

HEALTH AND WELLBEING BOARD

15 MARCH 2022

Title:	The Integrated Care System/Local Borough Partnership Proposals And Governance- Position Update	
Report of the Director of Public Health		
Open Report	For Information	
Wards Affected: All	Key Decision: No	
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Lead Officer; Matthew Cole, Director of Public Health		
Summary: This paper is intended to provide a high-level outline of the Integrated Care System (ICS) that is set to be established from July 2022, provide an overview of the current context, provide an update on the current proposal and of any next steps.		
Recommendation(s) The Health and Wellbeing Board is recommended to: 1. Consider the content of the report 2. Note the proposal to establish the B&D Delivery Board as the Place Based Partnership Board; an ICB place committee running alongside the Health & Wellbeing Board. This would be provided with delegated authority to make decisions about NHS service planning and delivery (a final agreement is still to be made with all relevant partners and a final full paper will be brought back to the Health and Wellbeing Board (HWBB) in June).		
Reason(s) A mutual agreement between partners needs to be established providing the final proposal for the governance structure of a place-based partnership for 22/23 onwards as part of the overall NEL ICS.		

1. Introduction and Background

- 1.1 Integrated Care Systems (ICSs) are partnerships that bring together providers, commissioners, local authorities and other local partners within a geographical area to collectively plan health and care services (H&CS) to meet local population need. Whilst they have been operating since 2021 (with some evolving from Sustainability and Transformation Partnerships), it is proposed that in July 2022 ICSs will be established as statutory bodies in all parts of England- subject to the successful passage of a Health and Care Bill through parliament.
- 1.2 Under the proposals, a statutory ICS will be led by two related entities operating at system level, together referred to as the ICS– an ‘Integrated Care Board’ (ICB) and an ‘Integrated Care Partnership’ (ICP). They will bring about changes and have responsibility for the planning, delivery of H&CS. Their core purpose¹ is to integrate care across different organisations and settings, joining up services and leading the following on behalf of their population footprint:
- 1.3 Improve outcomes in population health and healthcare
Tackle inequalities in outcomes, experience, and access
Enhance productivity and value for money
Help the NHS support broader social and economic development
- 1.4 Many of the statutory functions that the ICB has, could be delegated to a place. Discussions are still taking place, however the following are functions that might best be delegated for decision making at place level:
- Commissioning functions
 - Health and care needs planning
 - Market management, planning and delivery
 - Financial control and contracting
 - Monitoring performance (including quality improvement)
 - Communications and engagement with stakeholders
 - Population health management
 - Emergency planning and resilience
- 1.5 As part of development, NHS England and NHS Improvement asked ICSs to confirm their initial proposals for place-based arrangements for 2022/23 onwards. These arrangements should be mutually agreed between system partners and refined as needed to reflect the development of working relationships. They should set out:
- 1.6 Configuration, size and boundaries of the ICS’s places System responsibilities and functions to be carried out at place level Planned governance model, including membership, decision-making arrangements, leadership roles as well as agreed representation on, and reporting relationships with the ICP and ICB.
- 1.7 In addition to the two governing bodies, there will be three other core components of the ICS system: Provider Collaboratives, Place-based Partnerships and Primary Care networks.
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2. Proposal and Issues

- 2.1 The current B&D Delivery Group (DG) will transition towards becoming a place-based partnership board (PBPB) within the NEL ICS. An ICB place committee will be established with delegated authority to make decisions about resources, with terms of references and scope set by the statutory body agreed to by the committee members (and a delegated budget could be set to describe the level of resource available to cover its remit).
- 2.2 The ICB place committee might operate from 1st April 22 in shadow form until the ICS is formally established (currently proposed to be July 2022) and 2022-23 will be a period of testing whilst delegations and financial arrangements are agreed – nationally, regionally and locally.
- 2.3 The place committee would run alongside (as a ‘committee in common’) the London Borough Barking and Dagenham (LBBD) HWBB, whose current role (amongst other relevant strategic functions) is to encourage and support the making of arrangements under Section 75 of the National Health Service Act 2006 for the joint commissioning and provision of health and social care services between relevant bodies. Members at both the ICB place committee and the HWBB would be permitted. There may be decisions which only the committee can make, and in those circumstances, there will be a part A and Part B to the agenda.

3. Consultation

This paper has been taken to the following groups:

- People and Resilience Management Group- Business As Usual
- Corporate Strategy Group
- Leader/Deputy Leader Plus Meeting
- Prevention Independence and Resilience Member Group
- Barking and Dagenham Delivery Group
- Will also be taken to Health Scrutiny Committee

4. Financial Implications

Many unknowns remain about governance/accountabilities and finance in the NHS delivery plan and in due course, further clarity will be being provided for these areas.

5. Legal Implications

- 5.1 During drafting of the discussion paper on the borough partnership proposals and governance, the paper was shared with stakeholders including internal legal and governance officers for comment on implications etc. ahead of being taken through the Councils consultation process (outlined above).
- 5.2 At this stage, it remains difficult for full comment to be passed on any implications of this proposal. However, no immediate problems with the proposal were anticipated.

Public Background Papers Used in the Preparation of the Report:

None

List of Appendices:

Appendix A: ICS BP Proposals and Governance- HWB Presentation- March 22