



Update from the Partnership Board

Edition 5

April 2021

Welcome to the latest Partnership Board Update – a summary of business from the last meeting of the Cheshire and Merseyside Health and Care Partnership Board - to keep stakeholders informed of our progress. The full papers from the meeting can be found [here](#).

The last meeting took place on Wednesday 29th April and Chair, Alan Yates, remarked that this would be the penultimate meeting of the Partnership Board in its current form. It would change to the new membership arrangements – as outlined in the **Memorandum of Understanding** – from the end of June. Only a small number of existing members would remain and the Board agreed that a suitable, simple induction process to help new members would be beneficial. This could be a pre-Board event and the provision of useful and necessary background reading. Following local elections and the time required to appoint portfolio leads and health and wellbeing board chairs, the induction meeting could be arranged for early to mid-June, in advance of the formal meeting at the end of June.

Alan also informed members about the establishment of an Assembly for non-executive directors (NEDs) of NHS Trusts, as well as reporting that lay members of CCG governing bodies were now meeting regularly. The NED Assembly is planned for early June. He also reported on the new Cheshire and Merseyside Primary Care Provider Leadership Forum which met for the first time last month. Dr Rajkumar reported that this had been a good meeting, with the full range of primary care providers, including optometrists, pharmacists and dentists, giving them a welcome voice in the Partnership. One of the many benefits of this forum is the opportunity to communicate the progress of the emerging ICS to primary care constituents. Two members of this forum will have a place on the new Partnership Board.

Chief Officer, Jackie Bene gave a brief oral update and confirmed that the Partnership had commissioned a detailed review of our nine Places to support them to identify the actions required in preparation for April 2022. Jackie has attended a number of workshops across the system in preparation for this work. The review will be conducted by Hill Dickinson. She also confirmed that the team had been working in response to the planning guidance preparing the Partnership's submission to NHSE. This would be brought to the Board for sign off.

Since the meeting took place, it has been confirmed that Cheshire and Merseyside has passed the **2,000,000 vaccines administered milestone**. This is a great achievement and the Partnership is incredibly proud of, and thankful to, everyone responsible for this success – staff, volunteers and indeed the public.

Best wishes,



Dr Jackie Bene, Chief Officer and Alan Yates, Chair

Transformation Programmes' Governance



The Board received a paper outlining the proposed governance framework for the agreed Transformation Programmes to be funded or sponsored by the Partnership. The paper includes details of roles and responsibilities of programme leads, and HCP Senior Sponsors as well as the Terms of Reference for the Transformation Programme Board. The proposed governance framework will enable the ongoing measurement of progress and achievement against agreed milestones and objectives, and their impact on addressing health inequalities. The Programme Board will be in place by June and this will be chaired by Jackie Bene, Chief Officer. It will report to the HCP Partnership Board on a bi-monthly basis.

The Partnership Board welcomed the governance framework as described.

ICS Development Advisory Group

An ICS Development Advisory Group is to provide advice and guidance on the activities necessary for the health care partnership to become a statutory ICS by April 2022, and progress with implementation of the ICS Development Plan. The group will evolve from and replace the existing Programme Co-ordination Group which was set up last year in response to Covid-19. Terms of reference and membership are included in the **Board papers**.

The Advisory Group will be time-limited until the successful establishment of the required new ICS NHS Body (to be responsible for the day-to-day running of the ICS) and ICS Health and Care Partnership (to oversee integration,



planning and delivery of health care, public health and social care). Formal guidance on the mandated membership of these boards is awaited but here in Cheshire and Merseyside, we are committed to having local government and partner representation on the NHS body as well as the HCP.

This was seen as a positive development, particularly as Place leads, as well as CCG and local authority representatives continue to be central the group.

Rapid Health Needs Assessment for Cheshire and Merseyside



Eileen O'Meara, Director of Public Health at Halton and Population Health Clinical Lead for the Partnership, introduced this paper which was summarised in a presentation by Dr Matthew Atkinson, Senior Registrar in Public Health. The presentation was the result of a desk top review of data and local reports resulting in updates to causes of poor health and death and highlighting area-based inequality.

There have been nearly 190,000 cases of Covid-19 across the region and the impact of this on other health outcomes is noted. While Covid has led to massive disruption and significant strain on our services and staff, it has also accelerated the development of remote delivery, helped build better partnerships and led to rapid change. These positive benefits must be captured and built upon.

The information provides a clear message that the opportunity for significant impact and achievement of a 'shift-left' towards prevention of ill health must be taken whilst recognising the barriers to progress provided by competing priorities, funding and capacity. Expanding the triple aim of the long term plan to include improving population health and reducing health inequalities is supported by the evidence and 'making every contact count' – a person-centred approach to use every interaction with people to promote healthier choices – necessary. Cheshire and Merseyside has the highest number of priority wards of any ICS area in the country and life expectancy gap between here and the national average is at least 14 months and in some of our areas is as high as ten years between the most and least deprived. Life expectancy has now stalled for the first time in 100 years. The biggest causes of these gaps are heart disease, cancer, respiratory diseases and digestive diseases (including cirrhosis and liver disease).

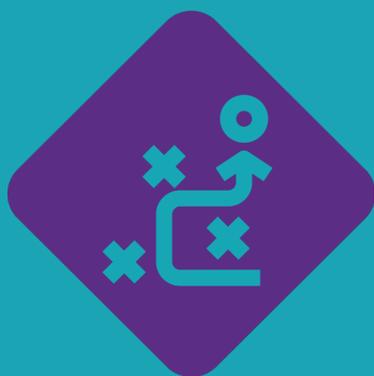
The Partnership Board welcomed the analysis and committed itself to making sure that an understanding of the population it served was a fundamental motivation for its work. It is a constant reminder of why we do what we do and we must never become tolerant of the situation. It will inform the work of some of the transformation programmes going forward and will be very helpful for our Places. Integration between health and local government; centrality of primary care and a commitment to population health management all provide levers for impact and all of these are key aspects of the **ICS strategy**.

Memorandum of Understanding

Four organisations were yet to confirm their position in writing – Liverpool City Council, Liverpool CCG, Southport and Ormskirk Hospital and Cheshire West and Chester Council – although all were making progress towards doing so.



Health and Care Partnership Board Draft Forward Plan



The draft HCP Board Forward Plan has been developed to provide a structure for engagement with the Board on its focus and approach over the coming year of transition.

Although the membership of the Board is expected to change in the coming months both current and future memberships will have valid perspectives and experience to share on the scope of the Board's work. It is also probable that during the year ahead, the scope of the Board's work will change from one ICS Board (as now) to reflect government thinking and anticipated NHSE guidance focusing on NHS and Partnership portfolios. It proposes remits for a Partnership Board and an NHS Board; an initial architecture; focus for the Board in the transition period and draft proposals for areas of focus during an anticipated shadow operation, with Board business is grouped into Strategy, Governance and Culture.

Board members were invited to send any comments or additions to the plan to Ben Vinter, Governance Lead.

Finance Report to 31/03/21

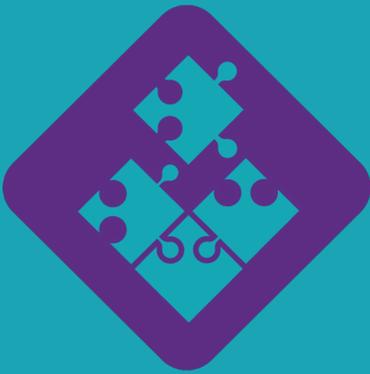
Executive Director of Finance, Keith Griffiths presented this paper which summarised financial performance for the six months to year end and covered HCP running costs, individual Transformation Programmes and Covid Mass Vaccination programme across Cheshire and Merseyside.



The aggregate performance of CCG and provider organisations within the system delivered the overall agreed net overspend of £11.0m. Keith acknowledged the efforts of his colleagues in both the Partnership team and across the NHS partners in the system and their collaboration and mutual support. This was in the context of a difficult year and a complex, changing regime.

It was noted that the financial performance and collaborative working practises are a significant and successful example of better relationships and more openness between parties that would continue to evolve and improve going forward.

ICS Development Plan



The last substantive item on the agenda was an oral update on progress with this plan by Executive Director of Strategy and System Development, Sarah O'Brien. A more detailed report would be made to the next Board meeting. She confirmed that the plan would be finalised, as required, by the end of Quarter 1, and a development tool to assist was awaited.

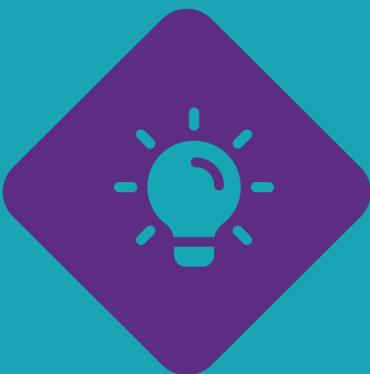
Development updates included progress already achieved on the review of transformation programmes to refocus and address health improvement and inequalities; new energy and commitment towards Place and ICP development, including the review by Hill Dickinson; progress on the commissioning function review; and the first meeting of the new Joint CCG Committee. Work is progressing on the development of provider collaboratives and the governance architecture for the ICS.

ICS Strategy – Improving Health and Wellbeing in Cheshire and Merseyside 2021-2025

Following discussion and suggested changes at last month's meeting, the Board has now agreed the Partnership's five year strategy 'Improving Health and Wellbeing in Cheshire and Merseyside'. You can find this [here](#).



Conclusion



As the agenda described in the White Paper: Integration and Innovation is expanded upon by HM Government and NHSE/I and purpose, organisational arrangements and the nature of partnership become clearer, so too the way Cheshire and Merseyside's approach is developing in the interests of its population. The outgoing Board will complete its contribution to that endeavour in May and Jackie and Alan would like to express their thanks to all those members for their insight, commitment and energy to making the progress we have.

