

# Thurrock Integrated Care Partnership

## Terms of Reference

**DRAFT**

### 1. INTRODUCTION

This document outlines the purpose and functions of the Thurrock Integrated Care Partnership (TICP). The original TICP terms of references have been amended to enable the TICP to plan the strategic response and recovery during the COVID 19 crisis.

### 2. BACKGROUND

Partners across Thurrock have a long history of working together to agree and deliver shared outcomes. The approach taken has been inclusive, bringing together commissioners, providers and colleagues from the third/voluntary sector as well as Healthwatch.

In late 2019, following a review of local arrangements, partners agreed to strengthen, further embed and accelerate collaborative arrangements by establishing the Thurrock Integrated Care Partnership.

In March 2020 the national priorities for delivering health and social care services were refocused to meet the unprecedented challenge due to the international coronavirus pandemic.

The intention is that the TICP partnership will evolve during the coronavirus pandemic to meet the developing challenges presented to health and social care services. The COVID 19 TICP will steer the development of partnership working in Thurrock throughout the coming phases of the COVID 19 crisis. Operating as the key strategic mechanism for all relevant system wide discussions and decisions. It consists of senior officers from all existing partners and – crucially – the leaders of the emerging Primary Care Networks (PCNs). Unlike its predecessor bodies, the TICP brings together into a single forum partnership working for all age groups – children, young people, adults and older people.

### 3. SCOPE

Reflecting its nature as an ICP, all relevant health, care and related services are considered to be within the broad scope of the group. The group will seek to take decisions, and/or where necessary co-ordinate decision making by other forums such as Board or Cabinet, about relevant services that are primarily governed within Thurrock. In other instances, the Board will wish to influence other parties, for example where services cover a wider geographic footprint such as the Mid and South Essex Health and Care Partnership.

#### 4. ROLE AND RESPONSIBILITIES

The agreed key functions of TICP are to:

- Build on the HWB strategy by developing, setting and agreeing the partnership strategy/priorities and associated outcomes for health and care across Thurrock
- Agree the key collaborative work programmes required to deliver the agreed strategy and outcomes, subject to partners' governance arrangements
- Oversee the development and deployment of all relevant pooled funds, ensuring they are aligned with the Partnership's strategy
- Develop and oversee the deployment of the Better Care Fund, including developing the annual plan for ratification by the HWB
- Ensure the four Integrated Medical Centres (IMCs) are delivered
- Be the operational and strategic focal point which underpins the Health and Wellbeing Board, for partnership discussions about health, care and related services that are principally controlled in Thurrock
- Enable and support the development of the four Thurrock localities
- Be the forum through which Partners influence decisions that are taken outside Thurrock (e.g. at Mid & South Essex Health and Care Partnership)
- Review the Partnership's success in delivering the agreed strategy, outcomes and work programmes, intervening as required to address any concerns
- Respond to changes in the operating environment, such as national policy or regulatory requirements
- Develop and agree common decision-making papers for Boards/Cabinet, as required
- Act as champions for the Thurrock Partnership and its strategy, both within and outside organisations

To ensure that the TICP can meet the challenges presented by the COVID 19 pandemic, the key responsibilities have been increased to include the following:

- Lead on shaping the mechanisms and resources that need to be in place due to the current COVID 19 crisis
- Lead the planning and transition into the next phase and the future following phases of the NHS and local government responses
- Agree which of the beneficial changes that have resulted from the COVID 19 crisis should be 'locked in' to become part of the new operating model for the Thurrock community
- Continue to work in partnership to develop the role of place in Thurrock, defining the responsibilities of how partner organisations work in an integrated way at place in response to the COVID 19 crisis and the recovery.
- Define how the partnership will interface between place and system, agreeing the arrangements of how to align the planning and the monitoring of performance across Thurrock

- Contribute to shaping the relationship between partnership organisations working at Place, PCNs and Locality based services
- Continue to commit to work in partnership to define place-based working through evolving the thinking around the integrated resources including people, processes, finances and systems within achievable constraints
- Plan out the next Phases of maturity of place-based working with reference to those already published for ICS and PCNs

The TICP will be guided by the Thurrock Memorandum of Understanding - “An integrated approach to health and care”. This MoU, which has been ratified by all relevant local Boards including the Health and Wellbeing Board, sets out a number of commitments that all partners have agreed to, including to:

- Put the improvement of health and well-being for the people of Thurrock at the forefront of all decision making
- Agree a set of Population Health System Outcomes so that objectives are fully aligned and to support a move away from process measures towards a focus on population outcomes
- Support the principle of subsidiarity – for decisions to be taken at the most local level possible
- Plan together – for example, aligning serve, operational and financial planning
- Change the way services are commissioned and provided to promote collaboration
- Prioritise Prevention –to keep people as healthy and independent as possible for as long as possible
- Develop shared or common models of care that integrate services around the person and reduce fragmentation
- Enable staff to work more flexibly across organisations and settings
- Ensure we have an equal focus on physical and mental health
- Reduce bureaucracy and transactions costs – for example by sharing assets

## **5. GOVERNANCE**

The accountability for TICP is set out in the exhibit below.

The TICP is jointly accountable to Thurrock CCG and the Thurrock Health and Wellbeing Board, with an informal line of accountability to other relevant fora, such as the Cabinet of the Council, the Joint Committee of the five CCGs and the Mid and South Essex Health and Care Partnership Board.

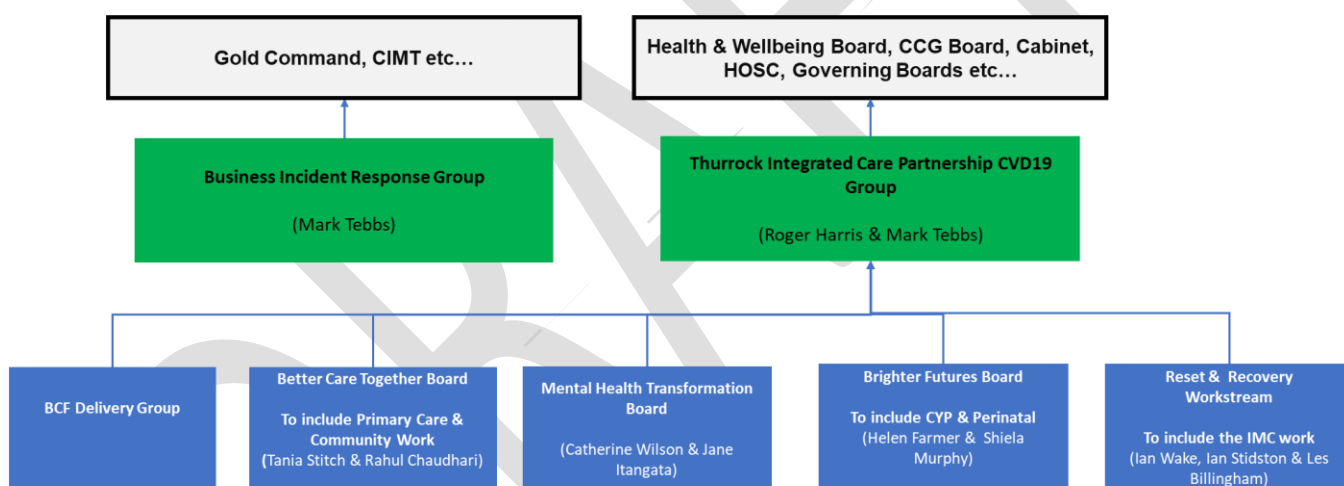
TICP has five key sub-groups, each of which take the lead on priority areas:

- Brighter Futures Partnership, which leads on services for children, young people & Perinatal services. Merit in adjusting the existing TOR & Membership to ensure it can rapidly address emerging needs and priorities due to COVID19 crisis.
- Better Care Together Board, leading on the COVID19 response & recovery implementing the emerging primary care & community model. Merit in adjusting the existing TOR &

Membership to ensure it can rapidly address emerging needs and priorities due to COVID19 crisis.

- The BCF Delivery Group, which prepares the annual plan for, and monitoring of, the Better Care Fund.
- The Mental Health Transformation Board, which focuses on the redesign of mental health services and has strong links with both the localities and Mid & South Essex wide groups. . Merit in adjusting the existing TOR & Membership to ensure it can rapidly address emerging needs and priorities due to COVID19 crisis.
- The Reset & Recovery Workstream will lead on the development and implementation of an integrated health, local authority and social care place based system during the COVID19 response & recovery period. This working group will include the work of the IMC as part of its scope. A TOR & membership will need to be developed to ensure it can rapidly address emerging needs and priorities due to COVID19

## COVID19 Crisis Response & Recovery Structure



Working groups are expected to integrate services users to ensure that Co-Production remains at the heart of what we do.

Sub groups reporting into the TICP through Highlight Reporting process:

- The COVID19 TICP Sub groups will report the progress of their workstreams into the TICP meeting through a highlight report process by exception.

### 6. AUTHORITY

The Boards/Cabinet of the relevant statutory bodies have not at this point formally delegated decision making to the TICP, although such a scheme of delegation may be developed in future.

Therefore, the Board draws its authority from the delegated responsibilities of its members as senior leaders across Thurrock.

Members of the Board will work together to secure decisions from the Boards/Cabinet of each partner, as required.

The Board has the authority to establish task & finish groups as it considers appropriate and necessary.

## 7. MEMBERSHIP

The TICP will continue to bring together all relevant partners locally; its members are as follows:

<b>Member</b>
Roger Harris (Co Chair, Thurrock Council)
Mark Tebbs (Co Chair, Thurrock CCG)
Dr Anil Khallil
Ian Wake Thurrock Council
Catherine Wilson Thurrock Council
Les Billingham Thurrock Council
Sean Clark / Michael Jones Thurrock Council
Rahul Chaudhari Thurrock CCG
Maria Wheeler Thurrock CCG
Sheila Murphy Thurrock Council
Jane Foster-Taylor Thurrock CCG
Ian Stidston Thurrock CCG
Tania Stitch NELFT/Thurrock Council
Brid Johnson NELFT
Nigel Leonard / Sue Waterhouse EPUT
Kim James, Thurrock Health Watch
Kristina Jackson Thurrock CVS
Tom Abell BTUH / Michelle Stapleton BTUH (either to attend as BTUH rep)
Mohammed Munshi PCN (Aveley/Ockendon)
Dr Chris Olukanni PCN (Tilbury)
Dr Manoj Chandran PCN (Grays)
Dr Reg Rehal PCN (Tilbury)
Dr Kam Singh PCN (Grays)
Dr Manjeet Sharma PCN (Stanford)

Other parties may be requested to attend the Board as required.

## 8. MEETINGS

The meeting will be chaired on a rotating basis by Mark Tebbs Deputy Accountable Officer of Thurrock CCG, and Roger Harris, Corporate Director of Adults, Housing and Health, Thurrock Council,

The Board will meet every Wednesday weekly. The meeting frequency will be reviewed as we move through the future phases of the COVID 19 Pandemic. Timings should be of sufficient frequency to ensure completion of the objectives and outputs, and can be flexed (increased/decreased) at the discretion of either Chair to accommodate these requirements. The Chair may call extraordinary meetings if required.

Attendance will be via dial-in or video link.

All members will receive copies of papers and minutes of meetings.

To be quorate, at least one of the following: CCG Deputy Accountable Officer (or nominated deputy) or Corporate Director of Adults, Housing and Health, Thurrock Council (or nominated deputy) must be present.

The TICP may invite non-members to attend its meetings as it considers necessary, at the discretion of the Chair.

These meetings are considered private and shall not be open to the public.

It would be expected that in most cases decisions would be reached through consensus. If this is not possible, then this should be escalated initially to Cabinet/Boards (or equivalent) of partner organisations.

## **9. MINUTES AND ADMINISTRATIVE SUPPORT**

Administrative support to the COVID 19 TICP will initially be provided by Adult Housing and Health Directorate Business Management Team, Thurrock Council. The core role is to manage a forward planner to ensure key agenda items are considered when necessary, ensure the agenda and papers are compiled and circulated to members prior to meetings, and to attend to capture key discussions, decisions and actions of meetings.

## **10. REVIEW**

The Terms of Reference will be reviewed as we move through the phases of the COVID 19 Pandemic.