



**Area Integrated Care Partnership (ICP) Meeting
(Tees Valley)**

Meeting held on: 31st March 2023 2.30-4.30pm

Held at: MyPlace, North Street, Custom House, Middlesbrough TS2 1JP

Item No:	Meeting Notes	Action
TVICP/23/01	<p>Welcome and introductions</p>	
	<p>Councillor Cook welcomed colleagues to the inaugural meeting of the Tees Valley Area Integrated Care Partnership (ICP) Meeting.</p> <p>A meeting was held last week with Sir Liam Donaldson, Chief Medical Officer, and the 4 nominated chairs of the North East and North Cumbria Health and Care Partnership where the agenda for the 4 inaugural Area ICP meetings was agreed, and it was noted that the agendas will evolve over time.</p> <p><u>Present:</u></p> <ul style="list-style-type: none"> - Councillor Bob Cook (Chair) (BC) - HWBB Chair & Portfolio for Health – Stockton Borough Council - Dan Jackson (DJ) - Director of Policy and Public Affairs NENC ICB - David Gallagher (DG) – Executive Area Director (South) – NENC ICB - Peter Rooney (PRo) - Director of Strategy and Planning NENC ICB - Christopher Akers-Belcher (CAB) - Chief Executive of Healthwatch Hartlepool, and the Healthwatch Network Regional Coordinator NENC - Deepak Dwarakanath (DD) – Medical Director of North Tees & Hartlepool NHS Foundation Trust - Brent Kilmurray (BK) – Chief Executive of Tees, Esk and Wear Valleys NHS Foundation Trust - Rob Harrison (RH) – Managing Director – South Tees NHS Foundation Trust 	

- Karen Hawkins (KH) - ICB Director of Place – Hartlepool – NENC ICB
- Craig Blair (CBla) - ICB Director of Place – Middlesbrough / Redcar & Cleveland – NENC ICB
- Jon Carling (JC) - Voluntary Sector Lead/3rd Sector – Catalyst Stockton
- Sally Robinson (SR) - Director of Children's Services – Hartlepool Borough Council
- Craig Blundred (CBlu) – Director of Public Health – Hartlepool Borough Council
- Jill Harrison (JH) - Director of Adult & Community Based Services – Hartlepool Borough Council
- Mark Adams (MA) – Director of Public Health - Middlesbrough Council / Redcar & Cleveland Council
- Erik Scollay (ES) – Director of Adult Services – Middlesbrough Council
- Patrick Rice (PRi) - Director of Adults and Communities – Redcar and Cleveland Borough Council
- Dr Dharendra Garg (DhG) - PCN/CD Representative – Stockton PCN
- Richard Scothon (RS) – Chair of County Durham & Darlington Foundation Trust
- Dr Jackie McKenzie (JM) - PCN/CD Representative – Hartlepool PCN
- Dr Janet Walker (JW) – Medical Director (South) – NENC ICB
- Lynne Walton (LW) - Director of Finance (South) – NENC ICB
- Martin Short (MS) - ICB Director of Place – Darlington – NENC ICB
- Julian Penton (JP) - Voluntary Sector Lead/3rd Sector - Hartlepower (Hartlepool)
- Sandra Britten (SB) - Chief Executive (Operational) on behalf of Hospices North East & North Cumbria Collaborative – Alice House Hospice
- Mark Davis (MD) - Voluntary Sector Lead/3rd Sector - Middlesbrough Voluntary Development Agency (MVDA)
- Wade Tovey (WT) - Voluntary Sector Lead/3rd Sector - Redcar & Cleveland Voluntary Development Agency (RCVDA)
- Dr Teik Goh (TG) - PCN/CD Representative – Redcar and Cleveland PCN

In Attendance:

- Kate Sutherland (KS) – Senior Governance Lead (Tees Valley) NENC ICB
- Claire Attey (Note Taker) (CA) – Corporate Secretary NENC ICB

TVICP/23/02	Apologies for absence	
	<ul style="list-style-type: none"> - Ann Workman – Director of Adult Services – Stockton Borough Council - Councillor Shane Moore - HWBB Chair & Portfolio for Health – Hartlepool Borough Council - Denise McGuckin – Managing Director of Hartlepool Borough Council - Dr Bharat Kandikonda - PCN/CD Representative – Middlesbrough PCN - Helen Ray – Chief Executive of North East Ambulance Service NHS FT - Peter Strachan – Chair of North East Ambulance Service NHS FT - Jean Golightly - Director of Nursing (South) – NENC ICB - Alex Sinclair – Director of Place (Stockton) – NENC ICB - John Sampson – Managing Director and Chief Executive of Redcar and Cleveland Borough Council - Julie Gillon – Chief Executive of North Tees & Hartlepool NHS Foundation Trust - Kathryn Boulton - Director of Children's Services – Redcar and Cleveland Borough Council - Kerry McQuade – Assistant Director of Strategy, Planning & Partnerships of North East Ambulance Service NHS FT - Martin Gray - Director of Children's Services – Stockton Borough Council - Mike Greene – Chief Executive of Stockton Borough Council - Professor Derek Bell – Chair of North Tees & Hartlepool NHS Foundation Trust / South Tees Hospitals NHS FT - Sarah Bowman-Abouna – Director of Public Health – Stockton Borough Council - Sue Jacques – Chief Executive of County Durham & Darlington Foundation Trust - Sue Page – Chief Executive of South Tees Hospitals NHS FT 	
TVICP/23/03	Declarations of Interest	
	<p>Councillor Bob Cook (BC) reminded colleagues of the importance of the robust management of conflicts of interest and asked individuals to raise any potential conflicts of interest as we run through the meeting.</p>	
TVICP/23/04	Role of ICPs within Integrated Care Systems and their relationships to: <ul style="list-style-type: none"> • Health and Wellbeing Boards 	

	<ul style="list-style-type: none"> • Place-Based Partnerships 	
	<p>Dan Jackson (DJ) provided an overview of the ICP arrangements in the North East and North Cumbria.</p> <p>DJ recapped that an Integrated Care System (ICS) includes all of the organisations responsible for health and wellbeing working together across a region to plan and deliver services for our communities. It is not an organisation but works through the following bodies:</p> <ul style="list-style-type: none"> • Integrated Care Board (ICB) – a statutory NHS organisation that took on the responsibilities of the former CCGs and some of the functions held by NHS England. The ICB will also work with a range of partners at ‘place level’ in each of the 14 local authority areas in our region. • Integrated Care Partnership (ICP) – a joint committee of the ICB and the 14 local authorities in the ICS area, plus other invited partners with responsibility for developing an integrated care strategy for the ICS. <p>The North East and North Cumbria (NENC) ICB covers a large population size and key feedback from partners in the development of the ICB was that given the large size, it was important to develop an ICP model that respects existing partnerships and reflects the differences within the geography.</p> <p>The main role of the ICP is to develop an Integrated Care Strategy which is refreshed annually and ratified by the Strategic ICP.</p> <p>The Joint Management Executive Group (JMEG), a joint NHS and Local Authority executive group chaired by Sir Liam Donaldson, helped to interpret National guidance and form the ICP and agreed due to the size of the geography covered there would be 4 Area ICPs established. The JMEG agreed that ‘Area’ ICPs would be best chaired by an elected member.</p> <p>The Department for Health and Social Care, NHS England and the Local Government Association jointly developed 5 key expectations for ICPs:</p> <ul style="list-style-type: none"> • Be a core part of the ICS, driving direction and priorities • Be rooted in the needs of people, communities and places • Create space to develop and oversee population health strategies • Support integrated approaches 	

- Take an open and inclusive approach to strategy development.

Strategic ICPs have a formal sign off role, are attended by the public and oversee and approve the ICS-wide Integrated Care Strategy, built up from an analysis of need from the four Area ICPs. Strategic ICPs promote a multi-agency approach to population health and wellbeing and the wider social and economic determinants of health for the population it serves.

Area ICPs are a key forum to develop and strengthen relationships between professional, clinical, political and community leaders and for partners to share intelligence, identify common challenges and objectives and share learning. They will analyse the common themes of the Joint Strategic Needs Assessments (JSNA) from each of the Health and Wellbeing Boards in their area and focus on the priorities of local residents and service users.

JP asked whether voluntary or community representatives were included in the ICB, and DJ noted that the voluntary sector are included under 'ICB participants'.

DJ added that as the guidance is very flexible, we can make the ICP arrangements work for us.

Since the establishment of the ICB, WT noted that there had been a breakdown of the Patient Participation Groups that were held in the former CCGs, and he was concerned that momentum could be lost. The ICB are trying to ensure direct feedback from patients is used to inform commissioning decisions and will ensure a strong voice to capture any challenges faced by patients.

In relation to governance and decision making and ensuring responsibility and accountability, BK queried how we establish a culture of working together. DJ noted that arrangements are still emerging but that it was important for a cohesive approach to work together which will be kept under review. Discussions are being held with 'places', and Health and Wellbeing Boards (HWBB) still remain a key component part of the landscape.

CAB asked, in relation to funding from the ICB to carry out pieces of work, how do we avoid duplication and bring it all together. DG highlighted the importance of how the ICP tailors work alongside the HWBBs and understands how that work will take place locally, but there is also an opportunity to pull some of the work together across a larger footprint.

	<p>JC questioned where commissioning decisions at place level are taken, and DJ advised that these decisions would be made through ICP Place Committees.</p> <p>ACTION: It was noted that the PowerPoint presentation would be circulated to colleagues following the meeting.</p>	CA
TVICP/23/05	Role of ICB Area and Place-based teams	
	<p>David Gallagher (DG) provided the group with an understanding of key roles and explained that the NENC ICB includes 2 Executive Area Directors – Levi Buckley who will cover the North and North Cumbria areas from May, and DG who covers the Central and Tees Valley areas. DG highlighted the corporate and area responsibilities of the Executive Area Director roles.</p> <p>DG also outlined the role of ICB Place Directors in places and outlined these Directors may also, as in the Tees Valley, hold lead portfolio across a number of places, e.g., Primary Care, Mental Health LD etc.</p>	
TVICP/23/06	Update on the Integrated Care Strategy and opportunities for joint working on the social and economic determinants of health	
	<p>Peter Rooney (PRo) delivered a presentation on the work to date on the development of the Integrated Care Strategy. PRo noted that each ICP in the country is required to develop an Integrated Care Strategy, and through the work with partners this region has developed a 'Better health and wellbeing for all' plan.</p> <p>The key feature of an Integrated Care Strategy ensures focus from a population health and reducing inequalities perspective.</p> <p>PRo advised our region has some of the poorest health outcomes in the country - people often die younger and live with illnesses for longer than people in other parts of the country, with the greatest impact felt by people living in our most deprived communities.</p> <p>PRo provided an overview of the strategy and the 4 key goals:</p> <ol style="list-style-type: none"> 1. Longer and healthier lives 2. Fairer outcomes 3. Better health and care services 4. Giving our children the best start in life <p>PRo highlighted that to achieve these goals, we must work together to build up and support the health and care workforce, use combined resources and involving</p>	

	<p>communities in understanding people's needs and experiences.</p> <p>He then went on to outline the national requirement for ICBs and NHS Foundation Trusts to submit an annual NHS Operational Plan and to develop an NHS Joint Forward Plan which is a narrative plan covering the 5 year period of 2023/24 – 2028/29.</p> <p>PRo emphasised the importance of partnership working and breaking down barriers to ensure collective delivery to meet the needs of our local populations.</p> <p>From a Local Authority (LA) perspective ES outlined he felt that the introduction of the new ways of working and associated Area ICP and Place Committees will be an effective way of working together to discuss and agree approached to collectively talking the wider determinants of health.</p> <p>JP queried whether there is an intention to gather and publish data with respect to how well the ICB is performing in areas such as changes in life expectancy etc. PRo explained that a baseline is set annually, and a summary dashboard is produced against the key measures to show progress.</p> <p>ACTION: It was noted that the PowerPoint presentation would be circulated to colleagues following the meeting.</p>	<p>CA</p>
<p>TVICP/23/07</p>	<p>Key themes from public feedback</p>	
	<p>Christopher Akers-Belcher (CAB) explained that Healthwatch is celebrating their 10 year anniversary as they came into place following the Health and Social care Act in 2012.</p> <p>Healthwatch are a non-statutory organisation but have statutory powers to consult, are viewed as the consumer champion for Health and Social Care and were established to understand the needs, experiences and concerns of people who use health and social care services and to speak out on their behalf. Local Healthwatch are funded by and accountable to local authorities and hold a statutory position on their respective Health and Wellbeing Boards.</p> <p>CAB noted that he is the Chief Executive of Healthwatch Hartlepool, and the Healthwatch Network Regional Coordinator for the North East and North Cumbria (14 Healthwatches). The five local Healthwatch organisations in the Tees Valley have worked closely together on issues of common interest for several years and CAB will now,</p>	

working in his regional role across the ICB, formalise working arrangements as a Healthwatch Network covering the whole of the North East & North Cumbria.

CAB provided an outline of the functions of Healthwatch including:

- The main statutory functions of Healthwatch are to obtain the views of people about their needs and experience of local health and social care services, make these views known to those involved in the commissioning and scrutiny of care services providing reports and recommendations about how those services could or should be improved based on lived experience of communities engaged with.
- Healthwatch promote and support the involvement of people in the monitoring, commissioning and provision of local health and social care services and provide information to the public about accessing health and social care services and the options available to them. Healthwatch make the views and experiences of people known to Healthwatch England to advise the CQC to carry out special reviews or investigations into areas of concern.
- Healthwatch have strong connections with the communities' others often struggle to hear from and will work to ensure the voices of service users, families and carers are heard in the work of the Tees Valley ICP.
- CAB provided an outline of a number of themes where concerns had been highlighted across the Tees Valley Area ICP, also recognising these may be different across places:
 - Access to GPs Access to Dentistry
 - Access to Pharmacies
 - Urgent Care, Maternity Services, Hospital Discharge and Single Point of Access
 - Mental Health – Community Based Services and provision for Children and Young People
 - Access to Nursing and Care Homes
 - Dementia
 - Learning Disabilities and Autism – Particularly poor rates of Annual Health checks given high incidence of mortality
 - Sensory Disabilities
 - Health inequalities and the voice of Children and Young People (YouthWatch)

	<p>In relation to patient issues in accessing GP appointments, JM queried whether patients are asked how they would like to see this improved. CAB noted that Healthwatch always ask patients what they would like services to look like and KH added that work is being undertaken both locally and nationally to ensure a continued focus on accessing GP services.</p> <p>CAB referred to a report published when Healthwatch were commissioned by Tees, Esk & Wear Valley Mental Health Trust (TEWV) to conduct a Tees Valley wide consultation exercise to support the Community Mental Health Transformation plan and the benefits and outcomes delivered by this way of joint working.</p> <p>ACTION: It was noted that the Healthwatch Briefing Note and the Healthwatch TEWV Community Transformation Report would be circulated to colleagues following the meeting.</p>	CA
TVICP/23/08	Forward planning and future items	
	<p>BC noted that a number of the items on future agendas will be standing items. DG explained that there is already joint work underway in the Tees Valley, e.g., around health inequalities and suggested that these could be discussed in the next meeting.</p> <p>BC asked attendees to give thought to any items that they would like to see on future agenda and to email suggestions across to nencicb-tv.corpgov@nhs.net</p> <p>ACTION: It was noted that the above email address along with a note to ask attendees to reply with any suggestions for future agenda items and the items would be collated by the administrative support.</p>	CA
TVICP/23/09	Any other Business	
	<p>BK queried whether Teesside University /education should be added to the meeting attendance list to allow contributions from a research perspective and DG noted that discussions around this are ongoing.</p> <p>MD highlighted potential challenge in how the voluntary sector connect conversations from these meetings into the frontline organisations in the Tees Valley.</p> <p>DD raised a query if there would be communications developed post meetings for use in their organisations to brief staff and DG believed that this would be an effective</p>	

	<p>way to ensure colleagues that were unable to attend the meeting were sighted on discussions.</p> <p>ACTION: It was agreed to discuss a highlight report post meeting and this will be agreed internally to take forward. KS to discuss.</p> <p>BC thanked colleagues for their contributions.</p> <p><i>Meeting closed 4.08pm</i></p>	<p>KS</p>
	<p><u>Next Meeting</u> Date: Friday 2nd June 2023 Time: 12-2pm Venue: Employment and Training Hub, Wellington Square, Stockton-on-Tees, TS18 1RG</p>	