



# CHESHIRE EAST HEALTH AND WELLBEING BOARD

#### **Reports Cover Sheet**

Title of Report:	Cheshire East Place Partnership update
Date of meeting:	26th January 2021
Written by:	Claire Heaney Programme Director
Contact details:	Claire.heaney2@nhs.net
Health & Wellbeing Board Lead:	Steven Michael
Duaru Leau.	

#### **Executive Summary**

Is this report for:	Information X	Discussion	Decision	
Why is the report being brought to the board?	To keep the Board updated on progress with the work of the Cheshire East Health and Care Partnership.			
Please detail which, if any, of the Health & Wellbeing Strategy priorities this report relates to?	Creating a place that supports health and wellbeing for everyone living in Cheshire East Improving the mental health and wellbeing of people living and working in Cheshire East Enable more people to live well for longer All of the above X			
Please detail which, if any, of the Health & Wellbeing Principles this report relates to?	Equality and Fairness Accessibility Integration Quality Sustainability Safeguarding All of the above X			
Key Actions for the Health & Wellbeing Board to address. Please state recommendations for action.	To note the progress and	any issues raised and commer	it as appropriate.	
Has the report been considered at any other committee meeting of the Council/meeting of the CCG board/stakeholders?	No			

Has public, service user, patient feedback/consultation informed the	N/A
recommendations of this report?	
If recommendations are adopted, how will residents benefit? Detail benefits and reasons why they will benefit.	N/A

## 1 Report Summary

- 1.1. Within the Cheshire East Partnership Five Year Plan 2019-2024, our vision *"to enable people to live well for longer; to live independently and to enjoy the place where they live"* is captured alongside our focus, key strategic goals, with reference to wider determinants of health, why we need to change and expected outcomes.
- 1.2. Since April 2020, despite being immersed in Covid-19 emergency operational response measures, Partnership working across Cheshire East Place has continued and has strengthened to enable progress in a number of key areas these being primarily around:
  - Commissioning Intentions
  - Financial Recovery Plan
  - Health and Care Services Redesign
  - Integrated Care Partnership (including Care Communities)
  - Wider enabling workstreams including Digital and Workforce
- 1.3. This report is designed to inform the Board of progress made, key challenges still prevailing and plans moving forward around commissioning, planning and delivery of integrated health and care services.

### 2 Recommendations

2.1 That the Cheshire East Health and Wellbeing Board note and comment on the report.

### 3 Reasons for Recommendations

3.1 To provide an opportunity for the Board to respond to the update on the work of the Cheshire East Health and Care Partnership.

## 4 Impact on Health and Wellbeing Strategy Priorities

4.1 The work of the Cheshire East Health and Care Partnership contributes to all of the Health and Wellbeing Board Strategy priorities.

### 5. Background and Options

- 5.1 Within our Five Year Place Plan 2019 2024, we have stated four key goals around development and delivery of a sustainable, integrated health and care system across Cheshire East Place, which is financially balanced, supported by a sustainable workforce and significantly reduces health inequalities. An update on the key elements enabling us to achieve this is summarised below.
- 5.2 In response to NHS England and NHS Improvement's reconfiguration proposals around the formation of Integrated Care Systems and disestablishment of Clinical Commissioning Groups. NHS Cheshire CCG has recently shared its approach, thinking and progress around evolving strategic and tactical commissioning to Cheshire East Integrated Care Partnership (Cheshire East ICP). Key elements emerging from devolving responsibility include:
  - Changes to contracting mechanisms and impact on budgets, financial frameworks
    and resources
  - Population Health and Performance outcome frameworks and measures
  - Clarity on future functions and Governance arrangements
  - Business Intelligence requirements
  - Communications and Engagement
- 5.3 To address the underlying financial deficit across the Cheshire wide NHS System, work has continued on the pan-Cheshire Financial Recovery Plan with emphasis specifically on Collaboration at Scale programmes of work designed to generate greater efficiencies and value for money from a broader geographical footprint and organisations working on solutions together, these being Workforce, Procurement, Estates and Facilities, and Medicines Optimisation.
- 5.4 Work progressed on the Health and Care Services Redesign with Clinical Workshops and Patient Focus Groups held during September/October 2020 to generate draft proposals for the New Model of Care. This work was completed with outcomes shared with respective Partners, presented at NHS Cheshire CCG Governing Body and shared with Cheshire East ICP Board Members. Yorkshire and the Humber Clinical Senate are currently undertaking an independent review of the process followed and outcomes with reporting back of initial findings expected during February 2021.
- 5.5. At the heart of our Cheshire East Place Transformation programme is the establishment of the Integrated Care Partnership and development of our eight Care Communities to provide the foundation for innovation and focus on meeting the specific needs of our local populations within these communities. The Governance arrangements as outlined in the structure below have now been approved with the respective forum mobilised and work commenced on four key target areas: Cardiovascular Health, Children's Health, Mental Wellbeing and Social Prescribing and Respiratory Health.

#### **Cheshire East ICP Governance Structure**



- 5.6 Two further areas of focus have been highlighted in respect of Business Intelligence & IT, and a Cheshire-wide operational alignment project. Work is also continuing on Workforce & OD, ensuring that the actions emerging from the cultural work supporting the development of the eight Care Communities is successfully completed. In addition, Covid-19 highlighted the importance of Digital in enabling us to work and operate differently. Therefore, focus remains on ensuring that the systems, tools and technology at our disposal are fit for purpose to deliver the services we need both now and in the future for the population of Cheshire East.
- 5.7 There are a number of implications due to the complexity and challenges associated with the integration of health and care services. However, under the revised Governance arrangements, there is a clear line of sight through Cheshire East Place Partnership Board to the Cheshire East Health and Wellbeing Board (CEHWBBd), with the Independent Chair of the Partnership Board now attending CEHWBBd enabling full visibility of Commissioning Intentions, and progress in respect of achievement of the Place 5 Year Plan.
- 5.8 Should there be any necessity to radically change the way in which a service is currently provided to the population of Cheshire East, then there may be legal implications to be considered and a robustness of process followed which will required to be evidenced. It is too early to pre-empt any such requirement.
- 5.9 There are likely to be revenue and capital requirements and discussions to be held with NHS England / Improvement and Cheshire and Merseyside Health and Care Partnership moving forward. Aligned with legal implications, these are yet to be quantified to enable discussions to be held around likelihood of funding availability, timescales and any associated restrictions of deployment.

5.10 Significant emphasis has been on supporting the establishment of the infrastructure in our eight Care Communities before moving onto the development of the Integrated Care Partnership. At a future point in time, there is envisaged to be a "left shift" of activity away from an acute "hospital" setting to a community setting which will involve changes to workforce deployment. As per above, it is too early to pre-empt these and especially as these are inextricably linked to Commissioning Intentions and the wider reconfiguration proposals underway.

## 6 Access to Information

6.1 The background papers relating to this report can be inspected by contacting the report writer: Name: Claire Heaney

Designation: Cheshire East Health and Care Place Programme Director Email: Claire.heaney2@nhs.net