



Open Report on behalf of Glen Garrod, Executive Director – Adult Care and Community Wellbeing

Report to:	Executive
Date:	05 July 2022
Subject:	For Lincolnshire County Council to jointly establish the Integrated Care Partnership with the Integrated Care Board
Decision Reference:	I026374
Key decision?	Yes

Summary:

The purpose of this report is to provide details of the approach Lincolnshire will take regarding the requirement for Lincolnshire County Council to jointly establish an Integrated Care Partnership (ICP) with the Lincolnshire NHS Integrated Care Board (ICB) as part of the new landscape within the Integrated Care System (ICS) to be known locally as “Better Lives Lincolnshire.” The Health and Care Bill received Royal Assent on the 28 April 2022, this requires each area in England to establish an Integrated Care System (ICS). The Health and Care Act comes into law on 1 July 2022 which is the earliest date at which the ICP can be established. An ICS is a partnership of health and care organisations that come together to plan and deliver joined up services and to improve the health of people who live and work in their area.

The aims of an ICS are to:

- **improve 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**

The Council has a duty under the new Act to jointly establish the ICP as a statutory joint committee. Legal advice is that this is an executive function, and therefore a decision is being sought to establish the joint committee and appoint a County Council representative on it.

Recommendation(s):

That the Executive approves:

- 1) the formal establishment by the County Council of Lincolnshire Integrated Care Partnership as a joint committee with the Lincolnshire NHS Integrated Care Board in accordance with section 116ZA of the Local Government and Public Involvement in Health Act 2007 as inserted by section 26 of the Health and Care Act 2022.
- 2) the appointment of Councillor Mrs Sue Woolley, Executive Councillor for NHS Liaison, Community Engagement, Registration and Coroners as Lincolnshire County Council's representative on the joint committee

Alternatives Considered:

Alternatives that have been considered for the appointment of a county council representative on the joint committee are a different member of the executive or a chief officer of the local authority.

Reasons for Recommendation:

The Health and Care Act 2022 requires each area to establish an ICP as part of the ICS arrangements. The function of the ICP will closely align with those of the Health and Wellbeing Board and for this reason it is recommended that Councillor Mrs Sue Woolley, Executive Councillor for NHS Liaison, Community Engagement, Registration and Coroners, be appointed as the County Council's representative on the joint committee. The timeline to establish the ICP should be agreed locally however it is expected it will be at the earliest opportunity following the launch of the ICB on the 1 July 2022.

1. Background

The Health and Care Act 2022 requires each ICS to establish two statutory bodies exercising statutory functions:

- An Integrated Care Board (ICB) bringing the NHS together locally to improve population health and care. In addition, the functions currently performed by Clinical Commissioning Groups will be conferred onto ICBs.
- An Integrated Care Partnership (ICP): a joint committee of the County Council and ICB with specific statutory responsibility for preparing an Integrated Care Strategy for the ICS footprint.

The ICB will be established by NHS England by way of statutory order and will have a constitution approved by NHS England. On the establishment of the ICB the Clinical Commissioning group (CCG) will be dissolved. The Council has no role in the establishment

of the ICB however the ICB is required to have a local authority partner member on its board. In response to this, the Leader of Lincolnshire County Council has formally nominated Councillor Mrs W Bowkett, Executive Councillor for Adult Care and Public Health to be the local authority partner member representative on the ICB board.

With regard to the ICP the Council has a duty under the new Act to jointly establish the ICP with the ICB as a statutory joint committee as part of the ICS arrangements. This includes providing a representative of the county council as part of the arrangement in establishing the joint committee. However, this is the extent of the Council's involvement. Once established any further membership is a matter for the joint committee itself and the joint committee can determine its own procedures including quorum.

The ICP has one statutory function and that is to prepare an Integrated Care Strategy, setting out how the assessed needs in relation to its area are to be met by the exercise of functions of (a) the ICB, (b) NHS England, or (c) the County Council.

The Integrated Care Strategy prepared by the ICP is to have regard to the Joint Strategic Needs Assessment (JSNA) which will remain the responsibility of the Health and Wellbeing Board (HWB) and in turn the Joint Local Health and Wellbeing Strategy (JHWS) also the responsibility of the HWB.

The upper tier local authorities, ICBs and NHS England must have regard to the integrated care strategy and the joint local health and wellbeing strategy in exercising their functions, including the preparation of the joint-forward plan.

In most areas the ICS has more than one upper tier local authority each required to maintain their duty to have a HWB and fulfil the duties set out as a committee of the council. In those areas the Integrated Care Strategy will bring together the collective priorities and ambitions for each HWB within the local system boundary.

The Lincolnshire ICS will have a boundary which is coterminous to that of only one upper tier authority, in our local system there will be one Integrated Care Strategy and one JHWS which highlights the simplicity of our system in comparison to others. A planning and development workshop was held on 26 April 2022 to engage members of the HWB, Better Lives Lincolnshire Leadership Team (BLLLT) and representatives of the ICB in discussions about how Lincolnshire would operate within this new landscape.

At this workshop, all representatives supported the following arrangements

- The ICP should align meeting timings, locations, and frequency to the HWB
- Membership of the ICP should be reviewed annually with as much alignment as possible with the membership of the HWB
- Appoint an Executive Councillor of the County Council as chair of the ICP to reflect the approach of the HWB

The key outcome of the multi-agency workshop was that in Lincolnshire due to our almost unique position, there is an opportunity like none before it, for us to locally plan and deliver services in a seamless way for residents and patients. It is therefore agreed that to

avoid duplication where possible it is our intention to align strategies and plans where we have opportunity to do so. Further national guidance is expected in July 2022 on the flexibility local areas will have regarding these arrangements.

It is also proposed that the membership of the Health and Wellbeing Board is mirrored across to the ICP. The terms of reference for the ICP will also mirror where possible those of the HWB with the exception of those which are either specific to the HWB as a committee of the council, or specific to the ICP to ensure both can fulfil their statutory duties and functions.

2. Legal Issues:

Equality Act 2010

Under section 149 of the Equality Act 2010, the Council must, in the exercise of its functions, have due regard to the need to:

- Eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under the Act.
- Advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it.
- Foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

The relevant protected characteristics are age; disability; gender reassignment; pregnancy and maternity; race; religion or belief; sex; and sexual orientation.

Having due regard to the need to advance equality of opportunity involves having due regard, in particular, to the need to:

- Remove or minimise disadvantages suffered by persons who share a relevant protected characteristic that are connected to that characteristic.
- Take steps to meet the needs of persons who share a relevant protected characteristic that are different from the needs of persons who do not share it.
- Encourage persons who share a relevant protected characteristic to participate in public life or in any other activity in which participation by such persons is disproportionately low.

The steps involved in meeting the needs of disabled persons that are different from the needs of persons who are not disabled include, in particular, steps to take account of disabled persons' disabilities.

Having due regard to the need to foster good relations between persons who share a relevant protected characteristic and persons who do not share it involves having due regard, in particular, to the need to tackle prejudice, and promote understanding.

Compliance with the duties in section 149 may involve treating some persons more favourably than others.

The duty cannot be delegated and must be discharged by the decision-maker. To discharge the statutory duty the decision-maker must analyse all the relevant material with the specific statutory obligations in mind. If a risk of adverse impact is identified consideration must be given to measures to avoid that impact as part of the decision-making process.

No implications relevant to the Equality Act 2010 have been identified in respect of this report.

Joint Strategic Needs Assessment (JSNA) and the Joint Health and Wellbeing Strategy (JHWS)

The Council must have regard to the Joint Strategic Needs Assessment (JSNA) and the Joint Health and Wellbeing Strategy (JHWS) in coming to a decision.

There are no direct implications of this report for the JSNA or the JHWS. However, once established the ICP has a statutory duty to have regard for the JSNA and JHWS.
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Crime and Disorder

Under section 17 of the Crime and Disorder Act 1998, the Council must exercise its various functions with due regard to the likely effect of the exercise of those functions on, and the need to do all that it reasonably can to prevent crime and disorder in its area (including anti-social and other behaviour adversely affecting the local environment), the misuse of drugs, alcohol and other substances in its area and re-offending in its area.

No implications relevant to Section 17 of the Crime and Disorder Act 1998 have been identified in respect of this report.

3. Conclusion

The Council has a duty to establish the Integrated Care Partnership (ICP) as a joint committee with the ICB and to appoint a County Council representative on it. This is required in response to the expectations set out in the Health and Care Act 2022. The Executive is therefore asked to approve the recommendation to establish a joint committee and for Councillor Mrs Sue Woolley, Executive Councillor for NHS Liaison, Community Engagement, Registration and Coroners as the county council representative on the joint committee.

4. Legal Comments:

The Council is required by the Health and Care Act 2022 to establish an Integrated Care Partnership as a joint committee with the Lincolnshire NHS Integrated Care Board and appoint a representative to it.

The decision is consistent with the Policy Framework and within the remit of the Executive.

5. Resource Comments:

Accepting the recommendation within this report, should have no material impact on the budgets of the council.

6. Consultation

a) Has Local Member Been Consulted?

n/a

b) Has Executive Councillor Been Consulted?

Yes

c) Scrutiny Comments

The decision was considered by the Overview and Scrutiny Management Board on 30 June 2022 and the comments of the Committee will be reported to the Executive

d) Risks and Impact Analysis

No

7. Background Papers

No Background Papers within the meaning of section 100D of the Local Government Act 1972 were used in the preparation of the Report

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