



North East and North Cumbria

REPORT CLASSIFICATION	✓	CATEGORY OF PAPER	✓
Official	✓	Proposes specific action	✓
Official: Sensitive Commercial		Provides assurance	
Official: Sensitive Personal		For information only	

BOARD	
27 September 2022	
Report Title:	Roadmap to place based working
Purpose of report	
This report sets out a roadmap for the development and agreement of place based working with local partners.	
Key points	
<p>The government's Integration White Paper 'Joining Up Care for People, Places and Populations' has set out further expectations for place-based working by 2023. This includes strengthening local joint governance arrangements between Integrated Care Boards (ICBs) and local authorities, and the accountability for delivering of local shared plans. Formal place-based governance structures will need to enable agreement of shared outcomes, manage risk, and resolve disagreements – and how better use is made of existing structures and processes, including Health & Wellbeing Boards, the Better Care Fund, and pooled budgets.</p> <p>In each of our fourteen places in North East and North Cumbria (NENC) we have begun to explore the governance options for place-based working set out in national guidance with our local government partners, with the aim of developing a mutually agreed governance roadmap with local partners to include the powers and resources delegated from the ICB (and local authority in the case of a joint committee).</p> <p>The aim is to develop early proposals for consideration by the ICB and local authorities by November, with the option for shadow-running the proposed arrangements from January onwards, followed by a review in March ahead of formal adoption of local governance arrangements by April 2023.</p>	
Risks and issues	
<ul style="list-style-type: none"> The integration white paper 'Joining Up Care for People, Places and Populations' sets the expectations for place based working arrangements between partners to be in place in some form by April 2023. In order to achieve that ambition a roadmap to explore governance arrangements needs to be put in place. 	
Assurances	

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- The Board will, through the Executive Directors of Place Based Delivery, be appraised of progress as partnerships develop.

Recommendation/Action Required

The Board is asked to note the proposals below and the plans for place governance models roadmap to April 2023.

Sponsor/approving director	David Gallagher, Executive Director of Place Based Delivery (Central and South) Nicola Bailey, Interim Executive Director of Place Based Delivery (North and North Cumbria)
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Report author	Neil Hawkins, Head of Corporate Affairs
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Link to ICB corporate aims (please tick all that apply)

CA1: Improve outcomes in population health and healthcare	✓
CA2: tackle inequalities in outcomes, experience and access	✓
CA3: Enhance productivity and value for money	✓
CA4: Help the NHS support broader social and economic development	✓

Relevant legal/statutory issues

Health and Care Act 2022
Integration White Paper 'Joining Up Care for People, Places and Populations'

Any potential/actual conflicts of interest associated with the paper? (please tick)	Yes		No	✓	N/A	
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If yes, please specify

Equality analysis completed (please tick)	Yes		No		N/A	✓
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If there is an expected impact on patient outcomes and/or experience, has a quality impact assessment been undertaken? (please tick)	Yes		No		N/A	✓
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Key implications

Are additional resources required?	Additional resources may be required to support the placed based models to ensure new governance arrangements are established and supported. To be agreed as part of partnership discussions.
Has there been/does there need to be appropriate clinical involvement?	Clinicians involved locally in established partnerships.
Has there been/does there need to be any patient and public involvement?	Not at this stage.
Has there been/does there need to be partner and/or other stakeholder engagement?	Place stakeholders and statutory bodies concerned are engaged in the process.

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Roadmap to place based working

1. Introduction

The government's Integration White Paper 'Joining Up Care for People, Places and Populations' has set out further expectations for place-based working by 2023. This includes strengthening local joint governance arrangements between ICBs and local authorities, and the accountability for delivering of local shared plans. Formal place-based governance structures will need to enable agreement of shared outcomes, manage risk and resolve disagreements – and how to make use of existing structures and processes, including Health and Wellbeing Boards, the Better Care Fund and pooled budgets.

2. Background

Each place, or upper tier local authority footprint, has begun to explore the governance options for place-based working set out in national guidance, with the aim of developing a mutually agreed governance roadmap with local partners to include the powers and resources delegated from the ICB (and local authority in the case of a joint committee).

Discussions with partners were launched at an ICB event 24 June 2022, where partners from all of the local authority footprints came together with the ICB senior team at an event in Gateshead to discuss local priorities and to begin thinking about the approach they wanted to take.

Following this session, the key points of discussion, next steps and the timeline included in this paper were shared with participants (included in appendix 1).

3. Main Issue

The aim is to develop early proposals for consideration by the ICB and local authorities by November, with the option for shadow-running the proposed arrangements from January onwards, followed by a review in March ahead of formal adoption of local governance arrangements by April 2023.

Elected members as democratically elected representatives will hold a key role in setting local and region-wide priorities and leading how health and care will work together going forward, through their role on both the Integrated Care Board and the Integrated Care Partnerships, alongside their ongoing role on Health and Wellbeing Boards and local scrutiny committees.

Many of our places already have established some form of placed based partnership that can evolve over time to take on more decision making responsibility as the partnership arrangements develop.

The government's 'Thriving Places' guidance illustrates some potential governance models that places can consider. For example:

- A place-based **Consultative Forum**, with a broad membership, which would act in an advisory capacity to the Executive Directors of Place-Based Delivery but could not make binding decisions
- A formal **Place Committee of the ICB**, coterminous with a single local authority (or group of neighbouring local authorities), with formal delegation of NHS resources and a direct line of reporting and assurance to the ICB. The chair and members of such a committee could include ICB staff and a range of partners but they would be accountable to the ICB. Such a committee could not make decisions on behalf of other bodies.
- A **Joint Committee**, coterminous with a single local authority (or group of neighbouring local authorities), allowing collective decisions to be made within its scope of authority on behalf of a number of organisations – for example, the ICB and one or more local authorities. Such a committee would have a direct line of reporting and assurance to both the ICB and the other constituent statutory bodies, requiring agreement by all parties to the level of delegated authority or statutory decisions set out in a formally approved MOU. Such a joint committee would allow for multi-agency decision-making and delegation of resources, which could more effectively address the wider determinants of health and wellbeing.

Whichever of these or other governance models are chosen, one key task is to be clear on the remit of these committees (for example, would they include children's services alongside adult social care), as well as their relationship to their local Health and Wellbeing Boards and other relevant local multi-agency forums, including Safeguarding Boards.

For all of these options a minimum core membership is proposed to include:

- A jointly appointed chair
- Senior ICB officers
- Local Authority senior officers, covering the disciplines of public health and adults' and children's social care
- Local clinicians, covering primary, community and secondary care
- Senior officers from local Foundation Trusts
- The voluntary sector
- Patient, service user and public voice

4. Next steps

As mentioned above, many of the fourteen places in NENC have established partnerships to build upon, with strong working relationships developed and working well.

ICB place based teams are working with local partners to develop a plan for the further development of these forums or committees, including the approvals required from statutory decision-makers prior to their establishment, the emerging shared local priorities for each committee, and any resourcing requirements to ensure these committees have the necessary capacity to deliver their objectives.

Each place has been asked to consider these issues and to develop an outline plan for the development of their preferred local governance arrangement by early October to enable the ICB and local authorities to consider how to move forward together on implementation ahead of January 2023.

These governance arrangements can and will develop as the partnership arrangements mature and the model chosen for April 2023 will mark the beginning of those formal governance arrangements that may evolve over time.

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**Name of Sponsoring Director: David Gallagher, Executive Director of Place Based Delivery (Central & South)
Nicola Bailey, Interim Executive Director of Place Based Delivery (North & North Cumbria)**

Date: 07 September 2022



North East and North Cumbria joint NHS and LA workshop event Working together for healthier and happier lives - 24 June 2022 Feedback and Next Steps

1. Executive Summary

Over 180 people attended a half-day workshop with representatives from Local Authorities, the NHS, Voluntary and Community Sector, Healthwatch and universities from across the North East and North Cumbria. Alongside a keynote from our chair, Professor Sir Liam Donaldson on the opportunities of working together as an Integrated Care System (ICS), presentations were given on the Integrated Care Board (ICB) and its operating model, the completion of the work PWC started with the ICS before the pandemic on our ICS vision and strategy, the role of the Integrated Care Partnership in identifying our shared priorities and developing our integrated health and care strategy, and how our ICB teams in each place will be working with you during this transition year.

This was followed by table-based discussions on key questions, including what should be included in the strategic priorities of the ICS, through to what does 'place-based working' mean and what principles should drive the development of our joint working arrangements.

Following the work of the Joint Management Executive Group (JMEG), where senior leaders from across the NHS and local authorities came together to oversee key objectives in the formation of the ICB as a statutory body – including the ICB's constitution, the composition of the board and delegation of key ICB's functions to each of the thirteen local authority 'places' – we are now focused on working with our partners on the next set of key deliverables for our ICS.

These are:

- The formation and membership of our strategic **Integrated Care Partnership (ICP)**, and its relationships with our four locally-focussed ICPs
- The joint development of our **Integrated Care Strategy** through the ICP, which the ICB and all of the local authorities in our ICS area must have regard to in making decisions.
- The development of formal **place-based governance arrangements** between the ICB and local authorities
- Take forward the 8 actions PWC shared with us (see Appendix 1)

We will be working closely with your teams on these over the coming months, with the first meeting of the ICP meeting scheduled for 20 September, which will receive recommendations from a multi-agency working group on the formulation of our Integrated Care Strategy.

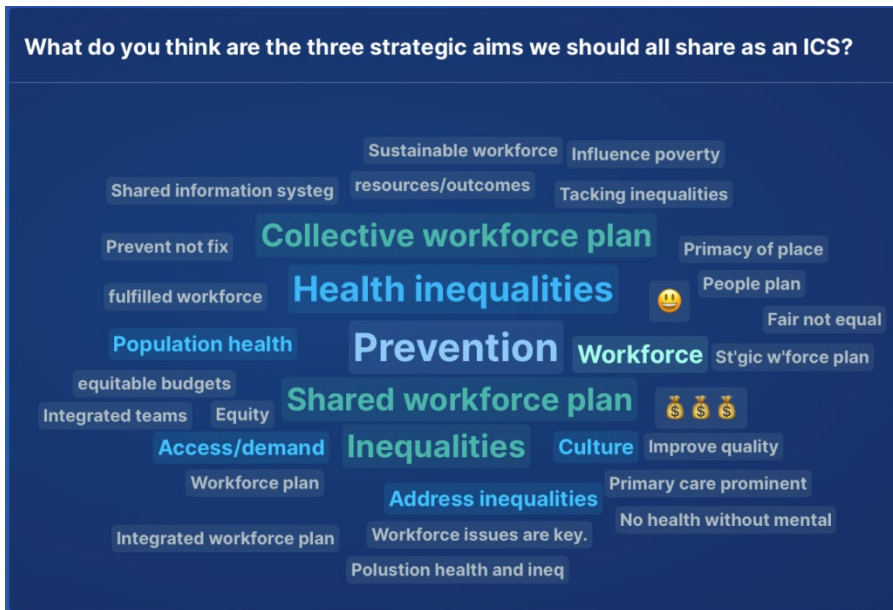
We have also a proposed programme of work for developing place-based governance which are set out in detail from page 5 of this paper, but the key next steps here will be contact from our Executive Directors of Place-Based Delivery to arrange local discussions on your preferred model of place governance, with a view to agreeing outline proposals with you by October 2022 and these discussions have already commenced.

2. Key feedback themes from the 24 June workshop

Grouped into place-based teams, each coterminous with our thirteen Local Authority areas, attendees engaged in a range of discussions from the strategic intent of the ICS through to what does 'place-based working' mean and what principles should drive the development of our joint working arrangements. A rich discussion followed, and we have captured the key themes in the following 'word clouds' for each of the questions we asked. This feedback has been incredibly important in the

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ongoing development of our Integrated Care Strategy, ICS operating model, and place-based working arrangements.



The top priorities from this discussion included:

- Population health, prevention and tackling health inequalities
- A shared workforce plan
- Managing access and demand
- Managing our collective resources
- Developing a culture of working together



Top priorities from this discussion included:

- Sharing best practice
- Reducing variation
- Freedom to act locally
- Agility in decision making



Top priorities from this discussion included:

- Having a clear purpose
- Ensuring patient voice is front and centre in our developing plans
- Being clear on what is delegated
- Autonomy to act
- Flexibility within the system



Top priorities from this discussion included:

- Transparency and accountability
- Ensuring plans are needs based
- Ensuring the voice of the communities we serve are referenced within the plans
- Ensuring we have robust governance arrangements in place



Top priorities from this discussion included:

- Ensuring teams have the resources to deliver what is required
- Ensuring the system works flexibly and teams have the space and time to do what is required
- Sharing agreements and joint appointments
- Using data intelligently

3. How we are using this feedback

This feedback has been useful to support the ongoing development of our ICS. This has included our emerging shared strategic priorities and how the role of the locally focussed ICPs can add value to place and system working (which will be considered at the first meeting of the ICP), and how we can further clarify our place-based governance arrangements to ensure they are fit for purpose.

Since the workshop we have met a series of important milestones, and have scheduled a series of further meetings through which we will take these key themes forward:

- The first board meeting of the **Integrated Care Board** took place on 1 July at Sunderland City Hall – you can watch this meeting here [Board meeting held in public: Friday 1 July 2022 | North East and North Cumbria NHS \(northeastnorthcumbria.nhs.uk\)](https://www.northeastnorthcumbria.nhs.uk)
- All of the ICB executive directors are now in place, as well as the appointment of place directors aligned to each of our local authority areas. There are two vacancies for place directors and these are being recruited to with input from our partners.
- The first meeting of our strategic **Integrated Care Partnership** has been scheduled for the 20 September and invitations have now gone out to all thirteen of our local authorities, who, with the ICB itself, form the statutory membership of the ICP. At this first meeting partners will decide chairing and governance arrangements for the ICP, and how we best develop an Integrated Care Strategy built up from our existing Joint Strategic Needs Analyses in each of our places, and the work of colleagues including the North East and North Cumbria Directors of Public Health network.
- Work is ongoing with regards to the formulation of the **Integrated Care Strategy** and a regional oversight group has been set up with representatives from across the health and care sector. Leading this work is Jacqueline Myers, Executive Director of Strategy and System Oversight. Over the coming months there will be opportunities for all partners to influence this developing strategy.
- We are also taking steps to coproduce our collective approach to **Building a Learning and Improvement System**. An event is planned for 21 September to start this work and invitations to participate in this session have gone out to all partners.

4. The governance of place-based working

Formalising the governance of our place-based working arrangements is a key task for us to work on with you during this important transition year. The ICB has delegated responsibility for the delivery of its place-based functions and relevant budgets through two Executive Directors of Place Based Delivery whose roles are described in our [ICB Operating Model](#).

These functions are set out in the 'Functions and Decisions Map' which forms part of the [ICB's Constitution](#) and set out how our ICB place-based teams will:

- Develop and agree a plan to meet the health and healthcare needs of the local population
- Plan and commission services (to include developing business cases and procurement strategies), in line with the ICB's scheme of delegation and delegated financial limits.
- Commission local primary care services (excluding nationally negotiated GP contracts)
- Develop local clinical leadership, including clinical pathway redesign and helping to shape the commissioning of acute services.
- Build strong relationships with communities, the wider local system including Healthwatch, the Voluntary Sector, and other local public services.
- Foster service development and delivery with a focus on neighbourhoods and communities, ensuring local engagement and consultations are undertaken as necessary.
- Monitor local service quality and the place-based delivery of key enabling strategies as agreed by the ICB Board or Executive Committee.
- Monitor and deliver target outcomes and outputs set by the Secretary of State, NHS England, NICE, CQC and other authorised bodies and providing assurance to the ICB on progress.

In addition, ICB place-based teams will play a key role in the formal place-based joint working arrangements between the NHS and Local Authorities, and they will continue to:

- Coordinate NHS input into local partnership initiatives to improve public health, prevent disease and reduce inequalities.
- Fulfill the NHS's statutory health advisory role in adults' and children's safeguarding.
- Jointly commission local integrated community-based services for children and adults (including care homes and domiciliary care), including:
 - Continuing health care
 - Personal health budgets
 - Community mental health, learning disability and autism
 - Children and young people's services (including transitions, Special Educational Needs and Disabilities, Looked After children)
 - Service integration initiatives and jointly funded work through, e.g. the Better Care Fund and Section 75 agreements.

Our two Executive Directors and their place-based ICB teams will manage the operational delivery of the ICB's functions, and the ongoing joint work we need to carry on in each of our local authority areas. Business continuity during this transition period is vital and our teams are working closely with our partners to avoid disruption and maintain business as usual.

5. Place governance options

The government's Integration White Paper 'Joining Up Care for People, Places and Populations' has set out further expectations for place-based working by 2023. This includes strengthening local joint governance arrangements between ICBs and local authorities, and the accountability for delivering of local shared plans. Formal place-based governance structures will need to enable how we agree shared outcomes, manage risk and resolve disagreements – and how we make use of existing structures and processes, including Health & Wellbeing Boards, the Better Care Fund and pooled budgets.

Our Executive Directors of Place-based Delivery will work with each place to explore the governance options for place-based working set out in national guidance, then develop a mutually agreed governance roadmap with you to include the powers and resources delegated from the ICB (and local authority in the case of a joint committee). Our aim is to develop early proposals for consideration by the ICB and local authorities by November, with the option for shadow-running the proposed

arrangements from January onwards, followed by a review in March ahead of formal adoption of local governance arrangements by April 2023.

Elected members as democratically elected representatives will hold a key role in setting local and region-wide priorities and leading how health and care will work together going forward, through their role on both the Integrated Care Board and the Integrated Care Partnerships, alongside their ongoing role on Health and Wellbeing Boards and local scrutiny committees.

We have identified some key questions that each of our thirteen places need to consider, and our Executive Directors and their teams will be in touch as soon as possible to arrange facilitated discussions on the following issues:

Of the governance models set out in the government's 'Thriving Places' guidance, and building on what you may already have in place, which is the preferred option for your place-based partnership?

For example:

- A place-based **Consultative Forum**, with a broad membership, which would act in an advisory capacity to the Executive Directors of Place-Based Delivery but could not make binding decisions.
- A formal **Place Committee of the ICB**, coterminous with a single local authority (or group of neighbouring local authorities), with formal delegation of NHS resources and a direct line of reporting and assurance to the ICB. The chair and members of such a committee could include ICB staff and a range of partners but they would be accountable to the ICB. Such a committee could not make decisions on behalf of other bodies
- A **Joint Committee**, coterminous with a single local authority (or group of neighbouring local authorities), allowing collective decisions to be made within its scope of authority on behalf of a number of organisations – for example, the ICB and one or more local authorities. Such a committee would have a direct line of reporting and assurance to both the ICB and the other constituent statutory bodies, requiring agreement by all parties to the level of delegated authority or statutory decisions set out in a formally approved MOU. Such a Joint Committee would allow for Multi-agency decision-making and delegation of resources, which could more effectively address the wider determinants of health and wellbeing.

Whichever of these or other governance models are chosen, we would ask each place to consider the remit of these committees (for example, would they include children's services alongside adult social care), as well as their relationship to their local Health and Wellbeing Boards and other relevant local multi-agency forums, including Safeguarding Boards.

For all of these options we would look for a minimum core membership to include:

- A jointly appointed chair
- Senior ICB officers
- Local Authority senior officers, covering the disciplines of public health and adults' and children's social care
- Local clinicians, covering primary, community and secondary care
- Senior officers from local Foundation Trusts
- The voluntary sector, especially local infrastructure bodies
- Patient, service user and public voice

6. Next steps

Our Executive Directors of Place-Based Delivery will work with you and other key partners to develop a plan for the development of these Committees, including the approvals required from statutory decision-makers prior to their establishment, the emerging shared local priorities for each committee, and any resourcing requirements to ensure these committees have the necessary capacity to deliver their objectives.

We would like each place to consider these issues and to develop an outline plan for the development of your preferred local governance arrangement by the early October to enable the ICB and local

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authorities to consider how we move forward together on implementation ahead of January 2023.

Implement the eight actions PWC recommended be taken forward by the ICS.

19 August 2022