

Title of Meeting:	NY CCG Governing Body	Agenda Item: 7.1									
Date of Meeting:	24 March 2022	<table border="1"> <tr> <th colspan="2">Session (Tick)</th> </tr> <tr> <td>Public</td> <td>X</td> </tr> <tr> <td>Private</td> <td></td> </tr> <tr> <td>Development Session</td> <td></td> </tr> </table>		Session (Tick)		Public	X	Private		Development Session	
Session (Tick)											
Public	X										
Private											
Development Session											
Paper Title:	ICS Transition Update										
Responsible Governing Body Member Lead Julie Warren, Director of Corporate Services, Governance and Performance		Report Author and Job Title Sasha Sencier, Board Secretary And Senior Governance Manager									
Purpose – this paper is for:	<table border="1"> <tr> <th>Decision</th> <th>Discussion</th> <th>Assurance</th> <th>Information</th> </tr> <tr> <td></td> <td></td> <td>X</td> <td>X</td> </tr> </table>			Decision	Discussion	Assurance	Information			X	X
Decision	Discussion	Assurance	Information								
		X	X								
Has the report (or variation of it) been presented to another Committee / Meeting? Yes. Elements of this paper have been reviewed at the Audit Committee.											
Executive Summary The purpose of this report is to provide an update to the Governing Body on the transition to the ICS. The report also aims to provide assurance that due diligence is being undertaken to ensure a smooth transition for the establishment of the ICB on 1 July 2022.											
Recommendations The Governing Body is being asking to: <ul style="list-style-type: none"> Note the transition update Receive assurance that the CCG continues to monitor, manage, and maintain robust governance arrangements and controls during the transition to the ICS. 											
Monitoring Due diligence continues to be monitored at CCG level by the Director of Corporate Services, Governance and Performance, and through the PMO at ICS level.											
CCG Strategic Objectives Supported by this Paper											
	CCG Strategic Objectives	X									
1	Strategic Commissioning: <ul style="list-style-type: none"> To take the lead in planning and commissioning care for the population of North Yorkshire by providing a whole system approach and to support the development of general practice. To make the best use of resources by bringing together other NHS organisations, local authorities and the third sector to work in partnership on improving health and care. To develop alliances of NHS providers that work together to deliver care through collaboration rather than competition. 										
2	Acute Commissioning: We will ensure access to high quality hospital-based care when needed.										
3	Engagement with Patients and Stakeholders: We will build strong and effective relationships with all our communities and partners.										
4	Financial Sustainability: We will work with partners to transform models of care to deliver affordable, quality and sustainable services.										
5	Integrated / Community Care: With our partners and people living in North Yorkshire we will enable healthy communities through integrated models of care.										
6	Vulnerable People: We will support everyone to thrive [in the community].										
7	Well-Governed and Adaptable Organisation: In supporting our objectives we will be a well-governed and transparent organisation that promotes a supportive learning environment.	X									

CCG Values underpinned in this paper

	CCG Values	X
1	Collaboration	X
2	Compassion	X
3	Empowerment	X
4	Inclusivity	X
5	Quality	X
6	Respect	X

Does this paper provide evidence of assurance against the Governing Body Assurance Framework? This report includes the GBAF.

YES		NO	X
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Any statutory / regulatory / legal / NHS Constitution implications	The CCG has a statutory and regulatory obligation to ensure that systems of control are in place to minimise the impact of all types of risk, which could affect patients, staff, public resources, and the function of the CCG.
Management of Conflicts of Interest	No conflicts of interest have been identified prior to the meeting.
Communication / Public & Patient Engagement	Not applicable.
Financial / resource implications	No financial or resource implications identified.
Outcome of Impact Assessments completed	No impact assessments are required.

Sasha Sencier
Board Secretary and Senior Governance Manager

CCG Transition and Due Diligence Update

1.0 Introduction

The purpose of this report is to provide an update to the Governing Body on the organisational transition to the Humber and North Yorkshire Integrated Care Board (previously known as Humber Coast and Vale ICS). The report also aims to provide assurance that due diligence is being undertaken to ensure a smooth transition for the establishment of the ICB on 1 July 2022.

It is important to recognise that, as a CCG, we remain accountable for delivery of our statutory functions until the new Integrated Care Board is formally established. The CCG is also accountable for ensuring that due diligence is undertaken to allow the legal transfer of people, property and liabilities.

It should be noted that the Audit Committee has a key role in gaining assurance regarding the governance of change and transition and a paper was taken to the last meeting, in February 2022, providing assurance in this area.

2.0 Transition Update

Development of the Integrated Care System

Integrated Care Systems (ICSs) are a partnership between the organisations that provide health and care needs across an area, coordinate services and plan in a way that improves population health and reduces inequalities between different groups. The Humber, Coast and Vale Health and Care Partnership was established in 2016 and comprises 28 organisations from the NHS, local councils, health and care providers and voluntary, community and social enterprise (VCSE) organisations. In April 2020, Integrated Care System (ICS) status was secured, a year ahead of the requirement set out in the NHS Long Term Plan.

The Health and Care Bill currently going through Parliament sets out plans to now put ICSs on a statutory footing, empowering them to better join up health and care services, improve population health and reduce health inequalities.

The proposals within this Bill mean that each ICS will be led by an NHS Integrated Care Board (ICB), an organisation with responsibility for NHS functions and budgets, and an Integrated Care Partnership (ICP), a statutory committee bringing together all system partners to produce a health and care strategy. When ICBs are legally established, Clinical Commissioning Groups (CCGs) will be dissolved.

It was originally expected that these changes would come in to effect in April 2022. However, to allow sufficient time for the remaining parliamentary stages, a new target date of 1 July 2022 has been agreed for new statutory arrangements to take effect and Integrated Care Boards (ICBs) to be legally and operationally established.

In Humber, Coast and Vale we are well developed with our plans and anticipate operating in shadow form from 1 April 2022.

Humber and North Yorkshire

NHS England guidance states that each ICB name should reflect the geographical area that it covers, and in Humber, Coast and Vale, the name will be revised to NHS Humber and North Yorkshire Integrated Care Board (ICB). We have also decided to take a consistent approach and apply the name of Humber and North Yorkshire to the ICS and ICP.

We plan to adopt the name of Humber and North Yorkshire Health and Care Partnership as the name of the ICS once ICB shadow arrangements are implemented from 1 April 2022.

Integrated Care Board

Subject to the passing of the Health and Care Bill, ICBs will be directly accountable for NHS spend and performance within each ICS. They will take on the NHS planning functions currently held by Clinical Commissioning Groups (CCGs), as well as some held by NHS England. Ahead of its establishment, NHS Humber and North Yorkshire ICB has appointed Sue Symington as Designate Chair and Stephen Eames CBE as Designate Chief Executive. Appointments have also been made to the majority of Board posts, as detailed below:

- Chair Designate – Sue Symington
- Chief Executive Designate – Stephen Eames
- Chief Operating Officer Designate – Amanda Bloor
- Executive Director Clinical and Professional Designate – Dr Nigel Wells
- Executive Director Nursing and Quality Designate – Teresa Fenech
- Executive Director People Designate – Jayne Adamson
- Executive Director of Finance and Investment Designate– Jane Hazelgrave
- Executive Director Corporate Affairs Designate – Karina Ellis
- Executive Director of Communications, Marketing and Public Relations (TBC)
- Non-Executive Director and Chair of the Remuneration Committee Designate – Mark Chamberlain
- Non-Executive Director and Chair of the Audit Committee Designate – Stuart Watson

Integrated Care Partnership

Integrated Care Partnerships (ICPs) will operate as a statutory committee, bringing together the NHS and local authorities as partners to focus more widely on health, public health and social care. ICPs will include representatives from the ICB, local authorities and other partners such as NHS providers, public health, social care, and voluntary, community and social enterprise (VCSE) organisations.

ICPs will be responsible for developing an integrated care strategy to set out how the wider health and wellbeing needs of the local population will be met. Our intention is to extend the responsibilities of the Humber and North Yorkshire ICP to reflect the core aims of the ICS, including improving our population's health, address inequalities, and contribute to the wider socio-economic challenges we face, such as unemployment and securing inward investment.

It is anticipated that Humber and North Yorkshire ICP will commence operating during the first quarter of 2022/23. This timescale will ensure there is sufficient input from partners and local stakeholders in its development.

Provider Collaboratives

Provider collaboratives are arrangements where providers come together to work across the ICS, with a shared purpose, set of priorities and effective decision-making arrangements. These collaboratives are an important part of ICS, working across a range of programmes and assist providers to work together to plan, deliver and transform services.

There are four fully established provider collaboratives within Humber, Coast and Vale: primary care, community health and care, mental health, learning disability and autism, and acute services. Each of our collaboratives have established CEO leadership and associated support arrangements. There is a development programme underway which is defining the future governance and operating models for the collaboratives.

Place Based Arrangements

Place Partnership Committees of the ICB are being established for all six places (East Riding of Yorkshire, Hull, North East Lincolnshire, North Lincolnshire, North Yorkshire, and City of York) to enable increased autonomy and delegation of local decision-making to a formal Joint Committee. It is anticipated that these Place Committees will receive delegated duties and resources from the ICB to make decisions about resourcing and services. They will also undertake joint decision-

making at a Place level with Local Authority, VCSE and other bodies to improve local services and outcomes, using evidence such as practice/ward level population profiles.

Each Place Committee will appoint a Place Lead. This will be decided by local leaders but will be a Chief Executive or equivalent of a partner organisation in that Place.

An NHS Place Director will also be appointed for all six places. This person will be a core member of the Place Committee and will champion ICS strategies, policies and ambitions, manage staff locally in accordance with ICB policies and also have delegated financial responsibilities

3.0 Approach to Due Diligence

3.1 HCV ICS

A key element of the HCV ICS Transition Programme is ensuring the safe transfer of people (staff) and property (in its widest sense) from CCGs to the Integrated Care Board (ICB), and the legal processes used for transfer, establishment, and closedown. This includes the need to complete a robust due diligence process.

A CCG Transition Programme has been established (owned by the CCG Accountable Officers, assured by the ICS) which brings together the six CCGs and the current ICS to ensure robust implementation and due diligence related to the closedown and transfer of statutory functions to the new statutory NHS Humber and North Yorkshire ICB.

NHS England / Involvement (NHSE/I) has produced due diligence guidance and a checklist which CCGs are using to ensure a consistent approach across the system. The CCG Audit Committee has reviewed the approach and framework and have approved their support of the approach.

3.2 NHS NY CCG

Julie Warren, Director of Corporate Services, Governance and Performance is the NY CCG lead responsible for governance, transition arrangements and due diligence within the organisation.

The CCG has a Transition Group, Chaired by Julie Warren, which includes senior leads that are also CCG representatives on each of the ICS Transition working groups. The group meets weekly, with the following key aims:

- assess the achievability, workload implications and assurance process for each checklist item.
- proactively monitor and provide report progress.
- escalate items considered at a high or medium risk of not being achieved, with an associated proposed action plan, to the Executive Directors of the CCG
- maintain and proactively manage the CCG Transition action log and risk register and
- ensure effective communications with ICS and CCG partners to ensure that a consistent approach is being undertaken across North Yorkshire & York.

The Assistant Director of Corporate Services, the Senior Governance Manager and the Corporate and Governance Officer support the due diligence work as part of their roles at the NY CCG.

The vast majority (over 75%) of items on the checklist are either being led by the ICS, completed, not possible to start, or are on target with no concerns. The items on the checklist that are considered to not be on target and of significant concern are being monitored through the transition groups and progress is reported back to the CCG transition leads.

4.0 Recommendations

The Governing Body is being asking to:

- **Note** the transition update.
- **Receive assurance** that the CCG continues to monitor, manage, and maintain robust governance arrangements and controls during the transition to the ICS.

Julie Warren, Director of Corporate Services, Governance and Performance