

Report of the Strategic Director Health & Wellbeing to the meeting of Executive to be held on 3 January 2023

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Subject:

West Yorkshire Integrated Care Partnership – Member Appointment

Summary statement:

To establish a statutory West Yorkshire Integrated Care Partnership and appoint an elected member to it.

To agree to enter into the Bradford District Health and Care Partnership Agreement relating to collaborative working in respect of health and social care.

EQUALITY & DIVERSITY:

The Partnership Agreement embeds an approach based on work with local communities, empowering people and a commitment to openness, transparency and involvement, to address health inequalities in keeping with the objectives set out statute.

Regard has been had to the public sector equality duty and an impact assessment is not required.

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Overview & Scrutiny Area: Health and Social Care

1. SUMMARY

Each council in West Yorkshire has been formally asked to collaborate with the NHS through the new Integrated Care Partnership arrangements. Executive are requested to approve establishing a statutory West Yorkshire Integrated Care Partnership, appoint a member to it, and to agree to enter into the Bradford District Health and Care Partnership Agreement relating to collaborative working in respect of health and social care.

2. BACKGROUND

The Health and Care Act 2022 introduced arrangements to strengthen partnerships between the NHS and local authorities, and with local partners including groups representing the public and patient perspective, the voluntary sector and wider public service provision. The principal features of the arrangements for Bradford District 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: and
- 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 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).

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).

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.

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. Terms of reference have been finalised under membership it provides for each council to nominate two elected members. Prior to the implementation of the 2022 Health and Care Act, ClIrs Hinchcliffe and Ferriby were the nominees of CBMDC. Officers recommend continuing with that arrangement.

A **Partnership Agreement** has also been produced for the Bradford District Health and Care Partnership with input from a range of partners. The Partnership Agreement sets out how we will work together in the interests of the local population. This is to replace a Memorandum of Understanding previously agreed by partner organisations. The agreement applies to partnership working through the WDHCP and generally, in respect of health and social care. Formal approval by Bradford Council is now sought.

3. OTHER CONSIDERATIONS

No significant resource implications arise directly from establishing the WY ICP nor from agreeing to the Partnership Agreement. However, significant efficiencies should be achieved by facilitating and promoting collaborative working.

4. FINANCIAL & RESOURCE APPRAISAL

There are no financial issues arising from the recommended decisions in this report.

5. RISK MANAGEMENT AND GOVERNANCE ISSUES

Establishing the WY ICP will reduce the risk of legal challenge, by discharging a key duty of the Council.

It is proposed that the Partnership Agreement will be kept under review in recognition of the formative stage of the new arrangements.

6. LEGAL APPRAISAL

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. The Partnership Agreement is a non-legally binding collaboration agreement which demonstrates support for the new arrangements.

7. OTHER IMPLICATIONS

7.1 SUSTAINABILITY IMPLICATIONS

No sustainability implications arise from the recommended decisions.

7.2 GREENHOUSE GAS EMISSIONS IMPACTS

No greenhouse gas emissions implications arise from the recommended decisions

7.3 COMMUNITY SAFETY IMPLICATIONS

No community safety implications arise from the recommended decisions.

7.4 HUMAN RIGHTS ACT

Establishing the integrated care strategy embeds through differing organisations a collaborative approach based on work with local communities, empowering people and a commitment to involvement, to address health inequalities in keeping with the Human Rights Act 1998.

7.5 TRADE UNION

No Trade union implications arise from the recommended decisions in this report.

7.6 WARD IMPLICATIONS

Bradford metropolitan area.

7.7 AREA COMMITTEE ACTION PLAN IMPLICATIONS (for reports to Area Committees only)

Not applicable

7.8 IMPLICATIONS FOR CHILDREN AND YOUNG PEOPLE

The main statutory function of the integrated care partnership is to prepare and publish an integrated care strategy which should result in improved and greater collaborative health care for young people in the Bradford District.

7.9 ISSUES ARISING FROM PRIVACY IMPACT ASSESMENT

Undertake a Privacy Impact Assessment to determine whether you need to deal with data protection and information security matters arising from the

proposal/decision.

8. NOT FOR PUBLICATION DOCUMENTS

None

9. OPTIONS

The following options are available:

Option 1: Establish the WY ICP and appoint to it; approve the Partnership Agreement – **preferred option**.

Establishing the WY ICP and agreeing the Partnership Agreement will facilitate the integration of health and social care arrangements.

Option 2: No action

Failing to take any action would be a breach of the Council's duty to establish an integrated care partnership and constitute a missed opportunity to promote closer collaboration with key partners.

10. RECOMMENDATIONS

Executive are recommended to:

- 1. Agree to establishing the West Yorkshire Integrated Care Partnership (WY ICP) as a joint committee, and for the WY ICB to act as Secretariat to the WY ICP.
- 2. Appoint the portfolio holder for The Healthy People and Places Portfolio Holder and the Leader of the Council as members of the West Yorkshire Integrated Care Partnership.
- 3. Agree to enter into the Health and Care Partnership Agreement on behalf of the Council.

11. APPENDICES

None.

12. BACKGROUND DOCUMENTS

None.