

CAMBRIDGESHIRE & PETERBOROUGH HEALTH & WELLBEING BOARD WHOLE SYSTEM JOINT SUB-COMMITTEE	AGENDA ITEM No. 10
DATE: 25th March 2022	PUBLIC REPORT

ESTABLISHMENT OF A JOINT CAMBRIDGESHIRE & PETERBOROUGH HEALTH AND WELLBEING BOARD PROPOSALS

R E C O M M E N D A T I O N S	
<i>To:</i>	<i>Cambridgeshire and Peterborough Health and Wellbeing Board Whole System Joint Sub-Committee</i>
<i>From:</i>	<i>Jyoti Atri, Director of Public Health</i>
<p>The Cambridgeshire and Peterborough Health and Wellbeing Board Whole System Joint Sub-Committee is recommended to:</p> <ol style="list-style-type: none"> 1. read this report on the proposals to form a Joint Cambridgeshire & Peterborough Health & Wellbeing Board which works as an aligned board with the Integrated Care Partnership. 2. endorse the revised Terms of Reference set out in Appendix A. 3. recommend the changes to both Full Councils to enable the necessary changes to be made to the respective Councils' Constitution. 	

Officer contact:		Member contact:	
Name:	Jyoti Atri	Name:	Cllr Susan Van de Ven and Cllr Irene Walsh
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1.	BACKGROUND
1.1	Under the Health & Social Care Act 2012 Upper Tier Local Authorities (UTLA) have a statutory function to have a Health & Wellbeing board (HWB) as a formal committee of the local authority. In 2019 procedures were put in place to establish joint working relationships between the Cambridgeshire HWB and Peterborough HWB.
1.2	Section 198 of the Health and Social Care Act 2012 provides that Two or more Health and Wellbeing Boards may make arrangements for: - (a) any of their functions to be exercisable jointly (b) any of their functions to be exercisable by a joint sub-committee of the Boards (c) a joint sub-committee of the Boards to advise them on any matter related to the exercise of their functions.
1.3	In 2019 both UTLAs agreed to an approach in establishing formal joint working relationships between the HWBs. This arrangement was possible as the two Health and Wellbeing boards had the same legal responsibilities. Both UTLAs changed their terms of references to allow for the creation of the Whole System Health & Wellbeing Board sub-committee and the Core Health & Wellbeing sub-committee. Both sub-committees had delegated authority to act on behalf of the Cambridgeshire and Peterborough HWB “Parent boards”.
2.	PURPOSE
2.1	The landscape for HWBs has changed dramatically with the formation of the Integrated Care System and locally, consideration has been given to how existing arrangements can provide the opportunity to build greater alignment between different system partners.
2.2	Cambridgeshire and Peterborough health and care partners, through a number of HWB and ICP Integration development sessions have committed to establishing a single strategy for the system that will be owned by both the HWBs and ICP.
2.3	Our approach in Cambridgeshire & Peterborough has been to establish new collaborative working arrangements between the Health & Wellbeing Boards and the developing Integrated Care Partnership (ICP), so that there is a commonality of purpose that ensures effective joined up decision making.
2.4	To enable delivery of this ambition, work is underway on agreeing common membership for the ICP and the HWB and streamlining arrangements for holding meetings to allow business to proceed in a more coordinated way.
2.5	This paper proposes further changes to the terms of reference to allow for the creation of a Joint Cambridgeshire & Peterborough Health & Wellbeing Board that recognises the new collaborative arrangement for working together.

3.	GOVERNANCE
3.1	<p>Guidance from the DHSC issued in September 2021 to support the implementation of Integrated Care Systems, including Integrated Care Partnership (ICP) Engagement Document: Integrated Care System (ICS) Implementation made it clear that the HWB cannot act as an ICP because they are separate legal entities with statutory responsibilities that cannot be delegated to each other. The White paper on Integration and Innovation: Working together to improve health and social care (published in 2021) establishes Integrated Care Systems (ICSs) on a statutory footing through both the NHS Integrated Care Board and an Integrated Care Partnership (ICP).</p>
3.2	<p>The dual structure recognises that there are two forms of integration a) with the NHS to remove barriers to collaboration and to make working together across the NHS an organising principle and b) between the NHS and others, principally local authorities, to deliver improved outcomes to health and wellbeing for local people.</p>
3.3	<p>The White paper specifies that an ICP should have the following functions:-</p> <ul style="list-style-type: none"> • System level partnership with NHS and local government as equal partners • Alignment of partners strategies across the system • Improving care, health and wellbeing for the local population.
3.4	<p>Through development sessions of HWB and ICP partners in October 2021 and January 2022 the collaborative approach to developing a single strategy has started to take form. The legislation is clear that both the ICP and HWBs would be independent boards but by working in alignment allows for a continued focus on the wider determinants of health. This approach reflects a genuine ambition across the local health and care system to develop innovative ways of working together.</p>
3.5	<p>Both ICP and HWBs would be independent boards with shared agendas. Where there is a need to take separate decisions, the function to do so could be achieved through a Part A (Shared HWB/ICP) and Part B (ICP only or HWB only) agenda. Both HWB and ICP members could sit at the one meeting with voting rights as assigned via the terms of reference. A common membership between the HWBs is proposed of around 11 members that would both be ICP and HWBs members. Both HWB and ICP will have some members that will not be shared and these are being worked through. For example Health partners will finalising membership from the acute and community provider Trusts and representatives from primary care, place based alliances and the community sector.</p>
3.6	<p>Changes to the terms of reference include the following:</p> <ul style="list-style-type: none"> • Context & Introduction – providing the background to the integrated approach with the ICP and the proposal for a Joint Cambridgeshire & Peterborough HWB. • Removal of the two sub-committee – i.e. Whole System HWB sub-committee (replaced by the Joint Cambridgeshire & Peterborough HWB) and the removal of the Core sub-committee (functions also replaced by the Joint Cambridgeshire & Peterborough sub-committee) • Membership proposals – refining current membership so that a shared membership exists with the ICP to allow for collaborative decision making.
4.	ANTICIPATED OUTCOMES OR IMPACT
4.1	<ul style="list-style-type: none"> - Co-ordinated system approach with shared Health & Wellbeing strategy HWB - Continued focus on the wider determinants of health which have an impact on an individual's health and wellbeing.

	- Health & Social care system accountability on delivering outcomes based on needs of the population								
5.	IMPLICATIONS								
	Financial Implications								
5.1	There are no financial implications as a result of this report.								
	Legal Implications								
5.2	The legal implications are around establishing a Joint Cambridgeshire & Peterborough Health & Wellbeing board are addressed in section 3. Specific reference is drawn to 3.5 and 3.6.								
	Equalities Implications								
5.3	There are no direct equality implications as a result of this report.								
6.	APPENDICES								
6.1	Appendix 1 Cambridgeshire & Peterborough Joint Health & Wellbeing Board Terms of Reference (draft)								
7.	SOURCE DOCUMENTS								
	<table border="1"> <thead> <tr> <th>Source Documents</th> <th>Location</th> </tr> </thead> <tbody> <tr> <td>Section 198 Health & Social Care Act 2012</td> <td>https://www.legislation.gov.uk/ukpga/2012/7/contents</td> </tr> <tr> <td>White Paper integration & Innovation DHSC Feb 2021</td> <td>Integration and innovation: working together to improve health and social care for all (HTML version) - GOV.UK (www.gov.uk)</td> </tr> <tr> <td>Integrated Care Partnerships Engagement Document</td> <td>Integrated Care Partnership (ICP) Engagement Document: Integrated Care System (ICS) Implementation</td> </tr> </tbody> </table>	Source Documents	Location	Section 198 Health & Social Care Act 2012	https://www.legislation.gov.uk/ukpga/2012/7/contents	White Paper integration & Innovation DHSC Feb 2021	Integration and innovation: working together to improve health and social care for all (HTML version) - GOV.UK (www.gov.uk)	Integrated Care Partnerships Engagement Document	Integrated Care Partnership (ICP) Engagement Document: Integrated Care System (ICS) Implementation
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