

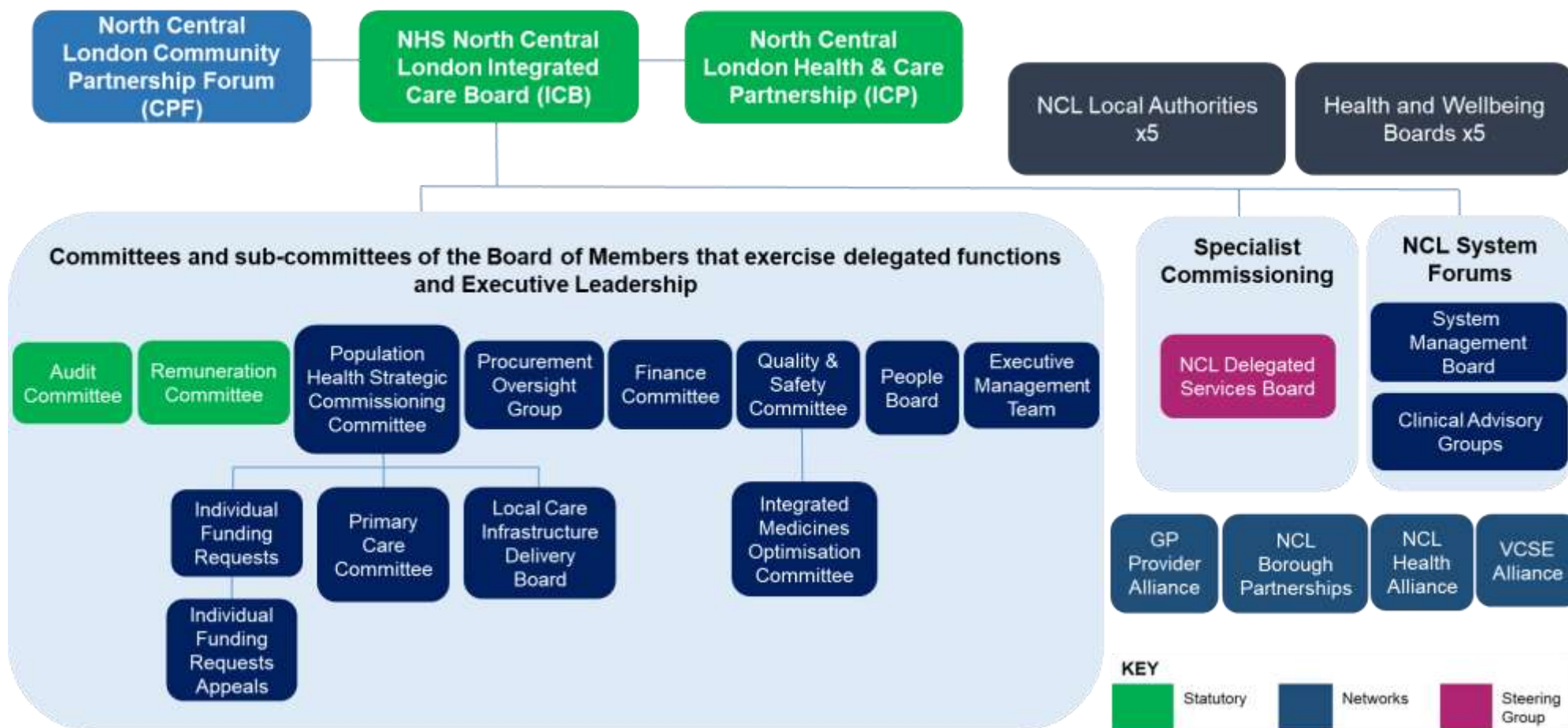


**North Central London**  
Integrated Care Board

## **NHS North Central London Integrated Care Board Functions & Decisions Map**

30 September 2025

## ICB Governance Structure



## Key Functions

A high level overview of the governance structure is set out below. For greater detail of the Integrated Care Board's key functions and how they are exercised please see the Scheme of Reservation and Delegation, which is published on our website.

### Board of Members

The Integrated Care Board ('ICB') has a Board of Members which has overall accountability and responsibility for the discharge of the ICB's functions (including all statutory requirements of the Integrated Care Board). The Board of Members will take an active role in decision making and oversight, meeting regularly to enact business.

The Board of Members sets the culture of the organisation, taking a supportive approach to subsidiarity and working with Borough Partnerships to develop our collective approach and learn what works best in different settings in order to deliver improved health outcomes for North Central London residents and patients.

### Audit Committee

The purpose of this committee is to provide oversight and scrutiny of the effectiveness and robustness of the governance and assurance processes on which the Board of Members relies. This includes but is not limited to:

- a) Integrated governance, risk management, internal and external controls;
- b) Internal and external audit;
- c) Counter fraud arrangements; and
- d) Financial reporting.

### Remuneration Committee

The purpose of this committee is to:

- a) Approve the remuneration and terms of service for Integrated Care Board members except for the Chair;
- b) Approve the remuneration and terms of service for Integrated Care Board officers, clinical leads and employees at the Very Senior Manager level;
- c) Set the pay policy for employees below the Very Senior Manager level. For the avoidance of doubt the Remuneration Committee does not approve employee pay below the Very Senior Manager level or the Integrated Care Board's staffing structures. These are delegated to the Integrated Care Board's Chief Executive.

### Population Health Strategic Commissioning Committee

- a) The purpose of the Committee is to:
- b) Oversee and drive the delivery of the North Central London approach to strategic commissioning and the development of a Commissioning Strategy, which will derive from the NCL Population Health and Integrated Care Strategy ('Population Health Strategy') and be in line with the 10 Year Health Plan;
- c) Ensure a commissioning construct is created to deliver Integrated Health Organisations (IHOs), Neighbourhoods and other new models of care;
- d) Oversee the accompanying financial strategy (ensuring necessary linkage and alignment with the ICB's Finance Committee);
- e) Ensure resources are concentrated appropriately to address health inequalities and achieve the ICB's three strategic objectives of:
  - o Knowing our population (segmentation, stratification and actuarial

- approach);
  - Developing our approach to strategic commissioning;
  - Delivering the Neighbourhood model;
- f) Approve the commissioning of health services that deliver the Population Health Strategy and the ICB's wider strategic objectives;
- g) Oversee the development of North Central London ('NCL') system plans, the ICB's commissioning strategies and plans to ensure they:
  - Improve outcomes in population health and healthcare;
  - Tackle inequalities in outcomes, experience and access;
  - Enhance productivity and value for money;
  - Help the NHS support broader social and economic development;
- h) Provide assurance to the Board of Members that the ICB is discharging its statutory duties relating to strategic commissioning functions effectively in line with the Model ICB;
- i) Oversee the implications and market management outcomes from the commissioning strategy;
- j) Oversee the Primary Care Committee, the Individual Funding Request ('IFR') Panel, the IFR Appeals Panel and the Local Care Infrastructure Delivery Board.

### Primary Care Committee

This is a sub-committee of the Strategy and Development Committee. Its purpose is to:

- a) Provide oversight, scrutiny and decision making for primary medical services;
- b) Make decisions in relation to the commissioning and management of primary medical services contracts;
- c) Have oversight of quality and performance in primary medical services; and
- d) Provide oversight and assurance of the primary care budget delegated from NHS England.

### Local Care Infrastructure Delivery Board

This is a sub-committee of the Strategy and Development Committee. Its purpose is to provide oversight, leadership and Governance for the delivery of the ICB's Local Care (Primary and Integrated Care) Estates programme. The Local Care Infrastructure Delivery Board takes its strategic direction from the Strategy and Development Committee and focusses on implementation, programme and project delivery and risk management.

### Individual Funding Requests Panel

This is a sub-committee of the Strategy and Development Committee. Its purpose is to consider and make decisions on Individual Funding Requests ('IFR') applications.

### Individual Funding Requests Appeals Panel

This is a sub-committee of the Strategy and Development Committee. Its purpose is to consider Applicants' appeals against decisions made by the Individual Funding Requests Panel.

### Procurement Oversight Group

The purpose of this committee is to:

- a) Be a non-conflicted forum which provides oversight and scrutiny of key procurements undertaken by the ICB and ensure that the correct procurement regime is complied with, properly evidenced, is transparent, and that conflicts of interest are appropriately managed;
- b) Oversee the organisational transition to the NHS Provider Selection Regime and its implementation;

- c) Provide assurance to the Board of Members and other committees and sub-committees as appropriate that conflicts of interest are properly managed throughout the development of the business case, the approval process and that the procurement routes for services are appropriate;
- d) Ensure that procurement processes are proportionate to the cost and complexity of the services to be procured;
- e) Provide approval to proceed to procurement for approved business cases;
- f) Approve service models where these have been remitted to the Procurement Oversight Group by the Board of Members or one of its committees or sub-committees;
- g) Have oversight of any procurement where the contract value is £500,000 (five hundred thousand pounds) or greater across the life of the contract and/or any other procurement where the Board of Members and/or any of its commissioning committees request oversight by the Procurement Oversight Group;
- h) Ensure procured contracts are being managed effectively once awarded and that lessons learned are implemented.

### Finance Committee

The purpose of the Committee is to:

- a) Provide oversight and scrutiny of the ICB's finances, budgets, financial performance and efficiency plans;
- b) Oversee the development and delivery of a robust, viable and sustainable system financial plan that support's the ICB's objectives;
- c) Support the ICB in its wider financial system leadership role and in particular the development and delivery of system financial plans, achieving the system control total (revenue and capital) and ensuring the financial performance of NHS organisations within the NCL Integrated Care System;
- d) Ensure health and social inequalities are taken into account in financial decision-making;
- e) Review and approve Single Tender Waivers on the Board of Member's behalf where the financial value is in excess of that delegated to the Chief Executive and Chief Finance Officer under the Standing Financial Instructions.

### Quality and Safety Committee

The purpose of this committee is to provide oversight, scrutiny and assurance of the following areas on behalf of the Board of Members and to provide robust recommendations and/or directions for actions:

- a) The quality and safety of commissioned services;
- b) Reducing inequalities in outcomes, experience and access;
- c) The effectiveness of patient care and high quality patient experience;
- d) Provider service quality performance and quality improvement initiatives;
- e) Continuous quality improvement and shared learning across the system;
- f) Safeguarding and complaints.

### Integrated Medicines Optimisation Committee

The purpose of the Committee is to:

- a) Provide oversight and assurance on the ICB's statutory functions on medicines;
- b) Provide oversight and assurance on medicines to ensure:
  - o Safe and clinically effective use of medicines;
  - o Improved clinical outcomes;
  - o Best value of medicines use;



- The promotion of proper use of medicines;
- Safe and consistent access to medicines in the context of care pathways which cross multiple providers;
- c) Oversee the development and implementation of the ICB's medicines management strategy and procedures;
- d) Provide clinical leadership for the system and ensure co-operation and consistency of approach to medicines optimisation across the NCL Integrated Care System;
- e) Oversee the arrangements for sponsorship and/or joint working with the pharmaceutical industry.

### ICB Executive Management Team

The Executive Management Team provides executive leadership to the Integrated Care Board, ensuring the effective management and running of the organisation. The Executive Management Team have delegated decision making authorities in line with the Integrated Care Board's governance framework.

### NCL People Board

- a) The purpose of the People Board is to:
- b) Provide strategic leadership and oversight of the delivery against people priorities including those within NCL strategic transformation programmes;
- c) Work together to co-design, promote and deliver the strategic vision for workforce across the ICS and amongst its member organisations and staff;
- d) Agree key priorities, programmes, and projects for developing and improving the experience, recruitment, and retention of staff;
- e) Optimise the current workforce and build the future workforce required within health and social care in NCL to continue to deliver sustainable high-quality care for the populations that NCL serve;
- f) Ensure that NCL ICS leverages the research, education, data and technology assets within the sector to drive innovative and future-focussed workforce transformation;
- g) Champion equality and diversity, and challenge inequalities;
- h) Identify and mitigate against strategic and programme risks;
- i) Ensure interdependencies with other programmes and projects are understood, managed and communicated;
- j) Promote engagement in programmes, projects and initiatives and progress on people matters within the ICS;
- k) Feedback and act on new priorities and challenges across the NCL workforce;
- l) Utilise Board members' influence to champion the NCL workforce programme, acting as advocates for innovation and change;
- m) Enhance and accelerate programme benefits and outcomes across the health and care sector;
- n) Challenge NCL organisations and the ICS effectively and constructively;
- o) Support NCL workforce programme delivery, ensuring quality and tracking of benefits and resource prioritisation;
- p) Ensure effective utilisation of available resources and funding for people development to ensure effective deployment (recognising that statutory accountability may lie elsewhere);
- q) Adhere to the NHS's 'people promise' and principles of public life (Nolan principles) and uphold the values of the NHS and public sector.

### North Central London Delegated Services Board

On 1 April 2025 NHS England delegated responsibility for the commissioning and oversight of 70 specialised services to the ICB. These are overseen by the NCL Delegated Services Board.

The NCL Delegated Services Board:

- Oversees all delegated specialised services;
- Oversees delegated Dentistry and Optometry services (note it does not oversee Community Pharmacy);
- Oversees the transformation work arising from the Clinical Strategy for Delegated Services;
- Reviews the investment strategies required to ensure residents and patients have high quality, sustainable, services;
- Provides assurance for clinical and operational planning;
- Reports into the Population Health Strategic Commissioning Committee;
- Makes recommendations to the relevant ICB Board committees on areas within the NCL Delegated Service Board's remit;
- Provides a forum for discussing issues with retained specialised services with NHSE
- Inputs into wider London system and partnership boards as required.

## Forums for partnership working with other organisations

### Health and Care Partnership Committee

This joint committee is the Integrated Care Partnership committee. It is a statutory joint committee between the Integrated Care Board and the Local Authorities in North Central London. Its role is to develop the Integrated Care Strategy for North Central London and to facilitate joint action to improve health and care services and to influence the wider determinants of health and broader social and economic development.

### Community Partnership Forum

This forum ensures effective community and citizen participation in the work of the wider Integrated Care System. It includes important system partners such as Healthwatch and other community groups.

### System Management Board

System Management Board is responsible to collaboratively drive the ICS's strategic, system-wide priorities. This is achieved through:

- Shared understanding of progress across the system;
- Collective steer for priority programmes of work;
- System collaboration to resolve escalations and issues.

### Clinical Advisory Group

The North Central London Clinical Advisory Group provides robust assurance about the clinical service change decisions that are being taken and provide a clear and transparent audit trail of the rationale for decisions to effect clinical service changes. The North Central London Clinical Advisory Group will be the interface between the London Clinical Advisory Group regarding clinical services that may impact North Central London and vice versa.

### NCL Borough Partnerships

North Central London's five Borough Partnerships are active multiagency partnerships. Their role is to foster collaborative working in support of accelerating joint working to

provide targeted care to their communities. Partnerships continue to mature locally. There are common features, and many priorities are consistent, but with local nuance within each partnership.

#### [NCL Health Alliance](#)

This is a multi-sector alliance for North Central London, that models collaboration, joint accountability, person-centred care and an outcomes focus throughout our system. The focus is on both physical and mental health needs and considering whole pathways, working with other partners, from prevention through to complete tertiary treatment to address health inequality and access to treatment and care.

#### [GP Provider Alliance](#)

The GP Provider Alliance brings together General Practice with a unified provider voice to strategically lead, influence and enable Primary Care provision at the North Central London level. The alliance ensures that our systems provide the best possible services for our communities, optimise health gains and reduce inequalities.

#### [VCSE Alliance](#)

The Voluntary Community and Social Enterprise (VCSE) Alliance brings together VCSE groups from across North Central London to represent and raise the voice of VCSE within the ICB, providing strategic leadership to develop the role of the sector within the system. The Alliance supports the ICB to understand the local community's needs and assets, improve dialogue with local communities and VCSE, support local communities to stay well, understand the role the VCSE can play when addressing key system issues and through this, reduce inequalities.