

Bath & North East Somerset Council

MEETING/ DECISION MAKER:	Cabinet	
MEETING DATE:	14 July 2022	EXECUTIVE FORWARD PLAN REFERENCE:
		E 3379
TITLE:	Health & Social Care - New Governance Arrangements	
WARD:	All	
AN OPEN PUBLIC ITEM/		
List of attachments to this report: Please list all the appendices here, clearly indicating any which are exempt and the reasons for exemption Appendix 1: Diagram outlining new arrangements		

1 THE ISSUE

- 1.1 The Health and Care Act 2022 ('the Act') has passed through the Parliamentary process. The Act creates the Integrated Care System (ICS) which has been established to ensure better integration between Health and Social care with the aim being to improve the health and wellbeing of our communities across Bath & North East Somerset.
- 1.2 The ICS operates on the established NHS governance footprint – Bath, Swindon & Wiltshire (BSW).
- 1.3 The ICS has 2 key components:
 - Integrated Care Board (ICB) to manage commissioning of NHS services
 - Integrated Care Partnership (ICP) is responsible for developing integrated strategies for the whole BSW population, covering health and social care to address the wider determinants of health and wellbeing.
- 1.4 A local delivery mechanism – the Integrated Care Alliance (ICA) will then operate on a Bath & North East Somerset level.
- 1.5 This report outlines the proposed representation on each board and seeks Cabinet's endorsement of the arrangements.

2 RECOMMENDATION

The Cabinet is asked to;

- 2.1 Agree for the Council to participate in the Integrated Care System (ICS) for Bath, Swindon & Wiltshire and ensure appropriate representation on the various committees which make up the ICS.
- 2.2 Request the Leader of the Council to make the appropriate nominations for councillors to sit on the committees making up the ICS.
- 2.3 Authorise the Chief Executive Officer to nominate Officers (including himself) to:
 - (1) Sit on the Integrated Care Board and to represent the Council on said Board including the making of decisions that require financial expenditure on the part of the Council provided such expenditure is within budgets agreed by Full Council; and
 - (2) Sit on the sub-committee of the Integrated Care Board established to make placed-based decisions as may be required to ensure that the Council is appropriately and fully represented in accordance with the constitutional documents of said sub-committee.
- 2.4 Agree that overall governance arrangements set out in Appendix 1.

3 THE REPORT

Integrated Care Board (ICB)

- 3.1 Integrated Care Boards will be introduced by the Act as of 1 July 2022 and will replace the current Clinical Commissioning Groups ('CCG's'). ICBs will be responsible for commissioning health and primary care services in the same way as CCGs are currently plus some additional areas currently reserved to NHS England.
- 3.2 The local ICB for Bath & North East Somerset will also cover the local authority areas of Wiltshire and Swindon.
- 3.3 ICBs form part of the new Integrated Care System ('ICS') which, it is hoped, will further empower local commissioning bodies to commission goods and services that are most relevant to their areas of operation.
- 3.4 In accordance with Schedule 2 of the Act, the ICB must contain at least one local authority representative. The Act sets out that this representative will represent all local authorities within the ICB's geographic area. These are however minimum requirements and it has been suggested by the current CCG (who are responsible for implementing the new constitutional arrangements for the ICB) that each of the three local authorities would be permitted to nominate a representative to sit on the ICB. The three local authorities have provisionally agreed, subject to Cabinet approval, to nominate their Chief Executive's to sit on the ICB.

Integrated Care Partnership (ICP)

3.5 Discussions are still at a very early stage. A steering group comprising the Chair and Chief Executive of the ICS and the Leaders and Chief Executives of the three local authorities has met once to begin scoping the work of the ICP. It will therefore take some time before a formal meeting of the ICP takes place.

Local Sub-committee of the Integrated Care Board (Integrated Care Alliance – ICA)

3.6 To support the empowerment of local communities, the new ICS would also call for a 'placed-based board' to be established. Such a board will be established for each of the local authority areas within an ICB's geographical area. As such, there will be a specific board for Bath & North East Somerset.

3.7 Schedule 2 of the Act allows for the ICB to create sub-committees and allows for those sub-committees to be made up of non-ICB members.

3.8 The purpose of the sub-committee is to set the local strategy and provide oversight to a further board that will be tasked with delivering the agreed strategy.

3.9 At this stage we are working on agreeing the terms of reference for the ICA.

4 STATUTORY CONSIDERATIONS

4.1 The statutory framework for the new arrangements is the 2022 Health & Care Act

5 RESOURCE IMPLICATIONS (FINANCE, PROPERTY, PEOPLE)

Financial and Procurement Implications

5.1 There would be a requirement for amendments to existing budgets to allow for the section 75 fund and any aligned fund.

Legal and Human Rights Implications

5.2 The creation of the ICB is a statutory requirement.

5.3 The creation of the sub-committee is lawful and the Council is permitted to sit on it as a member.

5.4 There are no human rights implications foreseen.

6 RISK MANAGEMENT

6.1 A risk assessment related to the issue and recommendations has been undertaken, in compliance with the Council's decision making risk management guidance.

6.2 There are no specific risks that are not addressed in this report.

7 EQUALITIES

7.1 A Diversity Impact Assessment (DIA) will be completed once the new arrangements are in place and we have a better understanding of the implications.

8 CLIMATE CHANGE

8.1 Officers do not expect any effect on the Council's carbon footprint.

9 OTHER OPTIONS CONSIDERED

9.1 There is a statutory requirement for at least one representative from a local authority to sit on the ICB as such there are no realistic alternative options to option 2.1.1.

9.2 In regards to recommendation 2.1.2, Cabinet could ask Officers to explore whether the sub-committee could sit as some form of joint committee or committee of the Council. This has been explored by Officer's already and they are satisfied that, at least whilst the new ICS way of working is in its infancy, the proposal before Cabinet represents the most effective way of progressing.

10 CONSULTATION

10.1 The following cabinet members and officers have been consulted as part of the preparation of the report:

- Council Leader
- Cabinet Member for Adult Services
- Chief Operating Officer
- Chief Financial Officer
- Monitoring Officer

Contact person	Will Godfrey, Chief Executive, 01225 477400
Background papers	The Health and Care Act 2022 (available here)
Please contact the report author if you need to access this report in an alternative format	

Appendix 1: Outline Governance Arrangements

