

INTEGRATED CARE PARTNERSHIP Date 17 July 2024

ITEM 07

Report sponsor: Kate Brown, Joint Commissioning and Community Development,

NHS Derby and Derbyshire ICB

Report author: Wynne Garnett, Programme Lead, Engaging the VCSE sector in the

ICS

Memorandum of Understanding - Voluntary, Community and Social Enterprise Sector (VCSE) and the Integrated Care System

Purpose

- 1.1 The purpose of this report is to provide the ICP with an overview of the Memorandum of Understanding (MoU) developed between the voluntary, community and social enterprise sector (VCSE) and the Integrated Care System (ICS).
- 1.2 The MoU sets a framework for the principles, culture and activities that are needed to underpin the VCSE sectors contribution as a partner in the Integrated Care System.

Recommendation

2.1 It is recommended that the ICP also agrees and adopts the MoU between the VCSE Alliance and the Integrated Care Board.

Reason

3.1 To ensure that the role and value of the VCSE sector within the ICS is fully recognised and that a shared approach, collectively agreed, sets out how the VCSE sector will be embedded as a partner.









Supporting information

Context

- 4.1 National Guidance on engaging the VCSE sector in Integrated Care Systems was released in 2021 and included an expectation that Memorandum of Understandings (MoUs) would be developed within each system, setting out how the VCSE sector would be embedded as a partner. Initial guidance advised that these were to be signed off by the ICB and the VCSE Alliance.
- 4.2 There is growing recognition of the importance of the VCSE sector particularly around prevention, health inequalities and tackling determinants of ill health. In addition, the sector plays a vital role connecting with and amplifying the voices of communities. A great deal of positive work has been undertaken in the Derby and Derbyshire system and the MoU builds on this and aims to underpin positive relationships going forward.
- 4.3 Whilst the national expectation has been a catalyst for this work, it is likely that the system would have initiated this action now as a useful step in confirming, with clarity, the commitment to working in partnership and a checklist of outcomes against which it will be possible to review whether VCSE engagement is developing effectively.

Development and engagement

- 4.4 A draft MoU was originally produced by a VCSE Alliance Task group to stimulate discussion. The drivers were to produce something short, understandable, effective and measurable. The focus was on four components;
 - context
 - behaviours and culture,
 - aspirations/actions, and
 - measurements.

The draft was circulated and promoted widely throughout the VCSE sector, including VCSE networks and infrastructure organisations. It has also been to a number of relevant structures of the Integrated Care System namely the Integrated Place Executive, the City and County Place Partnerships, Local Place Alliances and the Mental Health, Learning Disabilities and Neurodiversity Alliance.

4.5 Engagement opportunities included a Teams session for statutory partners and making the draft available online. There was a lot of helpful feedback and support.

Issues included:

- using "we" statements rather than ascribing different expectations between VCSE and other partners
- the importance of engaging the breadth of the VCSE sector at all planning cycle stages
- recognising power dynamics, and
- the need to develop sustainable relationships

- 4.6 The final version takes into account feedback received and has been approved by:
 - VCSE Alliance on 23 May
 - Integrated Place Executive on 25 May
 - Integrated Care Board on 15 June.

The MoU was launched at the 'Moving Forward Together' event held on 26 June. The event was open to VCSE and public sector colleagues to meet together and share learning and opportunities, build connections and help shape future ways of working together for the benefit of the population of Derby and Derbyshire.

The MoU was scheduled for discussion at the ICP planned for June. This ICP was postponed hence consideration at this meeting.

Next steps

4.7 The agreement is intended to be a practical reference point for working with the VCSE sector in the system. The culture and behaviours are critical, and the addition of aspirations, actions and measurements make the MoU something that can be evaluated. When the MoU was supported by the Integrated Place Executive, the concept of having an annual review by a cross sector group that could report back into the IPE was proposed.

Public/stakeholder engagement

5.1 Stakeholder engagement in the development of the MoU is described in 4.4, 4.5 and 4.6 above.

Other options

6.1 None considered. National Guidance on engaging the VCSE sector in Integrated Care Systems released in 2021 included an expectation that Memorandum of Understandings would be developed within each system, setting out how the VCSE sector would be embedded as a partner.

Financial and value for money issues

7.1 None directly arising from this report.

Legal implications

8.1 None directly arising from this report.

Climate implications

9.1 None directly arising from this report.

Socio-Economic implications

10.1 None directly arising from this report.

Other significant implications

11.1 The main risk / challenge is that truly acting in line with the aspiration in the MoU requires cultural change across the whole system and VCSE partners may feel frustrated and disengaged if they don't experience the change hoped for. However, the maturing relationship enables open conversation about the challenges, potential pace and priorities.

This report has been approved by the following people:

Role	Name	Date of sign-off
Legal		
Finance		
Service Director(s)		
Report sponsor	Kate Brown, Director of Joint Commissioning and	
	Community Development, NHS Derby and	
	Derbyshire ICB	
Other(s)	- · / - · · ·	

Background papers: List of appendices:	Appendix 1 Memorandum of Understanding between the VCSE Alliance and the Integrated Care Board and the Integrated Care
	Partnership