

Out thanks to the Shipston PPG and Jamie Barrett for permitting us to share this account of his job within the NHS.

**Jamie Barrett is Head of Primary Care, NHS Coventry & Warwickshire Integrated Care Board (ICB)**

But what is the ICB, how does it work, and how does that impact our local healthcare services?

Jamie’s route to Head of Primary Care began in 2005 in Public Health, continuing from there in a range of roles in an ever-changing NHS before joining Coventry & Warwickshire ICB in 2023. ‘Health improvement’ and ‘Commissioning’ have featured large within these roles. Jamie explained that commissioning in healthcare is essentially the process of determining what services a community needs, then prioritizing, planning and purchasing those services to get the best possible health outcomes for that community.

So, overall, the ICB exists to contribute to NHS England’s objectives and priorities in our part of the world.\* These include improving health outcomes, achieving best value for money and a reduction in any health inequalities, making health services easier to access and improving patient experience of those services. Jamie’s responsibilities in these areas are achieved through coordination with the 31

GP Practices in South Warwickshire and the 20 Primary Care Networks (PCNs, groupings of GP Practices), across Coventry and Warwickshire

What practical difference does that make for us as patients though?

Well – when it comes to standards of service (‘targets’) which are nationally defined (examples being how quickly you can get a GP appointment, early diagnosis of cancer, identification and treatment of patients with high blood pressure), then the role of the ICB is to ensure that our local NHS is meeting those standards by putting in resource where it is most needed – the resource needed to reach a given number of patients might be very different in say Nuneaton to that needed here in South Warwickshire however.

In other examples the ICB has the flexibility to support development of services which are not ‘one size fits all’. Jamie described his responsibility here as ensuring that Primary Care Networks, including ours, have the data and support they need to invest in new services which make a difference to their particular patient population. That information is also gained from individual patients who in telling their stories help build up a picture of the needs of their whole neighbourhood.

However, Jamie explained that the views of individual patients about how hospital, community or indeed primary care services are delivered can inevitably be at odds with those having to make investment decisions at the county level.

So, what does a typical day look like for Jamie?

It starts by dealing with emails; at the time of writing, those included plans to increase how often patient bloods are collected for testing, a PCN funding initiative to address health inequalities in 2025/2026, finalisation of a governance report, a workforce query, and a patient registration challenge – quite the range!

Other than that, his day consists of meetings – with health and social care partners, with GP Practices and PCNs as needed, checking the progress of various projects, making sure that things are proceeding as planned. Much of that can happen remotely, meaning that he can work with plenty of people on a given day, but inevitably some interactions are more productive when conducted face to face.

Jamie reflected that his greatest satisfaction as a ‘people person’ is that he gets to work with a wide range of people, something he finds very rewarding. Also being able to challenge the status quo and help build new services which work better for patients. However, working with lots of different people across multiple organisations can also be very challenging. Seeking to progress projects as fast as possible whilst trying to manage everyone’s expectations (knowing that it’s impossible to keep everyone happy!), but nevertheless always operating with the end goal in sight – improvement of primary care services for communities across Coventry and Warwickshire – including ours.

*\** The UK government's decision to dissolve NHS England (NHSE) and integrate its functions into the Department of Health and Social Care (DHSC) marks a significant change in how healthcare is structured in England. At a future date it will be interesting to find out how this has affected our local ICB