

Introduction / Background

The Health and Care Act, which received Royal Assent in April 2022, introduces significant reforms to the organisation and delivery of health and care services in England. It builds on proposals for legislative change set out in the NHS England Long Term Plan and will be backed by £36 billion over the next 3 years through the Health and Care Levy. The main purpose of the Health and Care Act is to establish a legislative framework that supports collaboration and partnership-working to integrate services. Among a wide range of other measures, the Act also includes targeted changes to public health, social care and the oversight of quality and safety.

Health and Care Act – Key Measures on Integration

Integrated Care Systems

The Act places Integrated Care Systems (ICS) on a statutory footing and ensures that every part of England will be covered by an ICS. It also introduces Integrated Care Boards (ICBs) and Integrated Care Partnerships (ICPs) and this will take place on 01 July 2022.

The legislation did not stipulate for a one-size-fits-all approach but aims for flexibility for local areas to determine the best system arrangement for them and build on existing partnerships at place and system level.

Integrated Care Boards

Integrated Care Boards (ICBs) will be responsible for the NHS functions of an ICS. This means that CCGs will be absorbed into their local ICSs. Their commissioning powers and the majority of their staff will become part of the ICS body. These powers will sit within the ICB, which will manage NHS commissioning and funding within ICSs.

Integrated Care Partnerships

Each ICB and 'responsible' local authority in the area must establish an Integrated Care Partnership (ICP). Membership of the ICP must include local authorities in ICS area and local NHS, but wider membership is for local determination. The Chair is to be jointly selected by NHS and local authority and can be same chair as NHS ICS Board. The establishment of ICPs is intended to bring together the NHS, local government and other local partners to support integration.

Integrated Care Strategies

Each ICP is required to produce an integrated care strategy setting out how to meet the needs of the population – as identified in the joint strategic needs assessments from the health and wellbeing boards that fall within the area of the ICB – through the exercise of functions by the ICB, NHSE and the upper tier local authorities. Local Healthwatch must be involved in the strategy, as well as people who live or work in the area. The strategy must address whether the needs could be met more effectively through the use of NHS/local authority section 75 agreements and may include a view on how health and social care could be more closely integrated with health-related services.

Each time an ICP receives a Joint Strategic Needs Assessment (JSNA), it must consider whether the current integrated care strategy should be revised. ICPs must publish their strategy and give a copy to each responsible local authority, and to each partner ICB of those local authorities.

Guidance on integrated care strategies is due in July 2022. DHSC has stated it will¹:

- include in its guidance, recommendations for ICPs on who to consider engaging in the preparation of their integrated care strategies
- produce guidance setting an expectation that the ICP should consult local children's leadership, and children, young people, and families themselves, on the integrated care strategy
- ensure that guidance for the integrated care strategy is aligned with guidance for ICBs and providers on working with people and communities
- refresh guidance for Health and Wellbeing Boards in light of the wider system changes

Joint Health and Wellbeing Strategies

Joint health and wellbeing strategies will be known as joint local health and wellbeing strategies. When a responsible local authority and each of its partner ICBs receives an integrated care strategy from the ICP, they must consider whether any existing joint local health and wellbeing strategies sufficiently address how needs will be met. If existing strategies do not address this sufficiently, a new joint local health and wellbeing strategy must be prepared. The health and wellbeing strategy for Plymouth is incorporated into the Plymouth Plan.

A responsible local authority and each of its partner ICBs must have regard to:

- Joint strategic needs assessments in responsible local authority areas
- Any integrated care strategy that coincides with or includes the whole or part of a responsible local authority area
- Any joint local health and wellbeing strategy prepared by a responsible local authority and its partner integrated care boards

Other Duties

Triple Aim

Integration will be supported by a broad duty to collaborate across the health and care system and new duties have been introduced to ensure the wider effects of decisions are considered. NHS England must consider the effects of its decisions on:

- people's health and wellbeing
- quality of NHS services
- efficiency and sustainability of NHS resources

Inequalities in health, wellbeing and the quality of services must be considered as part of the triple aim. This duty also applies to ICBs and NHS trusts and foundation trusts. NHS England has the power to produce guidance on this duty, must consult before publishing the guidance, and must have regard to it when it is in place.

Duty to Consult

In its responsibilities for public involvement and consultation under section 13Q of the National Health Service Act 2006, NHS England has a duty to consult individuals to whom services are being or may be provided, in the planning and development of commissioning arrangements for those services. The Act extends this to include "carers and representatives" of people receiving a service or who may do so. The extension of this duty is replicated in an equivalent duty on ICBs.

¹ [Integrated care partnership \(ICP\): engagement summary - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/103122/integrated_care_partnership_icp_engagement_summary.pdf)

Joint Forward Plans

Before the start of each financial year, each ICB and their partner NHS trusts and foundation trusts must publish a five-year joint forward plan, setting out how they propose to exercise their functions, including proposals for health services, and action on the ICB's general duties and financial duties. Plans must describe any steps taken to implement relevant joint local health and wellbeing strategies, to address the needs of children and young people under 25, and to address the needs of victims of abuse, whether adult or children. The ICB and its partner trusts must have regard to the plan.

The ICB and its partner trusts must consult people for whom the ICB has core responsibility and any others as appropriate and must involve each relevant health and wellbeing board (HWB) in preparing or revising the plan. Each HWB must be given a draft of the plan, or any revised plan, and be consulted on whether it takes proper account of each joint local health and wellbeing strategy. HWBs must respond with their views on this. HWBs may give their views to NHSE, informing the ICB and partners if they do so.

A copy of published plans must be given to the system's ICP, each relevant HWB and NHS England. Published plans must include a summary of views from consultation and how these were taken into account, and the final opinions of each relevant HWB. A HWB may give NHSE its opinion on whether a published plan takes proper account of each joint local health and wellbeing strategy and if it does so, must give the ICB and its partners a copy of this opinion.

Joint Capital Resource Use Plan

Before the start of each financial year, each ICB and its partner trusts must prepare and publish a plan setting out their planned capital resource use covering a period specified in a direction by NHSE. A copy of the plan must be given to the relevant ICP, HWB and to NHSE. Joint capital resource use plans may be revised.

Annual Report and Performance Assessment

Each ICB must produce and publish an annual report on how it has discharged its functions in the previous financial year and this report must also describe performance on the forward plan and on the capital resource use plan. Each ICB must review what has been done to implement any joint local health and wellbeing strategies and consult with relevant HWBs on this review. It must also review the extent to which it has exercised their functions consistently with NHSE's views about how powers in relation to information on inequalities. The annual report must cover information relating to mental health expenditure.

NHSE must conduct a performance assessment and publish a report on each ICB covering every financial year. In doing this they must consult each relevant HWB on its views on what the ICB has done to implement relevant joint local health and wellbeing strategies.

Care Quality Commission (CQC)

The Act introduces new duties that extend the role of the CQC in two areas: integrated care systems and local government adult social care. The CQC will review healthcare and adult social care in each ICB, with reviews covering how partners work together in the integrated care system. Priorities for reviews will be set by the Secretary of State and include leadership, integration, quality and safety. Reviews will assess the provision of the NHS, public health and adult social care, the activities of the ICB, local authorities and provider in relation to the care and the function of the whole system including the ICP.

Health and Care Act - Other Measures

As well as progressing integration, the Act also does a number of other things including formalising the merger of NHS England and NHS Improvement with the resulting body, NHS England, now responsible for providing 'unified, national leadership for the NHS'. The Act also introduces targeted changes to public health such as limiting the advertisement of junk food and to social care by creating a framework for assuring commissioners and sharing data. The Act formalises the role of the Health Services Safety Investigations Body – an independent body to investigate patient safety issues in England.

Legislation to allow a cap on care costs was already in place in the Care Act 2014 but implementation was postponed. The Health and Care Act 2022 amends the Care Act to change the cap-and-floor model of social care funding which will be implemented from October 2023. The changes will mean that local authority contribution towards paying for a person's care would no longer be counted towards the cap on their total costs.

The Health and Care Act is part of a wider range of policy reforms aimed at transforming health, care and wellbeing, supporting better health and care integration, and tackling growing health inequalities.

Other key publications include:

- The health and care integration White Paper 'Joining up care for people, places and populations'
- The adult social care reform White Paper 'People at the heart of care'
- The 'Levelling up the United Kingdom' White Paper
- The Government's plan for healthcare, adult social care, and new funding 'Build Back Better: Our Plan for Health and Social Care'
- A White Paper on health disparities (due later in 2022)