Paper ref: TB (03/22) 004



Report Title:	Chief Executive's Report					
Sponsoring Executive:	Richard Beeken, Chief Executive					
Report Author:	Richard Beeken, Chief Executive					
Meeting:	Trust Board (Public)	Date 2 nd March 2022				

1. Suggested discussion points [two or three issues you consider the Board should focus on]

My report this month covers the key elements of the draft constitution of the Integrated Care Board (ICB) for the Black Country, including implications relating to its likely approval by NHS England, for our Trust and Trust Board.

The report in particular highlights:

- Current status of the draft constitution
- Progress being made with executive and non-executive appointments to the ICB
- The constituent elements/organisations of the ICB
- ICB membership and the determination of the membership
- Governance considerations

The full draft constitution is available for Board members in the AdminControl reading room. The attachment to the report is the current, draft "ICB functions and decisions map".

2.	2. Alignment to our Vision [indicate with an 'X' which Strategic Objective this paper supports]							
	Our Patients		Our People		Our Population			
	To be good or outstanding in	X	To cultivate and sustain happy,		To work seamlessly with our	X		
	everything that we do		productive and engaged staff		partners to improve lives			

3. Previous consideration [where has this paper been previously discussed?]

I have referenced previous thinking about the ICB constitution in earlier Trust Board Chief Executive's reports.

4. Recommendation(s)

The Trust Board is asked to:

- **a. NOTE** the content of the report
- **DISCUSS** the key issues for the Trust and Trust Board in relation to the draft constitution, in order that the Chief Executive can represent Board member's views at the ICB development session to be held on 10th March 2022

5.	Impact [indicate with an 'X' which governance initiatives this matter relates to and where shown elaborate]								
Trι	Trust Risk Register n/a								
Board Assurance Framework									
Eq	uality Impact Assessment	ls	this required?	Υ		Ν	Х	If 'Y' date completed	
Qu	ality Impact Assessment	ls	this required?	Υ		N	Х	If 'Y' date completed	

SANDWELL AND WEST BIRMINGHAM NHS TRUST

Report to the Trust Board 2nd March 2022

Chief Executive's Report

1. Purpose of the report

- 1.1 The Black Country Integrated Care Board (ICB) will become a statutory NHS body under the NHS Health & Care Act 2022, with effect from 1st July 2022.
- 1.2 This report sets out the key elements of the draft constitution of the Integrated Care Board (ICB) for the Black Country, including implications relating to its likely approval by NHS England, for our Trust and Trust Board.
- 1.3 The report in particular highlights:
 - Current status of the draft constitution
 - Progress being made with executive and non-executive appointments to the ICB
 - The constituent elements/organisations of the ICB
 - ICB membership and the determination of the membership
 - Governance considerations
- 1.4 The full draft constitution is available for Board members in the AdminControl reading room. The attachment to the report is the current, draft "ICB functions and decisions map".
- 1.5 A report regarding the emerging likely constitution and implications arising from this, for the Birmingham & Solihull ICB, will be shared with the Board as soon as I am able.

2. The ICB

- 5 non-executive directors have already been appointed to the ICB, with one being the ICB Chair Designate, Jonathan fellows.
- 2.2 The following executive posts have had their selection processes and we are awaiting confirmation of who was appointed to them:
 - Chief Finance Officer
 - Chief Medical Officer
 - Chief Nursing Officer
- 2.3 The following executive posts will shortly be recruited to the ICB:
 - Chief Equalities & Integration Officer

- Chief Operating Officer
- Chief People Officer
- 2.4 The ICB will be the statutory strategic resource allocation and overseeing body for the Black Country. It will have the following constituent elements, which will be mirrored in all ICBs across the English NHS:
 - Integrated Care Partnership (ICP) the sister Board of the ICB, formed to be the alliance body between the NHS and local authorities, at system level
 - Place Based Partnerships (PBP) in the Black Country, these will be formed, if not already, around the boundaries of the four councils (Sandwell, Walsall and Dudley MBCs, Wolverhampton City Council). We explore the potential of PBPs through the Board paper today from the Director of Integration, in particular through the lens of the White Paper on Integration at Place level
 - NHS Trusts
 - Provider collaboratives guidance has been issued on how these should be formed, to accelerate the horizontal integration of services between NHS providers, and delivery of services at scale

3. The ICB draft constitution and ICB membership

- 3.1 We are currently on version 1.4 of this document
- 3.2 Final sign off of the constitution will be carried out by NHS England in May 2022, to have it ready to be enacted by 1st July
- 3.3 There is a development session of senior officers from across the ICB on 10th March, in which the draft constitution can be debated and further refined. Trust Board and governing body opinion on the current draft is sought in advance of that meeting. As Chief Executive, I will represent the Trust Board's views on this at the meeting on 10th March.
- 3.4 In its current form, there will be only two members of the ICB who will be representatives from NHS Trusts. One of the two members only, can come from an acute/community Trust. The other will be the system mental health provider (Black Country Healthcare NHS FT).
- 3.5 The NHS Trust membership model for ICBs is very much designed to force NHS providers together into collaboratives and as such, to nominate a clear, accountable officer representative of the collaborative for the ICB. This is a significant deviation from previous thinking and early discussions nationally, which hinted at a more balanced ICB membership, between "commissioners" and "providers". We must consider as a Board, over the next few months, how we want the Provider Collaborative in the Black Country to develop and how influential we wish to be around the ICB table, from within the collaborative, not from outside it.

3.6 Despite the White Paper on Integration and the emphasis on "Place" being at the core of multi-agency integration work to improve life chances and health outcomes, there is currently no place for "Place" around the ICB table. The Integrated Care Partnership (ICP) at system level is intended to be the forum where system wide Place improvements and learning is decided upon and delivered.

3.7 The constitution is currently silent on the membership and governance of its sub-committees. We must debate our view as a Board on the sustainability and appropriateness, of Trust committee chairs, regularly contributing as members of the ICB sub committees as well. This will be particularly pertinent with regard to the Finance & Performance Committee as well as the Quality Committee and possibly People & OD Committee.

4. Draft functions and decisions map (attached)

4.1 The attached draft functions and decisions map (organogram) may help Board members see, at a glance, how the constituent elements of each ICS fit together. Secondary legislation on this, which is imminent, will possibly help clarify further.

4.2 The only point of concern/error at present is the reference to the "Acute Provider Collaborative". This is a misnomer. There has been an acute collaboration programme and associated programme Board. However, now we are in receipt of the national guidance on provider collaboratives, all NHS Trusts in the system, including Dudley Integrated Health & Care Trust and Black Country Healthcare NHS FT, must consider whether they wish to become equal members of a more formal collaborative. Moreover, our Trust will need to consider its own membership of the provider collaborative forming in Birmingham, given 45% of our activity and income, will come from this system on an ongoing basis.

Richard Beeken Chief Executive

21st February 2022

Annex 1: Draft functions and decisions map v4

Reading Room: Integrated Care Board Model Constitution Template: Draft v1.4