

**Role Profile for
Primary Medical
Services Partner
Member of NHS North
Central London
Integrated Care Board**

May 2022

Summary of Partner Member roles

The NHS North Central London Integrated Care Board (NCL ICB) is a new organisation that is due to be established on 1 July 2022. It will be a statutory body with responsibility for strategic planning and commissioning in order to secure the provision of health services across NCL.

NCL ICB will have 14 people who are members of the ICB. These people sit on the ICB's Board of Members ('Board') and are collectively and corporately accountable for the ICB effectively discharging its statutory duties and for organisational performance. The purpose of the Board is to govern effectively and in doing so, build patient, public and stakeholder confidence that their healthcare is in safe hands. The board will be responsible for:

- formulating a plan for the organisation
- overseeing the delivery of the plan
- ensuring the organisation operates effectively and with openness, transparency and candour, and by seeking assurance that systems of control are robust and reliable
- shaping a healthy, values based culture for the organisation and the system through its interaction with system partners.

As outlined in the draft NHS North Central London Integrated Care Board (NCL ICB) Constitution, the ICB and its Board will have five Partner Members and a member from the UCL Health Alliance as follows:

- Two Partner Members: NHS Trusts and Foundation Trusts; one with a dedicated Mental Health perspective
- Two Partner Members: Providers of Primary Medical Services
- Partner Member: Local Authority
- UCL Health Alliance Member.

The role of the Partner Members and the UCL Health Alliance Member is to bring knowledge and experience and contribute the perspective of their sectors to the deliberations and decisions of the Board. However, they are not to act as delegates of those sectors or as delegates of the organisations from which they are drawn.

The ICB will make appointments to ensure it meets the requirement of the Health and Care Act and that the Board has the necessary skills, knowledge and experience to effectively carry out its functions.

Partner Members and the UCL Provider Alliance Member can only be considered for appointment to the Board if they meet the eligibility criteria and are nominated by eligible nominating organisations.

Role Profile

The two Partner Members on the Board will be appointed from NCL Primary Medical Services. Whilst these Partner Members will bring the perspective of primary care across the whole of NCL, one will specifically bring a perspective of the North of NCL and one will bring a perspective of the South. Organisations eligible to nominate Partner Members are outlined in Annexe A.

Partner Members nominated by Primary Medical Services Providers are expected to bring an understanding of primary care in the area. This includes dental, community pharmacy and optometry providers as well as primary care networks and general practice.

Time commitment and remuneration for the Primary Medical Services Partner Member roles are expected to be up to two paid sessions / one day per week. Sessional rates will be set in accordance with ICB policy.

Please note, while applications can only be accepted from GPs and wider primary medical services, all nominations must have the support of an NCL GP Practice (a holder of PMS/ GMS/ APMS contracts). This is to ensure that these Partner Members have sufficient knowledge and understanding of those primary care services in NCL that we currently commission and can contribute that sector perspective to the deliberations and decision making of the Board.

1. The opportunity

Integrated care systems (ICSs) are partnerships of health and care organisations, local government, and the voluntary, community and social enterprise (VCSE) sector. They exist to improve population health, tackle health inequalities, improve services and productivity by greater integration and whole system working, and help the NHS support broader social and economic development.

The NCL integrated care system covers the geographical boundaries of the London boroughs of Barnet, Camden, Enfield, Haringey and Islington. The NCL ICB will be a statutory body with responsibility for strategic planning and commissioning in order to secure the provision of health services across NCL.

The Partner Members on the Board must be able to provide the ICB with knowledge and experience of the primary care sector. While they will be expected to bring knowledge and experience from these sectors and will contribute the perspective of these sectors to the deliberations and decisions of the ICB, they are not to act as delegates of these sectors or of the organisations from which they are drawn.

2. NCL ICS ambition and priorities

The NCL ICS has a broad ambition to improve the health and wellbeing of residents and to ensure that its residents live healthy lives for as long as possible. This means that we have to address the long standing health inequalities that exist in our five boroughs. It follows therefore that our focus will need to be on:

- a population health outlook
- working with local authority partners to bring the wider determinants of health to bear

- having a focus on prevention of illness and disease and on early intervention
- when residents need health and care services, supporting them to live independently in their communities for as long as possible
- ensuring resident's mental health and wellbeing needs are met
- shifting the balance of care towards community-based care
- taking advantage of digital and technology based solutions to modernise services and support people in their own care
- supporting and enabling wider VCSE sector and community support, responses and services

- integrating services so residents experience care that is as seamless and efficient as possible
- ensuring that patients and residents are involved in the design and improvement of services
- building a financially sustainable system.

As well as these longer term ambitions, there are some immediate priorities for our system such as:

- reducing waiting times for treatment and tackling the backlog
- improving urgent care performance
- preparing for winter 2022/23
- continued pandemic response as needed
- responding to immediate financial challenges
- working together to address workforce challenges.

In order to make progress we know that HOW we work will be important. It is clear that we will need to:

- work in a strong and effective partnership both as one system and as high performing borough-based partnerships
- be a learning system which values continuous improvement and adaptation
- re-think traditional approaches and services, and innovate to bring about rapid change, where we can, utilising the world leading research and academic capabilities that exists within our partnership and within North Central London.

3. NCL principles for working with residents and communities

The ICB has adopted the ten principles set out by NHS England for working with people and communities.

1. Put the voices of people and communities at the centre of decision-making and governance, at every level of the ICS.
2. Start engagement early when developing plans and feed back to people and communities how it has influenced activities and decisions.
3. Understand your community's needs, experience and aspirations for health and care, using engagement to find out if change is working.
4. Build relationships with excluded groups – especially those affected by inequalities.
5. Work with Healthwatch and the voluntary, community and social enterprise sector as key partners.
6. Provide clear and accessible public information about vision, plans and progress to build understanding and trust.
7. Use community development approaches that empower people and communities, making connections to social action.
8. Use coproduction, insight and engagement to achieve accountable health and care services.

9. Coproduce and redesign services and tackle system priorities in partnership with people and communities.
10. Learn from what works and build on the assets of all partners in the ICS – networks, relationships, activity in local places.

4. Eligibility Criteria (Please refer to Appendix A)

Eligibility Criteria for Providers of Primary Medical Services
You will bring a sector perspective of the North of North Central London or bring a sector perspective of the South of North Central London. This is to ensure the ICB Board has a broad range of perspectives from Primary Care covering its entire geography (see Annex A for list of eligible organisations)
Meet the Board eligibility criteria: a) Comply with the criteria of the “fit and proper person test” b) Be willing to uphold the Seven Principles of Public Life (known as the Nolan Principles); c) Fulfil the requirements relating to relevant experience, knowledge, skills and attributes set out in a role specification.
Ability to manage time to undertake Partner Member role in conjunction with their role within their partner organisation within NCL

5. Role outline and description

Role Outline for Partner Members	
Contractual Term	Designate from appointment until 30 June 2022 Term 1 July 2022 – 30 June 2025
Contractual Status	Office Holder – confirm with HR
Terms of Engagement	Contract for Service
Accountable to	ICS Chair
Time Commitment	Up to two paid sessions / one day per week
Remuneration	Sessional rate in accordance with ICB policy
Base	ICB sites across North Central London

The Board plays a critical role in shaping the strategy, vision and purpose of NCL ICB to ensure achievement of what have been set out national as being the four purposes of all ICSs.

1. Improve outcomes in population health and healthcare.
2. Tackle inequalities in outcomes, experience and access.
3. Enhance productivity and value for money.
4. Help the NHS support broader social and economic development.

The ICB is responsible for formulating a strategy for the organisation; holding the organisation to account for the delivery of the strategy; and shaping a healthy culture for the organisation and wider ICS partnership. Members of the Board, includes the Partner Members, will share responsibility to ensure that the ICB exercises its functions effectively, efficiently, economically, with good governance and in accordance with the terms of the NCL ICB constitution.

Partner Members will work alongside appointed Non-Executive Members and Executives as equal members of the NCL ICB Board. They share responsibility for the decisions made by the Board and for success of the organisation in leading the local improvement of health and care for NCL residents and people who use services within NCL.

There is a requirement for each representative on the ICB to provide proactive, strategic leadership, informed by their expertise and experience, and to work with other ICB members to ensure:

- the ICB and wider integrated care system act in the best interests of the health of the local population at all times
- the ICB commissions the highest quality services with a view to securing the best possible outcomes for patients within available resources and maintains a consistent focus on quality, integration and innovation
- ensure that the Board sets challenging objectives for improving its performance across the range of its functions
- decisions are taken with regard to securing the best use of public money
- NCL ICB, when exercising its functions, acts with a view to ensuring that health services are provided in a way which promotes the NHS Constitution
- participate in committees established by the ICB to exercise delegated responsibility. As a member of Board committees, bring independent judgement and experience for the benefit of the ICB
- NCLICB is responsive to the views of local people and promotes self-care and shared decision making in all aspects of its business
- good governance remains central at all times.

6. Role purpose

Strategic leadership

- Responsibility for ensuring NCL ICB behaves with the utmost probity at all times.
- Demonstrate commitment and leadership to continuously improving outcomes, tackling health inequalities and delivering the best value for money for the taxpayer.
- As a member of the Board, provide an unbiased strategic view on all aspects of NCL ICB business.
- Take a balanced and forward-thinking view of the clinical agenda and draw on specialist skills to add value.
- Support and maintain an NCL-wide culture of collaboration, championing the overarching NCL identity and objectives whilst supporting borough partnerships at place level.
- Support NCL ICB's key decision making processes with respect to the management of conflicts, particularly where other ICB members are conflicted.

Key working relationships

The post holder will help NCL ICB to build and maintain effective working relationships across the system. Through engagement, they will ensure that the Board acts in the best interest of the patients and public. They will show commitment to working with key partners.

The post holder will take a proactive role in developing and maintaining key working relationships across the ICS. This will include:

- ICB Board Members
- executive directors of the ICB
- members of the Integrated Care Partnership (ICP)
- members of the Community Partnership Forum
- NCL Managers and staff
- provider organisations within NCL
- local authorities
- patient representatives and representative groups, including Healthwatch.

General

It is a requirement that all ICB members actively participate and regularly attend Board meetings. In addition, Partner Members may be required to attend committee meetings. Where an ICB member is unable to attend meetings and/or meet the required commitment, they will need to notify and discuss the absence with the Chair.

This role profile provides an outline of the tasks, responsibilities and outcomes required of the role. The office holder will also be expected to undertake any other duties that may be required which are consistent with the responsibility of the post.

This role description describes responsibilities, as they are currently required. It is anticipated duties will change over time and the role description may need to be reviewed in the future.

All NCL ICB members have a responsibility to participate in regular reviews with the Chair.

7. Governance

All NCL ICB Board members are required to:

- ensure that good governance remains central at all times and that the Board conforms to the highest standards of corporate, information and clinical governance, acts in the interest of the population, membership and stakeholders it serves and is seen to be accountable for the services provided and the resources deployed
- on appointment, declare all potential conflicts of interest on the NCL ICB Register of Interests. This will need to be kept updated regularly for members as circumstances change
- act at all times in accordance with the provisions of NCL ICB's policies and in particular its policies for managing conflicts of interest and standards of business conduct.

8. Equality and Diversity

In line with the Public Sector Equality Duty, NCL ICB is committed to an Equal Opportunities Policy which affirms that all ICB members should be afforded equality of treatment and opportunity in employment irrespective of sex, sexual orientation, age, marital status,

pregnancy and maternity, race, religion or belief, gender reassignment or disability. All NCL ICB members and others engaged by the ICB are required to observe this policy in undertaking the responsibilities of their role and their conduct, and conduct towards internal and external stakeholders.

9. Time commitment

Partner Member time commitments and duties will be in discussion and agreement with the ICB Chair. Partner Members may be required to fulfil commitments during the working day or in the evening. All members of the ICB Board are required to attend the NCL ICB Board meetings.

10. Appointment and tenure

Partner Members are appointed as designates until NCL ICB is established as a statutory body. Partner Members are then appointed for a three year term of office subject to satisfactory appraisal. Partner Members may hold a maximum of two terms of office. Each term of office is three years. A Partner Member may be removed from office if they no longer meet the requirements as set out in NCL ICB's Constitution.

11. Person specification

Qualifications and Experience

- Partner Members nominated by primary medical services providers are expected to bring an understanding of primary care in the area. This includes primary dental, community pharmacy and optometry providers as well as primary care networks and general practice
- Partner Member must bring a perspective of either the North of North Central London or South of North Central London
- Significant experience working in a collaborative decision-making Board setting, or other 'board level' working in a large and complex organisation.
- Experience of working in partnership with health and social care organisations in the context of shaping and delivering improved patient outcomes.
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- Experience of working in partnership with health and social care organisations in the context of shaping and delivering improved patient outcomes.
- Experience and demonstrable track record of securing and supporting improvements for patients or the wider public.

Leadership

- Demonstrable experience of success in a strategic leadership role at system level

Knowledge, Skills and Aptitude

- Understanding of the impact of health inequalities on communities and individuals and the need to focus on the wider determinants of health.
- Ability to work as an effective member of the Board and to contribute to a continued patient focused culture.
- The ability to understand and absorb complex data and information and reach informed judgement.
- Ability to chair a sub-committee of the Board.
- Ability to demonstrate how to work across boundaries, creating networks which facilitate high levels of collaboration within and across organisations and sectors.
- Good understanding of risk management and finance, budgeting and control.

Personal Qualities

- Able to operate successfully at Board level as Board team member including able to support and challenge constructively.
- Incisive and analytical.
- Real enthusiasm to help the ICB deliver the four purposes of an ICS.
- Emotional intelligence and resilience.
- Ability to inspire Board colleagues.
- Ability to demonstrate personal insight into their actions, experience and behaviours that illustrate awareness and appreciation and empathy of issues relating to equality, diversity and inclusion.