



MEETING TITLE Board of Directors in Public Meeting		MEETING DATE 31/08/2017	
TITLE of PAPER	For Approval: Memorandum of Understanding – South Yorkshire and Bassetlaw Accountable Care System	PAPER REF	4.1
STRATEGIC OBJECTIVE(S)	Work with partners to provide system leadership and resilience		
PURPOSE OF THE PAPER	To provide the Board of Directors with an overview of the content of the South Yorkshire and Bassetlaw Health and Care Working Together Partnership Memorandum of Understanding, specifically; <ul style="list-style-type: none"> - How the South Yorkshire Partnership will function - The content that relates to Yorkshire Ambulance Service Considerations for Yorkshire Ambulance Service in future working		
For Approval	<input type="checkbox"/>	For Assurance	<input type="checkbox"/>
For Decision	<input type="checkbox"/>	Discussion/Information	<input checked="" type="checkbox"/>
AUTHOR / LEAD	Matt Sandford, Associate Director of Planning & Development	ACCOUNTABLE DIRECTOR	Leaf Mobbs, Director of Planning & Development
DISCUSSED AT / INFORMED BY – include date(s) as appropriate (free text – i.e. please provide an audit trail of the development(s)/proposal(s) subject of this paper): TEG.			
PREVIOUSLY AGREED AT:	Committee/Group: Not Applicable	Date: N/A	
RECOMMENDATION(S)	It is recommended that the Board of Directors: <ol style="list-style-type: none"> 1. Ensures full engagement with the development of the Accountable Care System, particularly in the shadow phase when the future working mechanisms are shaped. 2. Are fully cognisant of the MoU requirements and the obligations therein for YAS in supporting the delivery of STP plans across SYB. 3. Provide any feedback on the MoU to enable this to be fully reflected in the final MoU for SYB. 4. Consider the implications for YAS of the SYB MoU and the direction of travel for all STPs across Yorkshire. 		
RISK ASSESSMENT		Yes	No
Corporate Risk Register and/or Board Assurance Framework amended <i>If 'Yes' – expand in Section 4. / attached paper</i>		<input type="checkbox"/>	<input checked="" type="checkbox"/>

Resource Implications (Financial, Workforce, other - specify) <i>If 'Yes' – expand in Section 2. / attached paper</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Legal implications/Regulatory requirements <i>If 'Yes' – expand in Section 2. / attached paper</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Diversity and Inclusion Implications <i>If 'Yes' – please attach to the back of this paper</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
ASSURANCE/COMPLIANCE		
Care Quality Commission Choose a DOMAIN(s)	5: Well led	
NHSI Single Oversight Framework Choose a THEME(s)	5. Strategic Change 6. Leadership & Improvement Capability (Well-Led)	

SUMMARY OF SOUTH YORKSHIRE AND BASSETLAW HEALTH AND CARE WORKING TOGETHER PARTNERSHIP MEMORANDUM OF UNDERSTANDING

1. PURPOSE/AIM

- 1.1 To provide the Board of Directors with an overview of the content of the South Yorkshire and Bassetlaw Health and Care Working Together Partnership Memorandum of Understanding, specifically;
- How the South Yorkshire Partnership will function
 - The content that relates to Yorkshire Ambulance Service
 - Considerations for Yorkshire Ambulance Service in future working

2. BACKGROUND/CONTEXT

- 2.1 South Yorkshire and Bassetlaw (SYB) has been invited as one of the 9 emerging Accountable Care Systems (ACS). A key part of this process is the development of a Memorandum of Understanding (MoU), which will support organisations to demonstrate their commitment and to better understand their role in delivering the plans.

The ACS model reflects the shift towards greater local devolution and responsibility. However, there have been no legislative changes around the statutory status or requirements of statutory public bodies. The MoU therefore attempts to provide greater confidence around newly devolved responsibilities, within the current legal framework; the MoU will offer a balance of commitment from appropriate organisations and flexibility around current and ACS related requirements.

- 2.2 The Memorandum of Understanding (MoU) is a non-legal framework setting out how partner organisations in the emerging ACS will collaborate. NHS England and NHS Improvement have supported the drafting of this MoU.

The MoU does not replace the legal framework, contracts, responsibilities or plans already created in South Yorkshire and Bassetlaw, and individually in each of the five local 'Places' (Sheffield, Barnsley, Rotherham, Doncaster and Bassetlaw). YAS has been engaged at a local level in the development and delivery of these plans.

The MoU sets out the approach to collaborative working and ambition to work as a shadow Accountable Care System in 2017/18, together with key milestones to move to a full ACS in 2018/19.

- 2.3 The MoU reflects the broad range of organisations that will be involved in delivering the plans of the STP. The MoU draws two distinctions between these organisations, based on their status and role:
- Parties: Typically statutory organisations, with key responsibilities for the delivery of the plan. Parties to the MoU will be signatories to the MoU, signifying their commitment and support.

- Partners: Typically organisations that will support the direction of travel for the overarching plan.

2.4 Yorkshire Ambulance Service are referenced within the MoU, specifically as a 'party to' the MoU and the work programme relating to the Ambulance Response programme, under the Urgent and Emergency Care transformation priority work-stream.

Yorkshire Ambulance Service is listed as a healthcare provider within the 'parties' section. Other 'parties' are the five CCGs, other healthcare providers (all hospital and mental health Trusts), and regulatory and advisory bodies. 'Partners' listed are local authorities and other provider partners.

2.5 Parties within the MoU will share the following system objectives:

- Care and quality
- Health and wellbeing
- Finance and sustainability

2.6 The MoU references the NHS Five Year Forward View as the framework which articulates why change is needed, what that change may look like and how it can be achieved. It sets out the development of new models and SYB is committed to being an early implementer and a test bed for new, innovative approaches of:

- Accountable Care System across SYB, with devolved freedoms, accountabilities and responsibilities and new relationships with member organisations, including NHS England, NHS Improvement and the ALBs
- A closer relationship between commissioning and providing, integrating and aligning approaches to strategic planning and transformation of services
- Accountable Care Partnerships with providers across SYB, delivering new models of acute and specialist care
- New models of commissioning at system level for acute services, reducing variation and duplication and minimising transactional activity
- Operating and managing a system control total for health
- Accountable Care Partnerships in each local Place delivering integrated health and social care aligned to an overall SYB ACS

2.7 By September 2017 parties will agree a delivery plan for 2017/19 for SYB 'working as one' for seven priority areas:

- Urgent and Emergency Care
- Cancer
- Healthy Lives, Living Well and Prevention
- Primary Care
- Mental Health
- Elective Care and Diagnostics
- Maternity and Children's

In addition to this, five enabler workstreams are identified.

2.8 The MoU states Parties, '*will work with ambulance providers to implement the ambulance response programme and work as one with NHSE/I to develop*

realistic implementation plans. This will include working with Place to develop consistent offers on alternative pathways to conveyance to A&E.

- 2.9 As one of nine high performing systems, South Yorkshire and Bassetlaw Partnership will receive a share of £450 million transformational funding and a share of £325 million capital funding. This allocation is yet to be defined.

3. PROPOSALS/NEXT STEPS

- 3.1 Key milestones identified within this process:

By end July 2017

- MoU Agreement between SYB Parties, providing the Framework through which SYB will 'work as one' to develop as an Accountable Care System and implement its Plan.

By September 2017

- Agree a delivery plan for 2017/19 for SYB 'working as one' to include priority areas including Urgent and Emergency Care, Primary care, Mental Health and Learning Disabilities and Cancer to demonstrate delivery and enable testing of key ACS objectives outlined.
- Agree governance and approach for agreeing and monitoring investment decision within the ACS, based on the allocated capital and transformation funding

By end October 2017

- Identify how to operate a system control total for health in 2018/19.
- Agree new NHS Single Oversight and Assurance Framework for SYB with aligned resources to support an integrated SYB ACS oversight and assurance function to work with a streamlined regional and national oversight arrangements.
- Agree system and place commissioning responsibilities for agreed functions and services to enable alignment to ACPs to focus on new ways of contracting and allocating resources including population budgets, population health management and segmentation approaches for each Place (referred to as 'tier 0 – 1') and an overarching system-wide commissioning function for broader, system-wide services/functions (referred to as 'tier 2 and 3') – these are all yet to be agreed.
- SYB ACS 'working as one': NHS England and NHS Improvement will work with ACPs, working in shadow form – establish support programme towards legally constituted partnerships.

By April 2018

- Agreed NHS Single Oversight and Assurance Framework for SYB to be operational.
- Agree governance and approach for delivery of 'tier 2' services following the Hospital Services Review outcome to support horizontally-integrated accountable network of hospital-based services.
- Each of the five places have confirmed they wish to continue to develop their Accountable Care Arrangements and it is anticipated that these will be in shadow form in 2017/18.
- SYB ACS 'working as one' will be legally constituted partnerships by April 2018 (at the latest).

4. RISK ASSESSMENT

- 4.1 YAS is currently party to 4 STPs, each with different levels of engagement, collaboration, funding and sustainability plans. Within the SYB STP, a range of reconfigurations and workstreams have been developed, with some level of YAS engagement. The challenge remains around the 'collective impact' and scale of the regional STP plans.

The Activity Group within YAS is currently identifying and quantifying the clinical/quality and financial impact of the emerging plans; these are being discussed locally, as part of the local system impact.

YAS needs to ensure the ongoing support and engagement within the SYB STP (and other STPs), as a Party to the MoU, but will be expected to remain committed to the delivery of each STP Control Total and overall transformation programmes. The Planning and Development team continue to co-ordinate the YAS engagement into STPs and local network meetings, however this MoU represents the direction of travel to be anticipated across all STPs.

- 4.2 Having been involved in the local 'Place' plans, we need to ensure that all YAS transformational ambitions are acknowledged. The Ambulance Response Programme is currently the only programme explicitly identified within the MoU.
- 4.3 Failure to secure representation in the development of the Accountable Care System could mean YAS is not included in the forward plans and opportunities for collaboration.
- 4.4 This MoU is not a legally binding document and all current statutory and contractual requirements for YAS remain; however there will remain an expectation that YAS will directly support the delivery of the SYB STP Plan. The legal constitution of the ACS in the future may be developed and will likely be based on the expectations with the MoU.

5. RECOMMENDATIONS

It is recommended that the Board of Directors:

1. Ensures full engagement with the development of the Accountable Care System, particularly in the shadow phase when the future working mechanisms are shaped.
2. Are fully cognisant of the MoU requirements and the obligations therein for YAS in supporting the delivery of STP plans across SYB.
3. Provide any feedback on the MoU to enable this to be fully reflected in the final MoU for SYB.
4. Consider the implications for YAS of the SYB MoU and the direction of travel for all STPs across Yorkshire.

6. APPENDICES/BACKGROUND INFORMATION

Appendix A: Draft SYB STP Memorandum of Understanding