Letter from the 42 Integrated Care System CEO-designates to CEO NHS England

Dear Amanda,

As the 42 Chief Executive designates of the Integrated Care Systems, we have been closely involved in developing this concise report, which we embrace. Today we are making a personal commitment to take forward the actions in our own systems in all our neighbourhoods. It's foundational to everything we do.

Next Steps for Integrating Primary Care could not be more timely. For too much of the country, the current model of general practice is not working anymore – not for our patients, nor for our staff. Patient satisfaction with access to general practice has plummeted, despite record numbers of appointments. Our hard-working teams are struggling to cope with demand. Many are stretched beyond capacity. They feel under siege. We can't go on as we are.

In the face of these challenges, the stocktake process has also shown strong and unanimous commitment to the core concepts of UK general practice. At its heart is the unit of the GP practice, with its registered list of patients, and holistic responsibility across the trinity of urgent, complex, and preventative care. The question is how do we make that a viable proposition now and for the coming decades: for primary care to be sustainable and thrive, how does primary care change, how do different services across the pillars of primary care and beyond need to come together to deliver a better service for patients, what support is needed?

The 42 systems have a vital role in addressing these questions and seizing the opportunities, but we can't do this alone. Critically, we will need some additional support from Government and NHS England, targeted most of all at fixing workforce supply and estates.

We welcome NHS England's commitment to pivot to system-led approaches as the main way of driving up access experience and outcomes in primary care in this next stage of its development. National contractual arrangements, including for PCNs, have and will continue to provide essential foundations. But they can only take you so far. Getting to integrated primary care is all about local relationships, leadership, support, and system-led investment in transformation. We need to put in place the right support at each level of neighbourhood, place and system.

As well as witnessing intense pressures, we also see fantastic examples of local leaders and their teams flourishing. *Next Steps for Integrating Primary* Care outlines the service models that can best help achieve these goals. The challenge for us as system leaders is to make them real in our own geographies. Across our systems and within our neighbourhoods, the answers to tackling variation in standards and outcomes will vary. One size does not fit all, but there are common themes.

A golden thread ties this report together: integrated neighbourhood teams. We need a stronger platform for service delivery and improvement in every neighbourhood. While we accept that the maturity of PCNs varies across the country, we see brilliant examples of PCNs that are bringing together a wide range of services as part of a much broader version of general practice, through deep partnerships, as integrated neighbourhood teams managing the health of their population.

We will back all our PCNs to develop into fully integrated neighbourhood teams. It's not an option for us to leave some neighbourhoods behind. We have an imperative to tackle inequalities and deliver the standards of access and care our populations expect – and that means enabling new services to set up in

our least well-served areas. We will back capable leadership delivering high quality care wherever we find it.

We recognise it will take really significant support. That support needs to be co-developed with and tailored to each neighbourhood. It's not going to be sufficient to rely on the discretionary effort of our PCN Clinical Directors working in their evenings and weekends, nor is it fair to do so. They can't do it alone. And it will also need the right support at place and system level too. We welcome the King's Fund evidence review commissioned as part of this work, that challenges us to rethink how we approach change in Primary Care; and would ask for your and your team's support in rebalancing ways of working in favour of a greater emphasis on support, improvement and collaboration as a means to achieve this vision.

Everyone knows there aren't any easy or quick fixes. But *Next Steps for Integrating Primary Care* gives us a vision of where we are going and a clear framework for what now needs to happen.

Yours,

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