

ICS Boundary - Glossop

National context

Earlier this year, the Department of Health and Social Care (DHSC) asked NHS England to set out options for boundary alignment in Integrated Care Systems (ICS) in specific geographies where upper-tier local authorities currently have to work across more than one ICS footprint and to assess the impact of changes to deliver alignment in each case. Over the last 6 months NHS England has worked with stakeholders to develop advice and analysis for each of the affected areas to inform the Secretary of State for Health and Social Care's decision.

This work has now concluded, with advice provided to the Secretary of State for Health and Social care. A final decision has been taken for the six areas in scope, one of which was Glossop, Derbyshire.

Coterminosity

This work has been underpinned by the principle that coterminous boundaries deliver clear benefits in integration between local authorities and NHS organisations. As approaches to integrated care develop it is crucial that systems support closer working both across NHS organisations and between the NHS and local government.

It is envisaged that local authorities, subject to the passage of the Health and Care Bill through parliament, will have a statutory seat on NHS Integrated Care Boards (ICB) and will play a key role in establishing and leading Integrated Care Partnerships (ICP). As such it is important that once established in legislation, ICBs and ICPs have the best opportunities to build strong relationships between NHS and local authority stakeholders.

ICS boundary review process

Since the initial request, NHS England asked NHS Derby and Derbyshire CCG to engage with local stakeholders to seek views on the proposal to move Glossop from the Greater Manchester ICS into the Derbyshire ICS boundary. Glossop is geographically already part of Derbyshire, with local authority service provided by Derbyshire County Council and High Peak Borough Council but has been part of the Manchester NHS system via Tameside and Glossop CCG.

The CCG submitted its engagement report to NHSE in June 2021. DHSC has also engaged at ministerial level with parliamentarians as well as national organisations such as NHS Providers and the Local Government Association to ensure their views were reflected in the final advice to the Secretary of State and they had an opportunity to feed into the development of this work.



Final Decision Process

The Secretary of State for Health and Social Care's decision process has involved careful consideration of a wide range of issues, perspectives and interests and a careful weighing up of risks and benefits, outlined in the analysis provided by NHS England for each area. These have been considered on a case-by-case basis for each area. Where NHS England has made a recommendation based on broad (not universal) local consensus, including a recommendation to retain the status quo, the Secretary of State has listened and has accepted these recommendations. Where there was not a broad local consensus within this review, no recommendations were made by NHS England and a balanced judgement was taken by the Secretary of State, weighing up the risks and benefits of a change in boundaries and having regard to his legal duties including his public sector equalities duty.

Glossop

The decision has been taken to amend the ICS boundary so that Glossop will move from the Greater Manchester ICS into the Derbyshire ICS.

The Secretary of State has outlined that there was no local consensus in this area and while the historic partnership and strong relationships developed in Tameside and Glossop were noted, the decision was taken based on a consideration that the benefits of coterminous boundaries outweighed the challenges. The benefits of the decision are that alignment enables more opportunities for joined-up working with the local authority and the creation of joined-up plans for prevention and population health to improve provision for local people as well as greater alignment between community, mental health and ambulance service provision which provide a county-wide service.

It is important to stress that this decision will not impact any individual patient's right to choose or use services outside of their ICS, nor do ICS changes mean any local services to patients and residents will change. It will also be important that all parties work together in the region to implement this change in a way that retains the learning and relationships developed as part of Greater Manchester ICS and incorporates all mitigations required to ensure a smooth transition.

NHS England has made an employment commitment for colleagues impacted by the legislative changes. The HR framework developed by NHS England will also provide guidance on the process to follow for CCGs affected by boundary changes to ensure the appropriate transfer of people in line with this employment commitment. This guidance is designed for leaders and HR colleagues and is due to be published in due course.

Comment

Dr Chris Clayton, Executive Lead for Joined Up Care Derbyshire, said:

"We welcome that the Secretary of State has taken a decision on this matter. One of the key lessons of the Covid-19 pandemic is the need to join up care across the NHS, local government, voluntary and community organisations right across the country. The Secretary of State's decision brings much needed certainty and clarity for systems, allowing them to get on with delivering for patients, their families and the public.

"I would like to reassure the public and our colleagues that work in health and care services in Glossop that this will not affect their use and access to key services, such as those in our specialist hospitals, but will allow us over time to develop more integrated care services between the NHS, Local Authority and other partners."

Joined Up Care
Derbyshire

