

HEALTH AND WELL-BEING BOARD
20 JULY 2021**Integrated Care System Development Update**

Board Sponsor

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Lead for Herefordshire and Worcestershire

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Priorities

(Please click below
then on down arrow)

Mental health & well-being

No

Being Active

No

Reducing harm from Alcohol

No

Other (specify below)

Safeguarding

Impact on Safeguarding Children

No

If yes please give details

Impact on Safeguarding Adults

No

If yes please give details

Item for Decision, Consideration or Information

Information and assurance

Recommendation

- 1. The Health and Well-being Board is asked to support the concept of using the Health and Well Being Board as the basis for creating the Integrated Care Partnership, that will be required by the new Integrated Care System legislation that is currently being considered by Parliament.**

Background

2. Since 2015, local authority, NHS, primary care and VCSE partners have been working together in a Sustainability and Transformation Partnership (STP). The Health and Wellbeing Board has previously received reports from the STP.
3. In recent years, national policy has been moving towards formalising STPs into Integrated Care Systems (ICSs). In April 2021, the Herefordshire and Worcestershire STP was formally recognised as an ICS and is now one of 42 in England, coordinating health and care services for their local population.

4. On June 17th 2021, NHS England released a guidance document called “*System Design Framework*”, which is the first of a suite of documents to will be released over the summer to outline the expectations on NHS Bodies in terms of their contribution to the development of Integrated Care Systems.

5. Alongside this, but yet to be published, Department of Health and Social Care is working on complementary guidance to outline the roles that NHS bodies and local authorities will be able to play in working together to develop the new partnership arrangements.

6. On 6th July, the legislation defining how Integrated Care Systems will work in future was presented in Parliament and a second reading of the legislation is anticipated before the summer recess. The current expectation is that Integrated Care Systems will be established in law from 01 April 2022. If the legislation passes as expected, then two new entities will be created:

- A statutory Integrated Care Partnership (ICP)
- A statutory Integrated Care Board (ICB)

7. The ICB will become a statutory NHS Body and will take over the legal duties, functions and responsibilities of NHS Herefordshire and Worcestershire Clinical Commissioning Group, which will be dissolved.

8. This report focuses particularly on the development of the ICP and the potential relationship it could have to the Health and Well Being Board.

Integrated Care System Partnership (ICP)

9. As noted in paragraph 5, guidance for ICPs is being developed by the DHSC, rather than the NHS, which reflects the intention for this to be a jointly owned, shaped and developed partnership.

10. The ICP will be established as a forum (rather than a statutory body) and will be formed on the basis of equal partnership between NHS and local authorities. NHS and local authorities will be asked to jointly agree on the chair, their role, term of office and accountabilities.

11. Membership of the ICP must include the NHS (which could just be the new ICB) and the local authorities that provide social care. Beyond this minimum requirement, membership is for local determination, but is expected to include a wide range of relevant stakeholders who have an interest and role in improving the health and well being of the population and reducing health inequalities.

12. The main responsibility of the ICP is expected to be to “**Approve an Integrated Care Strategy**” for the area. For the purposes of clarity, the area is defined as Herefordshire and Worcestershire, but guidance says that local arrangements will need to align closely to “Place”. The Herefordshire and Worcestershire Integrated Care System has two “Places” – one aligned to the boundaries of Herefordshire Council and the other to Worcestershire County Council.

13. In producing the integrated care strategy, the ICP is expected to facilitate joint action on:

- Improving health and care services
- Influencing the wider determinants of health
- Supporting broader social and economic development

14. The integrated care strategy must draw upon the JSNA and address issues relating to all age population health needs. Public Health experts are expected to play a significant role in the development of this strategy.

15. In some small Integrated Care Systems, there may be an opportunity to fulfil many of the ICP duties through existing HWBB arrangements, rather than creating a new self-standing partnership. Nationally there are some Integrated Care Systems that have 10 or more HWBBs in their area, where it would be logistically more difficult to do this. However, the statutory guidance is likely to be permissive enough to allow it in smaller systems. For example, there are some systems (such as Lincolnshire and Gloucestershire) where there is only one HWBB so there could be absolute alignment.

16. For Herefordshire and Worcestershire discussions continue, in the light of the emerging guidance, to explore the options to create an Integrated Care Partnership Assembly (ICPA). This could involve the functions of the ICP being routinely transacted through the individual HWBBs along with the provision for some form of joint meeting of some members of both Health and Well Being Boards to agree the Integrated Care Strategy for the ICS as a whole.

17. Parallel conversations are happening with members of Herefordshire HWBB, which has provisionally expressed support for the concept.

18. If Worcestershire HWBB also supports the concept then the Integrated Care Strategy could be a composition of two Place-based strategies, which are strongly aligned to Health and Wellbeing strategies. These two place-based strategies could then be supplemented with additional areas where there is common agreement to the additional benefit of working together across the whole system or where there are mandated requirements on NHS bodies to operate across a wider geography.

19. Health and Well Being Board members are asked to support this ongoing dialogue and take account of the issues and implications in the forthcoming HWBB governance review.

Legal, Financial and HR Implications

20. As the ICS legislation is still being considered by Parliament, there are no specific legal, financial or HR implications to consider at this stage.

Privacy Impact Assessment

21. There are no privacy issues to report.

Equality and Diversity Implications

22. There are no specific equality and diversity implications associated with this paper.

Contact Points

County Council Contact Points
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Specific Contact Points for this report

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Supporting Information

- Appendix 1 – Stakeholder summary of the key points from the NHS Guidance
This document provides a high level overview of the wider Integrated Care System development areas

Background Papers

In the opinion of the proper officer (in this case the Director of Public Health) the following are the background papers relating to the subject matter of this report:

- A copy of the legislation presented to parliament can be found at:
<https://publications.parliament.uk/pa/bills/cbill/58-02/0140/210140.pdf>