

	<b>Health and Wellbeing Board</b> <b>10 November 2016</b>
<b>Title</b>	<b>Health and Social Care Integration Board minutes</b>
<b>Report of</b>	Commissioning Director Adults and Health, London Borough of Barnet Director of Strategic Development, Barnet Clinical Commissioning Group
<b>Wards</b>	All
<b>Status</b>	Public
<b>Urgent</b>	No
<b>Key</b>	No
<b>Enclosures</b>	Appendix 1: Health and Social Care Integration Board minutes 20 September 2016
<b>Officer Contact Details</b>	Zoë Garbett, Commissioning Lead Health and Wellbeing <a href="mailto:Zoe.garbett@barnet.gov.uk">Zoe.garbett@barnet.gov.uk</a> / 0208 359 3478

<b>Summary</b> The Health and Social Care Integration Board plays a significant role in driving forward health and social care integration in Barnet. It oversees and provides strategic direction for the development of integrated health and social care services and is a platform for discussion between providers and commissioners.
---

<b>Recommendations</b> <b>1. That the Health and Wellbeing Board notes and comments on the minutes of the Health and Social Care Integration Board meeting of 20 September 2016.</b>
---

## 1. WHY THIS REPORT IS NEEDED

- 1.1 The Barnet HWBB on 13 November 2014 agreed to receive the minutes of the Health and Social Care Integration (HSCI) Board as a standard item on the agenda to ensure that adequate attention is given at Board level to the work that providers are doing to support delivery of Barnet's integrated care proposals.

- 1.2 The HSCI Board provides an opportunity for providers (including the primary care, secondary care and the voluntary and community sector) and commissioners to come together to discuss and drive forward the integration agenda in Barnet. The HSCI Board has a key role in shaping and implementing the Better Care Fund, Sustainability and Transformation Plans (including Care Closer to Home) and other local integration activities.
- 1.3 Over the last year the HSCI Board has been reviewed and its membership refreshed to ensure that the Board is able to operate at the appropriate level. The minutes attached at appendix 1 are from the HSCI Board's meeting on 20 September 2016.

## **2. REASONS FOR RECOMMENDATIONS**

- 2.1 The Health and Wellbeing Board has the responsibility of overseeing health and social care integration developments. Receiving the minutes of the HSCI Board provide the Health and Wellbeing Board with the opportunity to comment on activity in Barnet.

## **3. ALTERNATIVE OPTIONS CONSIDERED AND NOT RECOMMENDED**

- 3.1 Not applicable.

## **4. POST DECISION IMPLEMENTATION**

- 4.1 Provided the Health and Wellbeing Board is satisfied by the progress being made by the HSCI Board to take forward its programme of work, the group will progress its work as scheduled in the areas of the Better Care Fund, the STP (including Care Closer to Home) and prevention.
- 4.2 The Health and Wellbeing Board is able to propose future agenda items for forthcoming group meetings that it would like to see prioritised.

## **5. IMPLICATIONS OF DECISION**

### **5.1 Corporate Priorities and Performance**

- 5.1.1 Integrating care to achieve better outcomes for vulnerable population groups, including older people and children and young people with special needs and disabilities, is a key ambition of Barnet's Joint Health and Wellbeing Strategy.
- 5.1.2 Integrating health and social care offers opportunities to deliver the Council's Medium Term Financial Strategy (MTFS) and Priorities and Spending Review (PSR), and the CCG's Quality, Innovation, Productivity and Prevention Plan (QIPP) and Financial Recovery Plan.

### **5.2 Resources (Finance & Value for Money, Procurement, Staffing, IT, Property, Sustainability)**

- 5.2.1 Not applicable.

### **5.3 Social Value**

- 5.3.1 The Public Services (Social Value) Act 2013 requires people who commission

public services to think about how they can also secure wider social, economic and environmental benefits. Before commencing a procurement process, commissioners should think about whether the services they are going to buy, or the way they are going to buy them, could secure these benefits for their area or stakeholders.

#### **5.4 Legal and Constitutional References**

5.4.1 The Health and Wellbeing Board has the following responsibility within its Terms of Reference:

- *To work together to ensure the best fit between available resources to meet the health and social care needs of the population of Barnet.*
- *Specific responsibilities for overseeing public health and developing further health and social care integration.*

5.4.2 Under the Health and Social Care Act 2012, a new s2B is inserted into the National Health Service Act 2006 introducing a duty that each Local Authority must take such steps as it considers appropriate for improving the health of the people in its area. The 2012 Act also amends the Local Government and Public Involvement in Health Act 2007 and requires local authorities in conjunction with their partner CCG to prepare a strategy for meeting the needs of their local population. This strategy must consider the extent to which local needs can be more effectively met by partnering arrangements between CCGs and local authorities. At Section 195 of the Health and Social Care Act 2012 there is a new duty, The Duty to encourage integrated working:

*s195 (1) A Health and Wellbeing Board must, for the purpose of advancing the health and wellbeing of the people in its area, encourage persons who arrange for the provision of any health or social care services in that area to work in an integrated manner.*

#### **5.5 Risk Management**

5.5.1 There is a risk, without aligned financial strategies across health and social care, of financial and service improvements not being realised or costs being shunted across the health and social care boundary. JCEG has identified this as a key priority risk to mitigate, and the group works to align timescales and leadership of relevant work plans which affect both health and social care.

#### **5.6 Equalities and Diversity**

5.6.1 All public sector organisations and their partners are required under s149 of the Equality Act 2010 to have due regard to the need to:

- a) eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under this Act;*
- b) advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it;*
- c) foster good relations between persons who share a relevant protected characteristic and persons who do not share it.*

5.6.2 The protected characteristics are age; disability; gender reassignment; pregnancy and maternity; race; religion or belief; sex and sexual orientation.

5.6.3 Equality impact assessments will be completed for individual projects overseen by the HSCI Board.

**5.7 Consultation and Engagement**

5.7.1 The HSCI Board allows a platform for engagement between providers and commissioners.

5.7.2 The HSCI Board will factor in engagement with users and stakeholders to shape its decision-making.

**5.8 Insight**

5.8.1 N/A

**6. BACKGROUND PAPERS**

6.1 None.