

Health and Wellbeing Board

July 21st 2021

Report of the Joint Consultant in Public Health, Vale of York CCG / City of York Council

York Health and Care Alliance Update

Summary

1. This report is to provide an update on the progress of the York Health and Care Alliance, including minutes of Alliance meetings for Board members to note.

Background

2. The York Health and Care Alliance was established in April 2021 as our city's response to the changes and reorganisation of the NHS proposed in the government's white paper 'Integration and Innovation'.
3. The Alliance Board was established as a sub-group of the Health and Wellbeing Board through consultation with the Health and Wellbeing Board and through Full Council in April 2021. Papers relating to the establishment the Alliance board, including a description of its purpose and its terms of reference, can be found in Council Executive papers from their meeting on 18th March 2021.
4. As part of this arrangement, an update on the Alliance Board and minutes of meetings held since April are presented to the Health and Wellbeing Board in this paper.

Main/Key Issues to be Considered

Update on NHS reforms

5. Two key documents have been recently published which set out some more information on the government's plans for health and social care after April 2022.

6. The first is the Health and Social Care Bill, published on the 6th July. This lays out the legislative framework for the changes which were first proposed in the 'Integration and Innovation' White paper. The key reforms include:
 - The statutory establishment of Integrated Care Systems (locally, Humber Coast and Vale ICS)
 - The constitution of an ICS consisting of two statutory bodies:
 - the ICS Partnership (including local authority membership) to support integration, promote partnerships and develop a plan to address systems' health, public health and social care needs
 - the ICS NHS Body which will run the NHS day-to-day in local systems
 - The abolition of Clinical Commissioning Groups and merger of staff, functions, assets and liabilities into their local ICS
 - Specific changes to the procurement and provider selection regime in the NHS, removing many of the elements of competitive tendering and aiming to foster more collaborative approaches to give greater flexibility to how services are delivered
 - Giving the Secretary of State interventional powers, including power to intervene in local service reconfiguration and power to transfer functions between Arm's Length Bodies
 - Specific provisions around social care (e.g. on data sharing), public health (e.g. measures on advertising of products high in fat, salt and sugar) and safety (e.g. establishment of a Health Services Safety Investigations Body)

7. The second is the ICS Design Framework, which sets out guidance on how ICSs should arrange themselves locally. This includes:
 - Constitution and membership of the two statutory ICS groups

- arrangements for place-based partnerships, along with five options for governance arrangements at place level
 - arrangements for provider collaboratives around specific health and care sectors, for instance acute care and primary care
8. There is currently a great deal of work happening within the regional (Humber Coast and Vale), sub-regional (North Yorkshire and York) and local (York) geographies to agree how arrangements for decision making and commissioning health care services will be made after the abolition of CCGs in April 2022. This involves determining the future of a large range of statutory and non-statutory functions, significant contracts and budgets, and a large number of staff. It is a complex piece of work with some significant uncertainties still remaining. However over the last few months partners in York have developed close collaboration to tackle these challenges, and together have outlined a strong ambition to create future structures and future relationships which will serve to improve population health and deliver integrated, high quality services.
9. Links to both the Health and Social Care Bill and the ICS Design Framework are given below.

Alliance Board meetings

10. The York Health and Social Care Alliance has met monthly since April 2021, with the membership, aims and purpose and terms of reference presented to the council Executive in March.
11. Topics discussed so far as part of the board's work include:
- The ICS ambitions for place-based partnerships
 - Alliance 'areas of first focus':
 - Diabetes and Healthy Weight
 - Learning disabilities and autism
 - Mental Health
 - Complex care
 - The development of the Population Health Hub in York

- Section 75 arrangements / joint commissioning models between health and care
- Quality and service improvement
- Developing an Alliance engagement and coproduction approach
- Elective recovery

Consultation

12. The work of the Alliance involves key partners from each health and care provider organisation in the city and all of them have been heavily involved in its work. A number of engagement events have been held to share the plans and details on NHS reforms with partners in the city, and more will be possible when the detailed structures have been agreed.

Options

13. The HWBB will receive further reports on the progress of the NHS reforms and the York Health and Care Alliance.

Strategic/Operational Plans

14. The Joint Health and Wellbeing Strategy is the overarching strategic vision for York, and the work of the York Health and Care Alliance supports the delivery of the desired outcomes.

Implications

- **Financial** – There are no financial implications as yet from this report. Any future decisions about finances take by the Alliance will be made through the governance of each partner organisation at this stage, while the Alliance is a partnership rather than a formally constituted body.
- **Human Resources (HR)** – There are no human resources implications as a result of this paper, but significant HR implications of the NHS reforms in general should be noted.
- **Equalities** – the Alliance aligns with the Health and Wellbeing Strategy in aiming to tackle and improve health inequalities

- **Legal** - There are no legal resources implications as a result of this paper, but significant legal and contractual implications of the NHS reforms in general as noted above
- **Crime and Disorder** - none
- **Information Technology (IT)** –none
- **Property** - none
- **Other** – none.

Risk Management

15. Governance processes are in place between the partners to manage the strategic risks of these reforms

Recommendations

16. The Health and Wellbeing Board are asked to:
 - Note the update on the NHS reforms and work of the York Health and Care Alliance
 - Note and receive the minutes of the York Health and Care Alliance

Contact Details

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Report Approved

Date 12/07/2021

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All

Wards Affected: *List wards affected or tick box to indicate all [most reports presented to the Health and Wellbeing Board will affect all wards in the city – however there may be times that only a specific area is affected and this should be made clear]*

For further information please contact the author of the report

Background Papers:

Health and Social Care Bill – available [here](#)

ICS design framework – available [here](#)

Annexes

Annex 1 – York Health and Care Alliance Minutes (April and May 2021)