

<b>KIRKLEES HEALTH &amp; WELLBEING BOARD</b>	
<b>MEETING DATE:</b>	<b>6 September 2018</b>
<b>TITLE OF PAPER:</b>	West Yorkshire and Harrogate Health and Care Partnership Memorandum of Understanding
<b>1.</b>	<b>Purpose of paper</b>
1.1	To seek the Health and Wellbeing Board's views and endorsement for partners in the Kirklees health and care system to sign the Memorandum of Understanding (MoU) for the West Yorkshire and Harrogate (WYH) Health and Care Partnership (HCP).
1.2	For the Kirklees Health and Wellbeing Board to commit to continue working with the WYH HCP.
<b>2</b>	<b>Background</b>
2.1	Kirklees has been part of the WYH HCP since its inception as a Sustainability and Transformation Plan in March 2016.
2.2	In May 2018, WYH HCP was one of four areas to be invited to part of the Integrated Care System (ICS) development programme. Being a Shadow ICS is about helping the partnership to develop the sophistication of process and relationships that means, in future, the partnership itself will be able to take on some powers and budgets from national bodies. This would mean that decisions about investment in health and care can be taken more locally by those with a closer relationship to the impact of the funds and decisions.
2.3	In practice, at this stage, this does not change the status of the partnership itself, or remove or revoke any responsibilities or sovereignty from the organisations that make up the Partnership. It does, however, provide the opportunity to develop a clear statement of intent from all partners about how we will work together to develop that greater level of sophistication for more effective local decision making.
2.4	All partners are clear that the next phase of partnership working is about the right systematic leadership for integration across health and care from across all the 30+ organisations that make up the Partnership as well as how the Partnership works with the hundreds of other organisation that have an impact on health and care, including third sector organisations, pharmacies, care homes, hospices and domiciliary care providers.
2.5	It includes continuing to negotiate for the kind of WYH HCP and partnership outcomes that we have agreed are important: investment in prevention, primary care and mental health, community-wellbeing, better join up between 'health' and 'care' and democratic accountability and transparency about where we direct our collective resources.
2.6	The Joint Kirklees Health and Wellbeing Strategy 2014-2020 continues to guide our efforts to improve the health and care system – it sets the ambition for Kirklees to be a district combining great quality of life and a strong and sustainable economy where there is high prosperity and low inequality and people enjoy better health throughout

their lives. These principles guide Kirklees involvement in the WYH Partnership and engagement with central government and NHS England.

- 2.7 The emerging Kirklees Health and Wellbeing Plan is our Kirklees 'place based plan' and sets in more detail our plans to implement the priorities set out in the Joint Health and Wellbeing Strategy.

### **3 Proposal**

- 3.1 In October 2017 the West Yorkshire and Harrogate Partnership (WYH) Senior Leadership Executive Group (SLE) agreed that a Memorandum of Understanding (MoU) should be developed to formalise working arrangements and support for the next stage of the Partnership's development.

- 3.2 The MoU is a formal agreement between WYH health and care partners.

- 3.3 It also provides the basis for partners to collectively negotiate a refreshed relationship between local NHS organisations and national oversight bodies.

- 3.4 It does not introduce a new hierarchical model but aims to instil the principle of mutual accountability to underpin the collective ownership of the outcomes partners have agreed are essential.

- 3.5 It is not a legal contract, but is a formal agreement between all of the partners. It is based on an ethos that the Partnership is a servant of the people in West Yorkshire and Harrogate and of its member organisations.

- 3.6 It specifically does not replace or override the legal and regulatory frameworks that apply to statutory NHS organisations and Councils. Instead, it is designed to sit alongside and complement these frameworks, creating the foundations for closer and more formal collaboration.

- 3.7 The MoU is intended to be read in conjunction with the West Yorkshire and Harrogate Sustainability and Transformation Plan, published in November 2016, the West Yorkshire and Harrogate Next Steps document published in February 2018 and the emerging refreshed Kirklees Health and Wellbeing Plan. Together these documents set out the details of our commitment to work together in partnership to realise our shared ambitions to improve the health of the 2.6 million people who live in our area, and to improve the quality of their health and care services.

- 3.8 The MoU has been drafted by a working group of colleagues from across Local Government and the NHS.

- 3.9 The text of the MoU covers the context for the partnership, how partners are expected to work together across WYH, including principles, values and behaviours, mutual accountability and governance arrangements, including how the Partnership moves towards a new approach to assurance, regulation and accountability with the NHS national bodies.

- 3.10 Development of the MoU has aimed to provide a platform for:

- 3.10.1 a refresh of the governance arrangements including the relationship and interplay between the six Places and statutory bodies
- 3.10.2 exploring what mutual accountability means in the context of collective ownership for delivery, rather than a top-down approach
- 3.10.3 developing a new approach to commissioning, and maturing provider networks that collaborate to deliver services in place and at WYH level
- 3.10.4 improving clinical and managerial leadership of change in major transformation programmes
- 3.10.5 developing more transparent and inclusive approaches to citizen engagement in development, delivery and assurance
- 3.10.6 improving political ownership of, and engagement in the agenda, including regular opportunities for challenge and scrutiny
- 3.10.7 developing a new assurance and accountability relationship with the NHS regulatory and oversight bodies that provides new flexibilities for WYH to assert greater control over system performance and delivery and the use of transformation and capital funds
- 3.10.8 agreeing an effective system of risk management and reward for the NHS bodies in the system
- 3.11 The Memorandum:
- 3.12 The text of the MoU sets out details of:
  - 3.12.9 The context for the Partnership
  - 3.12.10 The partner organisations
  - 3.12.11 How partners will work together in WYH, including our principles, values and behaviours
  - 3.12.12 The objectives of the Partnership, and how our joint priority programmes and enabling workstreams will improve service delivery and outcomes across WYH
  - 3.12.13 The mutual accountability and governance arrangements, including how we will move towards a new approach to assurance, regulation and accountability with the NHS national bodies
  - 3.12.14 Our joint financial framework
  - 3.12.15 The support that will be provided to the Partnership by the national and regional teams of NHS England and NHS Improvement
  - 3.12.16 Which aspects of the agreement apply to particular types of organisation
- 3.13 In order for all signatory partners to have had a full opportunity to comment on the draft text – the final version of the Draft Memorandum of Understanding will not be publicly circulated until after the 31st August.

3.14	We will re-publish this paper with the Memorandum of Understanding included as an appendix as soon as possible and paper copies will be available at the Health and Wellbeing Board meeting.
3.15	Signatories:
3.16	All partners are being asked to take the process for sign-up through their own governance structures, including making any final decision at a meeting that takes place in public.
3.17	The process for all partners to go through their governance structures is anticipated to take place during September and October 2018.

<b>4</b>	<b>Financial Implications</b>
4.1	At this stage there resources and value for money implications for the Health and Wellbeing Board specifically relating to the MoU – as this responsibility is held with each of the organisational signatories.
4.2	As a key Kirklees multi-agency forum, with a democratic mandate from local communities through elected members, the Health and Wellbeing Board will remain fully engaged on any future funding arrangements and resource allocations decided through the WYH HCP to ensure that this represents value for public money and that the interests of the Kirklees population are fairly met.

<b>5</b>	<b>Sign off</b>
	Richard Parry, Strategic Director for Adults and Health, Kirklees Council

<b>6</b>	<b>Next Steps</b>
6.1	All partners in the WYH Partnership are currently undertaking formal discussions about signing the Memorandum of Understanding and taking it through the relevant governance arrangements.

<b>•</b>	<b>Recommendations</b>
	The Health and Wellbeing Board is asked to:
<b>•</b>	Note the Memorandum of Understanding that will be available after 1st September 2018.
<b>•</b>	Recommend to Kirklees Health and Wellbeing Board members whether or not to sign up to the spirit and letter contained in the Memorandum of Understanding.

<b>8.</b>	<b>Contact Officer</b>
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Rachael Loftus, Head of Regional Health Partnerships, [rachael.loftus@leeds.gov.uk](mailto:rachael.loftus@leeds.gov.uk) , 07891 271054