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| Report to: | Council | Date of Meeting: | Thursday 16 November 2023 |
| Subject: | Cheshire & Merseyside Health and Care Partnership | | |
| Report of: | Assistant Director of Corporate Resources and Customer Services (Strategic Support) | Wards Affected: | (All Wards); |
| Portfolio: | Cabinet Member - Health and Wellbeing | | |
| Is this a Key Decision: | No | Included in Forward Plan: | No |
| Exempt / Confidential Report: | No | | |

Summary:

This report seeks authority for the Council to become a member of the new statutory Integrated Care Partnership for Cheshire and Merseyside (to be known as the Cheshire & Merseyside Health and Care Partnership) and to agree its terms of reference.

Recommendation(s):

- (i) That the Council agrees to become a member of the Cheshire & Merseyside Health and Care Partnership,
- (ii) That the terms of reference of the Cheshire & Merseyside Health and Care Partnership set out in the Appendix be adopted,
- (iii) That the Cabinet Member – Health and Wellbeing be nominated to be the Council's representative on the Cheshire & Merseyside Health and Care Partnership
- (iv) That delegated authority be given to the Chief Executive to nominate such officers to the Cheshire & Merseyside Health and Care Partnership as considered appropriate, and
- (v) That delegated authority be given to the Chief Legal and Democratic Officer & Monitoring Officer to make such amendments to the Constitution as are necessary as a result of this decision.

Reasons for the Recommendation(s):

The Council must become a member of the Integrated Care Partnership as this is a statutory requirement under section 116ZA of the Health and Social Care Act 2022.

Alternative Options Considered and Rejected: (including any Risk Implications)

The establishment of the ICP is required by legislation and any delay in this could have reputational risks attached to it. This can be reduced by the agreeing to the recommendations in this report.

The Council could seek to make further amendments to the terms of reference but these would need to be agreed between all the local authorities and NHS partners.

What will it cost and how will it be financed?

(A) Revenue Costs

N/A see below.

(B) Capital Costs

N/A see below.

Implications of the Proposals:

Resource Implications (Financial, IT, Staffing and Assets):

There are no direct financial implications of this decision as this report is seeking to approve a statutory committee and the appointment of members to the committee. Any decisions made by the ICP which would involve budgetary implications for the Council would need to be made in accordance with the Council's constitutional requirements.

In the event that officers are appointed to the Committee, then this will have a financial implication in terms of time only, which would be managed within existing budgets

Legal Implications:

Integrated Care Partnerships are a fundamental part of the Integrated Care System which was established by the Health and Social Care Act 2022.

Under section 116ZA, each integrated care board and local authority within the integrated care board (ICB) area must establish a joint committee for the board's area. The ICB must consist of at least one member of the ICB and one member from each local authority and the ICP itself can determine any other membership. The ICP can also determine its own procedures, such as quorum.

The ICP is responsible for the preparation of the Integrated Care Strategy which sets out how the population needs of the area can be met by the ICB, NHS England and local authorities.

Section 116B of the Health and Social Care Act 2002 provides that local authorities and ICBs must have regard to any Integrated Care Strategy and any joint Health and Wellbeing Strategy when exercising its functions.

Equality Implications:

There are no equality implications directly from implementing the recommendations within this report.

Impact on Children and Young People:

No implications directly from implementing the recommendations within this report.

Climate Emergency Implications:

The recommendations within this report will

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| Have a positive impact | No |
| Have a neutral impact | Yes |
| Have a negative impact | No |
| The Author has undertaken the Climate Emergency training for report authors | Yes |

Contribution to the Council's Core Purpose:

Protect the most vulnerable: The establishment of the ICP and the Council's participation will assist the Council in delivering this element of the Council's core purpose.

Facilitate confident and resilient communities: The establishment of the ICP and the Council's participation will assist the Council in delivering this element of the Council's core purpose.

Commission, broker and provide core services: The establishment of the ICP and the Council's participation will assist the Council in delivering this element of the Council's core purpose.

Place – leadership and influencer: The establishment of the ICP and the Council's participation will assist the Council in delivering this element of the Council's core purpose.

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| Drivers of change and reform: |
| Facilitate sustainable economic prosperity: |
| Greater income for social investment: |
| Cleaner Greener |

What consultations have taken place on the proposals and when?

(A) Internal Consultations

The Executive Director of Corporate Resources and Customer Services (FD.7395/23) and the Chief Legal and Democratic Officer (LD.5595/23) have been consulted and any comments have been incorporated into the report.

(B) External Consultations

The constituent local authorities and partners in the NHS have been working together on the terms of reference in accordance with the relevant legislation and these are presented in this report.

Implementation Date for the Decision

Immediately following the Council meeting.

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Appendices:

Draft Terms of Reference for the Cheshire & Merseyside Health and Care Partnership.

Background Papers:

There are no background papers available for inspection.

1. Introduction/Background

- 1.1 The Government reforms of the NHS under the Health and Social Care Act 2022 created new integrated care systems with responsibility across wider geographical footprints. The new integrated care system (ICS) for the Council's area covers the footprints of the nine local authorities in Cheshire and Merseyside. Finances are directed to the Cheshire and Merseyside area and can then be devolved down to local areas (known as "Place"). Our "Place" operates through the Cheshire West Health and Care Partnership, which is comprised of partners from across the health services in Sefton.
- 1.2 As part of the statutory governance arrangements, the ICS is required to set up an integrated care partnership for Cheshire and Merseyside, with local authority membership from each "Place".
- 1.3 The Integrated Care Partnership (ICP) will drive the strategic direction and plans across the Cheshire and Merseyside area, and this work needs to be aligned with other strategies and the work of the local Health and Wellbeing Boards. The ICP allows organisations to work together more closely to collectively improve the health of residents across Cheshire and Merseyside. In particular, it has responsibility for agreeing an Integrated Care Strategy across the region to address the broad health and social care needs of the population across the region, including the wider determinants of health, such as employment, environment and housing. Integrated Care Boards and local authorities will be required to have regard to the ICP strategy when making decisions, commissioning and delivering services.
- 1.4 The ICP will comprise of health and care partners from across Cheshire and Merseyside including one councillor from each local authority, as well as two Directors of Adult Social Care and two Directors of Public Health from across the region. The ICP will have representation from across the broader sector,

including the Ambulance Service, Fire and Rescue, housing, voluntary sector, carers, primary care, social care providers, university sector and provider collaboratives. This will ensure a wide range of views are heard.

- 1.5 A copy of the terms of reference are attached to this report.
- 1.6 Until this point, the ICP has been operating in “shadow” form and the intention is that all constituent authorities are taking papers to councils to ensure the ICP is fully operational by November 2023.