

Name of meeting: Cabinet

Date: 21st December 2022

Title of report: Establishing an Integrated Care Partnership for West

Yorkshire

Purpose of report: To establish a statutory West Yorkshire Integrated

Care Partnership as a joint committee.

Key Decision - Is it likely to result in spending or saving £250k or more, or to have a significant effect on two or more electoral wards?	No
Key Decision - Is it in the Council's Forward Plan (key decisions and private reports)?	N/A
The Decision - Is it eligible for call in by Scrutiny?	Yes
Date signed off by <u>Strategic Director</u> & name	Richard Parry, Strategic Director for Adults and Health. 30/11/22
Is it also signed off by the Service Director for Finance?	Eamonn Croston, 30/11/22
Is it also signed off by the Service Director for Legal Governance and Commissioning?	Julie Muscroft, 30/11/22
Cabinet member portfolio	Councillor Musarrat Khan

Electoral wards affected: All

Ward councillors consulted: Ward councillors have not been consulted.

It is a statutory requirement to establish and be a member of the West Yorkshire Integrated

Care Partnership.

Public or private: Public

Has GDPR been considered? Yes

1. Summary

The Health and Care Act 2022 established Integrated Care Systems, comprised of an Integrated Care Board (ICB) and an Integrated Care Partnership (ICP).

A West Yorkshire Integrated Care Partnership (WY ICP) is now required to be established as a statutory joint committee of the WY ICB and the five West Yorkshire Councils.

Each Council will have 2 members, the Chair of the Health and Wellbeing Board and one other Councillor.

The WY ICP will be known as the West Yorkshire Health and Care Partnership Board.

2. Information required to take a decision

2.1 The Council has been working with partners across health and care in Kirklees and West Yorkshire over many years to strengthen collaboration and partnership arrangements.

The principal features of the arrangements are:

- a single statutory West Yorkshire Integrated Care Board (WY ICB), which has replaced Clinical Commissioning Groups. The WY ICB has statutory responsibility for making decisions about investing and allocating NHS resources within its area. The ICB has been in place since 1st July 2022.
- the Kirklees Health and Care Partnership (KHCP), a committee of the WY ICB. This makes decisions about NHS resources and services on behalf of the WY ICB, in respect of the Kirklees 'place'. The KHCP does not make decisions on behalf of the Council. The KHCP Collaboration Agreement was endorsed by Cabinet on 14th June 2022.
- the Kirklees Health and Wellbeing Board, which continues to bring together key partners to jointly assess population health needs and to drive work to improve health and wellbeing. The Terms of Reference and membership of the Health and Wellbeing Board have been updated to reflect the Health and Care Act changes, and these were approved by full Council on the 7th September 2022.
- a West Yorkshire Integrated Care Partnership (WY ICP), which is now required to be established as a statutory joint committee of the WY ICB and the five West Yorkshire Councils. The WY ICP will be known as the West Yorkshire Health and Care Partnership Board

The WY ICP will be a forum for NHS leaders and local authorities to come together with a range of stakeholders to agree shared objectives and work on joint challenges. It will replace and build on the work of the West Yorkshire

- and Harrogate Health and Care Partnership which was formed in 2016 as one of 44 non-statutory Sustainability and Transformation Partnerships (STPs).
- 2.2 The main statutory function of an integrated care partnership is to prepare and publish an integrated care strategy. The West Yorkshire Integrated Care Strategy which is required by the new s116ZA of the Local Public Involvement in Health Act 2007 (inserted by s26 Health and Care Act 2022) will set out how the needs of the population will be met by either the WY ICB, NHS England or the local authorities. The Strategy must address how NHS bodies and local authorities could work together to meet these needs. When carrying out functions, the Council and the WY ICB must have regard to the Strategy (as well as to the Joint Strategic Needs Assessment and Joint Local Health and Wellbeing Strategy prepared by the Health and Wellbeing Board).
- 2.3 In terms of **membership**, by law, the WY ICP must consist of:
 - one member appointed by the WY ICB,
 - one member appointed by each West Yorkshire Council, and
 - other members appointed by the WY ICP itself.
- 2.4 The Joint Committee/ICP approves its own Terms of Reference and procedures including quorum under s116ZA(3) of the 2007 Act. Extensive discussions with partners have taken place about the proposed membership and operation of the WY ICP.
- 2.5 The WY Health and Care Partnership Board has been meeting quarterly throughout the evolution of the integrated care system arrangement. The Council is represented by Cllr Pandor and Cllr Kendrick in her role as Chair of the Health and Wellbeing Board.
- 2.6 At the meeting held on the 6th September 2022 (<u>link</u>), WY Health and Care Partnership Board, which will fulfil the functions of the WY ICP, approved the attached Terms of Reference and membership see Appendix 1.
- 2.7 The Board membership includes:
 - A Chair who will be a local authority elected member. The Deputy Chair will be the Chair of the WY ICB.
 - Two representatives from each Council
 - the Chair of the local Health and Wellbeing Board and
 - o a second elected member
 - Chief Executive from each Council
 - One representative of Directors of Public Health
 - One representative of Directors of Adult Social Care
- 2.7.1 Part 3.4 of the Constitution sets out the Executive's authority to establish joint committees.

3. (i) Delegations to Joint Committees

The Executive may establish joint committees with one or more local authorities to exercise functions which are executive functions. Any joint committee appointed in accordance with those arrangements may, subject to the terms of those arrangements, discharge those executive functions on behalf of the Executive.

3 Implications for the Council

3.1 Working with People

The principles of the joint committee explicitly reference the need to 'build constructive relationships with communities, groups and organisations to tackle the wide range of issues which have an impact on people's health and wellbeing'.

3.2 Working with Partners

The joint committee is central to the new health and care partnership arrangements and will continue to involve a wide range of partners.

3.3 Place Based Working

The West Yorkshire ICB and the joint committee have been built on a commitment to the 'primacy of place', i.e. the 5 local authority areas. There is also a growing recognition of the importance of working on smaller geographies and the need for each place to identify what works best for them.

3.4 Climate Change and Air Quality

The current WY health and care strategy recognises climate change as one of its 10 Big Ambitions, and this will be carried forward into the new strategy.

3.5 Improving outcomes for children

The ICB and the joint committee are responsible for the health and care of the whole population of West Yorkshire. The recent work on refreshing the health and care strategy for West Yorkshire has highlighted the need to strengthen our children's ambitions to include poverty and improving access to services, including specific services such as dentistry and mental health.

3.7 Other (eg Legal/Financial or Human Resources) Consultees and their opinions

The Council has a duty to establish an integrated care partnership as a joint committee with the other West Yorkshire Councils and the WY ICB.

The WY ICP is a statutory Joint Committee. At present the West Yorkshire Councils do not intend to delegate any local authority functions to it and any such proposals will require a further decision.

Political balance requirements do not apply to the Council's appointment to the joint committee.

By law, the WY ICP must determine its own procedures, including quorum.

3.8 Financial Implications for the Population

There are no direct financial implications for the population. Poverty has come through strongly in the current work on developing the new strategy and is expected to be a key focus for the strategy.

4 Next steps and timelines

The WY ICP meets 4 times per year.

The WY ICP will approve the WY Integrated Care Strategy by March 2023.

5 Officer recommendations and reasons

- To establish the West Yorkshire Integrated Care Partnership (WY ICP) as a joint committee, to endorse the Terms of Reference attached at Appendix 1 and for the WY Integrated Care Board to act as Secretariat to the WY ICP.
- To note that authority is delegated to the Service Director Legal, Governance and Commissioning, in consultation with Group Business Managers to make the nominations to WYICP in accordance with the terms of reference namely, the Leader of the Council and the Chair of the Health and Wellbeing Board.
- To note that the Chief Executive is a member of the WY ICP, and the membership will also include one representative of Directors of Public Health and one representative of Directors of Adult Social Care in West Yorkshire.

The Council is required by law to establish the WY ICP and appoint a member. Doing so facilitates integrated working and strengthens the established relationships between NHS and local authorities, and local partners.

6 Cabinet Portfolio Holder's recommendations

That Cabinet agree the Officer recommendations

7 Contact officer

Phil Longworth, Senior Manager – Integrated Support phil.longworth@kirklees.gov.uk

8 Background Papers and History of Decisions

West Yorkshire Health and Care Partnership Board Terms of Reference (Appendix 1)

9 Service Director responsible

Richard Parry, Strategic Director for Adults and Health