

Cheshire and Merseyside Health and Care Partnership (ICP) Interim Strategy Summary

2023-2028





Who We Are – the Cheshire and Merseyside Health and Care Partnership

The Cheshire and Merseyside Health and Care Partnership (ICP) represents the coming together of health services, the local authority, and vital systems partners from across our region.

The partnership is a statutory body, collectively working to improve the health outcomes of the 2.7 million people living across Cheshire and Merseyside. A core responsibility of the partnership is to jointly assess the health, public health and social care needs of Cheshire and Merseyside, and generate a five-year strategy that addresses these needs.

Our Health and Care Partnership

- Our Integrated Care Board
- Our 9 Local Authorities
- 17 NHS Providers
- North West Ambulance Service
- Our Police Service
- Our Fire & Rescue Service
- Voluntary, Community, Faith & Social Enterprise Sector
- Education
- Local Enterprise Partnerships



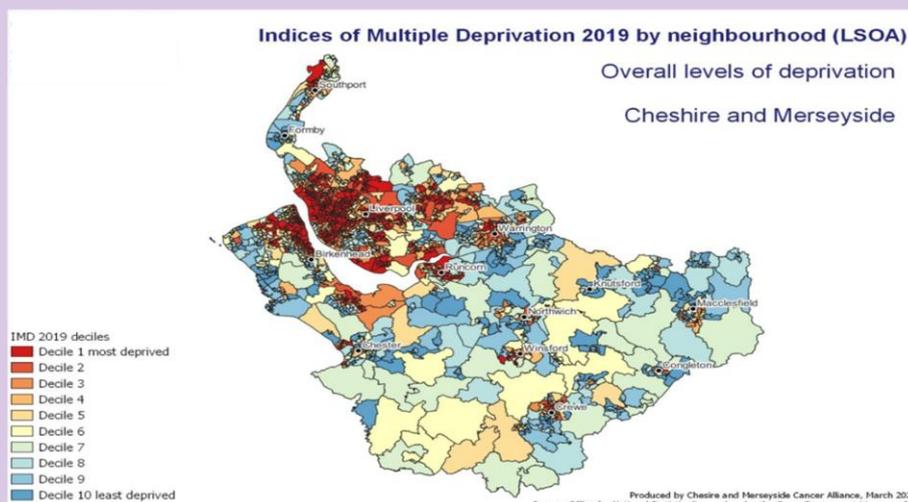
- 55 Primary Care Networks
- 355 General Practices
- 2 Provider Collaboratives
- Social Care Providers
- Children's Services
- Public Health
- Carers
- Housing
- HealthWatch

What Challenges Do We Face – Our Population Health Profile

There are long standing social, economic and health inequalities across Cheshire and Merseyside, with levels of deprivation and health outcomes in many communities worse than the national average. Key populations health facts:

- 35% of our population are deprived and 26% of our children live in poverty
- Deaths due to heart disease, cancer, respiratory conditions, and alcohol and drugs are higher than the England average. People in the most deprived area can live 15 years less than those in wealthier areas.
- The number of Looked After Children is 47% higher than the England average

As shown in the graphic to the right, there are pockets of deprivation across every one of the nine Places in Cheshire and Merseyside, which has a direct impact on long term health outcomes.





How Are We Going To Address Them – Our Health and Care Partnership Strategy

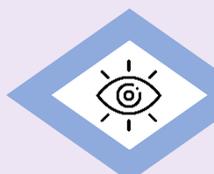
This document is a summary of our interim draft Health and Care Partnership Strategy. Our interim document represents the start of our journey towards developing a fully fledged strategy, ready for approval by the new Statutory Joint Committee, once it is formed later on in 2023.

This strategy is aligned to, and builds on, a number of other Cheshire and Merseyside-based strategies and national guidance:

- Our Place Plans
- Health & Wellbeing Strategies
- Place and System Level People Plans
- The Health and Care Act 2022
- Our Workforce Strategy
- NHSE Guidance for Integrated Care Systems

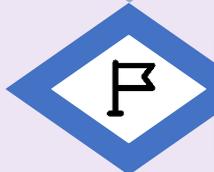
Our Partnership’s Vision, Mission, and Strategic Objectives

Our Health and Care Partnership Strategy is guided by our vision, mission and four core objectives:



Vision

We want everyone in Cheshire and Merseyside to have a great start in life and get the support they need to stay healthy and live healthier for longer.



Mission

We will prevent ill health and tackle health inequalities and improve the lives of the poorest fastest. We believe we can do this best by working in partnership

Strategic Objectives



1: Tackling health inequalities in outcomes, experiences and access



2: Improve population health and healthcare



3: Enhancing quality, productivity, and value for money



4: Helping the NHS to support broader social and economic development

As the focus of our interim draft Health and Care Partnership Strategy is themed around our four strategic objectives, this summary document focuses on the commitments set out within these four core areas. The joint achievement of our shared commitments will in turn support us to collectively deliver our vision and succeed in our mission.

The full version of the interim draft Health and Care Partnership Strategy can be found [here](#).



1: Tackling health inequalities in outcomes, experiences and access



We will:

- Give every child the best start in life
- Enable all children, young people and adults to maximise their capabilities and have control over their lives
- Create fair employment and good work for all
- Ensure a healthy standard of living for all
- Create and develop healthy and sustainable places and communities
- Strengthen the role and impact of ill health prevention
- Tackle racism, discrimination and their outcomes
- Pursue environmental sustainability and health equity together.

All Together Fairer

Our region understands the importance of reducing health inequalities. In 2019, health and care leaders across Cheshire and Merseyside outlined their collective commitment to tackling health inequalities by agreeing to become a “Marmot Community”.

Further to this in 2021, the ICP commissioned the landmark ‘All Together Fairer’ report, informed by Prof Sir Michael Marmot, which sets out the actions required for us to build a fairer, healthier Cheshire and Merseyside.

Our partnership fully endorses the reports recommended actions, and commits to:

1. Increasing and making equitable funding for social determinants of health and prevention
2. Strengthening partnerships for health equity
3. Creating stronger leadership and workforce for health equity
4. Co-creating interventions and actions within communities
5. Strengthening the role of business and the economic sector in reducing health inequalities
6. Extending social value and anchor organisations across the NHS, public services and local authorities
7. Developing social determinant of health in all policies

In addition to implementing the above, our region will also utilise our agreed set of local Marmot ‘Beacon Indicators’ to monitor the impact of our actions on social determinants of health.

NHS Prevention Pledge

Working in tandem with our Cheshire and Merseyside Marmot Community Programme, is the NHS Prevention Pledge. This pledge comprises of 14 core component, across a number of cross-cutting prevention themes, taking a system-wide approach to promoting wellbeing and tackling health inequalities.

Although a number of our NHS Trusts have adopted the pledge, we are committed to ensure that all of our Trusts adopt the pledge in full. In doing so, we aim to ensure that the reduction of health inequalities features as a key priority across all our Trusts corporate strategies. In the future we also hope to expand the pledge to providers across our wider health and care system.

Cost of Living Pressures

An individual’s physical home environment is closely related to their health outcomes. For example, living in a cold home, being frequently exposed to damp, and living in cramped households can exacerbate a wide range of physical and mental health conditions. With the cost of living rising significantly, many individuals will be faced with mounting financial pressures and may no longer be able to afford basic necessities.

Our partnership is committed to addressing the impact of cost-of-living pressures by working to reduce deprivation and income inequality, sharing good practice across our nine Places, jointly improving housing quality and energy efficiency and addressing local health needs via NHS interventions.



2: Improve population health and healthcare



We will focus on prevention of ill health and improved quality of life by:

- Delivering the Core20plus5 clinical priorities for adults and children and young people
- Reduce deaths from cardiovascular disease, suicide and domestic abuse
- Reduce levels of obesity, respiratory illness and smoking as well as harm from alcohol
- Improve early diagnosis, treatment and outcome rates for cancer
- Reduce maternal, neonatal and infant mortality rates
- Improve satisfaction levels with access to primary care services, waiting times for elective and emergency care services
- Improve diagnosis and support for people with dementia
- Provide high quality, accessible safe services
- Provide integrated, accessible, high quality mental health and wellbeing services for all people requiring support.

Core20PLUS5

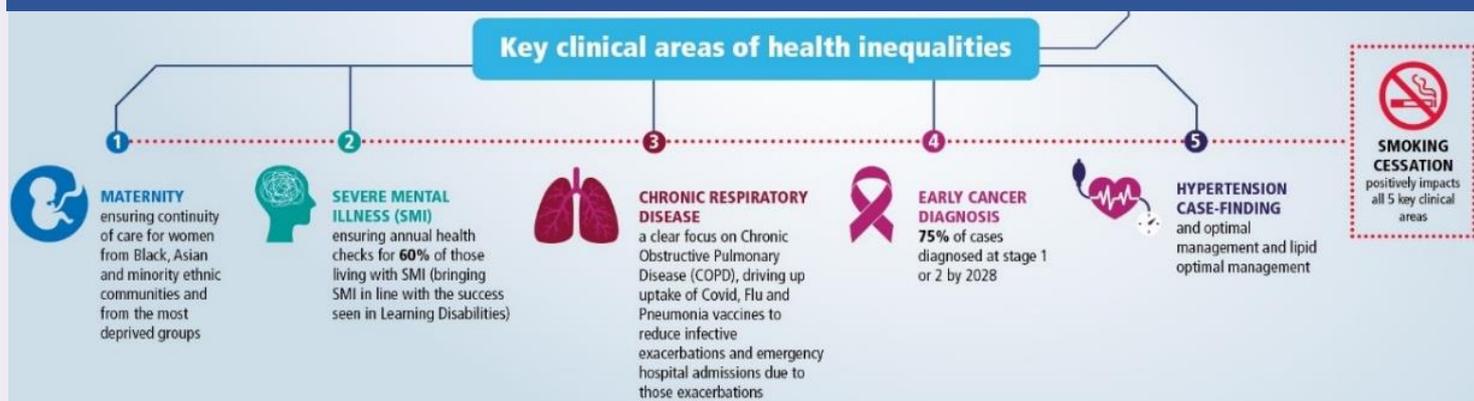
Our region supports the national Core20PLUS5 approach to population health. This approach can be broken down into three parts:

Core20 – this is the most deprived 20% of the population, for us this is >900,000 people.

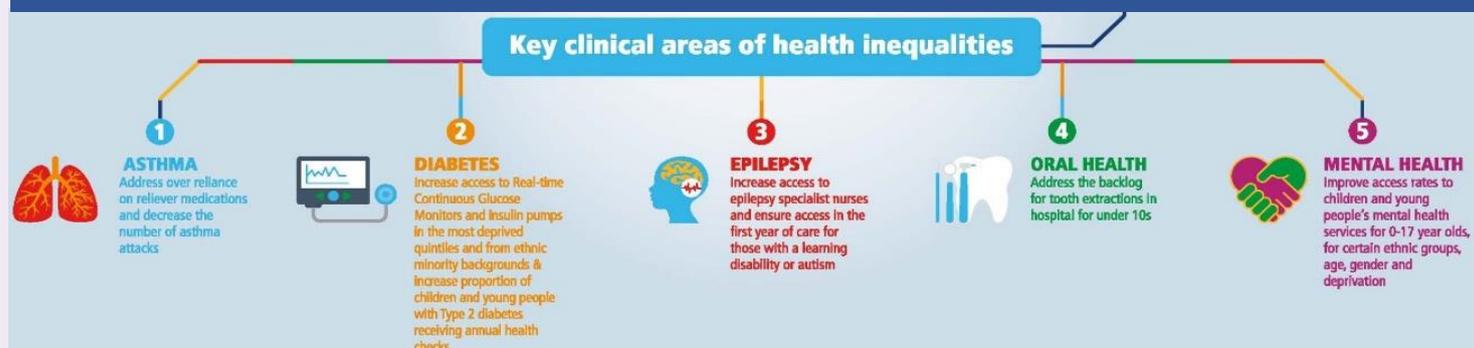
PLUS – this represents the population groups that are experiencing poorer-than-average health outcomes.

5 – these are the key clinical areas which require accelerated improvement:

5 areas of focus for Adults:



5 areas of focus for Children and Young People:



Beyond the five clinical priorities identified by the CORE20PLUS5 approach, our partnership has also committed to a number of key actions within the following health, care and corporate areas.

Children and Young People (CYP)

We will create a joint 3 year CYP strategy, listening to the needs of children and young people to co-create solutions that work for them. We will deliver the ambition of the national Family Hubs and Start for Life programme. We will also establish a multi-agency meeting in each of our Places to support children in crisis and develop a model for CYP 'safe places' as an alternative to hospital care.



Learning Disability and Autism (LD&A)

We will work to reduce the number of specialist in-patients and continue to develop integrated community services for LD&A. We will reduce wait times and ensure more people receive LD&A annual checks and assessments. By 2028 we will reduce the life expectancy gap for people with a LD&A by at least 20%

Carers

A new system-wide Carers Partnership Group for Cheshire and Merseyside has been established, supported by the NHSE national / regional carers team. Our partnership will identify and support carers through several interventions, such as carers passports and enhanced out-of-hours contingency planning.

Mental Wellbeing / Health and Suicide Prevention

We have an established Mental Health Programme, and a long-standing public health collaborative 'CHAMPS'. We will utilise our population health intelligence to better understand local needs and gaps. We will also use innovative commissioning of community base schemes, continue to roll out new mental health roles. We also have a new Suicide Prevention strategy, which will improve suicide risk awareness and prevention, build suicide prevention capability within our staff, and support our Mental Health Trusts to implement safer care standards.

Reduction of harm from alcohol, obesity and lack of physical activity

We will support prevention, detection, and early intervention for people at risk of harm from alcohol. We will also work to develop an intelligent liver function test for all GPs, and we will ensure that people transitioning from hospital to the community on an alcohol pathway will wait <7 days to be seen. We are addressing obesity in our region through the Food Active programme, and the Strategic Overweight and Obesity programme. We also aim to empower 150,000 people to become more active by 2026 by creating more physical activity opportunities.

Dementia and End of Life (EoL) Care

Rates of dementia in our region are higher than average. We will improve the quality of dementia care by exceeding the national diagnosis rate standard, offering personalised care, and providing support to carers. We will also continue to ensure that when a person reaches the end of their life that they are supported to die with dignity, in their preferred place, supported by those important to them. We will also raise public awareness of EoL care, so our communities are confident and willing to support each other through loss.

Personalised Care and Adult Social Care

We will use methods like make every contact count to embed discussions on health into day-to-day conversation, we will use social prescribing to enable self-management, and support the use of Personal Budgets. We will improve access to Home Care and Extra Care Housing to reduce reliance on residential and nursing homes. We will increase capacity in the care market and workforce by making it an attractive place to work.

Data and Digital

We have an innovative Digital and Data Strategy in place. It is our mission to be the most digitally advanced and data driven ICS in England by 2025. To achieve this, we will build strong digital and data foundations, level up our infrastructure, deliver 'at scale' platforms such as shared care records, and develop system-wide BI services.

Research and Innovation

We are working to establish a Cheshire and Merseyside Research Development Hub, creating a network of research champions, deliver annual learning events, and contributing to the development of a North West Secure Data Environment.

Health Protection

We will use our assets to assure the effectiveness of our health protection approaches and clarify any catch-up activity that is required. We will also develop a view of common health protection risks, shared mitigation plans and review our current arrangements to identify opportunities to strengthen clinical pathways for prevention.



3: Enhancing quality, productivity, and value for money



We will:

- Maximise opportunities to reduce costs by procuring and collaborating on corporate functions at scale
- Develop a financial strategy focused on investment on reducing inequality and prioritise making greater resources available for prevention and well-being services
- Plan, design and deliver services at scale (where appropriate) to drive better quality, improved effectiveness and efficiency
- Develop whole system plans to address workforce shortages and maximise collaborative workforce opportunities
- Develop a whole system estates strategy and a thriving approach to research and innovation across our HCP.

Quality Assurance and Improvement

Our system supports the key requirements of quality oversight, as set out by the National Quality Board. We will ensure the fundamental standards of quality are delivered, continually improve the quality of services, and achieve the highest regulatory standards. We will further develop our approach to meaningful engagement with service users, and agree shared quality assurance and improvement actions through our System Quality Group.

Access to Primary Care

Several factors have led to challenges in accessing NHS Dentistry. To improve access in our region, we will invest in an Advice Triage Helpline service, and work with partners to develop an oral health improvement strategy. To improve GP access, we will support our Primary Care Networks (PCNs) in addressing workforce challenges and growing teams through the Additional Roles Reimbursement Scheme (ARRS). We will develop new commissioning models that expand the range of service and capacity within Community Pharmacy, in order to improve access. We will also enable our population to have access to services directly ensuring services are integrated into our local models and pathways.

Access to Diagnostics

To improve access to diagnostics, we will work to achieve the 6 week wait target by 2025, deliver 120% of pre-pandemic levels of activity by 2023, reduce clinically inappropriate demand, and utilise digital solutions.

Elective Care Recovery and Transformation Programme (ERTP) and Clinical Pathways Programme (CPP)

Our ERTP work was established to support the recovery of pre-Covid activity levels. The programme will complete a harms review of long waiters and support waiting well initiatives. We will eliminate waits of >104 weeks and establish more elective hubs. Our CPP work is focused on transformation of clinical pathways for the long term, to improve the resilience of smaller Trusts, and to consolidate pathways where this provides better outcomes.

Enhancing community services to reduce avoidable hospital admissions

We know that we have higher rates of hospital admissions than our peers, and our Mental Health, Learning Disability and Community Services Provider Collaborative is focussed on reducing avoidable hospital admissions. We will review how we currently work and share ways of working across the system, by supporting a business intelligence model that tracks capacity and demand, and a shared workforce development plan.

Workforce

We will meaningfully improve working conditions to end our reliance on agencies, upskill and re-skill staff to work in new roles, promote staff health and wellbeing, enable culturally competent ways of working, develop leadership and talent management, and work as system partners to develop a social care academy.

Finance

Cheshire and Merseyside Health and Care partners have combined budgets of £4.4bn meaning we are a significant part of the local economy, in terms of employment and procurement of services. Our ICS will develop its system-wide financial strategy in the first half of 2023, and which will support our ambitious system plans and longer-term financial sustainability. The strategy will include an allocation approach to determine how we will best use resources to support reducing inequalities, and financial mechanisms to support integration.



4: Helping the NHS to support broader social and economic development



We will:

- Embed, and expand, our commitment to social value in all partner organisations
- Work with Local Enterprise Partnerships to connect partners with business and enterprise.
- Develop as key Anchor Institutions in Cheshire and Merseyside, offering fair employment opportunities for local people
- Promote our involvement in regional initiatives to support communities in Cheshire and Merseyside
- Implement school programmes to support mental wellbeing of young people & inspire a career in health and social care

Anchor Institution

The term 'anchor institution' refers to large organisations whose long-term sustainability is tied to the wellbeing of the populations they serve.

As a partnership we are a significant part of our local economy, including in terms of as employers, purchasers from the local supply chain, as well as being embedded in our communities. As an Anchor Institution/ System we will sign up to the relevant fair employment charters for our region, and commit to providing the real living wage. We have also pledged to employ and purchase locally in the first instance.

We will measure and evidence the progress we make from becoming an Anchor System, and we will develop an Anchor Network Progression Framework to help our organisations self-assess their own ambitions.

Social Value

Our definition of Social Value is: the good that we can achieve within our communities, related to environmental, economic and social factors.

As one of a group of Social Value Accelerator Sites across the UK, we are dedicated to exploring and learning more about how social value can practically and effectively be embedded at scale.

We will work together across our sector to achieve social value outcomes, foster innovation, and reduce avoidable inequalities. We will continue to protect our health and social care services, give a voice to our local communities, embed social value across the entire commissioning cycle, and create real opportunities for social innovation in our region.

Our Green Plan

Climate change poses a threat to our health as well as our planet. Across our organisations, we are committed to achieving net zero by 2040 (or earlier).

To achieve this we are transforming the way we use tech to provide health and care, we are decarbonising estates and enhancing sustainable food in our hospitals. We are working to reduce the environmental impact of our products and we are phasing out single use plastics.

We have already achieved:

- Installation of >300 solar panels at Wirral Community Health
- Reducing the use of nitrous oxide by approx. 443 tonnes of CO₂
- Introduced cycle to work scheme
- Introduced reusable theatre gowns, saving 23 tonnes of carbon dioxide emissions and £22,000 which has been reinvested into patient care.

We will build on these successes and continue to work with partners to achieve our aims.

Where Are We Going Next – Developing and Finalising our Strategy

We recognise that as we develop, in the coming months and years, we will need to develop and refine the content of our strategy to reflect our progress.

This development will be both in terms of working with our communities to reassess our priorities, and working to mature our relationships as partners. These developments will support us to identify increasingly integrated and innovative solutions to deliver our key shared objectives.

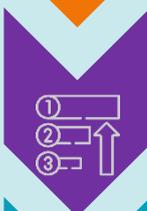
During 2023 we will focus on a number of key activities to further develop this strategy;



- Connect and engage more effectively with our communities to ensure that our Place and Health and Care Partnership plans continue to reflect what is truly important to our people.



- Collaborate and meaningfully engage across the breadth of our HCP, enabling co-creation opportunities for educational, police, housing, VCSE, and other members of our Partnership.



- Work across both our communities and our partnership to co-develop a Prioritisation Framework that ensures our Annual Plans and Joint Forward Plan will focus our resources in a way that delivers the greatest benefit to our population



- Co-produce a detailed Joint Forward Plan and Annual Plan with measurable outcomes to ensure we deliver on our shared priorities. The plans and corresponding work programmes will recognise the need to respond to our immediate service pressures, as well as our longer-term objectives.



- Agree how we will measure and report on these outcomes, so we are assured of the progress we are making and able to effectively communicate this progress to our population



- Produce a summary version of our strategy and annual plan for our citizens, which provides a clear and concise description of our strategic priorities



- Formalise the arrangements of the Health and Care Partnership as a Statutory Joint Committee to oversee finalising this strategy and subsequently delivery against it.



- Develop a system financial strategy that supports delivery of this Health and Care Partnership strategy.