

## Healthier Communities and Older People Overview and Scrutiny Panel

**Date: 06 September 2022**

**Subject: Integrated Care System Governance Update**

Lead officer: Mark Creelman, Locality Executive Director

---

### Recommendations:

- A. The Committee is asked to note the Integrated Care System governance particularly the arrangements in place for Merton Place.
  - B.
- 

## 1 PURPOSE OF REPORT AND EXECUTIVE SUMMARY

- 1.1. To provide a summary of the changes in governance as South West London Integrated Care System (ICS) is established.
- 1.2. The report outlines the two key elements of the ICS: The Integrated Care Board, the Integrated Care Partnership. The report also outlines the key role place-based partnership and provider collaborative play in the integrated care system.

## 2 DETAILS

- 2.1. Integrated Care Systems are partnerships of organisations that come together to plan and deliver joined up health and care services to improve the lives of people in their area. They will be responsible for how health and care is planned, paid for, and delivered.
- 2.2. ICSs have four key purposes:
  - improving outcomes in population health and healthcare
  - tackling inequalities in outcomes, experience and access
  - enhancing productivity and value for money
  - supporting broader social and economic development
- 2.3. South West London Integrated Care System took on statutory responsibilities on the 1<sup>st</sup> July 2022. There was a history of system collaboration through the Health and Care Partnership that was established in 2018.
- 2.4. Through the Health and Care Partnership SWL has developed better and more convenient services, invested in keeping people healthy and out of hospital and set shared priorities for the future through our local health and care plans for each borough.
- 2.5. There are 6 places identified in the South West London ICS, all aligned to the six London Boroughs; Croydon, Sutton, Kingston, Richmond, Wandsworth and Merton.

- 2.6. The key focus of Place based partnerships are to:
- (i) **To support and develop primary care networks (PCNs)** which join up primary and community services across local neighbourhoods.
  - (ii) **To simplify, modernise and join up health and care** (including through technology and by joining up primary and secondary care where appropriate).
  - (iii) **To understand and identify** – using population health management techniques and other intelligence – people and families at risk of being left behind and to organise proactive support for them; and
  - (iv) **To coordinate the local contribution to health, social and economic development** to prevent future risks to ill-health within different population groups.
- 2.7. In Merton, we have established the Merton Health and Care Together Committee, comprised of representatives from across health, social care and the community and voluntary sector. This is a formal sub-committee of the Integrated Care Board and is focused on driving forward the key focus of Place.
- 2.8. The committee oversees the delivery of the Merton Health and Care Plan, which focuses on the areas that require partnership to make a positive difference to the health and wellbeing of Merton residents.

### **3 ALTERNATIVE OPTIONS**

Not applicable.

### **4 CONSULTATION UNDERTAKEN OR PROPOSED**

4.1. Not applicable.

### **5 TIMETABLE**

5.1. Not applicable

### **6 FINANCIAL, RESOURCE AND PROPERTY IMPLICATIONS**

6.1. Not applicable.

### **7 LEGAL AND STATUTORY IMPLICATIONS**

7.1. Not applicable.

### **8 HUMAN RIGHTS, EQUALITIES AND COMMUNITY COHESION IMPLICATIONS**

8.1. Not applicable.

### **9 CRIME AND DISORDER IMPLICATIONS**

9.1. Not applicable.

### **10 RISK MANAGEMENT AND HEALTH AND SAFETY IMPLICATIONS**

10.1. Not applicable.

**11 APPENDICES – THE FOLLOWING DOCUMENTS ARE TO BE PUBLISHED WITH THIS REPORT AND FORM PART OF THE REPORT**

•

**12 BACKGROUND PAPERS**

12.1. Attached powerpoint presentation.

This page is intentionally left blank