

## Assessment of system readiness

1. To support assurance of ICB readiness for taking on greater responsibility for in-scope specialised services<sup>1</sup>, a pre-delegation assessment framework (PDAF) was developed. This built on the primary care pharmaceutical, general ophthalmic and dental commissioning functions framework and was co-developed with regional colleagues and national subject matter experts - with additional input from other stakeholders, including the Patient and Public Voice Advisory Group.
2. The PDAF has six key domains: Health and care geography, Transformation, Governance and leadership, Finance, Workforce capacity and capability; and Data, reporting and analytics infrastructure. Set against each domain are a series of criteria that ICBs should meet prior to assuming responsibility for the functions.

## Principles of the Pre-Delegation Assessment Framework

Domain	Principle
Health and care geography	There is a meaningful <u>geographical footprint</u> which takes into account key <u>patient flows</u> , with clear plans in place to manage and mitigate against any risks.
Transformation	There is a clear understanding of how receiving each new responsibility will <u>benefit population health outcomes</u> , deliver improved care quality, reduce healthcare inequalities, improve preventative capacity, and increase efficient use of resources.
	There is a <u>shared understanding</u> across all ICS partners on the benefits of delegation.
Governance and leadership	Governance enables <u>safe, high-quality delivery</u> .
	<u>Clinical leadership</u> combines the specialist expertise to lead and scrutinise individual functions, and the collaborative working necessary to identify, enable, and oversee clinical improvements.
Finance	Major <u>financial risk factors and issues</u> are clearly understood and mitigated, and there is a track record of delivering a balanced budget.
Workforce capacity and capability	There is an understanding of the <u>workforce and capability and capacity</u> requirements, with any major risks understood and processed for mitigation.
Data, analytics and reporting infrastructure	There is a clear understanding of the <u>level of digital maturity</u> required, with any gaps identified and prioritised for improvement.

<sup>1</sup> 'In-scope' specialised services refers to those services determined by the Service Portfolio Analysis to be suitable and ready for greater ICB leadership from April 23.

# Proposed Joint Committees

Discussions remain ongoing and these proposals may be subject to change, with some regions considering sub-committees based on geographies or services.

**~ 90% of core service spend is planned for greater ICB leadership<sup>3</sup>**

North West	
Population footprint <sup>1</sup>	7,693,574
22/23 Baseline allocation <sup>2</sup> (£)	1,592,650,245

West Midlands	
Population footprint <sup>1</sup>	5,961,929
22/23 Baseline allocation <sup>2</sup> (£)	1,216,799,632

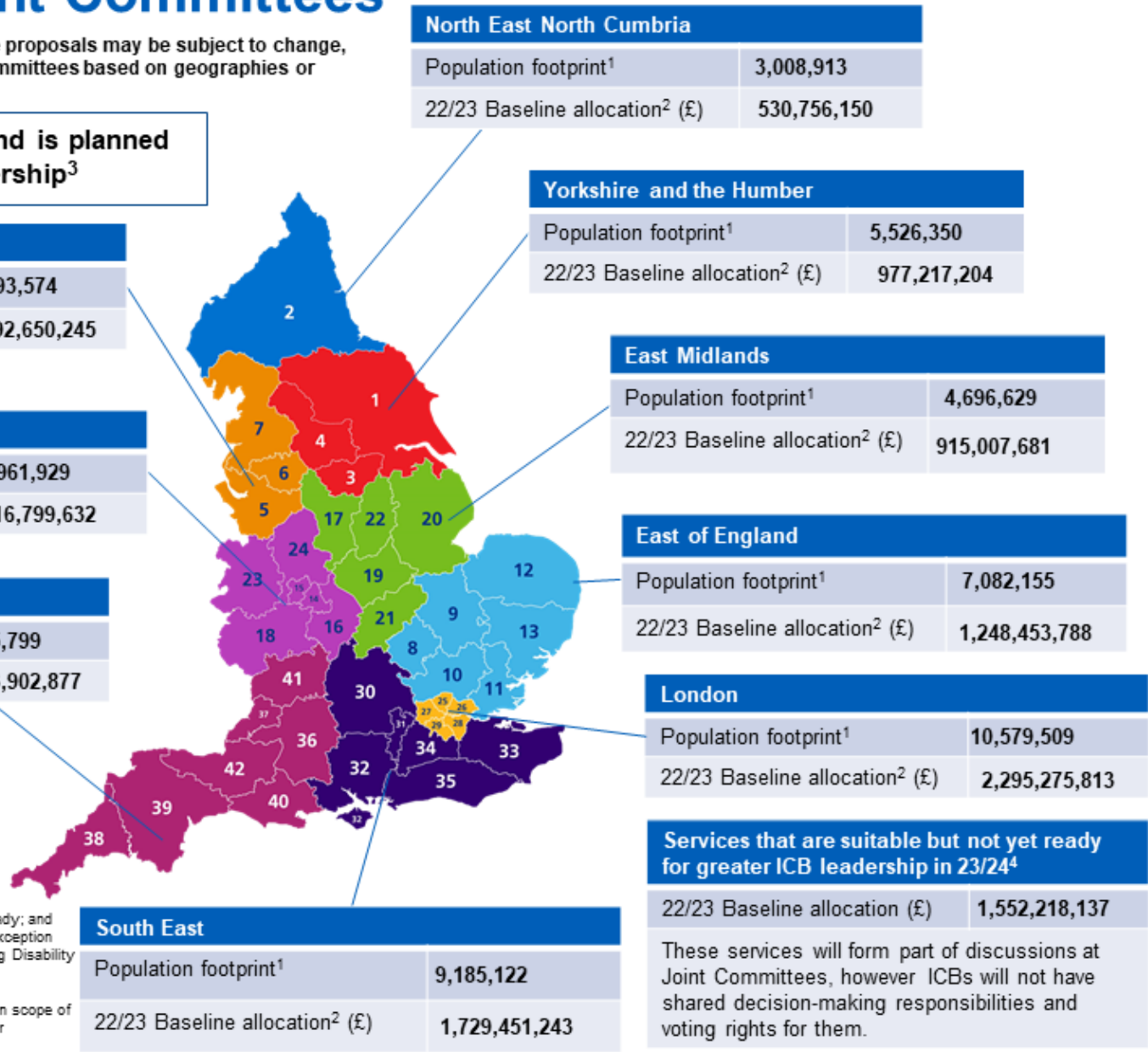
South West	
Population footprint <sup>1</sup>	5,665,799
22/23 Baseline allocation <sup>2</sup> (£)	1,093,902,877

1. Population footprints used on this slide were provided by regions in their summaries or entered nationally where they were not provided. As a result, several different data sources have been used.

2. As the 23/24 allocations are not yet available, these figures are the 22/23 indicative baseline population based allocations for acute and mental health services that are suitable and ready for greater ICB leadership in 23/24.

3. This includes both services that are suitable and ready; and services that are suitable but not yet ready (with the exception of services that are in scope of Mental Health, Learning Disability and Autism Provider Collaboratives).

4. Please note this does not include services that are in scope of Mental Health, Learning Disability and Autism Provider Collaboratives.



**Services that are suitable but not yet ready for greater ICB leadership in 23/24<sup>4</sup>**

22/23 Baseline allocation (£)	1,552,218,137
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These services will form part of discussions at Joint Committees, however ICBs will not have shared decision-making responsibilities and voting rights for them.