

Report of the York Health and Care Partnership

Summary

1. This report provides an update to the Health and Wellbeing Board (HWBB) regarding the work of the York Health and Care Partnership (YHCP).
2. This report asks the Health and Wellbeing Board to respond to the following recommendation in relation to Section 10:

Readiness for Neighbourhood Health

- Confirm the role of the HWB in the context of new national guidance; to lead development of the statutory Neighbourhood Health Plan and provide active system stewardship for implementation of Neighbourhood Health Services in York.

Background

3. Partners across York Place continue to work closely together to integrate services for our population. The YHCP shares the vision of the York Joint Local Health and Wellbeing Strategy that in 2032, York will be healthier, and that health will be fairer.
4. The YHCP has an Executive Committee which is the forum through which senior Partnership leaders collaborate to oversee the delivery of the Partnership priorities. The Partnership draws on membership across Integrated Care Board (ICB) senior officers, City of York Council senior officers, York and Scarborough NHS Teaching Hospital, Tees, Esk and Wear Valley NHS Mental Health Trust, primary care, York Centre for Voluntary Services, Healthwatch York, the university and education sectors, and City of York Council elected members. The Executive Committee also operates as a committee of the ICB and City of York Council, governed by a section 75 agreement between the two organisations.

Update on the work of the YHCP in the Reporting Period

5. The Executive Committee has met three times since the last YHCP Report and the approved minutes of the meetings which took place in December 2025, February 2026, and March 2026 are enclosed.

6. York Mental Health Partnership and Mental Health Hubs

- In December 2025 the YHCP Executive Committee received an update from the Mental Health Partnership outlining continued progress in developing York's integrated mental health system, with particular focus on the evolution of mental health hubs and wider partnership working. Since the previous report, work has advanced on key system priorities, including addressing data interoperability challenges, strengthening safeguarding oversight, and progressing collaborative approaches across health, care, and voluntary sectors. The introduction of an Open Dialogue model was highlighted as a promising relational approach to care, with early indications of improved outcomes.
- Ongoing work to align services with neighbourhood models, improve prevention (especially for people with severe mental illness), and better understand local mental health trends was also highlighted. Feedback from system partners emphasised the importance of sustainable, joined-up delivery, stronger data sharing, and long-term commitment across organisations.
- Looking ahead, the YHCP Executive Committee supported the development of a sustainable 24/7 mental health hub model for York in line with national expectations, including submission of a capital funding bid within required timelines. There was recognition of workforce and service design challenges, alongside the need to explore commissioning options to support a more integrated system. Partners committed to continuing work on early intervention, whole-family approaches, and inclusive engagement principles. The importance of community-based support was also highlighted.
- In March, the YHCP Executive Committee received a further update on early scoping work underway with system partners to develop a commissioning "roadmap" for mental health services in 2026/27. This work will inform a future proposal and includes consideration of different contracting models. The YHCP Executive Committee highlighted the importance of maintaining

protection for statutory responsibilities within any future arrangements, with clear expectations and boundaries for delivery built into contracts.

- The YHCP Executive Committee also recognised the financial pressures facing all partner organisations and the need to maximise existing resources in the absence of additional funding. The recently published Neighbourhood Health Framework (see section 10 of this report) was noted as a key opportunity to better align services and support more integrated, local delivery models.

7. York Health and Care Collaborative and Neighbourhood Health

- Since December 2025, the York Health and Care Collaborative (YHCC) has reported continued progress in developing neighbourhood-based working and population health management across York. This has been underpinned by shared guidance and principles focused on addressing holistic need, managing complexity, and delivering coordinated, multi-agency care rooted in neighbourhoods. City of York Council has progressed rapid transformation activity using data insights and community engagement, alongside recruitment to strengthen neighbourhood teams. Governance arrangements, including a programme management office and partnership task-and-finish groups, are now established, with improved connectivity across providers. The contribution of the Voluntary, Community and Social Enterprise sector and Healthwatch York has been recognised as critical, alongside the need for sustainable resourcing. York is also recognised as a leading place within the ICB, with Health and Wellbeing Boards playing a key role in oversight and accountability.
- By February 2026, this work had advanced further with the introduction of a draft York Neighbourhood Operating Model and supporting governance framework. The Health and Wellbeing Board made a valuable contribution to shaping the model through discussion at its January meeting. The model is designed to be flexible and scalable, building on existing strengths and informed by neighbourhood-level data. While initial delivery has focused on priority cohorts, there is a clear commitment to expand, including a strengthened focus on children and families. Ongoing discussions have highlighted system challenges, including funding and capacity constraints,

alongside the importance of an approach that prioritises prevention, wider determinants, and community engagement.

- There remains a strong expectation to deliver measurable outcomes, demonstrate impact under system pressures, and continue positioning York as a leading exemplar for neighbourhood development.
- The YHCC will continue to focus on neighbourhood health development for York, with a renewed focus on prevention and addressing the wider determinants of health.

8. Joint Commissioning

- At the December YHCP meeting, the Executive Committee received an update on progress made through the Joint Commissioning Forum, including work to align and integrate services across health, care, and the voluntary sector. This includes prevention and health inequalities programmes, community-based services, and efforts to reduce duplication and improve value for money. Members also noted ongoing work to and develop a more integrated, community-based mental health offer. The update highlighted both achievements and continuing challenges as partners work towards more joined-up, efficient delivery.
- Members discussed the potential implications of proposed NHS commissioning changes, particularly the impact on local partnership working, integration, and joint funding arrangements. While concerns were raised, there was agreement to provide collective feedback to inform the consultation, alongside responses from individual organisations. The YHCP Executive Committee emphasised the importance of maintaining momentum during this period of change and agreed to hold dedicated sessions to consider future place-based working arrangements.
- The Better Care Fund draft plan has now been submitted, with feedback expected over the coming weeks ahead of the final submission. There has been less change or significant movement in the BCF this year than initially anticipated. While the updated guidance indicates a shift towards neighbourhood-based approaches, the plan itself remains largely consistent with

previous iterations. We anticipate that more substantive changes may be introduced in next year's cycle.

- The section 75 agreement between City of York Council and the Integrated Care Board has now been extended into 2026-27, allowing work to align funding and commissioning to continue. This will be supported by a joint commissioning plan to be developed in quarter 1.

9. York Health and Care Partnership Development and Delivery

Development Fund

- In February the YHCP Executive Committee considered proposals for allocating a £250,000 non-recurrent development fund to support York Health and Care Partnership priorities. A total of £374,000 in bids had been received and assessed against agreed principles, with a focus on equitable investment, particularly for children and young people. Members approved the highest-scoring proposals, subject to conditions. A small number of lower-scoring proposals were not supported, and one proposal was conditionally supported pending confirmation of alternative funding sources.
- Discussion highlighted the importance of ensuring value for money, strengthening co-production, and maintaining partner commitment in the context of financial pressures and system change. It was agreed that any unallocated funding would be redirected to support co-production activity. The Committee also requested regular reporting on delivery and outcomes from funded projects and agreed to review all allocations after six months to ensure impact and alignment with partnership priorities.

Renewed Direction for ICBs

- In February the YHCP considered proposals to reform the York Health and Care Partnership (YHCP) governance and operating model in response to wider Neighbourhood policy developments and changes within the ICB. The report set out the need to reshape YHCP to ensure it remains effective in the next phase of system integration, particularly in light of reduced ICB support capacity. Members were advised of revised ICB arrangements, including a small number of dedicated roles for York and North

Yorkshire, and discussed how partnership leadership and delivery capacity could be maintained going forward.

- Proposed changes focused on streamlining governance, reducing voting complexity, and strengthening consensus-based decision-making, while retaining accountability through existing statutory structures. The model also emphasised shifting more delivery responsibility to providers, improving cross-organisational working, and aligning resources with the emerging Neighbourhood approach, including integrated community and mental health models. Mitigations were agreed to maintain leadership continuity and preserve system knowledge through designated Council and provider roles working alongside the ICB, as well as embedding staff working across organisational boundaries. A formal review of the revised arrangements will take place in six months.

Assurance report

- In March the YHCP received an Assurance Report covering progress from May 2025 to February 2026 across joint commissioning, neighbourhood development, and children and family services. The report set out evidence of delivery against the Partnership's three priorities.
- A key theme throughout the update was system capacity risk, particularly within contracting and delivery functions, which was identified as a significant constraint on pace and implementation. Delays linked to commissioning capacity and ICB financial controls were noted as impacting roll-out of otherwise ready initiatives, including mental health and high-intensity support schemes. Concerns were also raised about funding availability and the ability of teams to sustain and lead multiple transformation programmes simultaneously.
- Despite these pressures, strong partnership commitment was highlighted, alongside continued modelling to support the "left shift" from acute to community services and prioritisation of investment with the greatest impact on reducing demand. Members noted the importance of addressing waiting lists and maintaining focus on workforce and system capacity to ensure delivery ambitions remain achievable.

10. Wider neighbourhood health updates

National Neighbourhood Health Framework

- The Neighbourhood Health Framework was published in March 2026 and sets out a major national shift towards integrated, community-based care delivered through Neighbourhood Health Teams and neighbourhood health centres, with Health and Wellbeing Boards (HWBs) positioned as the central statutory anchor for delivery. The framework requires ICBs and local authorities, working through HWBs, to agree neighbourhood footprints, establish integrated neighbourhood teams focused on frailty, long-term conditions, end of life care and children and young people, and put in place the foundations for pooled budgets and data sharing. It also signals a clear long-term move away from hospital-based care towards prevention, early intervention and coordinated community services.
- For HWBs, the guidance represents a significant strengthening of role and responsibility, shifting them from primarily strategic oversight bodies to active system stewards with accountability for delivery. HWBs are expected to lead the statutory Neighbourhood Health Plan, align NHS, local authority and wider public service reform (including housing, education, policing, VCSE and employment support), and ensure resources are directed towards neighbourhood priorities. They are also expected to oversee delivery performance, surface and resolve system tensions, and ensure integration across partners rather than duplicative governance. In practice, HWBs become the key point of accountability for neighbourhood health reform, with place-based partnerships acting as the operational engine for delivery and coordination across the system.
- This report asks the Health and Wellbeing Board to respond to the following recommendation:
 - Confirm the role of the HWB in the context of new national guidance; to lead development of the statutory Neighbourhood Health Plan and provide active system stewardship for implementation of Neighbourhood Health Services in York.

York readiness for Neighbourhood Health

- Partners have worked together to assesses York Place's readiness to deliver the national Neighbourhood Health Framework and understand the preparatory work required for development of the 2027–28 Neighbourhood Health Plan under the leadership of the HWB.
- York Place has made notable progress in establishing the foundations of the model, including Integrated Neighbourhood Teams across all geographies, early frailty and complex care pathways, improved data sharing and population health management, and the development of neighbourhood-based service pilots.
- Partners highlight key areas requiring further development, particularly consistent delivery across all priority cohorts, stronger integration with secondary care, social care and children's services, and more mature approaches to urgent care, diagnostics and planned care within neighbourhood settings. Workforce capacity, cross-system commissioning, and governance clarity are also identified as constraints.
- Overall, while York Place is assessed as having a strong foundation for neighbourhood working, further acceleration is required to fully meet national expectations. The HWB will play a pivotal role in driving the 2027–28 Neighbourhood Health Plan, ensuring system-wide alignment, overseeing delivery readiness, and addressing gaps in integration, capacity and consistency to enable a fully embedded neighbourhood health model.

Neighbourhood Health Centres

- NHS England has issued guidance outlining planning requirements for developing Neighbourhood Health Centres, including a deadline of 28 May 2026 for submitting a return that consolidates service and estates strategies and identifies existing, upgraded, and new facilities. The guidance requires the ICB to work collaboratively with regional teams and system partners to establish a coherent pipeline of schemes supporting neighbourhood health. This will involve close coordination across transformation, integration, strategy, estates, and local authority leads to ensure proposals reflect both nationally consistent

services and local population needs, building on work already undertaken within the ICB.

- Early thinking suggests that York could consider a city centre site, particularly York Central, as a strong candidate for a Neighbourhood Health Centre, given its potential to anchor health services within a major regeneration area and support the development of a more balanced, community-focused city centre. At the same time, existing proposals such as Burnholme remain important, particularly in addressing areas of higher need, with any changes to primary care estate requiring significant engagement with GP partners and local communities.

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Wards Affected

ALL
