### **North Yorkshire Council**

### **Executive**

### 17 June 2025

North Yorkshire Health Collaborative – a new approach to transforming health and care in North Yorkshire through an NHS/North Yorkshire Council Joint Committee and Section 75 agreement

Report of the Corporate Director: Health and Adult Services

#### 1.0 PURPOSE OF REPORT

1.1 This report presents for approval the proposal to enter a Section 75 Agreement to enable the North Yorkshire Health Collaborative (NYHC) Joint Committee to be established. The Joint Committee will have an overview of aligned expenditure on health and care services of up to approximately £590m (not including Better Care Fund) across North Yorkshire Council and Humber and North Yorkshire Integrated Care Board (ICB) and lead the delivery of the 'Ambitious for Health' programme, a new approach to transforming health and care in North Yorkshire. The Section 75 Agreement between North Yorkshire Council and Humber and North Yorkshire ICB has been prepared following Executive approval in principle to establish the Joint Committee (17th December 2024).

#### 2.0 BACKGROUND

- 2.1 The legislation which placed NHS Integrated Care Boards (ICBs) on a statutory footing set out arrangements for ICBs to establish Joint Committees between themselves and local authorities. In 2024, Humber and North Yorkshire (HNY) ICB which plans, funds and provides NHS services to 90% of the population of North Yorkshire approached North Yorkshire Council (NYC) to set up a Joint Committee for North Yorkshire, supported by a Section 75 (NHS Act 2006) Agreement.
- 2.2 North Yorkshire Council (NYC) Executive considered this matter at its meeting on <a href="https://doi.org/10.10/10.10/">17th December 2024</a>, approving in principle the proposal to establish a formal Joint Committee supported by a new Section 75 Agreement between HNY ICB and NYC. The commitment of partners to transforming community and neighbourhood health and social care in North Yorkshire was also noted.

# 3.0 PROPOSED ARRANGEMENTS

- 3.1 The proposed arrangements build on established joint working through the North Yorkshire Place (NYP) Board, which is led by the Council's Chief Executive and includes leaders from Integrated Care Boards, Secondary Care, Primary Care, the Voluntary Sector, and the wider Council. Evolving this working arrangement into the 'North Yorkshire Health Collaborative' Joint Committee (NYHC) will provide unified leadership to address key health and social care issues in North Yorkshire through a single work programme, 'Ambitious for Health' a new approach to transforming health and care in North Yorkshire
- 3.2 The Section 75 Agreement is between North Yorkshire Council and HNY ICB only and does not include the other ICB's in the North Yorkshire area. The intention is that key existing NYP Board partners will continue to play an active role in leading the North Yorkshire Health Collaborative as part of the wider health and care system, and shall be attendees of the Joint Committee as non-voting members.

- 3.3 Our organisations and teams already work closely together to provide the best services we can, but establishing a Section 75 Agreement to facilitate the work of the Joint Committee opens new opportunities to align commissioning and deliver health and care services across our organisations and to collectively understand how resources across the system are most effectively deployed. This can help reduce duplication but also bring related services closer together so that people can get the help they need in a more joined-up, consistent way.
- 3.4 The work of the Joint Committee will deliver significant elements of the forthcoming national 10-year plan for health on a local level, including the signalled shifts from acute to community services and from treatment to prevention, ultimately supporting our ambition for people in North Yorkshire to live longer, healthier and independent lives. The core components of the 'Ambitious for Health' programme over the proposed lifetime of the Section 75 Agreement which deliver on the <a href="NHS England">NHS England</a> » Neighbourhood health quidelines 2025/26 include:

NHS and social care working together to prevent people spending unnecessary time in hospital or care homes:

- Implementation of single Hospital at Home / Intermediate Care / Reablement model for North Yorkshire
- Re-design and commissioning of the integrated community equipment service
- Development Care and Support Hubs to provide intermediate care and specialist dementia services

Strengthening primary and community based care to enable more people to be supported closer to home or work:

- Working towards collaboration and standardisation of Community Health services and Integrated Neighbourhood Teams
- Continued development of extra care housing schemes and supported accommodation for working age adults
- Integrated NHS Care Hubs delivery of Catterick Integrated Care Campus, and continued development at other locations

Connecting people accessing health and care to wider public services and third sector support, including social care, public health and other local government services:

- Action on health inequalities: physical activity, healthy ageing, women's health, smokefree generation
- Developing local models of enhanced prevention services
- Delivery of Get Britain Working Trailblazer (£10m) to address health barriers to work
- 3.5 On this basis, approval is now being sought from NYC Executive and from HNY ICB to establish the North Yorkshire Health Collaborative Joint Committee supported by a Section 75 Agreement between the two organisations, with an initial 1-year term and 2 options to extend for a further 12 months each (3 years in total). It is proposed that the new arrangements will take effect at the next meeting of the current North Yorkshire Place Board on 10th July 2025, subject to approvals.
- 3.6 As a consequence of these proposed changes and, also, the forthcoming re-structure of NHS England and ICBs and the publication of the NHS 10 Year Plan, it is also proposed to:
  - Review the terms of reference, role and membership of the North Yorkshire Health and Well-being Board later in 2025/26
  - Review all other existing legal agreements between the NHS and NYC during 2025/26, with a view to updating and consolidating these arrangements as from April 2026

#### 4.0 CONSULTATION UNDERTAKEN AND RESPONSES

- 4.1 A 28-day public consultation on the establishment of the North Yorkshire Health Collaborative and the Joint Committee was undertaken during May 2025 via the consultation section of the Council's website. No responses were received.
- 4.2 Further community engagement and co-production with people with lived experience will be undertaken as the Joint Committee's Ambitious for Health programme is designed and delivered, working with the Voluntary and Community Sector and Healthwatch as appropriate.

### 5.0 ALTERNATIVE OPTIONS CONSIDERED

5.1 Consideration has been given to the creation of pooled budgets to be included within the Section 75 Agreement at the outset to support joint commissioning and service integration. At this point however, the recommendation is that the Joint Committee focuses on establishing a shared overview of aligned budgets and making recommendations to decision-making forums through existing governance arrangements.

### 6.0 FINANCIAL IMPLICATIONS

6.1 The Section 75 Agreement will align HNY ICB and NYC funding on prevention and community health and social care services to promote shared leadership, service development and improvement, and to enable better integration of services. At this point in time, no budgets will be delegated to the Joint Committee from either the HNY ICB or NYC. The agreement does, however, outline the existing areas of spend which will be treated as 'aligned' budgets through the Joint Committee. An aligned budget relates to a service area and the spend in that service area which is common to both the HNY ICB and NYC. The main components of aligned spend include:

### HNY ICB:

- NHS community health services
- Continuing health care and adult social care placements
- Aftercare provided under Section 117 of the Mental Health Act 1983
- Transforming Care Programme
- Mental Health

#### NYC:

- Adult social care services
- Adult social care mental health services
- Healthy Child Service (0-19 years)
- Sexual Health Service
- Integrated Quality Team
- Public Health Grant
- 6.2 The Joint Committee will oversee c£590m of aligned expenditure. In the paper presented in December 2024 the potential aligned budgets were estimated at £850m. This figure has been adjusted to c£590m to reflect the following:
  - Primary Care will be fully part of the Joint Committee however its funding is largely nationally determined so whilst the Joint Committee will be cognisant of local funding for Primary Care (including medicines prescribing) valued at around £225m for North Yorkshire, this amount will not be part of the aligned budget overseen by the Joint Committee through the Section 75 Agreement.
  - The Better Care Fund, approximately £78.5m, is managed jointly through an existing separate s.75 agreement.

- Adjustments to take account of increases in 2025/26 budgets where they are now known. (Further adjustments will be made to the total aligned figure when ICB budgets for 2025/26 have been finalised.)
- 6.3 Each organisation will retain the ability to make its own allocation and expenditure decisions as per current arrangements. Future decisions about aligned expenditure will be informed by recommendations from the Joint Committee.
- 6.4 A key role of the Joint Committee in the proposed governance arrangements is to understand any new operational arrangements and mitigate risks relating to a deterioration in finance, performance, or the quality of services.

#### 7.0 LEGAL IMPLICATIONS

- 7.1 Section 75 of the National Health Service Act 2006 and the NHS Bodies and Local Authorities Partnership Arrangements Regulations 2000, S.I. 617 ("Regulations") enable NHS statutory bodies and local authorities to collaborate across a range of local authority health-related functions and NHS health functions.
- 7.2 In addition, Section 65Z5 of the National Health Service Act 2006, as inserted by the Health and Care Act 2022, enables the ICB (as a 'relevant body') to jointly exercise their functions with NHS England, other Integrated care boards (ICBs), NHS trusts, NHS foundation and/or with local authorities and to form joint committees (under s65Z6).

### 8.0 EQUALITIES IMPLICATIONS

- 8.1 Partners across the NHS and North Yorkshire Council work together to reduce social and health inequalities and support the integration of services. They harness the collective leadership to lever the totality of resources that will address wider determinants of health. HNY ICB, NYC and wider partners will work through the NYHC Joint Committee to align resources as appropriate to promote prevention and use targeted approaches to working with communities to have the greatest positive impact over time on the population's health.
- 8.2 Equality Impact will be assessed in relation to individual programmes of work with the Ambitious for Health transformation as appropriate.

### 9.0 CLIMATE CHANGE IMPLICATIONS

9.1 There are no specific climate change implications arising directly from the establishment of the Joint Committee and the Section 75 Agreement. As services are transformed and changes implemented over time, climate change implications will be considered as part of the design and delivery.

### 10.0 PERFORMANCE IMPLICATIONS

10.1 A key role of the Joint Committee in the proposed governance arrangements is to build a collective understanding of performance across the health and social care system, and to make improvements and mitigate risks in relation to the performance or quality of services.

#### 11.0 RISK MANAGEMENT IMPLICATIONS

11.1 The establishment of the Joint Committee does not take away from organisational responsibilities and accountabilities for statutory duties. The Partners shall remain liable for their own respective services and decisions taken, and it is not envisaged that either party shall assume liability in respect of any recommendations made by the Joint Committee.

#### 12.0 REASONS FOR RECOMMENDATIONS

12.1 By formalising integrated working, North Yorkshire Council and HNY ICB are putting in place the governance mechanisms that will enable joint work to transform local services to deliver

- significant elements of the forthcoming 10-year plan for health, including the signalled shifts from acute to community services, from sickness to prevention and from analogue to digital.
- 12.2 The creation of the North Yorkshire Health Collaborative Joint Committee supported by the Section 75 Agreement is an enabler to accelerate delivery of local shared objectives around integration and prevention in support of our ambition for people in North Yorkshire to live longer, healthier and independent lives.

## 13.0 RECOMMENDATION(S)

- i) Approve the proposal to establish the North Yorkshire Health Collaborative Joint Committee of partners across the health and care system and enter into a Section 75 Agreement for a maximum of 3 years (1+1+1 years);
- ii) Delegate approval of any subsequent amendments to the draft Section 75 Agreement between HNY ICB and North Yorkshire Council to establish the NYHC Joint Committee to the Assistant Chief Executive (Legal and Democratic Services):
- iii) Delegate to the Chief Executive, in consultation with the Leader of the Council, the decision to extend the Section 75 Agreement between NYH ICB and North Yorkshire Council annually for a period of up to three years in total;
- iv) Note the ongoing commitment from across partner organisations to transform health and care in North Yorkshire through the joint "Ambitious for Health" work programme

### **BACKGROUND DOCUMENTS:**

Appendix A – Section 75 Agreement (draft) Appendix B – Section 75 Schedules (draft) Via embedded hyperlinks

- Copy of previous report approved by North Yorkshire Council Executive on <u>17<sup>th</sup> December</u> 2024
- NHS England » Neighbourhood health guidelines 2025/26

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Note: Members are invited to contact the author in advance of the meeting with any detailed queries or questions.