

Report for: Cabinet Member for Health Social Care & Wellbeing
Title: Section 75 Partnership Agreement
Report authorised by: Sara Sutton, Corporate Director of Adults, Housing and Health
Lead Officers: Caroline Humphrey, Head of Service Development and Improvement, caroline.humphrey@haringey.gov.uk
Ward(s) affected: All

Report for Key/ Non-Key Decision: Key

1. Describe the issue under consideration

- 1.1. The Council has had an extensive Section 75 agreement with the NHS since 2017. It is a well-established and well used partnership/contractual mechanism used by local authorities and the NHS to implement a model of commissioning.
- The partnership agreement/contract sets out shared outcomes and objectives, and contains detailed schedules enabling:
- i. Lead commissioning for specified care groups
 - ii. Pooled budgets for specified care groups
- 1.2. Whilst the initial focus was predominantly adult services, the partnership agreement/contract acted as a framework to enable schedules to be added for other care groups. In 2018 a schedule was added including children's services.
- 1.3. The agreement for the provision of a section 75 agreement was approved on 13th September 2016 to commence for financial year 17/18 to financial year 21/22 (5 years). Subsequently there was an extension of the section 75 for a further 2 years. This means that the provision for a section 75 agreement is in place until the end of February 2026.
- 1.4. There is a need to establish a new agreement for a new section 75 to incorporate the full financial year for 25/26 (March 25/26) and make provision for 26/27.
- 1.5. New policy and guidance is being developed for 28/28 onwards to and once this is received and the requirements and expectations understood there will be a requirement to return to Cabinet for a new agreement if this is required.

2. Cabinet Member Introduction

- 2.1. N/A

3. Recommendation

It is recommended that the Cabinet Member for Health, Social Care and Wellbeing:

- 3.1. Approves the extension of the Section 75 partnership arrangement as permitted under CSOs 18.03.3 and 2.01 d) between Haringey Council and NHS NCL ICB to continue lead commissioning arrangements for the commissioning of various adult and children's services and aligning budgets for some of the commissioned services. This is to cover March 25/26 and thus covering the full financial year for

25/26 and also to make provision for an agreement for 26/27. This will be retrospective for March 25/26 at the time of the decision.

- 3.2. Approves the delegation to the Corporate Director of Adults, Housing and Health, in consultation with the Corporate Director of Finance and Resources, to negotiate, agree and finalise the terms of the s75 Agreement between the council and the ICB for the period set out in recommendation 3.1.

4. Reasons for decision

- 4.1. The commissioning of universal and targeted services for adults and children allows the Council and the NCL ICB to continue to work together in a coordinated way, to deliver services focused on promoting good health for all and tackle health inequalities.
- 4.2. By continuing to place the identified commissioned services in the section 75 partnership agreement the Council and the NCL ICB have identified a number of outcomes.
 - i. Integrated, more flexible commissioning across care groups with a focus on outcomes.
 - ii. A co-ordinated preventative approach for care groups
 - iii. A significant focus on driving up quality in community health services for Haringey residents
 - iv. A preventative and early intervention approach that provides access to a range of universal and targeted services in hospital and community settings.
 - v. Improved inter-agency working and improved communication across frontline practitioners.
- 4.3. Streamlined decision making and reduced administrative burdens, whilst focusing on delivering person centred care
- 4.4. The agreement for the provision of a section 75 agreement was approved on 13th September 2016 to commence for financial year 17/18 to financial year 21/22 (5 years). Subsequently there was an extension of the section 75 for a further 2 years. This means that the provision for a section 75 agreement is in place until the end of February 2026.
- 4.5. The request is for an agreement for a section 75 to be in place to incorporate March 25/26 thus covering the full financial year for 25/26 and to make provision for the financial year 26/27. This will allow for the schedule for the budgets to be agreed and applied.

5. Alternative options considered

- 5.1. Exit the arrangement: Consideration was given by officers to discontinue the Section 75 agreement however this was dismissed as it would dismantle a framework that has enabled good working relationships with the NHS in commissioning predominantly specialist clinical services delivered by local NHS Trusts that cannot be provided elsewhere. Ending the Section 75 agreement would also place additional pressures on joint contract management and commissioning arrangements and could result in a duplication of efforts and resources. In view of

the current financial pressures, it is more economical to jointly commission and monitor local services.

- 5.2. Do nothing: this is not a viable option as the current agreement ends in Feb 2026.
- 5.3. Recommended option: Renew legal framework/arrangement for joint funding local services. This option is recommended as it reduces duplication in contract management, monitoring and reporting. This option allows for streamlined decision making and reduced administrative burdens, whilst focusing on delivering person centred care. A joint legal framework for funding promotes joint working between agencies, collaboration which is focused on whole system services, supporting long term planning.

6. Background information

- 6.1. The Section 75 is an agreement with the NHS, and it is a well-established and well used partnership/contractual mechanism used by local authorities and the NHS to implement a model of commissioning.

The partnership agreement/contract sets out shared outcomes and objectives, and contains detailed schedules enabling:
 - i. Lead commissioning for specified care groups
 - ii. Pooled budgets for specified care groups
- 6.2. Having a Section 75 in place is requirement for receipt of the Better Care Funding.
- 6.3. The Section 75 Partnership Agreement was approved by Haringey Clinical Commissioning Group's Governing Body and the Council's Cabinet in Autumn 2016 and implemented from April 2017.
- 6.4. The Partnership Agreement originally had five schedules covering various care groups predominantly for the adult population although it did include a schedule for child and adolescent mental health services.
- 6.5. The intention was always to add more schedules, particularly commissioned children's services as and when appropriate. In 2018 another schedule was added focussing on children and young people services.
- 6.6. The Section 75 partnership agreement allows for any or all of the functions of lead commissioning and integrated provision to be set in place within schedules, according to the requirements of the service.
- 6.7. The Council and NCL ICB have worked together to improve integration and to jointly performance manage the local NHS Trusts providing the specific services in the schedules. This enables the council, the ICB and the NHS Trusts to understand the complex commissioning landscape to reduce duplication and to improve clinical pathways for Haringey residents.

- 6.8. There is a high degree of synergy between the outcomes and objectives sought by the Council and the NCL ICB for local families, as demonstrated in the outcomes laid out in the Council's Corporate Plan and the NCL ICB strategic plans.
- 6.9. The Section 75 Partnership Agreement/Contract supports the outcomes and objectives of the Haringey Partnership.
- 6.10. The local NHS Trusts providing services to Haringey residents through the Section 75 Partnership Agreement/Contract include:
- i. Whittington Health NHS Trust - provides hospital and community care services to people living in Islington and Haringey as well as other London boroughs including Barnet, Enfield, Camden and Hackney. The Trust is one organisation providing both hospital and community services. The Trust is known as an 'integrated care organisation'.
 - ii. North London NHS Foundation Trust - provides a wide range of mental health specialist services, across the five boroughs of Barnet, Camden, Enfield, Haringey and Islington.
- 6.11. There are a number of changes that are happening that will impact on the section 75 arrangements. The restructuring of the ICB, the Neighbourhoods agenda and the policy framework for the Better Care Fund, the agreement for the section 75 will provide stability pending the revised policy and funding arrangements.

7. Contribution to strategic outcomes

- 7.1. The services within the Section 75 Partnership Agreement/Contract support delivery of a number of priorities with the Corporate Delivery Plan 2024-2026. The intention of the Section 75 Partnership Agreement is to align resources between the Council and the ICB to enable better integration and improved outcomes for residents across Care and Health.
- 7.2. For Children and Young People. Key Outcome Areas are
- Best start in life
 - Happy childhoods
 - Successful futures
- 7.3. For Adults, Health and Welfare Key Outcome Areas are
- A healthy and active population
 - A welcoming borough with a vibrant voluntary and community sector (VCS)
 - Residents connected with the right support at the right time in their neighbourhoods.
 - Secure and resilient lives
 - Vulnerable adults are supported and thriving.

8. Carbon and Climate Change

N/A

9. **Statutory Officers comments (Chief Finance Officer (including procurement), Director of Legal and Governance (Monitoring Officer), Equalities)**

9.1. **Finance**

9.1.1. This report seeks Cabinet approval to extend the Council–ICB Section 75 partnership agreement, originally established in March 2017 and due to expire in February 2026, for a further two years (2025/26–2026/27).

9.1.2. The combined contributions total £95.157m, with funding for 2025/26 and 2026/27 provided by ICB contributions and the Council's Adults Social Care, Public Health, and Children's Social Care and Education budgets.

9.1.3. Jointly funded contributions for complex care for individuals may vary, as they are dependent on the on individual needs and actual year-end costs, the final outturn for this cohort can increase or decrease.

9.2. **Procurement**

9.2.1. Strategic Procurement has been consulted in the preparation of this report and is in full support of the recommendations, for the reasons outlined in paragraph 4 above

9.2.2. In accordance with CSO 18.03.3 a contract variation is permitted under 2.01.d (Cabinet variation of contract above 500k)

9.3. **9.3 Legal**

9.3.1. The Director of Legal & Governance has been consulted in the preparation of this report. Section 75 of the NHS Act 2006 and associated regulations permit the NHS and local authorities to enter into partnership arrangements which may include lead commissioning, pooled budgets and integrated provision where this is likely to lead to an improvement in the discharge of functions.

9.3.2. In 2017 the Council entered into a Section 75 Partnership Agreement (the Agreement) with the then Haringey CCG originally for adult services but subsequently extended to include other services including children's services. The Agreement has previously been varied to include extensions to the services, Council now wishes to extend for the financial years 25/26 and 26/27.

9.3.3. The Cabinet has power to approve the variation of the Agreement under CSO 18.03.3 and CSO 2.01.d (extensions valued at £500,000 or more). CSO 0.08 provides that where a decision is required by Cabinet, this may also be taken by the Leader or by a Cabinet Member with the Leader's agreement.

9.3.4. The Director of Legal and Governance confirms that there are no legal reasons preventing the Cabinet Member from approving the recommendations in this report.

9.4. **Equalities**

9.4.1. The Council has a Public Sector Equality Duty under the Equality Act (2010) to have due regard to the need to:

- i. Eliminate discrimination, harassment and victimisation and any other conduct prohibited under the Act
- ii. Advance equality of opportunity between people who share those protected characteristics and people who do not

iii. Foster good relations between people who share those characteristics and people who do not.

9.4.2. The three parts of the duty apply to the following protected characteristics: age, disability, gender reassignment, pregnancy/maternity, race, religion/faith, sex and sexual orientation. Marriage and civil partnership status apply to the first part of the duty.

9.4.3. The services within the partnership agreement are universal services and targeted services delivered to meet the needs of some of the most vulnerable residents within our communities.

9.4.4. The partnership agreement is intended to deliver more flexible use of resources should better meet identified need and demand and is therefore expected to have a positive impact in relation to the Public Sector Equality Duty. This includes multi-disciplinary and integrated working and increase commissioning capability.

10. Use of Appendices

N/A

11. Local Government (Access to Information) Act 1985