



Rutland Integration Executive Board Terms of Reference

The Integration Executive Board sits as a permanent sub-group of the Rutland Health & Wellbeing Board.

1. Aim

To deliver Rutland's vision for integrated health and care in Rutland, in line with national policy and local priorities.

2. Responsibilities

The Integration Executive has the following responsibilities:

- a) To agree the scope of the programme of work to integrate health and care in Rutland on an annual basis, setting the scale of ambition and pace needed for delivery
- b) To lead the development of the Better Care Fund Plan for Rutland, and input into the Better Care Together plans and programmes.
- c) To develop a programme plan to ensure delivery of all components of the Better Care Fund Programme, monitoring delivery, performance, and holding partners to account.
- d) To quality assure business cases for individual developments concerned with integration and/or delivery of the BCF, including the strategic assumptions, models of care, evidence base, financial analysis and equality impact assessment
- e) To make recommendations, as appropriate, to the Health and Wellbeing Board on the allocation of the resources necessary to deliver integration.
- f) To implement the necessary mitigation plans across the BCF and allied programmes, linking to the corporate governance systems in partner agencies
- g) To develop pooled commissioning and funding arrangements to support delivery of integration for approval by the Health and Wellbeing Board, and undertake the strategic management and relevant risk sharing agreement of these arrangements.
- h) To undertake forward planning and horizon scanning for the potential future of integration, including future arrangements for the BCF and the BCT
- i) To support and monitor the refresh of the Rutland Joint Health and Wellbeing Strategy, Joint Strategic Needs Assessment and Pharmaceutical Needs Assessment.
- j) To support annual planning cycles for RCC, ELRCCG and other partners

- k) To hear patient/service user feedback and ensure that it is taken into account by partners in the design, implementation and delivery of integrated services.

3. Membership

The membership of the Integration Executive Board will be as follows:

- Chief Operating Officer, East Leicestershire and Rutland Clinical Commissioning Group
- GP representative, East Leicestershire and Rutland Clinical Commissioning Group
- Head of Strategic Commissioning, East Leicestershire and Rutland Clinical Commissioning Group
- Director of Public Health, Rutland County Council
- Deputy Director for People, Rutland County Council
- Head of Commissioning for Health & Wellbeing, Rutland County Council
- Manager, Healthwatch Rutland
- Voluntary and Community Sector representative (rotating membership from VCS members on the Health and Wellbeing Board).
- Senior representatives from: University Hospitals of Leicester NHS Trust (UHL); Peterborough & Stamford Hospitals NHS Foundation Trust (PSHFT); Leicestershire Partnership NHS Trust (LPT).

and such other persons as the local authority and/or the Board thinks appropriate in order to bring particular skills, knowledge and/or perspectives, including, but not limited to: additional voluntary sector representatives; clinicians; provider representatives.

Members may nominate a named deputy to attend on their behalf where necessary. Members will act with the necessary delegated responsibility from their organisation and take decisions on behalf of that organisation in relation to the work of the Board.

Administrative support will be provided to the Board by officers of either RCC or the CCG as appropriate.

4. Voting

All members of the Integration Executive Board are allowed to vote.

Rutland County Council's Meeting Procedure Rules in relation to voting apply; however it is hoped that decisions of the Board can be reached by consensus without the need for formal voting.

Decisions can be taken by the Chair where necessary for reasons of urgency outside of formal meetings. Any decisions taken outside of formal meetings shall be recorded at the following meeting along with the reasons for the urgency and the basis for the decision.

5. Standing Orders and Meetings

The Access to Information Procedure Rules and Meeting Procedure Rules (Standing Orders) laid down by Rutland County Council will apply with any necessary modifications including the following:-

- a. The Chairperson will be a member from Rutland County Council; the Vice Chair will be a member from East Leicestershire and Rutland Clinical Commissioning Group.
- b. The quorum for a meeting shall be a quarter of the membership including at least one representative from Rutland County Council and one representative of the East Leicestershire and Rutland Clinical Commissioning Group.

Administration support will be provided by Rutland County Council or by East Leicestershire and Rutland Clinical Commissioning Group as appropriate.

There will be standing items on each agenda to include:

- Declarations of Interest
- Minutes of the Previous Meeting
- Matters Arising
- Performance Report for the Better Care Fund
- Items for the next Health & Wellbeing Board

Meetings will be held in public at least bimonthly (6 times a year).

The Board may also meet for workshops or seminar sessions and for Board learning and development. These meetings will be informal and not held in public.

6. Reporting

The Integration Executive will submit to the Health and Wellbeing Board:

- i) An annual work programme setting out expected delivery and performance targets;
- ii) At least quarterly reports on the performance of the Better Care Fund Programme, including expenditure;
- iii) Update summaries of any reports tabled at the Integration Executive on the work streams of the Better Care Together Programme and Sustainability and Transformation Plan, as and when;
- iv) Any reports or updates on specific work commissioned by the Health & Wellbeing Board, as and when requested by the Health & Wellbeing Board.

Individual members will be responsible for reporting progress to their organisations through their own internal governance arrangements. They may be asked to provide assure to the Integration Executive Board of this on a periodic basis.

7. Terms of Reference Review

The Terms of Reference for the Integration Executive will be reviewed annually and more frequently where circumstances dictate appropriate.