

Non-executives and the development of ICSs and ICPs

GGI webinar

Wednesday 16 December 2020

Briefing paper to prompt discussion

The NHSE/I paper *Integrating care: next steps to building strong and effective integrated care systems across England* does a good job of formalising and progressing the conversation about integrated care in England.

It freshly articulates the ambition to see greater collaboration between partners in health and care systems. It describes some of the challenges associated with that increased collaboration. And it sets out some of the options for giving integrated care systems (ICSs) a firmer footing in legislation, likely to take effect from April 2022.

But what happens until that legislation is in place? There is broad agreement about the general principles behind this drive for integration. But so far each of the systems taking shape across the country has had to come up with its own informal arrangements about how they operate and how they are governed.

Some of the new systems have been built with input from non-executive directors of their constituent bodies but many have relied purely on the chairs and chief executives. That means that most ICSs are currently ungoverned solutions, in the sense that they lack both legal form and the benefit of non-executive oversight.

Many people are still using the phrase 'coalition of the willing' to describe the way ICSs work – and they say this as though it's a good thing. But perhaps it is not. ICSs are making big, important decisions but in many cases they're doing so without proper board scrutiny. And

what happens in a coalition of the willing if some of the members of that coalition suddenly aren't willing because they disagree with a collective decision? Would those decisions be binding?

Currently, the leadership of most ICSs comprises the chairs of their constituent organisations. This certainly makes for a representative leadership group but not necessarily one that brings a good mix of skills to the decision-making process. It's that rich mix of skills and backgrounds that reminds us of the importance of non-executive oversight.

The following questions are worth considering before next week's webinar – to help guide the discussion.

- Is there an ideal model of ICS governance and if so, what does it look like?
- What role should health and wellbeing boards play in ICSs?
- Do the presence of ICPs make the governance situation with ICSs easier or more difficult?
- Do you feel the governance of ICSs pass the test of facing judicial review?
- How do other stakeholders such as industry or NGOs play into the ICS governance system?

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