collect and analyse demographic data across South London.
- Work with hepatitis C clinical networks to assess benefits realised, including health economic analysis to understand the financial quantification of benefit.

Specialised services – care pathway transformation pilots (3)

Chronic Neurological Conditions (SWL focussed pilot)

Achievements in 2022/23

- Transformation Networks established for priority conditions, including a Collaboration Manager and clinical network role in Myasthenia. Launch and development of further clinical roles for the network.
- Baseline PHM data pack finalised and PHM pilot proposal developed.
- Development of patient-led engagement strategy- Neuro Voices, establishment of a patient group and development of a draft programme communication plan.

Areas of focus for 2023/24

- Developing the evaluation framework, identifying baseline data across all neurology pathways to enable transformation for chronic neurological conditions, evaluating clinical network roles.
- Mapping critical interdependencies with other transformation programmes e.g. learning disabilities, outpatients, elective recovery.
- Identify appropriate network governance for oversight and reporting across ICBs and London region.
- Tackle network operation issues for clinical roles e.g. patient record access across providers.
- Strengthening patient involvement and building a long-term plan from the strategy.
- Developing a robust communications and engagement plan with stakeholders.
- Through pilot, continue to develop PHM approach for neurology and embed data and evaluation in transformation networks.

New pilots - London priority pathways for 2023/24

Three priority pathways for transformation – focus on areas where joint integrated approaches can support the triple aim of improving quality of care, reducing inequalities across communities and delivering best value.

- **Specialist paediatrics**, involving looking at the transformation impact of investing in HDU2 and the pathways that drive demand for critical care, including coronary heart disease, cancer, long term ventilation and specialist surgery.
- **Renal care**, with an emphasis on dialysis rates, involving looking across the care pathway at prevention, dialysis, transplant and end of life care.
- **Haemoglobinopathies**, involving looking at care across the pathway from A&E through to specialist care, such as automated exchange blood transfusions and access to specialist drugs.