

Agenda Item No:

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Report to:	Humber and North Yorkshire Integrated Care Board
Date of Meeting:	8 November 2023
Subject:	North East Lincolnshire Health and Care Partnership delegation
Director Sponsor:	Amanda Bloor Deputy Chief Executive/Chief Operating Officer
Author:	Helen Kenyon, Place Director, North East Lincolnshire
<p>STATUS OF THE REPORT: <i>(Please click on the appropriate box)</i></p> <p>Approve <input checked="" type="checkbox"/> Discuss <input type="checkbox"/> Assurance <input type="checkbox"/> Information <input type="checkbox"/> A Regulatory Requirement <input type="checkbox"/></p>	

SUMMARY OF REPORT:

North East Lincolnshire NHS and North East Lincolnshire Council (NEL Council) have a long and strong history of joint working, which started in 2004 and has been further developed over time.

The Integrated Care Board (ICB) and NEL Council have been working together to build new relationships, understanding and the right conditions to support the establishment of a formal partnership agreement (Section 75) that will support the continued integration of health and social care in NEL.

It is proposed that a Joint Committee will oversee the partnership agreement with its membership drawn from the ICB and NEL Council. The operating model that supports the Joint Committee is already in place supported by the ICB place team, many of whom are joint appointments across health and social care.

These arrangements will ensure that both the ICB and council are assured that they are able to effectively discharge their statutory duties, via the delegation to North East Lincolnshire Place.

This report is therefore seeking approval in principle from the Board for the establishment of a formal partnership agreement between the ICB (Health) and NEL Council, using the current legal Section 75 legal framework. The initial scope of the agreement would include approximately £162m of ICB resources and £55m of NEL Council resources (Health and Adult Social Care).

The proposal is that the formal partnership agreement be in place and operational from 1 April 2024. There is already a group of staff from across the ICB and NEL Council working on the detail of the agreement.

RECOMMENDATIONS:

Members are asked to:

- i) Approve in principle the establishment of a formal partnership agreement between the ICB and NEL Council, underpinned by a Section 75 legal agreement and managed via the establishment of a Joint Committee.

- ii) Support the continued work across the ICB and NEL Council to finalise the detail of what will be included in the Section 75 agreement.
- iii) Support the proposal to operate in shadow form from January 2024 followed by the formal establishment of the Joint Committee from 1 April 2024.

ICB STRATEGIC OBJECTIVE

Managing Today	☒
Managing Tomorrow	☒
Enabling the Effective Operation of the Organisation	☒

IMPLICATIONS

Finance	It is proposed that circa £162m of ICB resource would be delegated to place to be joined together with circa £55m of NEL adult social care resources.
Quality	There are quality benefits from joint working across Health and Adult Social Care, which include greater oversight of the care sector, improved risk management and quality of personal experience for example by having reduced transfer of care delays.
HR	The ICBs Place team is already integrated with Adult Social care and is jointly funded. If the proposal to establish a new Section 75 partnership agreement is not progressed this could result in issues for the continued joint working of the team.
Legal / Regulatory	The proposals are within the existing legal framework (Section 75), and further integration outside of what is allowable within the Section 75 arrangements will only progress once the expected Section 65ZA framework is available.
Data Protection / IG	The proposal supports the existing Data protection / IG arrangements in place.
Health inequality / equality	The proposed partnership agreement should have a positive impact on health inequalities.
Conflict of Interest Aspects	NA
Sustainability	Working together creates a more sustainable system across health and social care.

ASSESSED RISK:

The existing and proposed governance and operational arrangements mitigate the majority of risks regarding a deterioration in finance, performance and the quality of services.

Therefore, the main risk would be from having to uncouple those existing arrangements if a new partnership agreement cannot be agreed. The ICB and council are working together to develop the proposed partnership agreement, so any areas of disagreement would be picked up and addressed quickly.

MONITORING AND ASSURANCE:

The development of the proposed partnership arrangements is being overseen by the ICBs Deputy Chief Executive/ Chief Operating Officer from an operational perspective and by the ICBs Legal Officer. The ICB has also appointed Beachcroft's law firm to support the work to ensure that it is with current legislation.

Updates will be brought to future ICB Board meetings. In place the development is being overseen by the group that is proposed to become the Joint Committee.

ENGAGEMENT:

The development work is being undertaken in partnership with NEL Council and with the support of the health and care providers as stakeholder partners.

No specific engagement with the public has been undertaken or is planned as this is predominantly a governance proposal. However once established the Joint Committee will ensure engagement with the public as part of its ongoing work to improve services and outcomes. A specific example of how this is already happening would be the recent development of the NEL place Mental Health strategy which was co-produced with experts by experience.

REPORT EXEMPT FROM PUBLIC DISCLOSURE

No Yes

If yes, please detail the specific grounds for exemption.

North East Lincolnshire Health and Care Partnership Delegation

1.0 INTRODUCTION

- 1.1 North East Lincolnshire Health and North East Lincolnshire Council (NEL Council) have a long history of working together, with formal partnership arrangements first being established in 2004 around Mental Health Services, this was followed in 2007 by more comprehensive partnership arrangements covering Health, Adult Social Care, Public Health and Childrens Services.
- 1.2 The arrangements in place have been amended over time to reflect the changes in legislation relating to health and care with the last amendment to the partnership arrangement taking place in June 2022 immediately prior to the formal establishment of the Integrated Care Board (ICB).
- 1.3 The ICB and NEL Council are now working together to re-establish the partnership arrangements that were in existence prior to the 1 July 2022, which brought together the Health and Adult Social Care resources to enable joint strategic, operational and financial planning, joint decision making, and joint policy development, all supported by single contracting and performance processes.
- 1.4 As and when regulations allow, there is an ambition to go further with the partnership arrangements to support an even more integrated approach to population health and health improvement, incorporating more work around the wider determinants of health.
- 1.5 There is already an established operating model in North East Lincolnshire, and the majority of staff at place are joint appointments working across health and adult social care.
- 1.6 The proposed arrangements take full account of the ICB operating framework, 6 places, 5 collaboratives and one System.
- 1.7 The ICB and NEL Council have jointly appointed Legal advice via Beechcrofts to support the development of the formal Section 75 partnership agreement.
- 1.8 The ICB has identified people from the operational and governance teams to support ICB at place with progressing the proposal with NEL Council.
- 1.9 The aim is to have the new Section 75 agreement in place with effect from 1 April 2024, with the ICB and NEL Council working in shadow form from January 2024

2.0 BACKGROUND

- 2.1 Integrated working is a key component of the ICBs operating model, and integration at place is essential to ensure that the cross-sector partners are working together in the best interests of the population to deliver services in the most effective and efficient ways possible.
- 2.2 There was a presentation at the October ICB Board Development Day on the proposition to take forward a more formal approach to integrated working in NEL Place between the ICB and Council, which would in turn work with the providers in place to maximise the benefit of joint working.
- 2.3 Principles were proposed to help shape and define the size of the agreement and the delegation to place. Using those principles, the latest estimate of the financial delegation by each partner would be £162m from the ICB and £55m from the NEL Council.
- 2.4 A summary of benefits from a financial, quality and performance perspective that have already been seen in NEL place from joint working was shared.

2.5 Feedback from the Board Development discussion was positive with an appetite to go further as other areas for joint working were identified.

3.0 ASSESSMENT

- 3.1 The benefits to the system and population of NEL have been clearly articulated and development of a new formal Section 75 overseen by a Joint Committee will ensure that those benefits continue to be realised and built upon by the ICB and NEL Council working together with the health and care partners in place.
- 3.2 Whilst this is a place specific development the principles developed can be used to support and drive further integration across the other 5 places.
- 3.3 NEL place will continue to work closely with the other 5 places, and the collaboratives as part of the Integrated Care System (ICS), sharing its own learning and innovation and taking and implementing learning from other areas across the ICS.
- 3.4 An initial proposal in relation the ICBs membership on the Joint committee was outlined at the Board Development session (Place Director, Northern Lincolnshire Finance Director and Northern Lincolnshire Director of Quality), and the Board will need to decide whether it would want any additional representation at the Joint Committee either on an interim or permanent basis.
- 3.5 Work continues to finalise the proposed delegations to NEL place, and a final report on this will be shared at the ICB Board in February 2024 to allow it to formally sign off the delegation and approve moving to having the NEL Joint Committee operational from 1 April 2024.

4.0 CONCLUSION

- 4.1 The ICB Board are asked to support the continuation of the work taking place to establish a new Section 75 partnership agreement with NEL Council, which will reinstate some of the previous agreement that was in place prior to the inception of the ICB across health and social care, and will provide a springboard for the development of further integrated working within NEL place, to improve the overall health of the population with a particular focus on reducing inequalities.

5.0 RECOMMENDATIONS

- 5.1 Members are asked to:
 - i) Approve in principle the establishment of a formal partnership agreement between the ICB and NELC, underpinned by a Section 75 legal agreement and managed via the establishment of a Joint Committee.
 - ii) Support the continued work across the ICB and NEL Council to finalise the detail of what will be included in the Section 75 agreement.
 - iii) Support the proposal to operate in shadow form from January 2024 followed by the formal establishment of the Joint Committee from 1 April 2024.

Annex 1: Presentation from October 2024 Board development session



NELC ICB integration
moving forward-Oct 2