

Meeting Title	Board of Directors		
Date	9.5.19	Agenda item	Bo.5.19.26

Report from the Partnerships Committee

Presented by	Trevor Higgins, Interim Chairman		
Author	Edward Cornick, Head of Policy		
Lead Director	John Holden, Director of Strategy and Integration		
Purpose of the paper	Update from the Chairman on the discussions held at the Partnerships Committee		
Key control	Strategic Objective - To collaborate effectively with local and regional partners		
Action required	To note		
Previously discussed at/informed by	Partnerships Committee held on 25 March 2019		
Previously approved at:	Committee/Group N/A	Date	

Key matters discussed

The following matters were discussed at the meeting held on 25 March 2019.

Vertical integration. The committee noted the Strategic Partnering Agreement (SPA) had been discussed at the last BTHFT board. In that discussion the board agreed they were content to give approval for the trust to sign up to the final version of the SPA at upcoming Integration and Change Board (on the proviso the final version did not include any substantive changes). It was noted that other organisations in the SPA were currently undergoing a similar approval process.

The committee also received an update on the work the trust is completing in the community partnerships programme. In the discussion that followed the following points were raised:

- BTHFT should use the community partnerships programme of work to develop the trusts virtual ward model, and work more closely with GPs in expanding these types of models.
- BTHFT should continue to note and shape discussions regarding how programmes at place and West Yorkshire and Harrogate (ICS) level align.
- BTHFT should continue to monitor the amount of risk secondary care carries in place based programmes.

Airedale Collaboration. The committee received an update on the collaboration with Airedale NHS Foundation Trust. In this discussion it was noted the programme needs to move at pace if it is to deliver the benefits required. It was also noted the programme needs to prioritise both genuine transformative work as well as support for vulnerable services.

Horizontal Integration. The committee noted that work within WYAAT and the ICS has not advanced significantly since the last update provided at the last committee, other than work is being completed on revising a capital bid for the hybrid theatre required for the arterial centre.

Well Bradford. The committee received an update on the work of Well Bradford. It was noted that in this programme BTHFT is the lead organisation, having formed a partnership with Bradford Council and Bradford CCGs. The aim of the programme is to work with individuals, community groups and partners to enable the local communities in Bradford to take ownership of their environment, health and wellbeing. It was noted that series of projects are already underway in Girlington, Home Wood and Keighley to address these aims, and they are being delivered by a full time Programme Director who reports for the Director of Strategy at BTHFT.

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Recommendation

The Board of Directors is requested to note the work of the Partnerships Committee in scrutinising the Foundation Trust's partnership arrangements and providing assurance on its relevant strategic objective.

Risk assessment						
Strategic Objective	Appetite (G)					
	Avoid	Minimal	Cautious	Open	Seek	Mature
To provide outstanding care for patients		g				
To deliver our financial plan and key performance targets			g			
To be in the top 20% of NHS employers			g			
To be a continually learning organisation				g		
To collaborate effectively with local and regional partners					g	
The level of risk against each objective should be indicated. Where more than one option is available the level of risk of each option against each element should be indicated by numbering each option and showing numbers in the boxes.	Low		Moderate	High	Significant	
	Risk (*)					
Explanation of variance from Board of Directors Agreed General risk appetite (G)	No variation					

Risk Implications (see section 4 for details)	Yes	No
Corporate Risk register and/or Board Assurance Framework Amendments		X
Quality implications		X
Resource implications		X
Legal/regulatory implications		X
Diversity and Inclusion implications		X

Regulation, Legislation and Compliance relevance
NHS Improvement: Code of governance
Care Quality Commission Domain: <i>Well led</i>
Care Quality Commission Fundamental Standard:
Other (please state):

Relevance to other Board of Director's Committee:					
Workforce	Quality	Finance & Performance	Partnerships	Major Projects	Other (please state)
			X		