Kirklees Health & Care Partnership

NHS
NHS West Yorkshire
Integrated Care Board

Meeting name:	Kirklees ICB Committee
Agenda item number:	11
Meeting date:	10th May 2023
Report title:	Committee Annual Report, Terms of Reference and Work Plan
Report presented by:	Louise Hall, Interim Head of Governance
Report approved by:	N/a
Report prepared by:	Louise Hall, Interim Head of Governance

Purpose and Action:			
Assurance ☐	Decision ☒ (approve/recommend/ support/ratify)	Action ☐ (review/consider/com-ment/discuss/escalate	Information ☐

Previous considerations:

Kirklees ICB Committee has been working on end of year outcomes for some time and has considered various matters at formal and informal meetings in January, February and March of this year.

Committee members have also completed a self-assessment questionnaire and undertaken a development style discussion to feed into the draft annual report attached at appendix 1 of this report.

Executive summary and points for discussion:

Now that the Committee year 2022 – 2023 is over the Committee must complete certain statutory, constitutional and developmental tasks.

This report satisfies some of those tasks, in particular those which relate to statutory and constitutional requirements, to produce an annual report, both of the WYICB and of its Committees and to confirm the Terms of Reference and workplan for the Kirklees ICB Committee.

With which purpose(s) of an Integrated Care System does this report align?

☒ Improve healthcare outcomes for residents in their system

☒ Tackle inequalities in access, experience and outcomes

☒ Enhance productivity and value for money

☒ Support broader social and economic development

Recommendation(s):

The Kirklees ICB Committee is asked to:

- Approve the draft Committee Annual Report for submission to the core team and onward utilisation as part of the WYICB Annual Report

➢ Discuss and approve the workplan for submission the core team ➢ Agree that no changes to the Committee terms of reference are desirable at this stage and submit an unamended version to the core team.
Does the report provide assurance or mitigate any of the strategic threats or significant risks on the Corporate Risk Register or Board Assurance Framework? If yes, please detail which:
Good governance, namely the timely submission of these documents to the core team protects the organisation from statutory non-compliance and allows it to focus on delivering optimal health care outcomes for the people of Kirklees. A well-functioning Kirklees ICB committee will help to mitigate risks in many ways but is particularly relevant to mitigating BAF risks relating to measure and assess performance in a timely and effective way and to join up services in order to improve oputcomes.
Appendices:
Appendix 1 – Draft Kirklees ICB Committee Annual Report Appendix 2 – Committee workplan Appendix 3 – Terms of Reference
Acronyms and abbreviations explained:
None

What are the implications for:

Residents and Communities	
Quality and Safety	
Equality, Diversity and Inclusion	
Finances and Use of Resources	
Regulation and Legal Requirements	
Conflicts of Interest	
Data Protection	
Transformation and Innovation	
Environmental and Climate Change	
Future Decisions and Policy Making	The annual report and work done to create it will flow into the local Governance review and create more effective decision-making & taking pathways.
Citizen and Stakeholder Engagement	

Kirklees ICB Place Committee
ANNUAL REPORT 2022-23

INTRODUCTION

The Kirklees ICB Committee is established as a committee of the ICB Board, in accordance with the ICB's Constitution, Standing Orders and Scheme of Delegation.

The Committee has powers delegated to it by the West Yorkshire ICB Board, and these are set out in its terms of reference.

The Kirklees Health and Wellbeing Plan sets out the Kirklees Vision:

'No matter where they live, people in Kirklees live their lives confidently and responsibly, in better health, for longer and experience less inequality.

It also sets our clear outcomes, approaches and priority areas for Kirklees which the Committee has regard to in all of its business.

2. Membership

Independent Members

- Chair (Liz Mear)
- 2 x independent members (Nadeem Raja, Hilary Thompson)

Executive Members

- ICB Accountable Officer (Kirklees) (Carol McKenna)
- ICB Kirklees Place finance lead (Gary Boothby)
- ICB Kirklees Place quality lead (Penny Woodhead)

Clinical representative drawn from the Kirklees Clinical and Professional Forum

(Dr Khalid Naeem)

Partner Members

- 1 x Local Authority (Jacqui Gedman)
- 2 x Primary Care (general practice) (Dr Mohammed Hussain, Dr Omar Akhtar)
- 1 x Calderdale & Huddersfield NHS Foundation Trust (Brendan Brown)
- 1 x Mid Yorkshire Hospitals NHS Foundation Trust (Len Richards)
- 1 x South West Yorkshire Partnership NHS Foundation Trust (Mark Brooks)
- 1 x Community Services Provider (Karen Jackson, Locala)
- 1 x VCSE (via Kirklees Third Sector Leaders) (Dipika Haushal)
- 1 x Healthwatch (Stacey Appleyard)

MEETINGS HELD

Five formal meetings of the Kirklees ICB Committee have been held on 13 July 2022, 28 September, 9 November 2022, 11 January 2023 and 8 March 2023. In between these meetings the Committee has also held four informal 'development session' meetings. Prior to formal establishment on 1 July 2022, the Committee met in shadow form on three occasions between April and June 2022, with a focus on development work.

ATTENDANCE

Member	% of meetings attended	Acknowledging substitutions
Independent Member, Liz Mear, Chair	80%	100%
Independent Member, Nadeem Raja,	100%	100%
Independent Member, Hilary Thompson	100%	100%
Independent Carol McKenna	80%	100%
ICB Kirklees Place finance lead Gary Boothby	60%	100%
ICB Kirklees Place quality lead, Penny Woodhead	100%	100%
Clinical representative drawn from the Kirklees Clinical and Professional Forum, Khalid Naeem	100%	100%
Local Authority representative, Jacqui Gedman	0%	60%
Primary Care representative (general practice), Mohammed Hussain	80%	80%
Primary Care representative (general practice) Omar Akhtar	80%	80%
Calderdale & Huddersfield NHS Foundation Trust representative, Brendan Brown	100%	100%
Mid Yorkshire Hospitals NHS Foundation Trust representative, Len Richards	60%	100%
South West Yorkshire Partnership NHS Foundation Trust representative, Mark Brooks	60%	100%
VCSE representative (via Kirklees Third Sector Leaders), Dipika Kaushal	80%	80%
Community Services Provider representative, Karen Jackson, Locala	80%	80%
Healthwatch representative, Stacey Appleyard	60%	60%

HIGHLIGHTS FROM THE COMMITTEE'S WORK IN 2022 – 23

The Committee has undertaken a self-assessment exercise, consisting of a survey and development style discussion, and from the outcome of both areas of strength and highlights from the work undertaken since it was established have been drawn.

These are as follows:

- Establishing the governance arrangements in order to exercise its functions effectively and efficiently, complying with accepted principles of good governance. This work includes the establishment of 3 sub-committees, Finance and Performance, Quality and Transformation
- Focusing on citizen voice through the People's Voice item presented at the beginning of each meeting
- Requesting and monitoring in-depth reviews of some services plus enhanced performance measures.
- Valuable development sessions to help build trusted, open and respectful relationships between members that have enabled:
    - Effective collaboration on matters that have crossed organisational boundaries and budgets.
    - The agreement of a number of contract awards to provide much needed services for Kirklees residents
    - Planning and allocation of resources for Core20+5 priorities

AREAS FOR DEVELOPMENT IN 2023 – 24

The self-assessment exercise also allowed the committee to identify areas for development and these were as follows:

- Further clarity over roles of both the Committee and its individual members
- Increased understanding and effectiveness of governance pathways to decision.
- Better use of the workplan and early notice of governance pathway plans.

KIRKLEES ICB COMMITTEE WORK PLAN – APRIL 2023 TO MARCH 2024

No.	Agenda Item	May 23	Jul 23	Sep 23	Nov 23	Jan 24	Mar 24	Comments
Quality and Safety								
1	Quality and Safety Report	x	x	x	x	x	x	
2	People Story	x	x	x	x	x	x	
3	Kirklees Safeguarding (Adults and Children) Annual Report							To be confirmed
Finance, Performance and Contracting								
4	Finance and Contracting Report	x	x	x	x	x	x	
5	Performance Report	x	x	x	x	x	x	
6	Financial Plans/Budgets	x					x	
7	Operational Plan	x						
8	Kirklees Financial Strategy							To be confirmed
Commissioning/Transformation/Strategic Plans								
9	Transformation and service redesign programmes							To be determined – in line with programme timescales
10	Place strategies/plans eg workforce, estates, digital							To be determined
11	UCR updates		x		x			
12	Summary of Quality Sub-Committee deep dive into Children and Young People's Mental Health and Wellbeing (within Quality and Safety Report)	x						
13	Kirklees Health and Care Plan	x						
14	Inequalities approach (including Core 20 plus 5 initiative)		x					

15	Primary care – decisions in relation to general medical services requiring ICB Committee level decision taking				x			To be determined
Corporate and Governance								
16	Accountable Officer/Chair's Report	x	x	x	x	x	x	
17	Risk Register	x	x	x	x	x	x	
18	Urgent Decisions							As required
19	Partnership Assurance Framework							To be determined
20	Committee Annual Review							To be confirmed
21	Committee Terms of Reference							To be confirmed
22	Committee Work Plan	x	x	x	x	x	x	
23	Sub-Committees – Terms of Reference		x					
24	Sub-Committees – Work Plans		x					
25	Minutes of Sub-Committees	x	x	x	x	x	x	

Kirklees Health & Care Partnership

NHS West Yorkshire Integrated Care Board

Proud to be part of West Yorkshire Health and Care Partnership

Kirklees ICB Committee Terms of Reference

Version control

Version:	1.0
Approved by:	ICB Board
Date Approved:	1 July 2022
Responsible Officer:	Accountable Officer (Kirklees)
Date Issued:	1 July 2022
Date to be reviewed:	After 1 year (or sooner if required)

Change history

Version number	Changes applied	By	Date
0.1	Initial draft	Laura Ellis	21.09.21
0.2	Updated draft following discussion at KIHCLB 30.09.21 and ICS Governance Group 01.10.21	Laura Ellis	11.10.21
0.3	Updated draft following discussion on Kirklees vision, principles at KIHCLB 02.12.21	Laura Ellis	13.12.21
0.4	Updated draft following Constitution engagement, and amend to membership	Laura Ellis	21.03.22
0.5	Updated draft re urgent decisions and public bodies act	Laura Ellis	17.06.22
1.0	APPROVED	ICB Board	01.07.22

1. Introduction

1.1 The Kirklees ICB Committee is established as a committee of the ICB Board, in accordance with the ICB's Constitution, Standing Orders and Scheme of Delegation.

1.2 These terms of reference, which must be published on the ICB website, set out the remit, responsibilities, membership and reporting arrangements of this Committee and may only be changed with the approval of the ICB Board. The Committee has no executive powers, other than those specifically delegated in these terms of reference.

1.3 The ICB has identified a set of guiding principles that shape everything we do:

- We will be ambitious for the people we serve and the staff we employ.
- The West Yorkshire partnership belongs to its citizens and to commissioners and providers, councils and NHS. We will build constructive relationships with communities, groups and organisations to tackle the wide range of issues which have an impact on health inequalities and people's health and wellbeing.
- We will do the work once – duplication of systems, processes and work should be avoided as wasteful and potential source of conflict.
- We will undertake shared analysis of problems and issues as the basis of taking action.
- We will apply subsidiarity principles in all that we do – with work taking place at the appropriate level and as near to local as possible.

1.4 The ICB has committed to behave consistently as leaders and colleagues in ways which model and promote our shared values:

- We are leaders of our organisation, our place and of West Yorkshire.
- We support each other and work collaboratively.
- We act with honesty and integrity, and trust each other to do the same.
- We challenge constructively when we need to.
- We assume good intentions; and
- We will implement our shared priorities and decisions, holding each other mutually accountable for delivery.

1.5 The Kirklees Health and Wellbeing Plan sets out the Kirklees Vision:

'No matter where they live, people in Kirklees live their lives confidently and responsibly, in better health, for longer and experience less inequality.

1.6 The Kirklees Health and Wellbeing Plan sets out the Kirklees Outcomes:

- Children - children have the best start in life;
- Healthy - people in Kirklees are as well as possible for as long as possible;
- Achievement - people in Kirklees have aspiration and achieve their ambitions through education, training, employment and lifelong learning;
- Safe & Cohesive - people in Kirklees live in cohesive communities, feel safe and are safe / protected from harm;
- Economic - Kirklees has sustainable economic growth and provides good employment for and with communities and businesses;
- Clean & Green – people in Kirklees experience a high quality, clean and green environment.
- Independent - people in Kirklees live independently and have control over their lives;

1.7 The focus of the Kirklees Partnership approach is to:

- Work with local communities in Kirklees;
- Focus on prevention and early intervention;
- Empower people to stay independent;
- Deliver high quality acute and specialist services;
- Do work once, avoiding duplication and make sure things are strong-seamed; and
- Commit to openness, transparency and involvement

1.8 The Kirklees Health and Wellbeing Plan sets out a number of priority areas:

- Tackling underlying causes
    - Creating communities where people can start well, live well and age well
- Improving outcomes and experience
    - Creating integrated person-centred support for the most complex individuals
- Using our assets to best effect
    - Developing our people to deliver the priorities and foster resilience
    - Developing estate to deliver high quality services that serve the needs of the local population
    - Harnessing digital solutions to make the lives of people easier

2. Membership

2.1 This part of the terms of reference describes the membership of the Kirklees ICB Committee. Further information about the criteria for the roles and how they are appointed is documented separately.

2.2 Core membership

2.2.1 Independent Members

- Chair
- 2 x independent members

2.2.2 Executive Members

- ICB Accountable Officer (Kirklees)
- ICB Kirklees Place finance lead
- ICB Kirklees Place quality lead

2.2.3 Clinical representative drawn from the Kirklees Clinical and Professional Forum

2.2.4 Partner Members

- 1 x Local Authority
- 2 x Primary Care (general practice)
- 1 x Calderdale & Huddersfield NHS Foundation Trust
- 1 x Mid Yorkshire Hospitals NHS Foundation Trust
- 1 x South West Yorkshire Partnership NHS Foundation Trust
- 1 x Community Services Provider
- 1 x VCSE (via Kirklees Third Sector Leaders)
- 1 x Healthwatch

2.3 Required attendees

- Chair of Health and Wellbeing Board
- Director of Public Health

2.4 ICB officers may request or be requested to attend the meeting when matters concerning their responsibilities are to be discussed or they are presenting a paper.

2.5 Any member of the ICB Board can be in attendance subject to agreement with the Chair.

3. Arrangements for the conduct of business

3.1 Chairing meetings

The meetings will be run by the chair. In the event of the chair of the committee being unable to attend all or part of the meeting, the remaining members of the committee should appoint a chair for the meeting.

3.2 Quoracy

No business shall be transacted unless at least 50% of the membership (which equates to 8 individuals) and including the following are present: at least 1 independent chair/member; at least 1 executive member; and at least 2 partner members.

For the sake of clarity:

a) No person can act in more than one capacity when determining the quorum.
b) An individual who has been disqualified from participating in a discussion on any matter and/or from voting on any motion by reason of a declaration of a conflict of interest, shall no longer count towards the quorum.

Members of the Committee may participate in meetings by telephone, video or by other electronic means where they are available and with the prior agreement of the Chair. Participation by any of these means shall be deemed to constitute presence in person at the meeting.

Members are normally expected to attend at least 75% of meetings during the year.

With the permission of the person presiding over the meeting, the Executive Members and the Partner Members of the Committee may nominate a deputy to attend a meeting of the Committee that they are unable to attend. The deputy may speak and vote on their behalf. The decision of the person presiding over the meeting regarding authorisation of nominated deputies is final.

3.3 Voting

In line with the ICB's Standing Orders, it is expected that decisions will be reached by consensus. Should this not be possible, each voting member of the Committee will have one vote, the process for which is set out below:

a. All members of the committee who are present at the meeting will be eligible to cast one vote each. (For the sake of clarity, members of the committee are set out at paragraph 2.2; attendees and observers do not have voting rights.)

b. Absent members may not vote by proxy. Attendance is defined as being present at the time of the vote but this does not preclude anyone attending by teleconference or other virtual mechanism from exercising their right to vote if eligible to do so.
c. A resolution will be passed if more votes are cast for the resolution than against it.
d. If an equal number of votes are cast for and against a resolution, then the Chair (or in their absence, the person presiding over the meeting) will have a second and casting vote.
e. Should a vote be taken, the outcome of the vote, and any dissenting views, must be recorded in the minutes of the meeting.

The Kirklees Place Based Partnership Collaboration Agreement sets out a dispute resolution process.

3.4 Frequency of meetings

The Committee will normally meet bi-monthly.

The Chair may call an additional meeting at any time by giving not less than 14 calendar days' notice in writing to members of the Committee.

One third of the members of the Committee may request the Chair to convene a meeting by notice in writing, specifying the matters which they wish to be considered at the meeting, If the Chair refuses, or fails, to call a meeting within seven calendar days of such a request being presented, the Committee members signing the requisition may call a meeting by giving not less than 14 calendar days' notice in writing to all members of the Committee specifying the matters to be considered at the meeting.

In emergency situations the Chair may call a meeting with two days' notice by setting out the reason for the urgency and the decision to be taken.

3.5 Urgent decisions

In the case of urgent decisions and extraordinary circumstances, every attempt will be made for the Committee to meet virtually. Where this is not possible the following will apply:

a) The powers which are delegated to the Committee, may for an urgent decision be exercised by the Chair of the Committee and Accountable

Officer (Kirklees). This is subject to every effort having been made to consult with as many Committee members as possible, including at least one independent member, in the given circumstances.

b) The exercise of such powers shall be reported to the next formal meeting of the Committee for formal ratification, where the Chair will explain the reason for the action taken, and the ICB Audit Committee for oversight.

3.6 Admission of the press and public

Meetings of the Committee will be open to the public.

The Committee may resolve to exclude the public from a meeting or part of a meeting where it would be prejudicial to the public interest by reason of the confidential nature of the business to be transacted or for other special reasons stated in the resolution and arising from the nature of that business or of the proceedings.

The chair of the meeting shall give such directions as he/she thinks fit with regard to the arrangements for meetings and accommodation of the public and representatives of the press such as to ensure that the Committee's business shall be conducted without interruption and disruption.

The public may be excluded from a meeting to suppress or prevent disorderly conduct or behaviour.

Matters to be dealt with by a meeting following the exclusion of representatives of the press, and other members of the public shall be confidential to the members of the Committee.

A public notice of the time and place of the meeting and how to access the meeting shall be given by posting it at the offices of the ICB body and electronically at least 7 calendar days before the meeting or, if the meeting is convened at shorter notice, then at the time it is convened.

The agenda and papers for meetings will be published electronically in advance of the meeting excluding, if thought fit, any item likely to be addressed in part of a meeting is not likely to be open to the public.

3.7 Declarations of interest

If any member has an interest, financial or otherwise, in any matter and is present at the meeting at which the matter is under discussion, he/she will declare that interest as early as possible and act in accordance with the ICB's Conflicts of Interests Policy. Subject to any previously agreed arrangements for managing a conflict of interest, the chair of the meeting will determine how a conflict of interest should be managed. The chair of the meeting may require the individual to withdraw from the meeting or part of it. The individual must comply with these arrangements, which must be recorded in the minutes of the meeting.

3.8 Support to the Committee

The Committee's lead manager is the ICB Accountable Officer (Kirklees).

Administrative support will be provided to the Committee by the ICB. This will include:

- Agreement of the agenda with the Chair in consultation with the Lead Manager, taking minutes of the meetings, keeping an accurate record of attendance, key points of the discussion, matters arising and issues to be carried forward.
- Maintaining an on-going list of actions, specifying members responsible, due dates and keeping track of these actions.
- Sending out agendas and supporting papers to members five working days before the meeting.
- Drafting minutes for approval by the Chair and ICB Lead Manager within five working days of the meeting and then distribute to all attendees following this approval within 10 working days.
- An annual work plan to be updated and maintained on a monthly basis.

4. Remit and responsibilities of the committee

The Kirklees ICB Committee has been provided with delegated authority to make decisions about the use of NHS resources in Kirklees, including the agreement of contracts for relevant services. The decisions reached are the decisions of the ICB, in line with the organisation's scheme of delegation.

5. Authority

5.1 The Committee is authorised to investigate any activity within its terms of reference. It is authorised to seek any information it requires within its remit, from any employee of the ICB and they are directed to co-operate with any such request made by the Committee.

5.2 The Committee is authorised to commission any reports or surveys it deems necessary to help it fulfil its obligations.

5.3 The Committee is authorised to obtain legal or other independent professional advice and secure the attendance of advisors with relevant expertise if it considers this is necessary. In doing, so, the Committee must follow procedures put in place by the ICB for obtaining legal or professional advice.

5.4 The Committee is authorised to create sub-committees or working groups as are necessary to fulfil its responsibilities within its terms of reference. The Committee may not delegate executive powers delegated to it within these terms of reference (unless expressly authorised by the ICB Board) and remains accountable for the work of any such group.

6. Reporting

6.1 The Committee shall submit its minutes to each formal ICB Board meeting.

6.2 The Kirklees ICB Accountable Officer shall draw to the attention of the ICB Board any significant issues or risks relevant to the ICB.

6.3 The Committee's minutes will be published on the ICB website once ratified.

6.4 The Committee shall submit an annual report to the ICB Audit Committee and the ICB Board.

6.5 The Committee will receive for information the minutes of other meetings which are captured in the Committee work plan e.g. sub-committees.

7. Conduct of the committee

7.1 All members will have due regard to and operate within the Constitution of the ICB, standing orders, standing financial instructions and other financial procedures.

7.2 Members must demonstrably consider the equality and diversity implications of decisions they make and consider whether any new resource allocation achieves positive change around inclusion, equality and diversity.

7.3 Members of the Committee will abide by the 'Principles of Public Life' (The Nolan Principles) and the NHS Code of Conduct.

7.4 The Committee shall agree an Annual Work Plan with the ICB Board.

7.5 The Committee shall undertake an annual self-assessment of its own performance against the annual plan, membership and terms of reference. This self-assessment shall form the basis of the annual report from the Committee.

7.6 Any resulting changes to the terms of reference shall be submitted for approval by the ICB Board.