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## Partnering for success

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The move to turn integrated care systems into some form of statutory entities has been largely welcomed. In the last few years, and especially over the course of the pandemic, much of the cross-organisational working under the auspices of ICSs has been through a collaboration of the willing.

More formal arrangements will require agreements to be made and contracts to be signed. And this will mean committing to a certain structure and framework for the foreseeable future. Ensuring the right partners are included in the discussions will be extremely important to the positive outcomes we all want and need.

These partnerships will involve all players within an ICS, including the NHS, local authorities and the voluntary community and social enterprise (VCSE) sector to work together. It will be essential that there is some parity between all organisations and that all partners are engaged – and feel engaged – in the important system decisions.

### Power of partnerships

This represents a fundamental shift in the way the NHS has always operated. It marks a move away from the current command and control structure to a system in which power is shared and enjoyed by all system players.

Ways of working developed during the pandemic have already established and demonstrated the positive effect that partnerships and collaboration can have in terms of outcomes for citizens. More effective partnering will support the delivery of services out of hospitals and into the community, as close to the patients as possible. While each sector acts in a specific way to help out local communities, their convergence into a single more connected entity will support the focus of helping those most in need.

For ICSs to achieve their goals and objectives, they will need to engage all system partners. The LGA's consultation response paper expressed some scepticism about whether the NHS would be able to leave behind its centralised command and control structure and accept that it would not be the lead organisation within the new systems, highlighting that "it is only by working in equal partnership with local government that the NHS will be able to achieve [...] accountable, sustainable and effective health and care systems that address health inequalities and improve population health".



Through our National Commission work, we have found that there is a difference of expectation between the various players within integrated care systems. One local council chief executive said that although local governments are willing to let go of power for the benefit of the local system, other systems partners were not. There are still those who believe that the ICS and its legislations are simply yet another NHS construct and power grab.

As these partnerships become more formalised and long-standing, some relinquishing of power will need to be done by some for the benefit of the system.

## Balancing act

While some organisations will indeed be bigger than others, each player in the system will bring something different to the table. The smaller partners will be able to tailor their approach and services down to specific individuals, whereas larger organisations need to take on a more holistic perspective across care services and populations.

For example, VCSE has a very strong link into communities and has played a vital role in those communities throughout the pandemic so it is well positioned to help with the shift towards prevention and self-care. A recent NHS Confederation paper found that nine in ten UK households have accessed a service delivered by a voluntary organisation (NHS Reset).

Following a successful first series of ICS webinars, we are about to start our second, which will run bi-monthly and focus on topics chosen following a survey conducted after the first series. The first of these will be on 3 February and look at 'The New NHS – ICS Series: What should we be getting on with?'

## Illuminations

- **All voices heard** – it is important and for the benefit of the entire system to have all partners involved in the establishment and decision-making process of integrated care systems. The best systems will be those that can get this balance right.
- **Co-design and co-production** – to truly have an impact on the wider determinants of health and health inequalities, services will need to be designed by all partners and citizens.
- **Partnership boards** – the strongest partnership boards will be those that are able to encompass all system players to take place in the decision-making and taking.

If you have any questions or comments about this briefing, please call us on 07732 681120 or email [advice@good-governance.org.uk](mailto:advice@good-governance.org.uk)