



**Cheshire and
Merseyside**
Health and Care Partnership

Update from the Partnership Board

Edition 7

July 2021

Partnership Board Update

This is a summary of the discussions at the most recent Cheshire and Merseyside Health and Care Partnership Board (HCP), which took place on Tuesday, 6th July. This was the first meeting of the Board in its new form. Membership includes Local Authority member representation from each of the nine Places/Boroughs, representative Trust Chairs and Chief Executives, representatives of primary care, public health and the voluntary, faith and community sector as well as Chairs from each of the CCGs representing the local NHS. Board members were encouraged to contribute to the setting of future agendas for the Partnership Board.

Chair's introduction

HCP Chair Alan Yates confirmed that the adoption of the Partnership's Memorandum of Understanding (MOU) had been coupled with a commitment to review it within six months of the establishment of the new Board to ensure that it remained appropriate and as effective as possible. For that reason as well as because the Health and Care Bill will make some things clearer it is expected that the MOU will be reviewed before the ICS becomes a statutory body, in April 2022.

Alan made reference to the welcome news about significant investment in the Vauxhall Motors Plant in Ellesmere Port which had been announced earlier in the day. This will protect and create thousands of jobs for the Cheshire and Merseyside Region, positively contributing to the health and wellbeing of those affected.



Chief Officer's Report

Jackie Bene reported that the vaccination programme was continuing and everybody concerned was working hard to ensure as many people aged over 18 as possible were vaccinated before the expected easing of restrictions on 19th July. She reported that approximately 83% of the eligible population within Cheshire & Merseyside was vaccinated with at least one dose and there was sufficient available to vaccinate 89% of those eligible by 19th July. A number of initiatives have been established to encourage young people to have the vaccination, as well as reaching the most vulnerable and deprived areas of the population. There had been a good uptake of young adults coming forward and about 50% had had their first dose. She thanked all partners for their contribution to such a welcome joint effort.

Covid infection rate remains high throughout Cheshire and Merseyside and it was recognised that most hospital admissions are for people who have not been vaccinated. There was concern amongst members about the easing of restrictions with many intending to continue to wear masks indoors and observe social distancing where possible.

Elective services recovery and restoration of NHS services remains a priority and organisations are continuing to work collaboratively as part of the response to ongoing Covid infections. Emergency services are particularly busy with significantly increased attendances and high levels of acuity. Mental health, social care and children's services are similarly challenged.



ICS Development

ICS Framework and Development Plan

Prof Sarah O'Brien, Executive Director of Strategy and System Development gave a presentation on the HCP's ICS Development Plan and the Design Framework issued by NHSE. The development plan was to be made available on the HCP's website. She confirmed that Health and Wellbeing Boards remain pivotal to integration.

System Development & Implementation Plan outlines key actions required to establish statutory ICS by April 2022 including:

- Improving population health & healthcare
- Tackling unequal outcomes & access
- Enhancing productivity & value for money
- Helping the NHS to support broader social & economic development

The ICS Design Framework document describes future ambitions for:

- the functions of the ICS Partnership
- the functions of the ICS NHS body
- the governance and management arrangements that each ICS NHS body will need to establish
- the opportunity for partner organisations to work together as part of ICSs to agree and jointly deliver shared ambitions
- key elements of good practice that will be essential to the success of ICSs, including strong clinical and professional leadership, deep and embedded engagement with people and communities, and streamlined arrangements for maintaining accountability and oversight
- financial framework that will underpin the future ambitions of systems
- the roadmap to implement new arrangements for ICS NHS bodies by April 2022

The presentation also included an explanation and significance of Place-based Partnerships and Provider Collaboratives.

Digital Review

Sarah also gave a presentation on the Digital Review.

The aim of the review was to outline options & recommend direction for:

- An integrated shared care record for Direct Care across Cheshire and Merseyside.
- A single system (platform) supporting population health management.
- Supporting data provision / integration to Person Held Record solutions across the region

The review was conducted by independent external experts who

- Interviewed stakeholders across the ICS including Regional and Place leads, ICS programme leads, clinical users, adult and children's social care representatives, and academic researchers.



- Interviewed current vendors in the region to understand their vision for how the solutions in the market will develop.
- Generated an options assessment framework based on the ambitions, challenges, and impacts from both Place and region perspectives.
- Presented to ICS Digital Board and agreed on 2 options to explore further

There had been a consensus view that a common (C&M) solution was needed for direct care to inform population health management and provide a base for person held records

Design Principles for final solution had been agreed:

- No place to get a reduction in current service (solution needs to integrate existing)
- Place will retain local control (existing electronic records (health & care) won't change)
- Solution must adopt national clinical & technical standards
- Must move towards a common (C&M) data set
- Must support place place-based population health management

Ongoing engagement key stakeholders via Digital Board (including social care).

Now, the ICS will engage independent support to develop business case and take through Digital Board for comment. The final decision will be made by ICS – possibly 'Shadow NHS Body' decision. There was general support for this way forward but it was recognised that a decision would be proposed for a future meeting.

Population Health Management – next steps: System P



Louise Edwards from Mersey Care NHS Foundation Trust was in attendance at the meeting and gave a presentation on System P, a predictive, preventative approach to population, patient and person population health intelligence. The presentation summarised the challenges faced within Cheshire and Merseyside as well as practical strategies that could be implemented to resolve them by using Data, Analytics and Care and Payment (DACP) responses. To date this approach had been developed by Mersey Care and University of Liverpool's Institute of Population Health who wish to propose and advocate its use and development on behalf of Cheshire & Merseyside Health & Care Partnership.

The Board was provided with information on what System P could achieve, in collaboration with all nine Places, for the benefit of the health of the population. A reference group will now be established to further develop governance and stakeholder engagement, and Board members were invited to take part in this.

Alan noted that an approach with System P's characteristics had the potential to make a significant difference to the way decisions were made and highlighted the importance of the need for shared analytical data.

The value of working with academia across both Cheshire and Merseyside was noted, with Liverpool University having been pivotal in the development of System P.

The discussion which followed was a good example of the way in which the Chair hoped the Partnership Board will develop the way it works. As the ICS progresses, it will naturally take on a more formal, decision-making role. However, he reassured board members that they will be given sufficient time to consider and absorb information, ask any questions, and engage with their constituents prior to being asked to make any decision. The Partnership Board's focus would necessarily be on complex, long term and hard to resolve issues. Other issues could be dealt with in individual organisations, place-based or provider collaboratives.

Activity, Finance and Workforce

Keith Griffiths, Executive Director of Finance gave a presentation on the NHS planning process for April 2021 to September 2021 (H1 in current NHS Planning terminology). This included information on the details of the plan's submission and next steps. Information was also presented on the key challenges and priorities for local authorities and the wider care sectors as well as the next steps.



Board members discussed existing and expected challenges within Adult Social Care, following the pandemic, with more adults choosing to remain at home increasing pressure on domiciliary care. Staff shortages were apparent as well as financial challenges and uncertainties. It was noted that some local authorities in the UK had been reported as facing bankruptcy.

Alan confirmed that the 42 Chairs of ICSs across the Country had written to the Prime Minister in support of Local Authorities and the need for clarity on social care policy and improvements to social care funding.

It was agreed that whilst NHS organisations needed to follow planning systems and returns set by the NHS it was equally important that joint local plans were developed which supported integration.

Any other business

Cllr Louise Gittins advised that a group of Councillors and Chief Executives of Local Authorities had begun to develop some principles with regard to the ICS proposals being made by Government. Both Alan Yates and Jackie Bene had agreed to meet with them and discuss it with them. They hoped that a joint agreement on principles for the development of the Cheshire and Merseyside ICS could then be shared at the next Partnership Board meeting.



Conclusion

This had been an interesting and effective (first) meeting and Alan encouraged members to contact him after the meeting if they felt that was necessary. There were clearly some concerns about the continuing challenges of Covid and the impact of easing of restrictions on 19th July.

Alan urged members to think about when these meetings should start to be held in public and agreed that this would be discussed in more detail at the next meeting on Tuesday 14th September, at 3.0 pm.

Readers of this update are reminded that the full Board papers are available on our website here: www.cheshireandmerseysidepartnership.co.uk



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