

# London PLUS Project

## Integrated Care Systems

### Introduction

In 2015, an NHS Planning Guidance called for the development of Sustainability and Transformation Plans (STPs). This represented a shift towards greater collaboration between the NHS, local councils and other strategic partners such as the voluntary, community and social enterprise (VCSE) sector. STPs laid the foundations for the development of Integrated Care Systems (ICSs). These are place-based collaborative partnerships bringing together statutory and non-statutory providers and commissioners of health and social care services across defined geographical areas, to collectively plan health and care services to meet the needs of their local population.

The NHS introduced 42 ICSs in England from October 2021.

### What is an Integrated Care System?

“ICSs are new partnerships between the organisations that meet health and care needs across an area, to coordinate services and to plan in a way that improves population health and reduces inequalities between different groups” ([NHS England website](#)).

With closer collaborative working a more integrated, agile and personalised approach can be taken towards someone’s care. There can be closer co-ordination of services, resources can be pooled to meet the specific needs in local areas, and decisions can be made more quickly to improve health outcomes.

### Aims of Integrated Care Systems

ICSs have 4 fundamental aims:

- To improve health and healthcare
- To tackle unequal outcomes and access
- To enhance productivity and value for money
- To help the NHS to support broader social and economic development

To achieve these aims, the following changes are required:

## Homeless Link

- To develop stronger partnerships in local places e.g. between local councils, NHS, housing and the Voluntary and Community Sector (VCS)
- To develop system-wide strategic commissioning with a focus on population health and reducing health inequalities.

## How will Integrated Care Systems be structured?

It's expected that the Health and Care Bill, currently going through Parliament, will have become law by April 2022, establishing a statutory basis for ICSs. ICSs will replace the current STPs and Clinical Commissioning Groups (CCGs).

The fundamental structure of ICSs will be the same across England. There are several ICS models evolving as they are being developed. There is a real opportunity for different systems to learn from one another and test innovative approaches. Who is on the Integrated Care Boards and the size of the ICS will vary from region to region. Each ICS will operate at 3 levels:

**Neighbourhood:** Populations up to 50,000 (local/community level) - brings together Primary Care Providers (PCPs), e.g. GPs, Dentists, Pharmacy and community services into Primary Care Networks (PCNs). Also includes Social Prescribing and Asset Based Community Development, health management and promotion.

**Place:** Populations between 250,000– 500,000 (borough/district level). Partnerships between the NHS, local government and other partners, including the homelessness sector are developed to work together in a locally defined 'place' to collectively plan, deliver and monitor services e.g. Health and Wellbeing Boards. Partnerships will support the design, delivery and development of new service models, aiming to reduce health inequalities, support prevention and focus on service integration.

**System:** Populations over 1 million (NHS Trust level) where Integrated Care Boards (ICBs) and Integrated Care Partnerships (ICPs) will be established (see glossary for more information).

## How the Voluntary and Community Sector (VCSE) can engage with London ICSs

The NHS sees the VCSE sector as a “vital cornerstone of a progressive health and care system”;

“We expect that by April 2022 Integrated Care Partnerships and the ICS NHS body will develop a formal agreement for engaging and embedding the VCSE sector in system level governance and decision-making arrangements, ideally by working through a VCSE alliance to reflect the diversity of the sector.” ([Integrated Care Systems: Design Framework](#) - pages 28-29).

There has been a change in the direction of travel recently with many more mentions of embedding VCSE partnerships in health and social care provision the NHS. Partnerships with the VCSE sector are seen as an essential part of how the ICS will operate at all levels (neighbourhood, place and system). For example, there is scope for the VCSE sector to be involved in leadership, governance and service redesign work.

Each ICSs should ensure their governance and decision-making arrangements support a close working relationship with the VCSE sector to develop and deliver plans to improve and deliver services as well as tackling health inequalities. Examples of this could include:

### Neighbourhood

Social prescribing.

Capturing the specific needs of certain populations e.g. ethnic groups.

Coordinating primary health care services for people experiencing homelessness.

**Place**

Vaccinating homeless populations.  
 Hospital discharge work e.g. Step Down across the North West London ICS.  
 Co-ordinating networks between services like housing and primary care.  
 End of life care in hostels.  
 Capturing data and intelligence and the voice of lived experience.  
 Supporting the co-design and delivery of health and care services.  
 Providing reach to excluded groups and communities, such as those people experiencing homelessness to reduce health inequalities.  
 Link in with place-based arrangements in your area – e.g. PCNs, Public Health.

**System – via Integrated Care Boards (ICBs) and Integrated Care Partnerships (ICPs)**

Connect with health and homelessness colleagues at your ICS – see below  
 Strategy planning and implementing across the homelessness work stream.  
 Sharing good practice.  
 The provision of Pan-London schemes, including Find and Treat and potentially other services which are wider than just one ICS area.

The model below, based on emerging work in ICSs, shows a recommended structure for VCSE partnerships at wider ICS, place and neighbourhood level that will support relationships to deliver better health and care for local people.

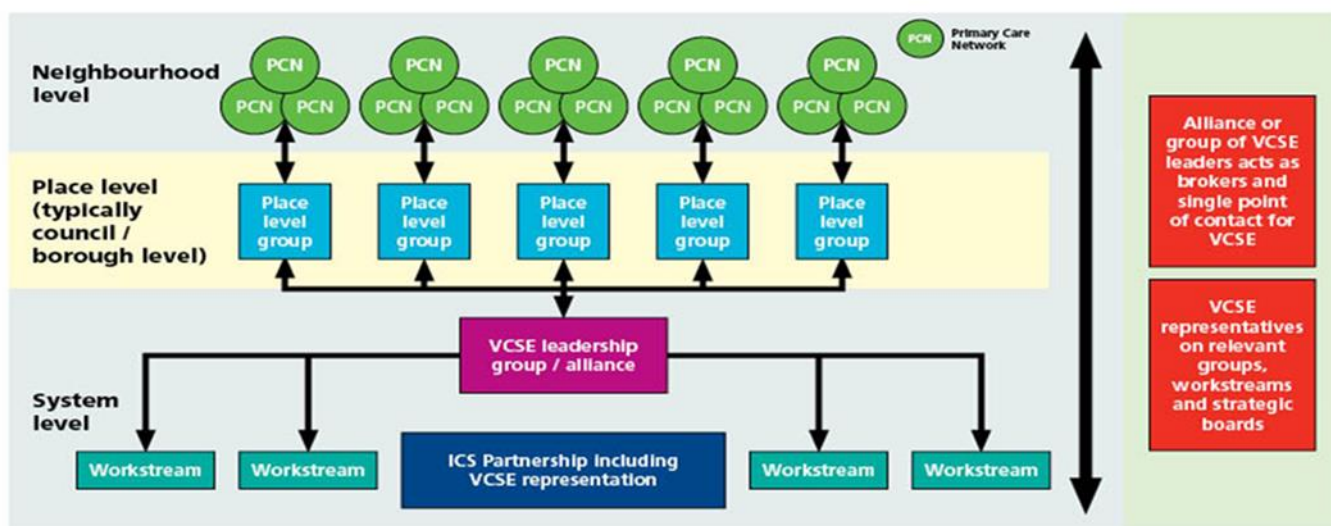


Diagram reproduced with permission from NHS England and NHS Improvement - [Report template - NHS website \(england.nhs.uk\)](#)

**The 5 London Integrated Care Systems**

There are 5 Integrated Care Systems in London:

**North Central London (NCL) - [North Central London Partners in health and care](#)** there is a collective commitment across North Central London ICS to work with partners including councils, the Clinical Commissioning Group (CCG), NHS providers and other sectors to challenge these inequalities and create better futures for everyone living in North Central London”.

**North East London (NEL) - [North East London Health and Care Partnership](#)** “brings together NHS organisations, local authorities, community organisations and local people to ensure our residents can live healthier, happier lives”.

**North West London (NWL) - [North West London Health and Care Partnership](#)** “is a collaboration of over 30 organisations, including the NHS, local authorities, voluntary sector and Healthwatch, working together to serve a population of 2.4 million, improve the quality of patient care and health outcomes, while focusing on building an NHS fit for the future”.

**South East London (SEL) - [Our Healthier South East London](#)** “brings together local health and care organisations and local councils to design care and improve population health, through shared leadership and collective action”.

**South West London (SWL) - [South West London Health and Care Partnership](#)** “has been working collaboratively with NHS providers, local authorities, Healthwatch, and voluntary sector representatives to continue to provide health and care services for people in South West London to Start Well; Live Well; Age Well”.

### London ICS Homeless Health Leads (as at November 2021)

<b>North Central London (NCL)</b>	<b>Boroughs covered: Barnet, Camden, Enfield, Haringey, Islington</b>
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## How can health data gathered by London's homelessness sector inform decision making?

London ICSs have acknowledged the importance of gathering data relating to the specific health needs of people experiencing homelessness. Data is a powerful tool which can make the case for change and the development of new services. A [Health Needs Audit](#) is an area-wide survey which identifies the needs of the local population, their experiences of accessing services and where services are working/not working well can provide rich data to feed into neighbourhood, place and system levels of ICSs.

## How will ICSs listen to the voice of lived experience?

ICSs recognise the importance of gathering the views of those with lived experience via organisations who work directly with them. These organisations should be invited to attend appropriate meetings at place and system levels.

## Further info/useful resources

[Homeless Link Blog: Health and Care Reforms are an opportunity for the homelessness organisations](#)

[NHS England Building Strong Integrated Care Systems everywhere: Guidance on developing partnerships with the VCSE sector](#)

[Integrated Care Partnership \(ICP\) engagement document: Integrated Care System \(ICS\) implementation](#)

[Integrated Care System Guidance Documents](#)

[NHS Confed August 2020 "How health and care systems can work better with the VCSE sector"](#)

[NCVO "Creating partnerships for success"](#)

[Tackling Health Inequalities Head on Through Integrated Care Podcast - Sandwell](#)

[HSJ – podcast on The Health Bill and ICSs](#)

## Glossary

- Primary Care Providers (PCPs) - a broad range of health services provided by medical professionals in the community.
- Primary Care Networks (PCNs) - brings practices together to work at scale.
- Place Based Partnership (PBP) – a collaborative arrangements formed by the organisations responsible for arranging and delivering health and care services in a locality or community.

- Integrated Care Board (ICB) – a new statutory organisation will lead integration within the NHS by bringing together all those involved in planning and providing NHS services. Each ICS will be led by an NHS ICB. ICBs will subsume the role of CCGs.
- Integrated Care Partnerships (ICPs) - are system-level groups of health and care organisations, including borough councils and voluntary/community sector members, working across local geographic boundaries. These forums will bring together partners across the system responsible for developing overarching strategies that cover health, social care and public health and address the wider determinants of health and wellbeing.
- STPs - Sustainability and Transformation Partnerships - STPs are five-year plans covering all aspects of NHS spending in England.



## What we do

Homeless Link is the national membership charity for frontline homelessness services. We work to improve services through research, guidance and learning, and campaign for policy change that will ensure everyone has a place to call home and the support they need to keep it.

## Let's end homelessness together

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