

# Update from the Partnership Board

**Edition 8** 

September 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, 14<sup>th</sup> September. This was the first meeting led by Interim Chair David Flory.

Membership of the board 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, community and faith sector as well as Chairs from each of the CCGs representing the local NHS.

### Chair's introduction

In his opening remarks David welcomed partners to the meeting and set out the significant statutory changes that are anticipated to follow the progress of legislation through parliament.

These include the closure of our 9 Clinical Commissioning Groups and secure transfer of their functions to the successor organisation – the ICS NHS Body – known as the Integrated Care Board – and the establishment of a new statutory Integrated Care Partnership for Cheshire and Merseyside by April 2022.

Confirming that the process for the appointment of a permanent chair for the Cheshire and Merseyside ICS is ongoing, David emphasised the collective responsibility of partners in seizing the opportunity to shape something special for our population - through an equal sense of partnership and ownership.

David stressed that we must always keep the 9 borough Place-Based Partnerships at the forefront of our minds in ensuring we put our communities at the heart of everything we do.



# Chief Officer's message

Interim Chief Officer Sheena Cumiskey was unable to attend Tuesday's Partnership Board meeting but did set out her message to partners.

Reflecting on her first month in post Sheena thanked staff and colleagues for her warm welcome and partners for the productive engagement enjoyed to date. It is very clear that there is lots of excellent work being delivered in Cheshire and Merseyside and that progress is being made in the transition to statutory Integrated Care System status by April 2022.

Sheena reiterated that the core priorities during her tenure are:

- Establishing the Integrated Care System by creating and maintaining momentum that is driven by a 'one team' approach
- Building on strong relationships by further enhancing levels of co-production between partners
- Wellbeing of our People put our people at the heart of everything we do by recognising fatigue
  across the workforce and providing emotional and practical support

While our 'one-team' for Cheshire and Merseyside deliver against these priorities we mustn't lose focus on 'the now' and the immediate challenges of system recovery and restoration of services, joint working between health and care in readiness for winter and continuing the successful rollout of the COVID-19 Vaccination Programme.



# COVID-19 update

Dr Sarah O'Brien, Executive Director of Strategy and System Development gave a presentation on the current COVID-19 position in Cheshire and Merseyside, highlighting the successes of the vaccination programme and the challenges that remain.

More than 3.5 million people have received their COVID-19 vaccination in Cheshire and Merseyside as we enter the next phase of campaign to deliver vaccinations to 12–15-year-olds and to roll out the booster programme across the region, focussing initially on the over-50s and most vulnerable.

That success is tempered by the fact that we are still seeing over 1000 new COVID-19 infections reported across the region daily and our hospitals are admitting a growing number of unvaccinated young people – at a time that critical care capacity is already stretched and winter with winter on the horizon.

Demand and pressures are severe across all care settings and we must continue to do all we can to get the key messages out there that it is so important that people take up the offer of a vaccine, wash hands regularly, wear a mask when they can and keep a safe distance. *Hands, Face, Space.* 

# Adult Social Care staffing position

Cheshire West and Chester Council's Deputy Chief Executive – Health and Wellbeing, Delyth Curtis, gave a presentation on the adult social care staffing position on behalf of the directors of adult social services (ADASS) for Cheshire and Merseyside.

There are several key challenges:

- Low pay, a lack of parity and recognition compared other parts of the workforce
- Increased vacancies in other sectors post Brexit
- Staff moving to other sectors attracted by higher pay and other perceived benefits
- Staff fatigue and the impact of increased COVID-19 infection rates on the need to isolate or provide care.

These challenges coexist with escalating pressures - with increased demand for both high-acuity packages of care post hospital discharge, and demand for care at home more generally.

There is a lot of remedial work taking place at a national, regional and local level involving partners from all sectors, both to support the care provider market and drive recruitment.

Partners supported the recommendation to collectively to commission a campaign to promote careers in Adult Social underpinned by a charter single Cheshire and Merseyside approach.



# Sustainability update



Dave Sweeney, Executive Director of Partnerships presented an update on the work being carried out with partners to deliver the Greener NHS and Social Value agendas in Cheshire and Merseyside.

A regional Net Zero Board has agreed a Memorandum of Understanding for regional leadership and delivery of the Greener NHS requirements, setting out the areas which the Partnerships need to include on its journey to net zero.

Locally, the development of an ICS Green Plan is being driven by a Sustainability Board that is aligned with strategic estates planning and population health delivery.

Key priorities include:

- Reducing the NHS Carbon Footprint via building energy, waste, and water
- Tackling supply chain wastage including via medicines, chemicals, and equipment
- Reducing business and personal travel including via the NHS fleet, staff commuting and patient/visitor travel.

Partners reflected that this agenda is key to reducing health inequalities and stressed the importance of collaboration across all strategic partners – particularly local Government.

# **Guidance for Integrated Care Systems**

NHS England and Improvement continues to publish guidance documents setting out how NHS leaders and organisations should operate with their partners in Integrated Care Systems (ICSs) from April 2022.

Up to date guidance can be viewed at <a href="https://www.england.nhs.uk/publication/integrated-care-systems-guidance/">https://www.england.nhs.uk/publication/integrated-care-systems-guidance/</a>

Of particular interest to the Board is the Department of Health and Social Care <u>engagement document</u> on the Integrated Care Partnership (ICP) – the statutory committee that will sit alongside the NHS ICS Body – the Integrated Care Board.

The ICP engagement document has been developed by DHSC in partnership with NHS England and Improvement and the Local Government Association to help all NHS and local government leaders consider what arrangements might work best in their area.



Readers of this update are reminded that the full Board papers are available on our website.

