

## Decision Pathway – Report Template



**PURPOSE:** Key decision

**MEETING:** Cabinet

**DATE:** 06 September 2022

<b>TITLE</b>	<b>Bristol, North Somerset and South Gloucestershire Integrated Care System: Integrated Care Board Constitution and Integrated Care Partnership Terms of Reference</b>	
<b>Ward(s)</b>	Citywide	
<b>Author:</b> Nikki Knowles	<b>Job title:</b> Policy and Public Affairs Manger	
<b>Cabinet lead:</b> Cllr Helen Holland, Cabinet Member with responsibility for Adult Social Care and Integrated Care System	<b>Executive Director lead:</b> Hugh Evans, Executive Director of Adult Social Care	
<b>Proposal origin:</b> BCC Staff		
<b>Decision maker:</b> Cabinet Member <b>Decision forum:</b> Cabinet		
<b>Purpose of Report:</b>		
<ol style="list-style-type: none"> <li>1. To seek Cabinet approval for the Integrated Care Partnership Terms of Reference and note the Cabinet Member with responsibility for Adult Social Care and Integrated Care System (and as Chair of the Bristol Health and Wellbeing Board) has been nominated as Bristol City Council’s representative on the Integrated Care Partnership Board.</li> <li>2. That Cabinet notes the Integrated Care Board constitution and the nomination of the Chief Executive as Bristol City Council’s representative on Integrated Care Board.</li> </ol>		
<b>Evidence Base:</b>		
<ol style="list-style-type: none"> <li>1. In June 2022 the Health and Care Act 2022 was passed. This creates the mechanism for establishing Integrated Care Systems (ICSs) as statutory bodies and to remove legal barriers to integrated care for patients and communities and enable integration and collaboration between the NHS and Local Government.</li> <li>2. ICSs present an opportunity to strengthen and continue our partnership working to deliver joined-up support that meets people’s needs. This will enable us to deliver the shared BNSSG ambition to tackle health inequalities, help communities thrive and achieve the very best for everyone. ICSs also present an opportunity to invest in community health and preventative measures and ensure that the NHS and social care have a sustainable foundation for the long term.</li> <li>3. In the lead-up to the establishment of Integrated Care Systems, the Bristol, North Somerset, and South Gloucestershire (BNSSG) Sustainability Transformation Partnership (STP), Healthier Together, was designated a ‘maturing ICS’: the penultimate stage of the journey towards becoming an ICS. In 2021, BNSSG Healthier Together implemented a Memorandum of Understanding (MOU) for the BNSSG ICS, which set out transitional arrangements, partnership arrangements, and the shared principles and values that will underpin the BNSSG ICS.</li> <li>4. Bristol City Council worked closely with BNSSG Health Partners and Local Authority Partners to</li> </ol>		

influence the design of the MOU to ensure that Local Authorities are well represented, have parity in decision-making over the issues that matter to them, in keeping with their leadership on areas such as population health, social care, and inequalities. The MOU was approved by all partners, including BCC Cabinet on the 14 December 2021.

5. The main parts of the new integrated Care System are as follows:
  - a) **The Integrated Care Board (ICB)** is the new organisation responsible for the day-to-day running of the NHS, and for overseeing the health and care system. The NHS Bristol, North Somerset and South Gloucestershire ICB takes account of population needs, arranges for the provision of services, and manages the NHS budget. The ICB has several roles that are mandated through legislation: the Chair, Chief Executive, Chief Nursing Officer, Chief Medical Officer, and Chief Finance Officer.
  - b) The BNSSG ICB also has five independent non-executive members, as well as senior representatives from all the Healthier Together partner organisations, and representatives from Healthwatch and the OneCare GP Federation. Bristol City Council's representative on the ICB is the Chief Executive Officer.
  - c) The ICB features several sub-committees, upon which BCC and other participants will sit.
  - d) The **Integrated Care Partnership (ICP)** comprises a range of partners including from the local voluntary sector and community groups. It will set the strategy to meet the population's health, care, and wellbeing needs.
  - e) The Health and Care Act 2022 amends the Local Government and Public Involvement in Health Act 2007, and requires integrated care partnerships to write an integrated care strategy to set out how the assessed needs (from the joint strategic needs assessments, see glossary in annex B) can be met through the exercise of the functions of the integrated care board, partner local authorities or NHS England (NHSE).
  - f) The Integrated Care Strategy should set the direction of the integrated care system, setting out how commissioners in the NHS and local authorities, working with providers and other partners, can deliver more joined-up, preventative, and person-centred care for their whole population, across the course of their life.
  - g) The draft Integrated Care Strategy will be brought to BCC Cabinet later in the year for approval.
  - h) The ICP is jointly chaired on a rotating basis by the chairs of the three Health and Wellbeing Boards. The chair for the first year is the Health and Wellbeing Board chair for North Somerset. Bristol's Health and Wellbeing Board chair will assume the role in year two.
  - i) The ICP membership will total 28 places. It will include representatives from each ICS Partnership organisation and each of the six Locality Partnerships. A Director of Public Health, Director of Children Services and Director for Adult Social Care from each Locality Authority will sit on the ICP on a rotating basis.
  - j) Membership will also include community and voluntary sector representatives and Healthwatch
6. As noted, **Health and Wellbeing Boards** are very important in the structure of the Integrated Care System. Bristol's Health and Wellbeing Board will still fulfil its statutory responsibilities for the BCC area, including for population health and Joint Strategic Needs Assessment. The work of Bristol's Health and Wellbeing Boards will feed into the broader strategic work of the ICP and ensure that important Bristol-specific considerations are prioritised.
7. The final components of the Integrated Care System are **Locality Partnerships**. There are six of these in the BNSSG area, three of which are in Bristol: South; Inner City and Central (ICE); North and West. The Delivery Directors of the Locality Partnerships sit on the Health and Wellbeing Board to ensure that there is join-up across every level of the BNSSG Integrated Care System.
8. The terms of the ICB constitution are predominantly set by statutory guidance, and were formally adopted at the first meeting of the ICB on 1<sup>st</sup> September 2022. Cabinet is asked to note

this document.

9. The Integrated Care Partnership draft terms of reference build upon the ICB constitution and the ICS Memorandum of Understanding. Cabinet is asked to approve the draft document with a view to it being adopted at the meeting of the ICP on 15<sup>th</sup> September 2022, and to delegate authority to the Chief Executive to agree any minor amendments needed to the TOR as the ICP develops over its first year.

#### **Cabinet Member / Officer Recommendations:**

That Cabinet:

1. Approves the Integrated Care Partnership Terms of Reference and notes that the Cabinet Member with responsibility for Adult Social Care and Integrated Care System (who is chair of the Bristol Health and Wellbeing Board) has been nominated as Bristol City Council's representative on the Integrated Care Partnership Board.
2. Notes the Integrated Care Board constitution and the nomination of Bristol City Council Chief Executive as Bristol City Council's representative on Integrated Care Board.
3. Authorises the Chief Executive, in consultation with the Cabinet Member with responsibility for Adult Social Care and Integrated Care System to agree minor amendments to the Terms of reference.

#### **Corporate Strategy alignment:**

Both the Integrated Care Board constitution and Integrated Care Partnership terms of reference support the commitment of Bristol's Corporate Strategy to work in partnership to improve health and reduce the gap in health inequality in the City.

#### **City Benefits:**

1. The City of Bristol's population represents just under 50% of the whole population of the Integrated Care System, is the more diverse population within the Integrated Care System area and has the highest level of health inequality within the Integrated Care System area accordingly, it is critical we meaningfully engage and support the development of the ICB and ICP to ensure Bristol's health needs are addressed, the diversity of Bristol is recognised and planned for when designing and commissioning health services and deliver improved health and care services for Bristol Citizens.
2. Active participation by Bristol City Council in the Bristol, North Somerset and South Gloucestershire Integrated Care System will ensure that the diverse health needs and inequalities of the Bristol population are fully represented and addressed.

#### **Consultation Details:**

14<sup>th</sup> December 2021 Cabinet ratified the Bristol, North Somerset, and South Gloucestershire Integrated Care System Transitional Memorandum of Understanding

#### **Background Documents:**

1. [14<sup>th</sup> December 2021 Cabinet paper Memorandum of Understanding \(October 2021 to March 2022\) for the Integrated Care System of Bristol, North Somerset and South Gloucestershire](#)
2. [Healthier Together - Memorandum of Understanding February 2022](#)

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<b>Revenue Cost</b>	£ N/A	<b>Source of Revenue Funding</b>	N/A
<b>Capital Cost</b>	£ N/A	<b>Source of Capital Funding</b>	N/A
<b>One off cost</b> <input type="checkbox"/>	<b>Ongoing cost</b> <input type="checkbox"/>	<b>Saving Proposal</b> <input type="checkbox"/>	<b>Income generation proposal</b> <input type="checkbox"/>

**Required information to be completed by Financial/Legal/ICT/ HR partners:**

**1. Finance Advice:** There are no direct financial implications arising from this report. As the ICP Terms of Reference set out “The ICP has no statutory delegated authority. It is a committee jointly established by the founding members. It is incorporated only via this Terms of Reference; it holds no financial accounts and cannot directly employ any staff”. Normal Bristol City Council governance and decision pathways will continue to be followed if there are any future proposals with financial or other implications.

**Finance Business Partner:** Denise Hunt 12 August 2022

**2. Legal Advice:** There are no direct legal implications in this report. The ICB constitution complies with Statutory guidance. The TOR has been agreed by all Partners and will assist the Authority to work with partners to deliver services across the BNSSG area. The process for nominations for the Local Authority members has been complied with. The ICP is developing a strategy in line with the statutory duty to do so which will be reported to Cabinet for approval later in the year

**Legal Team Leader:** Nancy Rollason, Head of Legal Services 26 August 2022

**3. Implications on IT:** There are no direct IT implications in this report and IT colleagues are engaged in the Healthier Together Digital Delivery Board. The principle of safe and appropriate sharing of data and information outlined at 2.10 of the Terms of Reference is welcomed, but decision makers should note that the delivery of this in practice could incur significant opportunity cost or direct financial costs establishing any digital system integrations and/or ensuring compatibility and compliance with the Council’s Integrated Data Analytics Platform and methodology in future.

**IT Team Leader:** Tim Borrett, Director: Policy, Strategy and Digital, 11 August 2022

**4. HR Advice:** The report is seeking Cabinet approval for the Integrated Care Partnership Terms of Reference and to note the nominations of Bristol City Councils representatives. There are no significant HR implications arising from these requests.

**HR Partner:** Lorna Laing, People Business Partner, 11 August 2022

<b>EDM Sign-off</b>	Hugh Evans, Executive Director of Adult Social Care	17/08/22
<b>Cabinet Member sign-off</b>	Cllr Helen Holland, Cabinet Member with responsibility for Adult Social Care and Integrated Care System	22/08/22
<b>For Key Decisions - Mayor’s Office sign-off</b>	Mayor’s Office	08/08/22

<b>Appendix A – Further essential background / detail on the proposal</b> A1. Final Integrated Care Board constitution A2. Draft Integrated Care Partnership Terms of Reference	<b>YES</b>
<b>Appendix B – Details of consultation carried out - internal and external</b>	<b>NO</b>
<b>Appendix C – Summary of any engagement with scrutiny</b>	<b>NO</b>
<b>Appendix D – Risk assessment</b>	<b>NO</b>
<b>Appendix E – Equalities screening / impact assessment of proposal</b>	<b>NO</b>
<b>Appendix F – Eco-impact screening/ impact assessment of proposal</b>	<b>NO</b>

<b>Appendix G – Financial Advice</b>	<b>NO</b>
<b>Appendix H – Legal Advice</b>	<b>NO</b>
<b>Appendix I – Exempt Information</b>	<b>NO</b>
<b>Appendix J – HR advice</b>	<b>NO</b>
<b>Appendix K – ICT</b>	<b>NO</b>
<b>Appendix L – Procurement</b>	<b>NO</b>