

EALING INTEGRATED CARE PARTNERSHIP BOARD

TERMS OF REFERENCE

1. Introduction and vision of the Ealing Integrated Care Partnership Board

1.1. NHS England's Long Term Plan outlined the ambition for Integrated Care Systems (ICSs) to cover the whole country by April 2021. To be clear the NWL STP, will evolve into the NWL ICS. ICSs are a pragmatic and practical way of delivering the 'triple integration' of:

- primary and specialist care
- physical and mental health services
- health and social care

Each borough will deliver this through a local Integrated Care Partnership (ICP) Board.

1.2. Future Ealing outlines Ealing Council's renewed focus on improving the lives of local people at a time of reduced funding.

1.3. Both these strategies will be aligned through the Integrated Care Partnership. For Ealing this local ICP will oversee the continued mobilisation and integrated working across all community and care providers, to include primary, community, voluntary and social care.

1.4. Our vision for the Ealing Integrated Care Partnership is committed to working together to:

- Improve health, wellbeing and independence, and reduce inequalities for Ealing Residents through delivering the health and wellbeing strategy
- Improving the experience of people accessing health and care in the Borough
- Delivery of high quality care across the Partnership
- Creating a sustainable care system in Ealing

1.5. Our approach to integration is based on the following key principles:

- collaborative leadership
- subsidiarity - decision-making as close to communities as possible
- building on existing, successful local arrangements
- a person-centred and co-productive approach
- a preventative, assets-based and population-health management approach
- achieving best value
- equitable

2. Key responsibilities

2.1. The key responsibilities of the Board will be:

- In line with the requirements of the NHS Long term plan and local borough based requirements, leading the co-production of strategic planning for the Ealing integrated care programme including
- Primary Care Network development
- Leadership and co-ordination of transformation delivery
- Leadership and co-ordination of operational and financial sustainability
- Collective performance monitoring to drive quality improvement and reduce inequalities
- Understanding workforce and responsibilities
- Resolving local system issues with a remit of issuing recommendations for each member organisation to enact
- Advise and resolve issues that are outside the capabilities of CCG and Ealing Council contract teams or any of the regular governance groups supporting provider contracts to support improved integrated care delivery.
- To oversee estates discussions affecting local contracts and agree appropriate actions and governance process to improve integrated ways of health and care delivery.
- Providing the oversight and guidance to any working sub groups the Board required to deliver the Integrated Care Programme
- Risk log management for represented parties related to scope of services within the programme and for referring and receiving organisations/providers.
- Collectively agreeing any commissioning intentions for the annual contract round for in scope services under the remit of the ICP.
- Improve health, wellbeing and independence, and reduce inequalities for Ealing residents through delivering the health and wellbeing strategy

3. Board Governance & Reporting Structure

3.1. The below diagram outlines the current governance arrangement



4. Board Constitution

4.1. The ICP Board membership will include senior decision makers from the commissioner, provider, local authority together with representation from local partner organisations and service users. The initial membership is set out in the tables below:

a) NHS Ealing Clinical Commissioning Group

- Clinical Chair
- Vice Chair
- Managing Director
- Lay Member
- Deputy Managing Director(s)

b) West London NHS Trust for mental health and community services

- Executive Director for Local Services
- Clinical Director for Integrated Care
- Deputy Director for Ealing Integrated Care & Local Services
- Associate Director

c) Ealing Council

- Executive Director Children, Adults & Public Health
- Director of Public Health
- Director of Adults Social Care

d) Ealing Primary Care Networks

- 3 nominated primary care representatives, one from each locality to ensure there is a balance of representation across all partners for North, Southall and Central Ealing & Acton.

e) Ealing Voluntary Sector

- Ealing Healthwatch representative
- Ealing Community Network

5. Chair, Board Secretary and Quoracy:

5.1. The Chair of the ICP Board will be the Clinical Chair of Ealing CCG, or their nominated deputy.

5.2. The Board Secretary will be provided by NHS Ealing CCG. Papers aim to be issued 5 working days ahead of the meeting.

5.3. For the ICP Board to be quorate, the minimum number of members present (in person or via teleconference) at a meeting must include one member from each group:

a) Ealing Clinical Commissioning Group

b) West London NHS Trust

c) Ealing Council

d) Ealing Primary Care Network

5.4. If a member is unable to attend the meeting, a representative must be nominated to attend with decision-making authority. Subject to the Chair's agreement, decisions can be made in writing, including via email.

5.5. The ICP Board may request the attendance of others as appropriate.

5.6. It is not intended that the meetings will be open to the public, though the Partnership Board may consider this on a meeting by meeting basis.

6. Frequency and Location of Meetings

6.1. It is envisaged that meetings will be held at 4-week intervals initially, with an option to stepping back to 6 weekly or quarterly at a mutually agreed time.

6.2. Meetings will be held at locations within the borough of Ealing.

7. Communications

7.1. The ICP Board will provide reports to all main party boards as per the governance diagram.

6.1. The following documents will be maintained and provided to parties requiring assurance:

- Meeting minutes
- Risk register
- Issues log
- Transformation document changes for insertion to the contract
- Proposed contract changes relating to any of the groups responsibilities
- Board and Governing Body reports if and when necessary
- NWL communication if required

6.2. Public publication of Partnership Board papers will be made on a case by case basis noting that this is a private meeting.

6.3. Board members agreed that papers would not be circulated to wider audiences without prior agreement. The Board will flag to members where there are any sensitive documentation.

6.4. Board membership for AEBDs representation will be reviewed at a later date once the Ealing Integrated Care Partnership Board is fully established.

7. Review arrangements

7.1. This Terms of Reference will be reviewed at the first meeting of the ICP Board and every 6 months or earlier if necessary, by agreement of the ICP Board.