

NORTH LINCOLNSHIRE COUNCIL

**HEALTH AND WELLBEING
BOARD**

**DEVELOPMENT OF THE INTEGRATED CARE
SYSTEM AND PLACE BASED PARTNERSHIP**

1. OBJECT AND KEY POINTS IN THIS REPORT

- 1.1 To update the Health and Wellbeing Board on current progress of development of the Place based partnership within the developing ICS arrangements.

2. INTRODUCTION

- 2.1 The Health and Wellbeing Board has previously been briefed on the progress on the development of the ICS and the North Lincolnshire NHS Place Partnership and the development for governance arrangements to support this following transfer of statutory functions from CCGs to the NHS Humber Coast and Vale ICS in April 2022.
- 2.2 This report provides an update on the progress to date and includes the output of the self-assessment that has been undertaken to identify areas of strength and further development in the Partnership.
- 2.3 In terms of a general update on progress on development of the ICS, the following areas of work are progressing:
- The designate Chair of the anticipated NHS Integrated Care Board (ICB) and Integrated Care Partnership (ICP) has been announced as Sue Symington. Sue's most recent role is as Chair of York and Scarborough Teaching Hospitals NHS Foundation Trust.
 - The process for appointment of the Chief Executive of the HCV Partnership (ICS) NHS Integrated Care Board (ICB) has been concluded and is awaiting formal sign off by the SoS for Health.
 - The process for appointment of other Executive roles on the Integrated Care Board will shortly commence, to conclude by the end of December.
 - The confirmation of other staff in post will proceed following these appointments in accordance with the principles of Transfer of Undertakings (Protection of Employment) Regulations (known as TUPE) and the Cabinet Office Statement of Practice (COSOP).
 - The Health and Care Bill is progressing through the House of Commons and House of Lords to achieve Royal Assent by April 22 to enable formal establishment of the ICS by April 22.
- 2.4 Work is continuing to develop the architecture for the ICS as identified below:
- **Integrated Care Partnership: ICP (Statutory)**
Broad engagement across all partners in order to develop the strategy, jointly convened by the ICB & LAs.

- **Integrated Care Board: ICB (Statutory)**
Accountable for NHS spend, decision making and system performance.
 - **Place-Based Partnerships: PBPs (Non-Statutory)**
Integration of care working with partners to tackle the determinants of ill health and address inequalities.
 - **Provider Collaboratives (Non-Statutory)**
At place, ICS level and across ICS's.
- 2.5 This includes the work to ensure that the relevant transfer of responsibilities and statutory duties to the ICS will be completed by April 22 including:
- Transfer of all CCG staff, assets and liabilities (including commissioning responsibilities and contracts).
 - Transfer of duties regarding health inequalities, quality, safeguarding, children in care and children and young people with special educational needs and (SEN) or disability.
- 2.6 The ICS Constitution and scheme of reservation and delegation and standing orders/financial rules will identify how these functions will be discharged across the ICS including within Place.
- 2.7 CCG close-down and ICS / ICB readiness to operate preparations have commenced to include the safe close down of CCGs and transfer of responsibilities and in tandem readiness to operate arrangements for the ICS/ICB through a Transition Programme.
- 2.8 The Health and Wellbeing Board has recommended the arrangement for the discharge of these responsibilities through the establishment of a Committee of the ICB. Terms of Reference for this Committee have been developed and approved through the CCG Governing Body. This will be formally approved through the Constitution of the ICB. It is intended that we move in to shadow operation of the Committee – the North Lincolnshire Place Based Partnership (ICS) from November 2021.
- 2.9 In North Lincolnshire we are building from a position of strength as there is already a history of strong partnerships, collaboration and joint working between partners in the North Lincolnshire Place.
- 2.10 Established governance in Place includes a Committee in Common, Integrated Adult Partnership, Integrated Children's Partnership and Integrated Commissioning and Quality Executive, in addition to the statutory responsibilities of the Health and Wellbeing Board, Local Safeguarding Adults Board, Local Multi Agency Resilience and Safeguarding Children's Board and Community Safety Partnership. These arrangements will be reviewed to support the Partnership
- 2.11 We have agreed and recently refreshed our Health and Care Plan for North Lincolnshire & Joint Commissioning Plans for Adults & Children and Young People. A refreshed Joint Strategic Needs Assessment and Joint Health and Wellbeing Strategy will also inform the NHS ICS Plans. It is anticipated that these arrangements will therefore support the continued delivery of Partnership Strategy and objectives.
- 2.12 A baseline self-assessment for the developing ICS/NHS Place Partnership has been undertaken for North Lincolnshire with engagement with stakeholders and HWBB involvement.
- 2.13 The baseline assessment and key outcomes against a range of parameters such as our vision, place plans, leadership, citizen engagement, data and intelligence, organisation development, culture, governance, quality and finance is attached below.

North Lincolnshire – Self Assessment

- Initial baseline assessment has been undertaken supported by Health and Wellbeing Board workshop and has been reviewed and contributed to by partners and will go back to the Health and Wellbeing Board on 1st November.
- Describes a developing Place with strong partnerships, open and transparent culture and shared values, with good joint working, established vision and plans good clinical engagement and good example of citizen engagement.
- Areas for further development:
 - Combined approach to citizen engagement across the partnership and application across neighbourhood
 - Shared approach business intelligence and development of population health approaches
 - Shared approach and plans for workforce across the system
 - Opportunities for shared infrastructure
 - Opportunities for shared management risk, financial plans and pooled budgets
 - Single approach to quality improvement

Domains	Emerging	Developing	Maturing	Thriving
Ambition & Vision				
System Leadership				
Design & Delivery				



This has been used to inform a more detailed development plan for the Place which will be considered through the NL Place Partnership through its inaugural meeting.

3. NEXT STEPS

- 3.1 Plans are in place to establish the NL Place Partnership operating in shadow form from November. The development plan presented here will be taken for consideration at the inaugural meeting of the Partnership.
- 3.2 It is anticipated that arrangements for Place based arrangements as part of the ICS developments will then be tested between October and March 2022 ahead of the changes to statutory organisations coming in to play in April 2022.

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2. OPTIONS FOR CONSIDERATION

Update to Health and Wellbeing Board

3. ANALYSIS OF OPTIONS

Not applicable

4. FINANCIAL AND OTHER RESOURCE IMPLICATIONS (e.g. LEGAL, HR, PROPERTY, IT, COMMUNICATIONS etc.)

Not applicable

5. OTHER RELEVANT IMPLICATIONS (e.g. CRIME AND DISORDER, EQUALITIES, COUNCIL PLAN, ENVIRONMENTAL, RISK etc.)

Not applicable

6. OUTCOMES OF INTEGRATED IMPACT ASSESSMENT (IF APPLICABLE)

Not applicable

7. OUTCOMES OF CONSULTATION AND CONFLICTS OF INTERESTS DECLARED

Not applicable

8. RECOMMENDATIONS

The Health and Wellbeing Board are asked to note the update

Background Papers used in the preparation of this report:

None