



**Brighton & Hove
City Council**

**Integration and Innovation: Working Together to Improve Health & Social
Care**

NHS White Paper Feb 2021/Health & Care Bill July 2021 Briefing

Health and Wellbeing Board

27th July 2021

Purpose

- Rationale behind the legislation
- Embedding place based working
- Continually evolving partnership working

4

Timetable/further legislation

- The Government intends to move quickly on this Bill – i.e. two readings of Bill over the summer, shadow structures in place by Oct 2021, and full implementation from Spring 2022.
- The white paper acknowledges the need for social care reform to support its ambitions – the Government will publish plans for reform in 2021.

The White Paper/Bill

- The legislation supports the direction of travel established in recent years by the Long Term Plan

- 9
- Whilst little that's new in policy terms, this legislation presents a shift in the NHS away from the internal market to a partnership model.

Integration

- The legislation will give **Integrated Care Systems (ICSs)** a statutory footing. The statutory ICS arrangements will be made up of two core elements working across Sussex:
 - **The Integrated Care Partnership (ICP)** made up of the NHS, Local Government, community and voluntary sector, Healthwatch and other partners.
 - **The Integrated Care Board (ICB)** will be the statutory body that brings the NHS together locally, working alongside local authorities to improve population health and care.

Note: The term "ICPs" have previously been used nationally and locally to describe the development of partnerships at place

ICB Structures

- CCGs will be abolished and their commissioning functions will transfer to the ICB, as potentially will NHS England commissioning functions, including around Public Health.
- NHSE will set finance allocations to each ICB, including a duty to deliver annual financial balance.
- Every ICB has statutory duties, including to secure continuous improvement in the quality of services and in patient outcomes, and to reduce health inequalities (in terms of access and of outcomes).
- Each ICB must develop an **ICB 5 year forward plan** (refreshed annually) for primary, community and acute healthcare services. ICB 'forward plans' must be shared with local Health & Wellbeing Boards, and must take account of local Joint Health & Wellbeing Strategies (JHWS).

Integrated Care Board

- The ICB will be the senior decision-making structure for the local NHS, providing strategic leadership across the ICS. Every ICB will have a duty to:
 - Promote the NHS Constitution
 - Be efficient, effective and economical
 - Secure continuous improvement in the quality of services and in patient outcomes
 - Reduce health inequalities (in terms of access and of outcomes)
 - Promote patient involvement
 - Promote patient choice
 - Obtain appropriate expert advice
 - Promote innovation
 - Promote research
 - Promote education & training
 - Promote integration (within the NHS and between the NHS and LA social care)

Integrated Care Partnership

- Each ICS will have an ICS Partnership established by the NHS and local government as equal partners. The Partnership will operate as a forum to bring partners together across the ICS area to align purpose and ambitions with plans to integrate care and improve population health and wellbeing.
- The Partnership must include local authorities that provide social care services in the ICS area and the NHS. Beyond this, members may be from health and wellbeing boards, other statutory organisations, VCSE sector partners, social care providers and organisations with a relevant wider interest.
- The ICS Partnership will have a specific responsibility to develop an 'integrated care strategy' for its whole population, covering health and social care (both children's and adults' social care), and addressing the wider determinants of health and wellbeing.

Place

- Sussex ICB will deliver through three place-based partnerships: East Sussex, West Sussex, and Brighton & Hove. Each place-based partnership will be responsible for:
 - Operational issues and pressures
 - Population health management using public health principles
 - Health inequalities
 - Transformation of clinical pathways and health and social care service models
 - Primary care
 - Priorities for social care and housing, and other services related to delivering outcomes for communities
- Improving population health will be central to the role of the place based partnerships, with Directors of Public Health having a lead role in coordinating and leading partnership plans across the range of services and activity that support this.
- Each place-based partnership will report to both its local Health and Wellbeing Board and to the ICB.

Brighton and Hove

- People with multiple complex needs
- Mental Health in Children and Adults
- People with multiple long term conditions
- Cancer
- Health inequalities
- Promoting Prevention

Accountability

- 2012 Health & Care Act introduced a firewall between Secretary of State (SoS) and NHSE. These measures have been relaxed to allow SoS to direct NHSE.
- The SoS will be given new powers to intervene in NHS reconfiguration plans. Currently, the SoS can only become involved following a referral from a local authority.
- A new Social Care Assurance Framework will be introduced, giving the Government more oversight of local authority social care. CQC will have a new role to assess social care delivery.
- The Bill will change the legal framework for Discharge to Assess, removing the current requirement for people to receive social care assessments prior to hospital discharge.

BHCC Representation

- Each of the three Sussex upper-tier Local Authority will be represented at both the ICB and the ICP.
- For the ICB, representation is likely to be the Directors of Adult Social Services.
- For the ICP, the current suggestion is that representation will be through HWB Chairs and HOSC Chairs.
- BHCC will play a leading role in locally developed “place-based partnerships”.

Health & Wellbeing Boards

- HWBs will be retained with further guidance anticipated on how they will align with ICBs and ICPs.
- There will be a legal duty for the ICB 5 year forward plan to take account of local Joint Health & Wellbeing Strategies (JHWS) and for the ICP Integrated Care Strategy to take account of JSNAs.
- There will be a parallel requirement for local JHWS to take account of ICB and ICP plans.

