



Report to:	West Yorkshire Combined Authority		
Date:	22 June 2023		
Subject:	Partnership Working with West Yorkshire Integrated Care Board		
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Is this a key decision?		□ Yes	⊠ No
Is the decision eligible for call-in by Scrutiny?		□ Yes	⊠ No
Does the report contain confidential or exempt information or appendices?		☐ Yes	⊠ No
If relevant, state paragraph number of Schedule 12A, Local Government Act 1972, Part 1:			
Are there implications for equality and diversity?		⊠ Yes	□ No

1. Purpose of this Report

- 1.1 The Combined Authority and the NHS West Yorkshire Integrated Care Board (ICB) are developing a partnership agreement that sets out our shared commitment to working together on the factors that affect population health: fair economic growth, climate, tackling inequality.
- 1.2 The draft agreement sets out how we can further collaborate and move from mutually beneficial but separate work to a greater level of more strategic investment in shared capacity and shared work programmes. The purpose of the agreement is to codify the existing strong relationships between our two bodies at West Yorkshire level, describe our relationship more formally and set out the framework for greater partnership working.
- 1.3. This report seeks approval to enter into the partnership agreement and to agree reciprocal membership arrangements between the two organisations.
- 1.4. These papers have also been reviewed and endorsed by the West Yorkshire Integrated Care Partnership on 6th June 2023.

2. **Information**

Partnerships at West Yorkshire level

- 2.1 Tackling inequity and injustice, including health inequalities and socioeconomic disparities, are priority areas of focus for the West Yorkshire Mayor, the West Yorkshire Combined Authority (WYCA), the West Yorkshire Healthand Care Partnership and the NHS West Yorkshire Integrated Care Board (WY ICB) Chair and Chief Executive.
- 2.2 West Yorkshire's leaders have come together recognising the value of collaborative, partnership working around inclusivity and health determinants. There has been a commitment to work together on these issues and jointly resource a small team to catalyse system change. There is strong base and potential to grow the national recognition for the leadership role that West Yorkshire plays in this area of work.

Health, inclusion and growth

- 2.3 We know that around 80% of the things that generate and sustain good health, are things outside of healthcare. As well as individual factors, social determinants have a strong influence on the health of the population. This includes the conditions in which people are born, grow, work, live, and age, and the wider set of forces and systems shaping the conditions of daily life.
- 2.4 Good health is vital to an enjoyable and meaningful life, free from avoidable pain, anxiety and, in the worst cases, premature death. But it is also a crucial determinant of our economic prospects, both at an individual, local, regional and a national level.
- 2.5 Additionally, when the economy doesn't work for people, harm is caused to both people and the planet. This harm may be in the form of ill health, climate breakdown or economic inequalities and insecurity. The response is usually to spend money to respond to these harms, and so we become trapped in an expensive cycle of spending money to fix what was broken.
- 2.6 It is clear, therefore, that the contribution of combined authorities, and local authorities are hugely influential in the health of the population, and any powers and resources that are within the control of these institutions should be looking at ways of positively maximising their impact on the population's health.
- 2.7 Concurrently, changes in the NHS structural arrangements and articulation of purpose have put greater emphasis on the role of the NHS as contributor to social and economic development and have created a new geographical footprint for NHS management responsibilities removing Clinical Commissioning Groups (which tended to be broadly similar to local authority footprints) and creating Integrated Care Systems (ICSs) and Board (closer to combined authority footprints, some better aligned than others).

- 2.8 It is particularly important to acknowledge and strengthen this link, given the wider ongoing changes in the economic geography of our places and the way we live. There is an inextricable relationship between health and socioeconomic outcomes, as witnessed in the current situation around the cost of living and the impact of ill-health on labour markets. West Yorkshire leaders are committed to delivering the best possible outcomes for their population through addressing the drivers that affect this relationship.
- 2.9 We are therefore setting out in the attachment partnership agreement, the aim to codify the existing strong relationships between our two bodies operating at the West Yorkshire level and describe our ambition for greater partnership working that catalyses our shared ambitions for better lives. Our shared mission is that by working in partnership, we can develop and deliver better policies, programmes and services that will improve the lives the people of West Yorkshire. Our shared ambition is to be a region that understands and invests in lifetime health, both for our current population and for future generations.
- 2.10 The work programme supporting this will be delivered through a focus on shared priorities and resources, in three main ways: health and inclusion in all policies; programme design and delivery to demonstrate this in action; development of future ambition for the region.
- 2.11 It is therefore recommended that the West Yorkshire Combined Authority:
 - endorse this approach and support the work;
 - sign the attached partnership agreement to demonstrate commitment and agreement of areas of focus;
 - acknowledge the West Yorkshire Health and Care Partnership Board's extension of membership to include the Mayor and Chief Executive of the Combined Authority and agree to these appointments;
 - seek to review opportunities for Integrated Care Board colleagues to take up ex-officio advisory roles on Combined Authority Committees, in the first instance through the Place Regeneration and Housing Committee extending an ex-officio advisory role to Chair of the Integrated Care Board (or delegated representative).

3. Tackling the Climate Emergency Implications

3.1 There is an explicit commitment to working together to ensure that our collective actions mitigate the health impacts of the climate emergency and maximise our region's contributions to tackling climate change.

4. Inclusive Growth Implications

4.1 There is an explicit commitment to better joined up thinking, planning and delivery of our policies, strategies, programmes and services to ensure the maximum benefits of health and wealth for our population.

5. Equality and Diversity Implications

5.1 There is an explicit commitment to tackling discrimination and removing structural inequality in our joint work. We commit to working closely together through the work of our shared West Yorkshire Inclusivity Champion, so that we can hear more directly from our diverse communities about their priorities for our region. In doing so, we will aim to maximise the diversity advantage of West Yorkshire and ensure that all parts of West Yorkshire's diverse communities can be part of designing and delivering the healthier, more fair and more inclusive West Yorkshire that we are working for.

6. Financial Implications

6.1 There are no financial implications directly arising from this report.

7. Legal Implications

7.1 There are no legal implications directly arising from this report.

8. Staffing Implications

8.1 There are no staffing implications directly arising from this report.

9. External Consultees

9.1 No external consultations have been undertaken.

10. Recommendations

- 10.1 That the Combined Authority resolves:
- 10.1.1 To enter into the Partnership Agreement with the West Yorkshire Integrated Care Board as attached at Appendix 1.
- 10.1.2 To endorse the determinants of health and inclusion work programme.
- 10.1.3 To agree to the appointment of the Mayor and the Chief Executive onto the West Yorkshire Health and Care Partnership Board
- 10.1.4 To appoint the Chair of the Integrated Care Board (or their delegated representative) onto the Place, Regeneration and Housing Committee as an ex-officio advisory representative.

11. Background Documents

There are no background documents referenced in this report.

12. Appendices

Appendix 1 – Draft Partnership Agreement between West Yorkshire Combined Authority and the NHS West Yorkshire Integrated Care Board

Appendix 2 – Determinants of health and inclusion for West Yorkshire – a partnership approach