

Subject:	NHS Sussex Integrated Care Board – Invitation to join the Greater Brighton Economic Board		
Date of Meeting:	16 October 2024		
Report of:	Chair, Greater Brighton Officer Programme Board		
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Ward(s) affected:	All		

FOR GENERAL RELEASE**1. PURPOSE OF REPORT AND POLICY CONTEXT**

- 1.1 The Greater Brighton Economic Board (“the Board”) was established in 2014 as part of the Greater Brighton City Region Deal with Government.
- 1.2 The Board comprises the Greater Brighton Economic Joint Committee (“GBEJC”), on which the local authorities are represented; and the Greater Brighton Business Partnership (“GBBP”), on which the business, university and further education sectors, and South Downs National Park Authority are represented. Meetings of the Board comprise concurrent meetings of GBEJC and GBBP.
- 1.3 The Integrated Care System that covers Sussex (NHS Sussex) is responsible for healthcare for 1.7 million people across Sussex. It employs 50,000 staff with the largest components being the 20,000 employees at University Hospitals Sussex and 8,000 at East Sussex Healthcare. The NHS in Sussex has an asset base that covers 236 GP Practices, 9 acute sites, and around 14 other sites. The NHS Sussex Integrated Care Board (ICB) has 850 employees, and commissions the services for NHS Sussex health care providers. It currently has contracts with 267 individual providers making the organisation a big driver of economic growth in the area, both with the number of people it employs and the amount it spends on procurement within the region. The ICB has expressed an interest in becoming a formal member of the Board, which would broaden the geographical reach of the Board to all of Sussex.

2. RECOMMENDATIONS:

- 2.1 That the Board agrees to formally invite the NHS Sussex ICB to become a constituent member of the Board, joining the GBBP subject to both their agreement and formal ratification from the Board’s member organisations.

3. CONTEXT/ BACKGROUND INFORMATION

- 3.1 The following bodies are the current members of the Board:
 - i. Adur District Council
 - ii. Arun District Council

- iii. Brighton & Hove City Council
- iv. Crawley Borough Council
- v. Lewes District Council
- vi. Mid-Sussex District Council
- vii. Worthing Borough Council
- viii. Adur & Worthing Business Partnership
- ix. Brighton & Hove Economic Partnership
- x. Chichester College Group
- xi. University of Brighton
- xii. University of Sussex
- xiii. South Downs National Park Authority

- 3.2 The GBEJC comprises the bodies specified in paragraphs 3.1(i) to (vii); and GBBP comprises the bodies specified in paragraphs 3.1(viii) to (xiii).
- 3.3 Board membership has been extended twice since the Board's inception; Crawley Borough Council and Arun District Council joined the GBEJC in February 2018 and in October 2019 respectively.
- 3.4 The NHS Sussex ICB attended the Board meeting as observers on 16 July 2024 and have written a letter to the Chair formally requesting to join the Board.
- 3.5 When considering the request by Crawley to join the Board in 2018, it was agreed that the Board should adopt a fair and consistent approach to organisations that express an interest in joining, and for proposed new members consideration would need to be given to the following five questions;
- i. Does the organisation buy into the Board's agreed vision and priorities?
 - ii. Do they share economic characteristics and represent the Greater Brighton functional economic area?
 - iii. Do they add capacity to help the Board deliver on its agreed vision and priorities?
 - iv. Will they add to the Board's reputation, in terms of legitimacy, standing and reach?
 - v. Are they going to actively participate and commit resource to supporting the Board and deliver the work programme?

This methodology was also employed with regards Arun District Council's request to join in 2019.

- 3.7 The Board is asked to extend its membership; formally inviting the NHS Sussex ICB to become a constituent member of the GBBP. This is subject to the approval of NHS Sussex ICB. It would also trigger a variance in the Board's Heads of Terms (see Appendix 1) that will require the formal ratification of all Joint Committee members.
- 3.8 Some points for consideration are summarised below;

Does the organisation buy into the Board's agreed vision and priorities?

- 3.8.1 Inclusive growth is a priority for the Board. Whilst it is acknowledged that Sussex is a relatively affluent region based on many economic metrics, there exist pockets of significant deprivation, particularly along the coast. People living in deprived circumstances may experience poor quality housing, low incomes, a lack of access to good food and places to exercise, and a sense of social isolation. These factors often have a negative influence on people's health choices and outcomes, with smoking, alcohol misuse, obesity and poor mental health more likely. This, in turn, increases the risk of them developing long term conditions which reduces their life expectancy, and this can also place demand on health and social care services.
- 3.8.2 NHS Sussex has identified that 75% of deaths and disability across Sussex are influenced by health inequalities. The links between inequality, health, productivity and inclusive growth are clear – a healthy population is more productive and able to enjoy the benefits associated with growth. By working closely with NHS Sussex ICB and wider health partners, the Board can better address the challenge associated with health inequality and create the conditions where more residents can benefit from inclusive growth.
- 3.8.3 Air Pollution has been identified as the largest single environmental risk factor in the UK; it is associated with 28,000-36,000 premature deaths annually, and disproportionately affects the most vulnerable in society. Estimates of the costs of air pollution impacts to human health in the UK are in the region of £20 billion per year. With around 4-5% of the country's carbon emissions and an increasing burden on the health of communities from climate change, the NHS has an essential role to play in meeting the Net Zero targets set under the 2008 Climate Change Act.
- 3.8.4 Delivering a "Net Zero" National Health Service sets out two targets for the NHS;
- Net zero by 2040 for directly controlled emissions (NHS Carbon Footprint), with an 80% reduction by 2028-32.
 - Net zero by 2045 for the emissions the NHS can influence but not directly control (NHS Carbon Footprint Plus), with an 80% reduction by 2036-39.
- 3.8.5 The Health and Social Care Act 2022 places duties on NHS England (NHSE), and all Trusts, Foundation Trusts, and Integrated Care Boards to contribute towards these emissions reductions, climate adaptation and wider environmental targets. Decarbonising buildings is a key component of the net zero transition, with 10% of the NHS's carbon footprint coming from building energy. Grid decarbonisation has contributed towards reduced emissions for the NHS, but NHS organisations must urgently take action to improve building fabric, optimise heating and lighting efficiency and replace existing fossil fuel heating systems.
- 3.8.6 The Board has recently agreed to use its convening powers and influence to drive transformational change across the region in the form of Sussex Energy, a mission for Sussex to achieve net zero energy status by 2040. This ambitious goal seeks to ensure that our community's energy use equals the zero-carbon energy generated locally, thereby enhancing energy security, driving down energy bills and addressing urgent climate concerns, at the same time as driving economic growth.

3.8.7 The Sussex Energy mission dovetails with the 'Net Zero' National Health Service targets. NHS Sussex has a high energy consuming infrastructure, across the whole region, making them a key anchor partner for scaled energy solutions.

Do they share economic characteristics and represent the Greater Brighton functional economic area?

3.8.8 As outlined in 3.8.6 above, the Sussex Energy Mission, launched by the Board in July, will require the Board to engage with stakeholders and develop partnerships across the Sussex region, so having NHS Sussex ICB as a Board member with a Sussex wide footprint will help build these relationships. The broadening of the membership to one with a wider geography is relevant and timely.

3.8.9 Furthermore, in line with the new Government's ambitions around devolution, discussions have been taking place around what a sensible devolution geography looks like in this region. Devolution is a collaborative process, and any credible move towards a devolution settlement would need to involve regional stakeholders and influencers such as NHS Sussex.

Will they add to the Board's reputation, in terms of legitimacy, standing and reach?

3.8.10 The inclusion of NHS Sussex ICB would be an asset to the Board. The ICB is a major economic actor in Sussex. It allocates a £3.6bn annual NHS budget, commissions services for the 1.7 million people across Sussex and supports the delivery of the system's five-year health and care strategy: Improving Lives Together. In its capacity as commissioner of NHS services, the ICB is able to work with wider NHS partners across Sussex e.g. the NHS Trusts, Health & Wellbeing Boards, Primary Care Networks etc.

3.8.11 NHS Sussex ICB is a statutory member of the Sussex Health and Care System. The Sussex Health and Care Assembly, as a statutory joint committee between the NHS and local government (NHS Sussex, Brighton & Hove City Council, East Sussex County Council and West Sussex County Council), comes together to formally agree the strategic direction for the health and care system. Its core purpose is to agree the strategic direction and facilitate joint action across a broad alliance of organisations to improve the outcomes, equality of access and patient experience of health and care services for all communities across Sussex. The Assembly has specific responsibility to develop Improving Lives Together, for its whole population using the best available evidence and data, covering health and social care, and addressing health inequalities and the wider determinants which drive these inequalities.

3.8.12 The Sussex wide footprint of an organisation that touches so many people's lives makes NHS Sussex an important influencer with many partnerships which will be instrumental to spread the Board's ambitions.

Are they going to actively participate and commit resource to supporting the Board and deliver the work programme?

3.8.13 The ICB has an established Care Without Carbon team supporting experts by experience across all NHS organisations. The Team is building a good track record

of securing high levels of investment and delivering large scale low carbon energy projects. To further advance its net zero objectives, the NHS Sussex ICB is forming active partnerships with wider public sector partners. The Board provides the NHS with a fantastic opportunity to work alongside public sector partners to actively communicate the importance of the energy mission in improving population health; to build resilience in energy supply by leveraging solar, wind, hydro, and other sustainable technologies; and to work together to support a reduction in the overall public sector estate footprint through better support for local communities. Having a Sussex-wide footprint and a large number of assets provide significant anchor tenant potential and community reach, as in the case of the Worthing Heat Network, where NHS Sussex is a key anchor tenant and is working with Worthing Borough Council and other partners to deliver this transformational work programme.

3.8.14 The NHS Sussex ICB are also supporting work on the emerging City Food Strategy Action Plan 2025-30, which is being developed by the Brighton & Hove Food Partnership and will feed into the wider Greater Brighton Integrated Food Systems Plan.

Do they add capacity to help the Board deliver on its agreed vision and priorities?

3.8.15 By pulling together the resources of current Board Members, the ICB and wider NHS partners, there will be access to a larger pool of experience and expertise which will extend the range of solutions available. There will be greater leverage of DNOs and other suppliers through stronger collective purchasing power. By working together, across a wider geography, there will be opportunities to optimise the use of a vast public sector estate. There is opportunity to take a joined-up approach in engaging local communities to embrace sustainability and create local wealth.

Governance

3.8.16 NHS Sussex ICB attended the July Board meeting and Sussex Energy Launch as an observer. They have nominated a prospective representative to sit on the Board as well as a deputy and have also nominated a member of the Team to sit on the Programme Board. NHS Sussex ICB have also attended recent Sussex Energy meetings so are already participating in and adding value to the Board's work.

4 ANALYSIS & CONSIDERATION OF ANY ALTERNATIVE OPTIONS

4.1 The alternative would be for the membership to remain as it is currently, but for the reasons outlined in 3.8.1-3.8.16, the recommendation is that NHS Sussex ICB should be formally invited to join the Board.

5 COMMUNITY ENGAGEMENT & CONSULTATION

5.1 The governance committees of constituent Board members will be consulted as part of the changes to Heads of Terms.

6 CONCLUSION

- 6.1 The Board is asked to note the benefits of NHS Sussex ICB joining the Board and accordingly approve the extension in membership; formally inviting the ICB to become a constituent member of the Business Partnership. Changing the Board's membership will trigger a variance in the Board's Heads of Terms that will require the formal ratification of all Joint Committee members.

7. FINANCIAL & OTHER IMPLICATIONS:

Financial Implications:

- 7.1 In joining the Greater Brighton Economic Board, NHS Sussex ICB will be required to make a budgetary contribution towards operational costs in line with other Business Partners as agreed within the Operational Arrangements 2024/25 at the Board meeting on 16 July 2024.

Finance Officer Consulted: Haley Woollard, Head of Finance, Planning & Reporting

Date: 08/10/24

Legal Implications:

- 7.2 The legal implications in relation to the recommendations are contained within the body of this report.

Lawyer Consulted: Siobhan Fry, Head of Legal, Commercial

Date: 08/10/24

Equalities Implications:

- 7.3 The NHS Sussex ICB and wider NHS organisations are committed to reducing health inequalities. By working closely with NHS Sussex ICB and wider health partners, the Board can better address the challenge associated with health inequality and create the conditions where more residents can benefit from inclusive growth.

Sustainability Implications

- 7.4 There are no sustainability implications directly related to this report. However, both the Board and NHS Sussex ICB have ambitious targets associated with net zero, and this will be a strong feature of the future work programme.

SUPPORTING DOCUMENTATION

Appendices:

Greater Brighton Economic Board Heads of Terms