

RAISING CONCERNS (WHISTLEBLOWING) POLICY

July 2022

Authorship :	Director of Corporate Affairs
Reviewing Committee :	ICB Executive
Approval Body :	Integrated Care Board
Approved Date :	1 July 2022
Review Date :	This policy will be reviewed biennially or earlier in response to exceptional circumstances, organisational change or relevant changes in legislation / guidance.
Equality Impact Assessment :	Completed - attached
Sustainability Impact Assessment :	Completed – attached
Related Policies	<ul style="list-style-type: none"> • Business Conduct Policy • Conflict of Interest Policy • Health & Safety Policy • Risk Management Policy • Serious Incident & Concerns Policy • Local Anti-Fraud, Bribery & Corruption Policy • Bullying and Harassment Policy • Disciplinary Policy • Equality & Diversity Policy • Grievance Policy
Target Audience :	All employees, members, committee and sub-committee members of the group and members of the Integrated Care Board; Integrated Care Partnership and its committees.
Policy Reference No. :	ICB 38
Version Number :	1.0

The on-line version is the only version that is maintained. Any printed copies should, therefore, be viewed as 'uncontrolled' and as such may not necessarily contain the latest updates and amendments.

POLICY AMENDMENTS

Amendments to the policy will be issued from time to time. A new amendment history will be issued with each change.

New Version Number	Issued by	Nature of Amendment	Approved by and Date	Date on Website
1.0	Corporate Affairs	Reviewed following establishment of ICB	ICB Board 01 July 2022	November 2022

To request this document in a different language or in a different format, please contact the ICB :

01904 565103 or voyccg.fts@nhs.net

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1. INTRODUCTION

- 1.1. All of us at one time or another has concerns about what is happening at work. Usually these concerns are easily resolved. When, however, they are about patient care or patient services, professional practice, unlawful conduct, dishonesty, financial malpractice, or a danger to health, safety or the environment, or a cover up of any of these, it can be difficult to know what to do.
- 1.2. You may be worried about raising such issues or may want to keep the concerns to yourself, perhaps feeling it is none of your business or that it is only a suspicion. You may feel that raising the matter would be disloyal to colleagues, managers or to the Organisation you work for. You may have said something but found that you have spoken to the wrong person or are not clear that the person you spoke to understood your issue and you are not sure what to do next.
- 1.3. Humber and North Yorkshire ICB has introduced this policy to enable you to raise your concerns or suspicions about any issues of malpractice at an early stage and in the right way. We know from experience that to be successful we must all try to deal with issues on their merits. The ICB welcomes your genuine concerns and is committed to dealing responsibly, openly and professionally with them. Without your help, we cannot deliver a safe service and protect the interests of patients, staff and the Integrated Care Board and its partners. If you are worried, we would rather you raised it when it is just a concern than to wait for proof.
- 1.4. If something is troubling you which you think we should know about or look into, please use this procedure. If, however, you are aggrieved about your personal position then this is not the appropriate procedure and you should seek advice from your line manager or the Workforce Team. You may wish to speak to HR about whether the Grievance Policy is more appropriate to manage your concerns.
- 1.5. This policy is primarily for concerns where the interests of others, most especially service users, or of the ICB itself, are at risk.

If in doubt – raise it!

2. POLICY STATEMENT

- 2.1. The ICB is committed to the principle of public accountability. The ICB will investigate genuine and reasonable concerns expressed by employees relating to malpractice within the ICB and will ensure that employees are not discriminated against or suffer a detriment as a result of making such a disclosure, as laid down by the Public Interest Disclosure Act 1998 (PIDA).
- 2.2. The ICB encourages all staff to raise any concerns that they may have about the conduct of others in the ICB or the way in which it is run.
- 2.3. This policy applies to all employees and any agency or contract staff whilst they are working at the ICB, and is in accordance with the ICB's Equality and Diversity policy.
- 2.4. This policy incorporates the requirements of the Public Interest Disclosure Act 1998 (PIDA) and the Bribery Act 2010. Where instances of fraud are identified these should be reported immediately to the Chief Finance Officer or the Local Counter Fraud Specialist who, where appropriate, will arrange for the matter to be referred to the police for investigation and notified to NHS Protect. Please refer to the Local Anti-

Fraud, Bribery and Corruption Policy. One of the basic principles of public sector organisations is the proper use of public funds and this would include the assets bought through public funds. It is, therefore, important that all ICB staff are aware of the rules against any acts involving bribery, dishonesty, corruption or damage to ICB property. For simplicity all such offences are hereafter referred to as “fraud”.

- 2.5 Where safeguarding concerns are raised these should be reported immediately to the responsible safeguarding officer in line with the Safeguarding Policies published on legacy CCG and ICB websites.
- 2.6 The three fundamental public service values underpinning the NHS and all public sector work, specified by the NHS Code of Conduct for Boards published by the NHS Executive in April 1994, are Accountability, Probity and Openness. All those who work in the public sector should be aware of, and act in accordance with, these values. Acting with honesty and integrity forms a cornerstone of the public sector values.
- 2.7 The ICB is a public sector body and its employees are required to be honest and impartial in the conduct of their business. All employees of the ICB should be aware of the Business Conduct Policy, published on the CCG legacy intranet and ICB’s intranet. The ICB is absolutely committed to maintaining an honest, open and well-intentioned atmosphere within the ICB.
- 2.8 All employees have a duty to report instances where they witness others failing to demonstrate the expected levels of integrity in their working life. This will include bribery, fraud, corruption or bringing the ICB, the NHS or wider public service in to disrepute.

3. IMPACT ANALYSES

Equality

- 3.1. As a result of performing the screening analysis, the policy does not appear to have any adverse effects on people who share Protected Characteristics and no further actions are recommended at this stage. The results of the screening are attached.

Sustainability

- 3.2. A Sustainability Impact Assessment has been undertaken. No positive or negative impacts were identified against the twelve sustainability themes. The results of the assessment are attached.

4. SCOPE

- 4.1. This policy applies to all ICB employees, Provider Collaboratives, Members of the Integrated Care Partnership, members of its committees and sub-committees, Non-

executive Directors, any staff seconded to the ICB and contract and agency staff. Any reference to staff or individuals applies to all the aforementioned.

- 4.2. This policy covers all staff employed by the ICB while they are at work either within ICB premises or at any other location in pursuance of their normal work activities.
- 4.3. Staff working in ICB premises who are not ICB employees must follow the policy of their employer, however the results of risk assessments carried out in ICB premises that they work in must be shared with them and their risk assessments shared with ICB staff.
- 4.4. Where staff are not ICB employees but they have concerns about patient safety and quality matters which relate to an organisation operating within the ICB these issues can still be raised through this policy and through the supporting procedures available from voyccg.fts@nhs.net

5. POLICY PURPOSE / AIMS AND FAILURE TO COMPLY

5.1. This policy aims to:

- Encourage employees to feel confident in raising serious concerns regarding the practice of the ICB,
- Provide avenues for employees to raise those concerns and receive feedback on any action taken,
- Ensure that employees receive a response to their concerns,
- Reassure employees that they will be protected from possible reprisals, subsequent discrimination, victimisation or disadvantage if they have a reasonable belief that they are making the disclosure in the public interest.

5.2. This organisation also has separate policies to cover fraud and safeguarding concerns which provide further guidance and details separate procedures for reporting suspected cases of fraud. If your concern relates to a suspected incidence of fraud or safeguarding then please refer to the local anti-fraud, bribery and corruption policy or safeguarding policies respectively. Please note that the principles of this policy will still apply.

6. PRINCIPAL LEGISLATION AND COMPLIANCE WITH STANDARDS

Bribery Act 2010

6.1. Under the Bribery Act 2010, it is a criminal offence to:

- Bribe another person by offering, promising or giving a financial or other advantage to induce them to perform improperly a relevant function or activity, or as a reward for already having done so; and
- Be bribed by another person by requesting, agreeing to receive or accepting a financial or other advantage with the intention that a relevant function or activity would then be performed improperly, or as a reward for having already done so.

- 6.2. Any matter raised under this procedure will be investigated thoroughly, promptly and confidentially and the outcome of the investigation reported back to the employee who raised the issue.
- 6.3. All employees will be made aware of the policy on joining the organisation and will be encouraged to read and understand its process. All existing staff will be made aware of the policy and regular training sessions will be organised for management of staff.
- 6.4. No employee will be victimised for raising a matter under this procedure for raising a legitimate concern. Any form of bullying, harassment, victimisation or retaliation of a Whistleblower will not be tolerated and will be managed in accordance with the ICB's disciplinary policy.
- 6.5. In the event that misconduct is discovered as a result of any investigation under this procedure the organisation's disciplinary procedure will be invoked in addition to any external measures.
- 6.6. Where it can be demonstrated that an employee knowingly supplied false information when raising a concern the organisations disciplinary procedure will be invoked.
- 6.7. The ICB will treat all such disclosures in a confidential and sensitive manner. The identity of the individual making the allegation may be kept confidential so long as it does not hinder or frustrate any investigation. The investigation process may, however, reveal the source of the information and the individual making the disclosure may need to provide a statement as part of the evidence required.
- 6.8. This policy encourages individuals to put their name to any disclosures they make. Concerns expressed anonymously are much less credible, but they may be considered at the discretion of the ICB. In exercising this discretion, the factors to be taken into account will include :
- The seriousness of the issues raised
 - The credibility of the concern
 - The likelihood of confirming the allegation from attributable sources.

7. ROLES / RESPONSIBILITIES / DUTIES

Executive Director Clinical and Care Professionals

- 7.1. The Executive Director of Clinical and Care Professionals holds professional accountability for this policy and is the ICB's designated Freedom to Speak Up Guardian. The Executive Director of Clinical and Care Professionals will make her or himself available to discuss any concerns but will also be supported to investigate any concerns.

Head of Legal and Regulatory Services

- 7.2. The Head of Legal and Regulatory Services will be responsible for triaging referrals that are made. This will require close working with the Freedom to Speak Up Guardian who will complete the referral form at Schedule 1 should there be a referral made verbally. Any referrals that come into the Freedom to Speak Up inbox will be reviewed; where necessary anonymised; and triaged to the relevant Place by the Head of Legal and Regulatory Services. Where any concerns raised relate to the Head of Legal and Regulatory Services; or in the event of that individual being absent

for a prolonged period of time, the Executive Director of Corporate Affairs or their nominated Deputy will perform the functions of this post.

Executive Director of People

- 7.3. The ICB Director of People will be responsible for ensuring that where concerns which are raised amount to concerns which ought to be managed. The eMBED Director of Human Resources will be responsible for ensuring that employment law and the ICB's policies and procedures are adhered to throughout the investigation.

Director of Nursing in Place

- 7.4. The Director of Nursing in Place will be the first point of contact following a referral to the Freedom to Speak Up Guardian. The Director of Nursing in Place will either investigate the matter themselves or will identify an appropriate manager to investigate the concerns.

Executive Director of Corporate Affairs

- 7.5. The Executive Director of Corporate Affairs will have an overview of the issues involved and will keep the ICB informed of the progress of any investigation as necessary. The Executive Director of Corporate Affairs will also have overall responsibility for the maintenance of this policy and any associated procedures.

Non-executive Director Sponsor

- 7.6. The Non-executive Director Sponsor for Freedom to Speak Up can be approached with any concerns in the same way as the Executive Director Clinical and Care Professionals. Where the Non-executive Director is approached they will liaise with the Head of Legal and Regulatory Services to ensure that the matter is triaged in accordance with this policy.

Audit Committee

- 7.7. The Audit Committee will review any reports submitted to it in respect of this policy, and consider any necessary recommendation.

Managers

- 7.8. Concerns will normally be reported to an employee's line manager. The manager will be responsible for passing the details to the workforce team, or in cases of fraud to the Local Counter Fraud Specialist or Chief Finance Officer unless it is clear that the concerns are groundless. The Manager will also be responsible for seeking advice on whether concerns raised are covered under this policy or other HR

policies. The first point of contact for advice in this regard will be the Head of Legal and Regulatory Services.

Staff

7.9. All staff are responsible for being aware of this policy and for raising any concerns they have using appropriate procedure.

8. POLICY IMPLEMENTATION

8.1. This policy will be published on the ICB's website.

9. TRAINING AND AWARENESS

9.1. The policy will be brought to the attention of all new employees as part of the induction process. Further advice and guidance is available from the Head of Legal and Regulatory Services.

10. MONITORING AND AUDIT

10.1. The policy and procedure will be reviewed periodically by the ICB in conjunction with operational managers, System Partners and Trade Union representatives. Where review is necessary due to legislative change, this will happen immediately.

10.2. The implementation of this policy will be audited at appropriate intervals and reported to the ICB Governing Body.

11. POLICY REVIEW

11.1. This policy will be reviewed biennially. Earlier review may be required in response to exceptional circumstances, organisational change or relevant changes in legislation / guidance.

12. REFERENCES

- Freedom to speak up : raising concerns (whistleblowing) policy for the NHS – April 2016. Public Interest Disclosure Act 1998 (PIDA)
- Bribery Act 2010
- NHS Code of Conduct for Boards - April 1994

13. ASSOCIATED POLICIES

- COR Business Conduct Policy
- COR Conflict of Interest Policy
- COR Health & Safety Policy
- COR Risk Management Policy

- COR Serious Incident & Concerns Policy
- COR Local Anti-Fraud, Bribery & Corruption Policy
- HR Bullying and Harassment Policy
- HR Grievance Policy
- HR Disciplinary Policy
- HR Equality & Diversity Policy

14. CONTACT DETAILS

The Corporate Affairs Team

voycg.fts@nhs.net

Part 1 – Procedure

What concerns can be raised ?

Any concerns about risk, malpractice or wrongdoing can be raised if it is believed it is causing harm to any service the ICB commissions. These could include :

- unsafe working conditions
- inadequate induction or staff training
- suspicions of fraud (which can also be reported to our Local Counter-Fraud Team – please speak to a member of the Governance Team)
- a bullying culture (across a team or organisation, rather than individual instances of bullying).

Although the ICB do not deliver care to patients, any concerns at any of our partner organisations that are believed to be causing harm to patients can also be reported. These could include :

- unsafe patient care
- lack of, or poor, response to a reported patient safety incident

It is not necessary to wait for proof; it is better to raise an issue while it is still a concern. If in doubt, raise it !

Feeling safe to raise concerns

Anybody who wishes to raise a genuine concern under this policy can do so without the risk of losing their job or suffering any form of reprisal. The organisation will not tolerate the harassment or victimisation of anyone who raises a concern. Any such behavior is a breach of the ICBs values and behaviours.

As long as the person raising the concern is acting honestly, it does not matter if they are mistaken or if there is an innocent explanation.

Confidentiality

Anybody raising a concern under the terms of this policy will be able to raise their concerns openly and in confidence. The identity of the person who has raised the concern will be kept confidentially among as small a number of people as possible, unless the ICB is required by law / the police to identify said person.

Who can report a concern ?

Anybody who works (or has worked) within the NHS can raise a concern as can anybody who works for an independent organisation that provides NHS services, including agency workers, temporary staff, volunteers, governors and students.

Who should concerns be raised with ?

The easiest way for someone to raise a concern is with their line manager. If, however, they do not feel this is appropriate, they can raise the issue with the ICB's Freedom to Speak Up Guardian which is the Executive Director of Clinical and Care Professionals.

The Executive Director of Clinical and Care Professionals is the ICB's designated Freedom to Speak Up Guardian and is available should any staff have any concerns. An email inbox, voycg.fts@nhs.net, has been set up which will be monitored by the Executive Director of Corporate Affairs and the Head of Legal and Regulatory. Should an employee's concern be regarding either the Executive Director of Corporate Affairs or the Head of Legal and Regulatory then the matter will be dealt with by a nominated Place Director of Nursing. The Executive Director of Clinical and Care Professionals will nominate that Place Director of Nursing.

If the person does not feel comfortable / that it is appropriate to raise the issue with anybody within the ICB, then they should contact a member of the Workforce Team or the NHS Whistleblowing Helpline on 08000 724 725 <http://wbhelpline.org.uk/>.

Concerns can be raised in person, by phone or in writing, including by email.

Investigation

If the issue cannot be resolved quickly and easily by the concerned person's line manager or the ICB's Freedom to Speak Up Guardian, then a more formal investigation will have to be conducted by an independent person. In the case of the ICB, this will possibly be someone from another ICB or elsewhere within the NHS. The investigation will be evidence-based and objective and a report of the findings will be issued. Any lessons to be learned will be taken on board by the ICB.

If for any reason it is deemed more appropriate for the concern to be investigated by a different route, i.e., the Bullying and Harassment Policy or the Grievance Policy, this will be discussed with the person raising the concern.

Raising concerns with outside bodies

If a concern is about another part of the NHS outside of the ICB, there are other routes that can be taken :

NHS Improvement for concerns about :

- how NHS Trusts and Foundation Trusts are being run
- other providers with an NHS provider license
- NHS procurement, choice and competition
- the national tariff

<https://improvement.nhs.uk/>

Care Quality Commission for quality and safety concerns :

<http://www.cqc.org.uk/content/who-we-are>

NHS England for concerns about :

- primary medical services (general practice)
- primary dental services
- primary ophthalmic services
- local pharmaceutical services

<https://www.england.nhs.uk/>

Health Education England for education and training in the NHS :
<https://hee.nhs.uk/about-us/how-we-work>

NHS Protect for concerns about fraud and corruption :
<http://www.nhsbsa.nhs.uk/3350.aspx>

15. APPENDIX 1: EQUALITY IMPACT ANALYSIS FORM

1.	Title of policy/ programme/ service being analysed
	Raising Concerns (Whistleblowing) Policy
2.	Please state the aims and objectives of this work.
	This policy is designed to help people feel confident in raising any issues they may have.
3.	Who is likely to be affected? (e.g. staff, patients, service users)
	Anybody who has a concern either within the ICB, or outside.
4.	What sources of equality information have you used to inform your piece of work?
	'Freedom to speak up : raising concerns(whistleblowing) policy for the NHS'.
5.	What steps have been taken ensure that the organisation has paid <u>due regard</u> to the need to eliminate discrimination, advance equal opportunities and foster good relations between people with protected characteristics
	The analysis of equalities is embedded within the ICB's Committee Terms of Reference and project management framework.
6.	Who have you involved in the development of this piece of work?
	<p>Internal involvement: Senior Management team</p> <p>Stakeholder involvement: Consultation with Senior Managers</p> <p>Patient / carer / public involvement: This is an Internal policy aimed at staff employed by the ICB and contractors working for the ICB. The focus is on compliance with statutory duties and NHS mandated principals and practice. There are no particular equality implications.</p>

7.	What evidence do you have of any potential adverse or positive impact on groups with protected characteristics? Do you have any gaps in information? Include any supporting evidence e.g. research, data or feedback from engagement activities	
Disability People who are learning disabled, physically disabled, people with mental illness, sensory loss and long term chronic conditions such as diabetes, HIV)	Consider building access, communication requirements, making reasonable adjustments for individuals etc.	
N/A		
Sex Men and Women	Consider gender preference in key worker, single sex accommodation etc.	
N/A		
Race or nationality People of different ethnic backgrounds, including Roma Gypsies and Travellers	Consider cultural traditions, food requirements, communication styles, language needs etc.	
N/A		
Age This applies to all age groups. This can include safeguarding, consent and child welfare	Consider access to services or employment based on need/merit not age, effective communication strategies etc.	
N/A		
Trans People who have undergone gender reassignment (sex change) and those who identify as trans	Consider privacy of data, harassment, access to unisex toilets & bathing areas etc.	

N/A	
Sexual orientation This will include lesbian, gay and bi-sexual people as well as heterosexual people.	Consider whether the service acknowledges same sex partners as next of kin, harassment, inclusive language etc.
N/A	
Religion or belief Includes religions, beliefs or no religion or belief	Consider holiday scheduling, appointment timing, dietary considerations, prayer space etc.
N/A	
Marriage and Civil Partnership Refers to legally recognised partnerships (employment policies only)	Consider whether civil partners are included in benefit and leave policies etc.
N/A	
Pregnancy and maternity Refers to the pregnancy period and the first year after birth	Consider impact on working arrangements, part-time working, infant caring responsibilities etc.
N/A	
Carers This relates to general caring responsibilities for someone of any age.	Consider impact on part-time working, shift-patterns, options for flexi working etc.
N/A	

<p>Other disadvantaged groups This relates to groups experiencing health inequalities such as people living in deprived areas, new migrants, people who are homeless, ex-offenders, and people with HIV.</p>	<p>Consider ease of access, location of service, historic take-up of service etc.</p>
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N/A

<p>8.</p>	<p>Action planning for improvement Please outline what mitigating actions have been considered to eliminate any adverse impact?</p> <p>Please state if there are any opportunities to advance equality of opportunity and/ foster good relationships between different groups of people?</p> <p>An Equality Action Plan template is appended to assist in meeting the requirements of the general duty</p>
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Sign off	
Name and signature of person / team who carried out this analysis	Abigail Combes – Head of Legal and Regulatory
Date analysis completed	23 June 2022
Name and signature of responsible Director	Karina Ellis – Executive Director of Corporate Affairs

Date analysis was approved by responsible Director
23 June 2022

17. APPENDIX 2: SUSTAINABILITY IMPACT ASSESSMENT

Staff preparing a policy, Governing Body (or Sub-Committee) report, service development plan or project are required to complete a Sustainability Impact Assessment (SIA). The purpose of this SIA is to record any positive or negative impacts that this is likely to have on sustainability.

Title of the document	COR12 – Raising Concerns (Whistleblowing) Policy
What is the main purpose of the document	To determine if the implementation of the Raising Concerns (Whistleblowing) Policy will have an impact on sustainability for the ICB.
Date completed	29 November 2016
Completed by	Rachael Simmons, Corporate Affairs Manager

Domain	Objectives	Impact of activity Negative = -1 Neutral = 0 Positive = 1 Unknown = ? Not applicable = n/a	Brief description of impact	If negative, how can it be mitigated? If positive, how can it be enhanced?
Travel	Will it provide / improve / promote alternatives to car based transport?	N/A		
	Will it support more efficient use of cars (car sharing, low emission vehicles, environmentally friendly fuels and technologies)?			
	Will it reduce 'care miles' (telecare, care closer) to home?			
	Will it promote active travel (cycling, walking)?			
	Will it improve access to opportunities and facilities for all groups?			

	Will it specify social, economic and environmental outcomes to be accounted for in procurement and delivery?			
Procurement	Will it stimulate innovation among providers of services related to the delivery of the organisations' social, economic and environmental objectives?	N/A		
	Will it promote ethical purchasing of goods or services?			
	Will it promote greater efficiency of resource use?			
	Will it obtain maximum value from pharmaceuticals and technologies (medicines management, prescribing, and supply chain)?			
	Will it support local or regional supply chains?			
	Will it promote access to local services (care closer to home)?			
	Will it make current activities more efficient or alter service delivery models ?			
	Facilities Management		Will it reduce the amount of waste produced or increase the amount of waste recycled? Will it reduce water consumption?	N/A
Workforce	Will it provide employment opportunities for local people?	N/A		
	Will it promote or support equal employment opportunities?			
	Will it promote healthy working lives (including health and safety at work,			

	work-life/home-life balance and family friendly policies)?			
	Will it offer employment opportunities to disadvantaged groups?			
Community Engagement	Will it promote health and sustainable development?	N/A		
	Have you sought the views of our communities in relation to the impact on sustainable development for this activity?			
Buildings	Will it improve the resource efficiency of new or refurbished buildings (water, energy, density, use of existing buildings, designing for a longer lifespan)?	N/A		
	Will it increase safety and security in new buildings and developments?			
	Will it reduce greenhouse gas emissions from transport (choice of mode of transport, reducing need to travel)?			
	Will it provide sympathetic and appropriate landscaping around new development?			
	Will it improve access to the built environment?			
Adaptation to Climate Change	Will it support the plan for the likely effects of climate change (e.g. identifying vulnerable groups; contingency planning for flood, heat wave and other weather extremes)?	N/A		
Models of Care	Will it minimise 'care miles' making better use of new technologies such as telecare and telehealth, delivering care in settings closer to people's homes?	N/A		

	Will it promote prevention and self-management?			
	Will it provide evidence-based, personalised care that achieves the best possible outcomes with the resources available?			
	Will it deliver integrated care, that co-ordinate different elements of care more effectively and remove duplication and redundancy from care pathways?			