

KENT AND MEDWAY JOINT HEALTH AND WELLBEING BOARD

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UPDATE ON THE DEVELOPMENT OF THE INTEGRATED CARE BOARD

Report from: Rachel Jones, Executive Director of Strategy and Population Health,
NHS Kent and Medway Clinical Commissioning Group

Author: Donna Carr, Senior Programme Manager, Population Health,
NHS Kent and Medway Clinical Commissioning Group

Summary

This report provides an update on the development of the NHS Integrated Care Board (ICB) and Kent & Medway Integrated Care Partnership (ICP) and outlines the forthcoming governance and oversight arrangements for population health, health inequalities and prevention.

1. Budget and policy framework

- 1.1. The ICB and ICP will be formally established once the Health and Care Bill receives royal assent.

2. Background

- 2.1. The implementation of the Integrated Care Board (ICB) has been delayed in parliament (the Health and Care Bill) and is now expected to go live in July 2022.
- 2.2. As part of these interim arrangements, it is also proposed to run the ICP in shadow form before July 2022. The ICP will be a Joint Committee between the ICB, Kent County Council and Medway Council, and will, in effect, replace the existing Joint Board.
- 2.3. The Kent and Medway Joint Health and Wellbeing Board (Joint Board) was established in 2018 as an advisory Joint Sub Committee of the Kent Health and Wellbeing Board and the Medway Health and Wellbeing Board. This was originally time limited for a period of two years. Both the Medway and Kent Boards agreed to extend this for a period of four years from 1 April 2020. However, this arrangement can be reviewed annually.

3. Advice and analysis

- 3.1. Kent County Council, Medway Council and district/borough councils are important partners and stakeholders in the new ICB and ICP. The approach to the development of the ICB and ICP will continue to be agreed with all partners as further submissions to the NHS regulator (NHSE/I) are made.

These have been put back in line with the delay to formal ICB/ICP implementation.

4. Risk management

4.1. As the Joint Board is a non-decision-making body, there are no specific risk management implications arising from these proposals. However, the ICB and the ICP cannot be formally established until the Health and Care Bill receives royal assent.

5. Consultation

5.1. There is ongoing engagement with all partners and stakeholders on the development of the ICB/ICP. Regular discussions are being held at a range of forums with council participation. Support for submitted documents is achieved via the existing system wide K&M Partnership Board.

6. Financial implications

6.1. The cost for supporting the Joint Board is shared, with each local authority supporting the Board for one year in turn within existing resources. The Joint Board itself does not have a budget.

7. Legal implications

7.1. In the case of the Joint Board, the scope for two or more Health and Wellbeing Boards to establish arrangements to work jointly, whilst not mandatory, was provided in section 198 of the Health and Social Care Act 2012. Section 198 allowed for the joint exercise of functions by a Joint HWB or by a Joint Sub Committee or, as was the case for the Joint Board, for the establishment of a Joint Sub Committee to advise the participating HWBs on any matter related to the exercise of their functions.

7.2. The ICP will be established as a Joint Committee of the Integrated Care Board, Kent County Council and Medway Council. The Health and Care Bill proposes that Local Government and Public Involvement in Health Act 2007 shall contain the following provision: “An integrated care board and each responsible local authority whose area coincides with or falls wholly or partly within the board’s area must establish a joint committee for the board’s area (an “integrated care partnership”)”.

7.3. Whilst it is proposed to run the ICP in shadow form until July 2022, it cannot carry out any functions until it is formally established by the ICB, Medway Council and Kent County Council as a Joint Committee.

8. Oversight of Health Inequalities, Population Health and Prevention

8.1. Currently, the Population Health and Prevention Group, established in July 2021, provides oversight and direction to deliver a shared vision for improving population health, preventing ill health, reducing health inequality, and promoting physical and mental health and wellbeing across Kent and Medway. The Group reports into both the ICS Partnership Board and Joint Health and Wellbeing Board.

8.2. From July 2022, the Inequalities, Prevention and Population Health Committee will be given this role and remit. This will be a formal committee of the ICB with the necessary delegated authority to act on behalf of the ICB on issues within its remit. Both Directors of Public Health will be members of the Committee.

8.3. Due to the nature of its work, the Committee will also be responsible to the Integrated Care Partnership Joint Committee to assist the Joint Committee in its role of developing a wider Kent and Medway Integrated Care Strategy and associated outcome measures. This Committee will continue to oversee the development and implementation of the Health Inequalities Strategic Action Plan, originally agreed by the Joint Health and Wellbeing Board in September 2020.

9. Recommendation

9.1. The Joint Board is asked to note the update on the development of the ICB/ICP and the Inequalities, Prevention and Population Health Committee.

Lead officer contact

Rachel Jones, Executive Director Strategy & Population Health

Tel: 07826 531754

Email: rachel.jones22@nhs.net

Author contact:

Donna Carr, Senior Programme Manager - Population Health

Tel: 01634 335159

Email: donna.carr3@nhs.net

Appendices

None