

## Update on Leeds Provider Partnership Joint Committee

**Public Board**  
**Thursday 28<sup>th</sup> May 2026**

<b>Presented for:</b>	Information
<b>Presented by:</b>	Mike Harvey, Director of Transformation
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<b>Previous Committees:</b>	None

<b>Freedom of Information Act (FOIA) Exemption</b>	<input type="checkbox"/> <b>YES</b> (restricted from the FOIA) <input checked="" type="checkbox"/> <b>NO</b> (available to the public under the FOIA)
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<b>Link to Strategic Objective</b>	Develop integrated partnership services
<b>Link to Provider Capability Assessment</b>	Strategy, leadership and planning
<b>Link to CQC Well-led Statement</b>	Partnerships and Communities
<b><a href="#">Regulatory Impact</a></b>	N/A

<b>Key points</b>	<b>Purpose</b>
<p>1. The purpose of this report is to provide the Board with an update on the establishment and initial progress of the Leeds Provider Partnership Shadow Joint Committee (LPPSJC). The Board is asked to:</p> <ul style="list-style-type: none"> <li>Note the establishment and initial progress of the Leeds Provider Partnership Shadow Joint Committee.</li> <li>Take assurance from the approval of governance arrangements and the structured programme of work to support transition to a fully operational partnership from April 2027.</li> </ul>	Information

<b><a href="#">Risk Appetite Framework</a></b>			
<b>Level 1 Risk</b>	<b>Level 2 Risks</b>	<b>(Risk Appetite Scale)</b>	<b>Impact</b>
Workforce Risk	Choose an item.	Choose an item	Choose an item.
Operational Risk	Choose an item.	Choose an item	Choose an item.
Clinical Risk	Choose an item.	Choose an item	Choose an item.
Financial Risk	Choose an item.	Choose an item	Choose an item.
External Risk	Partnership Working Risk - We will maintain well-established stakeholder partnerships which will mitigate	Open	Operating within

	the threats to the achievement of the organisation's strategic goals.		
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## 1. Summary

This report provides an update on the establishment of the Leeds Provider Partnership Shadow Joint Committee (LPPSJC), which convened for the first time on 15 May 2026 and marks the formal commencement of the shadow phase of provider collaboration across Leeds.

At its inaugural meeting, the Committee reviewed and approved the proposed Terms of Reference and Collaboration Agreement, representing a key milestone in the transition towards a provider-led partnership model. These documents have been developed collaboratively across partner organisations with legal support and are now progressing through individual provider Board approval processes, expected to conclude by July 2026. Due to the Board being sighted on the current progress, it has been decided to submit the formal documents for review in the July Board so that this can include some of the latest developments in the finance and service delivery schedule which is currently in development.

The Board is asked to note progress to date and take assurance from the structured approach to governance development and the defined programme of work to support transition to a fully operational provider partnership from April 2027.

## 2. Update

### **Establishment of the Shadow Joint Committee**

The Leeds Provider Partnership Shadow Joint Committee was formally established in May 2026, initiating the shadow phase of partnership working across Leeds Teaching Hospitals NHS Trust, Leeds City Council, Leeds Community Healthcare, Leeds and York Partnership NHS Foundation Trust, the GP Provider Collaborative and VCSE representatives. This represents a significant step in enabling more coordinated, provider-led responses to shared system pressures.

### **Governance Arrangements**

The Committee reviewed and endorsed the Terms of Reference and Collaboration Agreement, which set out the governance framework for the partnership. These documents reflect extensive development through the governance workstream, with input from all partner organisations and legal advice. Formal approval processes are currently underway across partner Boards and are expected to conclude by July 2026.

### **Development Priorities During Shadow Period**

The approved documentation represents an initial framework and will be further developed during the shadow period. Key areas for progression include:

- Development of a detailed service delivery model
- Identification and agreement of priority programme areas
- Establishment of a supporting financial framework

These elements will be developed over the next 10 months to support transition to a fully operational provider partnership from April 2027.

### **Partnership Development and Future Considerations**

The Committee recognised the importance of building a shared culture and collective leadership approach across partner organisations. Future development areas identified include:

- Consideration of an independent voice within the partnership
- Strengthening links with scrutiny committees
- Exploration of broader engagement with external partners, while maintaining focus on NHS transition priorities

### **3. Quality and Performance Implications**

The establishment of the Shadow Joint Committee is expected to support improved system-wide coordination and delivery of services, enabling providers to respond more effectively to shared pressures.

As the service delivery model and priority programmes are developed, further assessment of quality and performance implications will be undertaken, including consideration of impacts across patient pathways and system performance.

### **4. Financial Implications**

At this stage, there are no direct financial decisions associated with this report. However, the development of a partnership-wide financial framework is a key priority during the shadow period. This will inform future decision-making on resource allocation, value for money, and financial risk-sharing arrangements across partner organisations.

### **5. Risk**

The establishment of the Shadow Joint Committee is aligned with the Trust's risk appetite in relation to partnership working and system integration. Key risks include:

- The complexity of establishing effective multi-provider governance arrangements
- The requirement to develop and agree a shared financial framework
- Dependencies on external system and national policy developments

These risks are mitigated through:

- Formal governance structures and partner Board approval processes
- Phased development approach during the shadow period
- Ongoing engagement with system partners and stakeholders to develop the governance required for the committee which is being led by LTHT.

### **6. Communication and Involvement**

All partner organisations have been actively involved in the development of the governance documentation through the programme governance workstream.

Ongoing communication and engagement will continue through:

- Partner Boards and executive teams
- Development of partnership structures and programme areas
- Future engagement with system partners and external stakeholders

### **7. Impact on Equality & Health Inequalities**

The development of a provider partnership model presents opportunities to improve health equity through more coordinated and consistent service delivery across Leeds. As priority programmes and service models are developed, considerations of health inequalities and differential access to services will be incorporated into design and decision-making processes.

#### **8. Publication Under Freedom of Information Act**

This paper has been made available under the Freedom of Information Act 2000.

#### **9. Recommendation**

The Board is asked to:

- **Note** the establishment and initial progress of the Leeds Provider Partnership Shadow Joint Committee.
- **Take assurance** from the approval of governance arrangements and the structured programme of work to support transition to a fully operational partnership from April 2027.

#### **10. Supporting Information**

None.