



Committee and Date

Cabinet
19th October 2022

Item

Public

NHS STW Governance Arrangements

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1. Synopsis

This report provides an overview of NHS governance changes establishing an Integrated Care System in Shropshire, Telford and Wrekin and seeks endorsement for the governance arrangements relating to the Integrated Care Partnerships.

2. Executive Summary

- 2.1 The Health and Care Act 2022 introduced statutory Integrated Care Systems ("ICS") from 1 July 2022. A statutory ICS comprises an Integrated Care Partnership ("ICP") and Integrated Care Board ("ICB"). ICBs replaced Clinical Commissioning Groups in the NHS and cover the whole of England. ICPs are joint committees including members of the local ICB and local authorities.
- 2.2 This report makes recommendations as to the steps Shropshire Council is required to take with regard to the ICS.

3. Recommendations

That Cabinet:

- 3.1 Endorse the nomination of Chief Executive of Shropshire Council as a voting member of the ICB.
- 3.2 Note that the Leader (or Cabinet Lead as Deputy) will be invited to ICB meetings as a non-voting participant member of the ICB.
- 3.3 Agree to the establishment of a joint committee known as the Shropshire, Telford and Wrekin Integrated Care Partnership and approve the Terms of Reference as set out in Appendix 1 to this Report.

Agree to the appointment of the Leader as the Co-chair and voting member of the ICP representing Shropshire Council.

3.4 Agree to the appointment of the Cabinet Lead as a voting member of the ICP representing Shropshire Council.

3.5 Notes that the interim ICP Terms of Reference currently provide that the ICP will appoint the following additional members from Shropshire Council as members of the ICP:

- Chief Executive of Shropshire Council
- Executive Director of Public Health for Shropshire
- Executive Director of Children's and Adult's Services for Shropshire
- Chair of the Health and Wellbeing Board for Shropshire.

REPORT

4 Risk Assessment and Opportunities Appraisal

4.1 Being a member of the ICB and the ICP provides the council with the opportunity to be involved in and inform the design, planning, commissioning and delivery of integrated health and care services in Shropshire.

4.2 The council will be best placed to realise the opportunities presented by the move to these new arrangements by having the right representation at the different levels of the ICS governance, and for those representatives to be supported and enabled in their roles. The same preparedness will also help to mitigate, tolerate or eradicate any risks that are identified through the course of service design and decision making.

5 Financial Implications

5.1 This paper does not include any direct plans or proposals that will have financial implications for the Council. However, it should be noted that the long term aims and outcomes of the ICS may have financial implications which will be brought to the agreed appropriate decision making forum and made explicit in that way.

6 Climate Change Appraisal

6.1 This paper does not include any specific proposals, policies or plans that will directly have impacts on the climate.

- 6.2 The ICS carry out Integrated Impact Assessments (IAAs) that include considering the impact of decisions on climate change as well as wider societal issues such as social inclusion and inequalities. These impact assessments should also provide recommendations on ways in which positive impacts can be maximised and ways in which to mitigate, or minimise, any adverse effects.

7 Background

Integrated Care Systems

8. An Integrated Care System (“ICS”) is an umbrella term for a partnership of health and care organisations that come together to plan and deliver joined up health and care services, and to improve the lives of people who live and work in their area. They were introduced in our area (and in 41 other locations across England) from 1 July 2022 under the Health and Care Act 2022
9. An ICS includes an Integrated Care Board (“ICB”) and an Integrated Care Partnership (“ICP”). ICBs replaced Clinical Commissioning Groups in the NHS from 1 July 2022, and cover the whole of England. ICPs are joint committees including members of the local ICB and local authorities.
10. The ICB was established by an order made by NHS England from 1 July 2022.
11. An ICP can determine its own procedure including a quorum. The ICP Terms of Reference are shown at Appendix 1.

The Council’s obligations

12. The Council is obliged to establish an Integrated Care Partnership with the ICB by section 116ZA(1) of the Local Government and Public Involvement in Health Act 2007 (introduced from 1 July 2022 by the Health and Care Act 2022). Therefore, there is no alternative option other than to establish an ICP.
13. The Council must appoint a member to the ICP (section 116ZA(2)). The Council has discretion as to who this is. It is suggested for Shropshire that this would be the Leader due to the significance of

the health and social care system to the communities of Shropshire and Shropshire Council. The Council has been working with the relevant stakeholders and the Terms of Reference provide for the ICP to appoint additional Council representatives as specified at paragraph 3.6 of this Report.

14. The Council must nominate an ordinary (or 'partner') voting member of the ICB jointly with Telford and Wrekin (section 14Z25 and schedule 1B paragraph 8(2)(c) of the National Health Service Act 2006). A link to the ICB's constitution is shown at paragraph 7.17. This provides that the Council and Telford and Wrekin should be invited to make two nominations per vacant role. Under this process the Chief Executive has been duly appointed.
15. In addition, the ICB constitution provides for the Council's Leader to be invited to ICB meetings as a Regular Participant of the ICB under paragraph 2.3 of the Constitution. This is a non-voting role.
16. The relevant functions are executive and this is a key decision, to be endorsed by Cabinet.

The Shropshire, Telford and Wrekin ICS

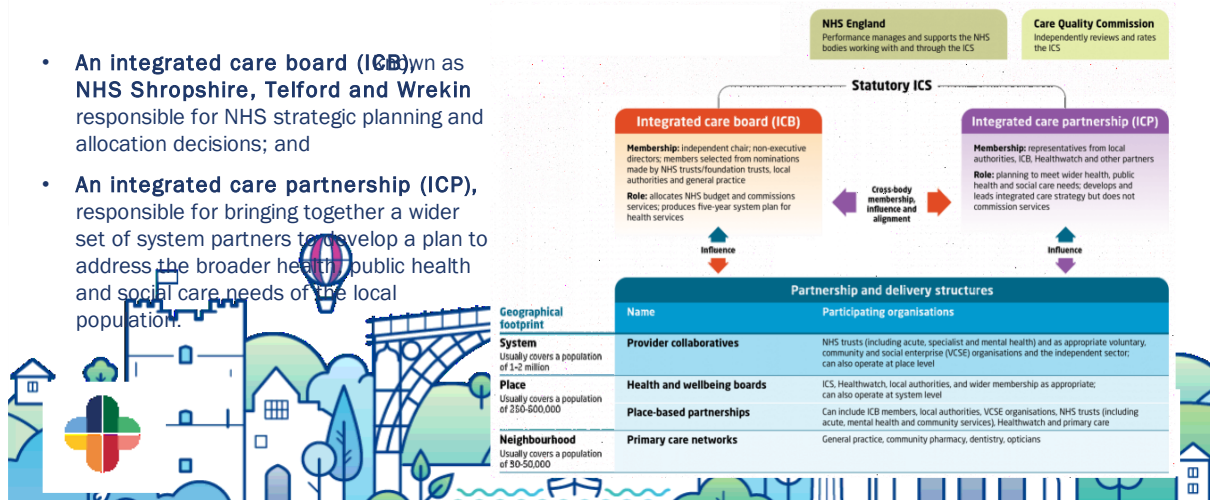
17. In Shropshire, Telford and Wrekin, the ICS is a partnership involving the local NHS, Local Government organisations, the third sector and other relevant bodies with an active interest in the health, care and wellbeing of the residents of the Shropshire, Telford and Wrekin. Together they will collaborate to address health and care inequalities, enhance integrated working, ensure optimal use of available resources and contribute to broader societal priorities.
18. The ICS footprint covers a population of around half a million people, over a total area of 3,487km². By 2043 there will be an estimated 0.6 million people in Shropshire, Telford, & Wrekin. It is structured in the following way using specific and consistent terminology:
 - **"System"** – this covers the whole population of an ICS, for NHS STW this is the whole of Shropshire, Telford & Wrekin.

- **“Place”** – this is broken down into different localities within the system. There are two defined and agreed “Places” within STW – Telford & Wrekin Integrated Place Partnership (TWIPP) and Shropshire Integrated Place Partnership (ShIPP). Both are co-terminus with the two Local Authority Boundaries
 - **“Neighbourhoods”** – this footprint covers the communities within each Place. There are 8 neighbourhoods, with 4 in each Place. These neighbourhoods include communities such as Ludlow, Shrewsbury and Whitchurch
19. The four key aims of any ICS, including Shropshire’s, are to:
- improve quality of services and 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.
20. Collaborating as partners in an ICS is designed to help health and care organisations tackle complex challenges, including:
- improving the health of children and young people
 - supporting people to stay well and independent
 - acting sooner to help those with preventable conditions
 - supporting those with long-term conditions or mental health issues
 - caring for those with multiple needs as populations age
 - getting the best from collective resources so people get care as quickly as possible.
21. The full Constitution of the NHS STW (which is a standard NHS constitution) can be found using this link [Our Constitution - NHS Shropshire, Telford and Wrekin \(shropshiretelfordandwrekin.nhs.uk\)](https://www.shropshiretelfordandwrekin.nhs.uk/our-constitution)
22. The following diagrams shows the way in which the ICS has been organised together with its governance arrangements:

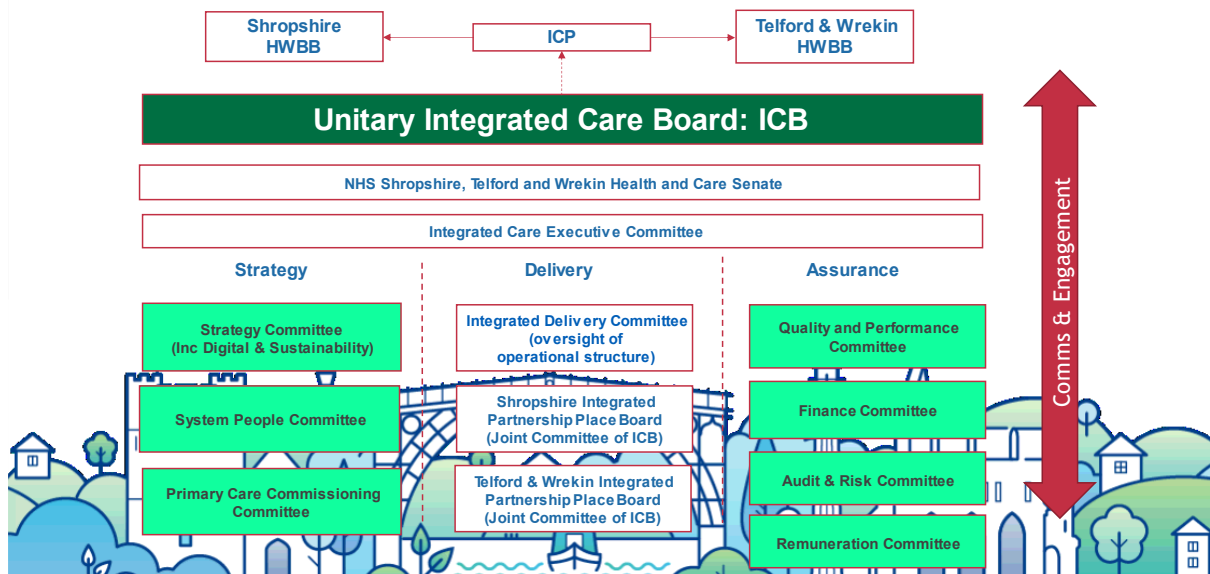
What the new system looks like

Two-part statutory integrated care systems (ICSs) comprised of:

- An **integrated care board (ICB)**, known as **NHS Shropshire, Telford and Wrekin** responsible for NHS strategic planning and allocation decisions; and
- An **integrated care partnership (ICP)**, responsible for bringing together a wider set of system partners to develop a plan to address the broader health, public health and social care needs of the local population.



Our ICB Governance



23. This report is primarily concerned with the most significant aspects of the ICS which have been established at this stage. The intention is to provide an overview of the arrangements as context while seeking specific endorsement of the governance arrangements for the ICP.
24. The role of the NHS STW is to produce a five-year plan regarding meeting the health and healthcare needs of the population. It allocates resources to deliver this plan, establishes joint working arrangements to embed collaboration in the plan, establish governance arrangements to support collective accountability and drive joint working. It has effectively taken on the functions of the

former CCGs and has delegated responsibility for certain health services such as dental, general ophthalmic and pharmaceutical services

25. A non-legally binding Memorandum of Understanding has been entered into by the NHS STW and NHS Midlands region, on behalf of NHS England (NHSE). This sets out (amongst other things):
 - the principles that underpin how the NHS STW and NHSE will work together to discharge their duties to ensure that people across the system have access to high quality, equitable health, and care services
 - the delivery and governance arrangements across the NHS STW and its partner organisations
26. NHSE remains statutorily responsible for NHS performance with ICBs accountable for the oversight of NHS performance.
27. Sitting alongside the ICB is the ICP which is a statutory joint committee of the NHS STW and the two local authorities. It will provide a public forum for leaders from the two local authorities, health and stakeholders from across the health and social care system (including the voluntary and community sector) to develop an Integrated Care Strategy for the whole population using the best available evidence and data, covering health and social care and addressing health inequalities and wider determinants.
28. The ICP will ensure that an Integrated Care Strategy is developed that is evidence based, focused on local needs at a "Place" and "Neighbourhood" level informed by the Health and Wellbeing Strategies created by the two Health and Wellbeing Boards of Shropshire and Telford & Wrekin, which are in turn informed by Joint Strategic Needs Assessments.
29. The Strategy's priorities should be focused on improving the public's health and wellbeing and reducing health inequalities. It will explain how it is intended to address needs within the ICS through commissioning and the provision of quality services by its statutory organisations. Critically it should complement the local HWB Strategies and consider where needs are best addressed at an ICS level. Guidance on the strategy is in Appendix 2. Initially an "interim" Strategy needs to be produced by December but the intention is to then to update it following wider engagement.

30. The ICP will ensure that the Integrated Care Strategy is developed, focused on local needs at a place and neighbourhood level and informed by the Health and Wellbeing Strategies created by the two Health and Wellbeing Boards (HWBB) of Shropshire and Telford & Wrekin. Whilst ensuring that the Integrated Care Strategy is focused on local needs, the ICP will seek commitment from the ICS to work collaboratively across partners and other ICSs to deliver wider social and economic opportunities and benefits for residents and patients at a local level across the health and care system. The ICP will support the work of the HWBBs and Place boards across Shropshire and Telford & Wrekin and Take account of the Health and Wellbeing Strategies and health inequality strategies created by the HWBBs.
31. As can be seen from the diagram above the Shropshire Integrated Place Partnership ("ShIPP") is a committee of NHS STW. Partners on the ShIPP are expected to collaborate in the arrangement and delivery of health and care services in the community in accordance with the outcomes set by the ICS. Where possible service integration options will be considered and health and social inequalities addressed.

ICP procedures

32. The ICP will meet three times in its first year of operation and then decide on the frequency of meetings in subsequent years. It be co-chaired by the Leader/Cabinet Member of the Telford & Wrekin Council and the Leader of Shropshire Council with the role of Chair alternating after each meeting. Where the nominated Chair is unable to attend a meeting, the attending Vice Chair will act as Chair for that meeting.
33. Telford and Wrekin Council and Shropshire Council will be responsible, on an alternate basis, for producing the agenda and preparing minutes of each meeting. Members of the ICP may vote to exclude press and public at any point during a meeting so that consideration may be given to an item or items that may involve the disclosure of confidential or exempt information.
34. The ICS including NHS STW and the two local authorities will be required to take account of the ICP's strategy when making decisions, commissioning and delivering services.

35. The terms of reference for the ICP (attached as Appendix 1) were approved by NHS STW at its meeting on 27 July 2022. They have also been adopted in principle by the ICP at its inaugural meeting on 5th October 2022.

36. To be quorate the ICP must have representatives in attendance from both local authorities and NHS STW. All members are entitled to an equal vote in matters under consideration which will generally be determined by a majority vote. However, should the decision relate to the exercise of one or more of NHS STW and/or either local authority's statutory functions, a dispute resolution procedure (attached at Appendix 3) has been incorporated into the procedure if consensus can't be reached in the meeting.

List of Background Papers (This MUST be completed for all reports, but does not include items containing exempt or confidential information)

Cabinet Member (Portfolio Holder)

Leader Councillor Lezley Picton

Portfolio Holder – Health (Integrated Care System) and Communities

Local Member

All Members

Appendices

Appendix 1: Terms of Reference for the Integrated Care Partnership

Appendix 2: ICS Strategy Overview

Appendix 3: ICP Dispute resolution process