

	<b>Health and Wellbeing Board</b>  <b>16 January 2020</b>
<b>Title</b>	<b>Barnet Integrated Care Partnership: The journey so far.</b>
<b>Report of</b>	Kay Matthews, Chief Operating Officer Barnet CCG Dawn Wakeling, Executive Director, Adults and Health Adults and Health Directorate
<b>Wards</b>	All
<b>Status</b>	Public
<b>Urgent</b>	No
<b>Key</b>	No
<b>Enclosures</b>	Appendix 1: Presentation slides
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### Summary

The North Central London (NCL) Sustainability and Transformation Partnership (STPs) has evolved to an Integrated Care System (ICS) following publication of the NHS Long Term Plan.

An important part of the NCL ICS is Integrated Care Partnerships (ICPs), which are borough-based alliances between health and social care organisations.

Locally, system leaders have been meeting regularly to develop the Barnet ICP and establish interim governance arrangements, agree a vision, develop high-level outcomes, and identify areas to progress local integration.

This report provides an update on the progress of the Barnet ICP.

### Recommendations

- 1. The Health and Wellbeing Board to note the update on the progress of the Barnet Integrated Care Partnership.**

## **1. WHY THIS REPORT IS NEEDED**

- 1.1 The NHS Long Term Plan outlines that all organisations operating as a Sustainability and Transformation Partnership (STP) are to form Integrated Care Systems (ICS) by April 2021. Key priorities for ICS' will include promoting health and wellbeing, redesigning care services and ensuring financial sustainability.
- 1.2 The local ICS will cover North Central London (NCL), and an essential component of the ICS model is borough based commissioner and provider partnerships, known as **Integrated Care Partnerships (ICPs)**. ICPs are alliances of local NHS providers, clinical commissioning groups, primary care networks, local authorities and other partners who share responsibility to deliver care.
- 1.3 Health and social care leaders across Barnet have been meeting since summer 2019 to develop the Barnet ICP. The Barnet ICP brings together Barnet Clinical Commissioning Group; Barnet Council; Royal Free London NHS Foundation Trust; Central London Community Healthcare NHS Trust; Barnet, Enfield and Haringey Mental Health Trust and Barnet Federated GPs, with input from other key stakeholders such as the voluntary sector.
- 1.4 Progress to date includes developing collaborative system leadership, joint interim governance arrangements, high-level outcome domains and identifying areas to progress local integration. These areas are dementia and urgent and emergency care pathways, under an 'Ageing Well' model. In addition there was a detailed HWBB seminar for members to discuss the ICP work on 20<sup>th</sup> November.

## **2. REASONS FOR RECOMMENDATIONS**

- 2.1 It is important that the Health and Wellbeing Board is kept up to date with ICP development, to ensure local strategies and priorities align.

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

- 3.1 Not applicable

## **4. POST DECISION IMPLEMENTATION**

- 4.1 The Health and Wellbeing Board will be kept up-to-date with Barnet ICP development at future meetings.

## **5. IMPLICATIONS OF DECISION**

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

- 5.1.1 Future work of the ICP will contribute to key priorities identified in the council's Corporate plan, Barnet 2024 including integrating health and social care and providing support for those with mental health problems and complex needs.

5.1.2 The work of the Barnet ICP will also contribute to the Joint Health and Wellbeing Strategy, including continuing to emphasise prevention, making health and wellbeing a personal agenda, joining up services so residents have better experience and developing greater community capacity.

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

5.2.1 Not applicable

## 5.3 **Social Value**

5.3.1 Not applicable

## 5.4 **Legal and Constitutional References**

5.4.1 Under the Council's Constitution, Article 7 the terms of reference of the Health and Wellbeing Board includes responsibilities towards integration of health and social care and to promote partnership work across all necessary areas.

## 5.5 **Risk Management**

5.5.1 Not applicable

## 5.6 **Equalities and Diversity**

The 2010 Equality Act outlines the provisions of the Public Sector Equalities Duty which requires Public Bodies **to have due regard** to the need to:

- eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Equality Act 2010
- advance equality of opportunity between people from different groups
- foster good relations between people from different groups

The broad purpose of this duty is to integrate considerations of equality into day business and keep them under review in decision making, the design of policies and the delivery of services

In addition all templates should advise the inclusion of:

- Up to date information about the Equalities impact of the proposal and details of how this has been assessed
- Sources of data
- Assessment of equalities risks and what has been done to mitigate them

Advice on completing Equality Impact Assessments (EIAs) can be found [here](#).

## 5.7 **Corporate Parenting**

5.7.1 Not applicable

## 5.8 **Consultation and Engagement**

5.8.1 Engagement has been ongoing with local health and social care leaders, including workshops, regular meetings as part of the interim governance arrangements and weekly ICP bulletins. An update on ICP progression was also provided at a Health and Wellbeing Board Strategy workshop, attended by Barnet councillors, Barnet Officers and Barnet Clinical Commissioning Group.

## 5.10 **Insight**

5.10.1 Not applicable

## 6. **BACKGROUND PAPERS**