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MSE Integrated Care Board (ICB) Update

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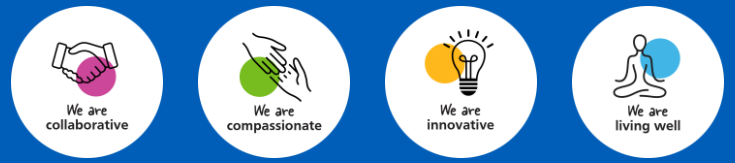

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NHS Reform

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We are collaborative
We are compassionate
We are innovative
We are living well

Overview

In March 2025 the government announced plans to:

1) **Abolish NHS England as an independent body and absorb it back into the Department of Health and Social Care**
2) **Restructure and cluster/merge Integrated Care Boards**

- Aim of both is to create a more efficient, effective and responsive healthcare system, with reduced bureaucracy and administrative burden.
- Changes are likely to take place over the next couple of years.
- There will be an approximate 50% reduction in staffing in the future.

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ICB changes

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What’s changing?- Role of ICBs

- **Focus on strategic commissioning:** ICBs will concentrate on improving population health and reducing inequalities, with a clearer national focus on prevention, care closer to home, and digital access.
- **Oversight of provider performance:** It is expected that some existing ICB functions will be undertaken at a regional level, such as oversight of provider performance – particularly around finance, quality, operational performance, where there are ongoing challenges.
- **Community transformation shift**: Over time, responsibilities such as estates, workforce and medicines optimisation are expected to move from ICBs to emerging neighbourhood care providers. However, the pace of change will be different across the country, depending on existing provider landscapes.
- **Primary care contracting:** ICBs will continue to be responsible for GP contracting, and the delegated commissioning of pharmacy, optometry and dentistry.

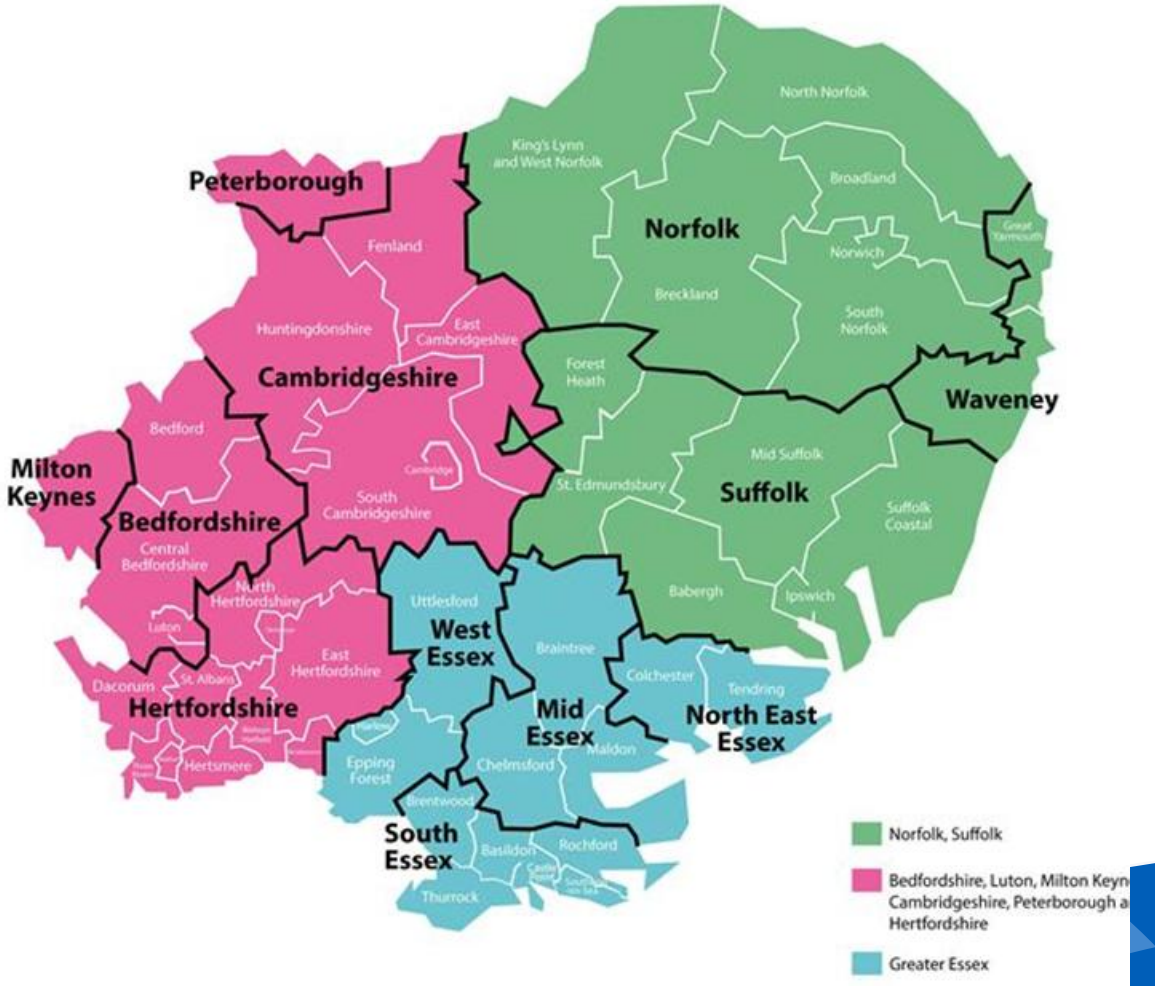
What's changing?- Configuration of ICBs

- **ICB footprints have been re-shaped:**

Across the East of England, the number of ICBs will reduce from six to three.

Configurations agreed, formal implementation from April 1st 2026

MSE ICB will be part of a new proposed Essex ICB cluster with colleagues in north-east Essex and west Essex.



Leadership team for proposed Essex ICB

Tom Abell
Chief Executive Officer

Michael Watson	**Jennifer Kearton**	**Dr Matthew Sweeting**	**Dr Giles Thorpe**	**Emily Hough**	**Vacant**
Executive Director of Corporate Services	Executive Director of Finance & Commercial	Executive Medical Director	Executive Director of Nursing	Executive Director of Strategy	Executive Director of Neighbourhood Health

Next steps

- From 1 October 2025 we will begin to implement shadow governance arrangements with an **Joint Committee** to enable collective decision-making ahead of the proposed establishment of Essex ICB from April 2026.

- There are no immediate changes to how we work with you.

- ICB teams remain in place but some of our staff may be affected, we are committed to keeping relationships and support as stable as possible.

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Fit for the Future: 10-Year Health Plan for England

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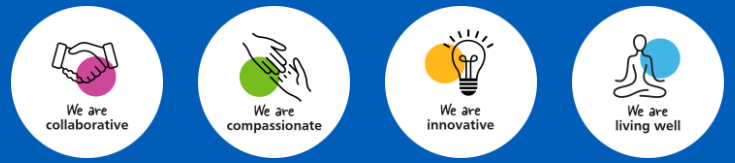


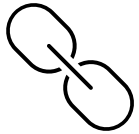
Context and Purpose

- NHS at a crossroads: long waits, workforce pressures, and rising demand
- Need for transformation: The plan centres on three ‘shifts’ or changes the government wants to see:
  - ➢ Moving care from hospitals to local communities
  - ➢ Preventing illness, not just treating it
  - ➢ Realising the potential of digital technology

Hospital to Community: The Neighbourhood Health Service

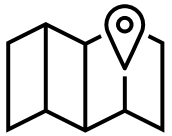
Local Neighbourhood Care

- Establish Neighbourhood Health Centres in every community as local hubs for everyday health needs.
- Open longer hours and bring GPs, nurses, mental health, dental, pharmacy and social care under one roof.



Personalised, Joint Up Support

- Create Personal Care Plans for everyone with complex or long-term conditions by 2027.
- Expand Personal Health Budgets so more people can shape and manage their own care.
- Integrate NHS teams with local councils and voluntary services to deliver wraparound support.



Right Care, Right Place

- Strengthen local pharmacy services to help manage long-term conditions and urgent care.
- Fix NHS dentistry to ensure fair access- no one forced to pay privately or go without.
- Expand virtual wards and community urgent care so hospitals can focus on specialist treatment.

From Sickness to Prevention: Tackling the Causes

Stopping illness before it starts

- Phase out tobacco sales for future generations so no child turning 16 today can ever buy cigarettes legally.
- Ban junk food ads aimed at children and re-strict high-caffeine energy drinks for under-16s.
- Expand routine vaccinations, newborn genomic testing, and early cancer screening to catch risks sooner.

Supporting Healthy Choices

- Launch national campaigns and reward schemes to help people stay active and make healthier lifestyle choices.
- Make it easier for people to access new weight-loss medicines, paid for based on real health results.
- Improve nutrition in schools with better food standards and more healthy school meals.

Early Help for Mental Health

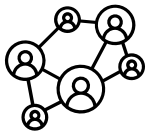
- Strengthen mental health support in schools through expanded local teams and Young Futures Hubs.
- Provide more community-based services to tackle mental health issues early, not in crisis.
- Combine prevention, early help and community care to close health gaps and reduce future NHS pressure.

From Analogue to Digital: Putting Patients in Control

NHS App as your Front Door

• Expand the NHS App into a single, trusted way to book appointments, manage medicines, and view health records.

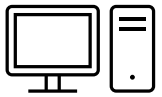
• Add new tools like My NHS GP, My Vaccines, and real-time waiting times to put more control in patients' hands.



Connected Data and Records

• Create a Single Patient Record so health information is secure, joined-up, and accessible by patients and clinicians anywhere.

• End duplication and the need to repeat your history at every visit.



Smarter Tech for Staff and Patients

• Use wearables and remote monitoring to keep people well at home and spot problems earlier.

• Bring in AI scribes, digital triage, and smart devices to cut admin time and free up staff for frontline care.

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What this means for care providers

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Neighbourhood health services

- Integration into neighbourhood health services
- The plan introduces a Neighbourhood Health Service model designed to bring together health and social care professionals promoting truly community based care.
- Closer collaboration with NHS teams
- Multi-disciplinary planning and delivery
- Opportunities to shape local ‘neighbourhood level’ care strategies
- The hope is that this will improve outcomes throughout co-ordinated care and reduce hospital admissions and delayed discharges.

Prevention and personalisation

- Increased demand for personalised care planning
- Joint working to achieve the target for 95% of individuals with complex needs to have personalised care plans by 2027- this should fully reflect all their needs and wishes
- Providers will need to co-produce care plans with service users and families
- This may require new training and systems

Digital transformation

- Systems which speak to each other and reduce the administrative burden on staff across health and care settings
- Providers must ensure compatibility with NHS systems and maintain data protection compliance
- Opportunities for care providers to help co-design digital tools and ensure digital inclusion
- Increase in the use of wearables and remote monitoring to keep people well at home and spot problems earlier.
- There will be early opportunities for care providers to benefit from this shift. Any tool which can help service users manage their health well can support both efficiency and outcomes with appropriate data sharing arrangements could lead to improved responsiveness and coordination of health and care for service users.

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Questions?

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