

## Health and Wellbeing Board

### 1. Reference Information

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Paper tracking information	
<b>Title:</b>	Proposals for the Surrey Heartlands Integrated Care Partnership
<b>Related Health and Wellbeing Priority:</b>	System Capabilities
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<b>Sponsor(s):</b>	Tim Oliver - Leader of Surrey County Council
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<b>Related papers:</b>	N/A

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### 2. Executive summary

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As part of the reforms set out in the Health and Care Bill 2021-22, Integrated Care Systems are being asked to establish Integrated Care Partnerships.

This paper outlines proposals for the Surrey Heartlands Integrated Care Partnership, including purpose, membership of the partnership and frequency of meetings.

Final decisions on the purpose and membership of the partnership are reserved for Surrey County Council and Surrey Heartlands Integrated Care Board

### 3. Recommendations

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The Health and Wellbeing Board is asked to note the proposals for establishing the Surrey Heartlands Integrated Care Partnership.

### 4. Detail

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#### *Legislation establishing Integrated Care Partnerships*

The Health and Social Care Bill (2021) sets out a requirement for each Integrated Care System to establish an Integrated Care Partnership, and for this partnership to prepare an integrated care strategy, unless they consider the existing joint local health and wellbeing strategy is sufficient. Guidance published by NHSE proposes the following purpose and functions for the partnership:

- Align purpose and ambitions with plans to integrate care and improve health and wellbeing outcomes.

- Facilitate joint action to improve health and care services and to influence the wider determinants of health and broader social and economic development
- To develop an ‘integrated care strategy’
- Built bottom up from an assessment of needs and assets at place
- Based on JSNAs
- Focused on improving health and care outcomes, reducing inequalities, and addressing the consequences of the pandemic for communities.
- Champion inclusion and transparency- formal sessions held in public
- Support place based and neighbourhood level engagement
- Ensure system is connected to communities

### *Integrated Care Partnerships in Surrey*

Surrey Heartlands Integrated Care System is in a relatively unusual position of only having one Upper Tier Local Authority within the geography of its health system. Typically, Integrated Care Systems span more than one unitary or upper tier local authority, and therefore multiple Health and Wellbeing Boards, and/or multiple local authorities with responsibility for delivering adult social care. In such situations, the Integrated Care Partnership serves a useful function of bringing together its local authority partners in a forum to develop an integrated care strategy for its whole ICS population.

In Surrey Heartlands ICS, this function is already delivered by the Surrey Health and Wellbeing Board, through the Surrey-wide Health and Wellbeing Strategy.

Furthermore, Surrey County Council is in the unusual position of having social care responsibilities that span more than one Integrated Care System as Surrey County Council is also a statutory partner of Frimley Integrated Care System, and a statutory member of Frimley’s Integrated Care Partnership. Again, the Health and Wellbeing Board, as a Surrey-wide entity, provides a forum to bring together these two Integrated Care Systems alongside the Council’s public health, adult social care, children’s services and community safety responsibilities to work in partnership to address the wider determinants of health and wellbeing.

### *Proposed purpose of the Surrey Heartlands Integrated Care Partnership*

To avoid duplication of purpose with the Surrey-wide Health and Wellbeing Board, we propose that in Surrey Heartlands Integrated Care System, its Integrated Care Partnership discharges the Health and Wellbeing Board’s responsibilities with regards to the Better Care Fund within the Surrey Heartlands geography.

Working to this remit, the role of the partnership would be to coordinate place-based plans across Surrey Heartlands and prepare national Better Care Fund submissions in order to further progress the existing functions of the Health and Wellbeing Board.

Membership would therefore include representation from Surrey Heartland’s place-based partnerships, district and borough councils and voluntary sector organisations.

We propose that the Partnership meets on the same day as the Health and Wellbeing Board, initially with the same frequency

## *Proposed membership of the Surrey Heartlands Integrated Care Partnership*

1. The Leader of Surrey County Council (Chair Designate)
  2. Joint Executive Director for Adult Social Care and Integrated Commissioning, Surrey County Council/Surrey Heartlands ICS
  3. Director for Children's Services, Surrey County Council
  4. Director for Public Health, Surrey County Council
  5. Representative of Healthwatch Surrey
  6. Chief Executive Officer of Surrey Heartlands Integrated Care System
  7. Joint Executive Director for Public Service Reform (Surrey Heartlands ICS/Surrey County Council
  8. Lead Primary Care Network Clinical Director,
  9. Representatives of the District/Borough Councils (Elected)
  10. Representatives of the District/Borough Councils (Officer)
  11. Representatives of the Voluntary, Community and Faith Sector (standing)
  12. Representatives of the Voluntary, Community and Faith Sector (selected each meeting)
  13. Representatives of the Voluntary, Community and Faith Sector (selected each meeting)
  14. Representative of G&W place-based partnership
  15. Representative of NW Surrey place-based partnership
  16. Representative of Surrey Downs place-based partnership
  17. Representative of East Surrey place-based partnership
- Participant: Chair of Surrey Heartlands Integrated Care System

## **5. Challenges**

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- There is an interdependency between the task of establishing the statutory Integrated Care Board from April 2022 and establishing the Integrated Care Partnership. In practical terms, as the ICP will be established by the Integrated Care Board and Local Authority within an area jointly, so cannot formally be established until the ICB designated chair and Chief Executive of the Integrated Care System is in place. It will not be possible to formally convene the Integrated Care Partnership before the Integrated Care Board has been established.
- The BCF plan is Surrey-wide, so the Health and Wellbeing Board would need to retain responsibility for formal sign off of submissions. Oversight of performance and planning within Surrey Heartlands would sit with the ICP. Mechanisms for coordination with Frimley ICS with regards to those areas of Surrey within the Frimley system would be developed as the working relationships between the two ICSs and Surrey County Council evolve.
- Currently, responsibilities relating to the Better Care Fund sit with the Commissioning Collaborative and Committees in Common. These interdependencies will need to be reviewed as the ICSs start to operate in shadow form.

## 6. Timescale and delivery plan

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NHS England are expecting Integrated Care Partnerships to have appointed an ICP Chair Designate by February 2022 and expect all ICPs to be operating in interim form from April 2022, and to have been able to build their membership to a steady state by September 2022.

Surrey Heartlands Integrated Care System is working towards standing up the ICP in shadow form from January 2022. Further engagement with VSCE partners will take place during this time.

## 7. How is this being communicated?

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Proposals for the Integrated Care Partnership, once finalised, will be communicated as part of the overall Surrey Heartlands Integrated Care System Development communication strategy and incorporated into Frimley ICS communication plans.

## 8. Next steps

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- These proposals will be reviewed and agreed by the ICB Chair designate, the ICS Chief Executive and the Leader of Surrey County Council.
  - The ICS governance group will coordinate with other partnerships to develop a better understanding of the interdependencies and areas of common interest in different forums including Urgent Care Delivery Board, Neighbourhood Board etc.
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