

REPORT TITLE	<i>Healthy Wirral Update</i>
REPORT OF	<i>Healthy Wirral Programme</i>

REPORT SUMMARY

This matter affects all Wards within the Borough, and supports the delivery of both Wirral 20/20 pledges in relation to Health and Wellbeing, and the delivery of Health and Wellbeing ambitions within 'Wirral Together'.

In common with all health and care systems across Cheshire and Merseyside, Wirral is expected to establish and implement its plans to achieve the best possible health and wellbeing outcomes for its population within the funding available to the system. The '*Healthy Wirral*' programme is seen as the prime system-wide programme to deliver sustainable and affordable long term changes to the way that the health and wellbeing of the Wirral Population is supported.

The *Healthy Wirral* Programme has identified a mission of '*Better health and wellbeing in Wirral by working together*' with the clearly stated aim to enable all people in Wirral to live longer and healthier lives by taking simple steps to improve their own health and wellbeing. By achieving this together we can provide the very best health and social care services when people really need them, as close to home as possible. Delivering this aim requires the Wirral partners to rise to four key challenges:

- **Acting As One** - exemplified in actions and behaviours.
- **Clinical sustainability** - sustainable, high quality, appropriately staffed, organisationally agnostic services.
- **Improving population health** - delivering the *Healthy Wirral* outcomes around better care and better health using a place based approach.
- **Financial sustainability** - managing with our allocation, taking cost out, avoiding costs, delivering efficiency and better value.

This paper outlines the key actions that have been undertaken to date and the proposed next steps to progress the *Healthy Wirral* Programme.

RECOMMENDATION/S

The Health and Wellbeing Board is asked to note the contents of this report.

SUPPORTING INFORMATION

1.0 REASON/S FOR RECOMMENDATION/S

- 1.1 The purpose of the report is to inform the Health and Wellbeing Board, no further action by the Health and Wellbeing Board is required except to note the report.

2.0 OTHER OPTIONS CONSIDERED

- 2.1 The *Healthy Wirral* Programme represents a system wide approach to the commissioning and delivery of health and care transformation on Wirral in order to achieve clinically and financially sustainable place based care. As such there is no alternative option to consider for the system.

3.0 BACKGROUND INFORMATION

- 3.1 The *Healthy Wirral* programme has continued to make good progress against key objectives. This is reported to the *Healthy Wirral* Partners Board on a monthly basis. The following priority areas have progressed as of October 2018:

3.2 Work streams composition and leadership

The primary and enabling work streams established to deliver the required system transformation are summarised in the diagram at appendix 1. The majority of these work streams are now populated with nominees from all appropriate *Healthy Wirral* partner organisations. All work streams have now identified system leads and primary work stream leads have been working with their teams to draw up plans on a page and programme summaries which will support the completion of the System Financial Sustainability Plan.

3.3 Programme Requirements

Work has continued to develop and refine the programme summaries and plans on a page in order to firmly establish the work plans for each of the *Healthy Wirral* work streams. *Healthy Wirral* Programme colleagues are engaging with all Wirral partners ensure that the principles and requirements of the *Healthy Wirral* programme are being adopted and form the basis of the system sustainability plan. As part of this partner organisations and stakeholders are asked to commit to a formal process known as the Capped Expenditure Programme-Lite (CEP-Lite) as established by Cheshire and Merseyside Health and Care Partnership. Following a

productive ‘*Wirral Acting as One*’ session with all system partners in June 2018 and subsequent discussions at the *Healthy Wirral* Partners Board a Memorandum of Understanding has been completed and sent to all partners for presentation and endorsement by their individual boards in order to formally establish their commitment to the *Healthy Wirral* programme (appendix 2).

A proposed approach to programme review has been agreed, together with suggested timescales for review. This is summarised in figure 1 below:

Figure 1 Programme Reporting and Oversight		
Governance Function	Programme Group	Reporting
<ul style="list-style-type: none"> Strategic Overview and Monitoring Healthy Wirral Programme Shaping System Support/ Challenge 	Healthy Wirral Partners Board (HWPB) 	<ul style="list-style-type: none"> Programme Overview Dashboard Strategic Progress Shaping Programmes reporting Escalation of system concerns
<ul style="list-style-type: none"> Programme Oversight/ Delivery Assurance Recovery Planning Individual Programme Shaping 	Healthy Wirral Executive Delivery Group (HWEDG) 	<ul style="list-style-type: none"> Primary and Enabling Programme Highlight reporting HWODG Reporting/ Escalation
<ul style="list-style-type: none"> Operational and Financial Progress Oversight/ Management New Scheme Development and Scrutiny 	Healthy Wirral Operational Delivery Group (HWODG) 	<ul style="list-style-type: none"> Primary Programme Reporting Financial reporting and dashboard development
Programme Work Streams		

3.4 Programme support

Work is continuing to establish the Neighbourhood teams supported by the Neighbourhood Transformation manager to ensure that a resilient approach is adopted. The Neighbourhood co-ordinator G.Ps, whose leadership has been fundamental in this work, have led the development of neighbourhood action plans to address frailty. Transformation resources to support the delivery of these plans have been made available to the neighbourhoods to ensure delivery at pace. The plans share a focus on case finding and risk stratification, proactive care

management, education and the embedding of multi-disciplinary and multi-agency working. This includes pharmacy and third sector/ voluntary support as well as statutory community and primary care services.

Design and development work on the neighbourhood multi-disciplinary team (MDT) is continuing, and additional programme support is being deployed from our phase 1 transformation fund to increase pace on this work. A clinical engagement event for neighbourhoods focusing on frailty took place on 24 September to share current thinking and provide information on key developments to support population health across the health and care system on Wirral.

3.5 Workforce support

Work has continued in developing a system-wide place-based workforce plan. Work stream members have been asked to identify their key strategic Wirral workforce priorities based on an exercise undertaken in August and the group will meet in October to finalise this. The executive lead for this work is leading a wider strategic discussion with system partners to agree our joint approaches to a workforce strategy. In support of this a bid was submitted to the Cheshire and Merseyside Local Workforce Action Board (LWAB) development fund at the end of August. Following key discussions with workforce and system leads it was agreed to submit a joint bid with the Cheshire West Integrated Care Partnership (ICP) as both systems shared common aims and favoured a similar capability-based approach to workforce strategy. Health Education England confirmed on 23 October that this bid had been successful which will bring circa £184k to support the development of a comprehensive integrated workforce strategy utilising an aligning capability model.

3.6 Leadership Development

Following the submission of the Wirral system-wide bid for funds to support leadership development the NHS North West Leadership Academy (NWLA) have entered into negotiations with Wirral and our partners in Cheshire West around a proposal to co-create a Neighbourhood leadership programme. This will include some focused delivery of support at a Neighbourhood team level, and the development of a suite of leadership development opportunities that would be

delivered locally, together with a small grant of funds to support local venue and administrative costs. Key neighbourhood and OD partners will be invited to support this programme development, which may act as a blueprint for the wider Cheshire and Merseyside programme proposed by NHS England.

3.7 Mersey Internal Audit Authority (MIAA) support to the programme

MIAA Solutions have continued their diagnostic work to support the production of a System Financial Sustainability Plan, and have progressed actions in relation to the benchmarking programmes within Right Care, GIRFT and Model Hospital. These are being supported and actioned through the *Healthy Wirral* Operational Delivery Group (HWODG).

In conjunction with the *Healthy Wirral* Finance lead and HWODG, MIAA are continuing to update the Year-end financial forecast and focus on actions to improve this.

MIAA have continued to work closely with the *Right Care* team to focus on support for Frailty, Gastro and Meds Management and have engaged with key leads from Wirral Health and Care Commissioning to ensure this work is still aligned and supporting *Healthy Wirral* priorities. Following discussions with the system lead for the planned care primary programme and colleagues from *Right Care* work is now in progress to establish a whole system clinical review of frailty data in October, to inform clinical pathway development. This will support the programme work streams for both planned care and neighbourhoods.

3.8 Primary Care Network Development

Following the submission of bids from the nine neighbourhoods against the Cheshire and Merseyside Primary Care Network Development Fund, NHS England have completed their bid scrutiny and allocation process and awarded funding to a number of the Wirral neighbourhood networks. In total 5 bids were awarded, with three being fully successful and two partially successful. In total this represents a further £468k in development funding for Wirral over the next two years. NHS England will oversee the implementation and performance of the neighbourhood

networks in delivering their plans, and have commenced the development of memoranda of understanding with each network.

3.9 Working with Cheshire and Merseyside Health and Care Partnership

The Cheshire and Merseyside Health and Care Partnership (C&M HCP) supports sustainable transformation across the wider health and care geography by bringing together all organisations to spread best practice, make sure no area is left behind and provide challenge to one another to change the way we do things to benefit local people as much as possible. The partnership has identified a vision of improving the health and wellbeing of the 2.6 million population of Cheshire and Merseyside and creating a strong, safe and sustainable health and care system that is fit for the future. Through their business plan to deliver this vision C&M HCP have identified three key priorities for 2018-19 which are:

- Delivering care more efficiently
- Improving the quality of care
- Improving the health and care of the population

The key vehicles identified for the delivery of these priorities are place based care at a local system level, a number of system-wide clinical transformation programmes including mental health, cancer and cardio-vascular disease, and improving population health management. The *Healthy Wirral* Programme has been designed primarily to deliver the required changes identified by and needed for Wirral, but this dovetails fully with the ambitions of this wider partnership, which provides support and positive challenge to the system.

The *Healthy Wirral* team have undertaken a stocktake with C&M HCP to review progress against key business plan objectives and the delivery of 'place'. Key areas addressed included resource and support from the C&M HCP, any risks and issues, performance against key priorities, financial performance, programme milestones, outputs and ambitions. Whilst acknowledging the significant financial challenge faced by the Wirral system, the C&M HCP recognised that significant progress had been made in the delivery of key objectives, and in particular progress with integration of commissioning and provision, and the implementation of neighbourhoods

4.0 FINANCIAL IMPLICATIONS

The Wirral Health and Care system faces significant challenges to achieve financial recovery and sustainability. The summary projected financial position as of September 2018 is provided below:

I&E Forecast	Plan	Likley	Likely	Best	Best	Worse	Worst
	Surplus / (Deficit)	Surplus / (Deficit)	Variance to Plan	Surplus / (Deficit)	Variance to Plan	Surplus / (Deficit)	Variance to Plan
	£,000	£,000	£,000	£,000	£,000	£,001	£,002
CWP	254	254	0	254	0	198	(56)
Wirral Community	1,993	1,993	0	2,393	400	(940)	(2,933)
WUTH	(25,042)	(25,042)	0	(25,042)	0	(30,442)	(5,400)
Wirral CCG	2,000	(3,591)	(5,591)	(2,222)	(4,222)	(7,895)	(9,895)
Contract mis-alignment (CCG/WUTH)	0	(5,000)	(5,000)	(3,000)	(3,000)	(1,000)	(1,000)
Wirral LA	0	0	0	0	0	0	0
Total	(20,795)	(31,386)	(10,591)	(27,617)	(6,822)	(40,079)	(19,284)

The table above includes a number of forecast scenarios with a likely system deficit of £31.4m which is £10.6m worse than the planned system deficit of £20.8m.

The table also shows the best position with a forecast deficit of £27.6m (£6.8m off plan) whilst the worse deficit is £40m (£19.3m off plan). The forecast position may improve if further mitigations are identified within the recovery plan to reduce the deficit position. Although the CCG is required to produce a financial recovery plan, this will need to include all partners to ensure that a true system plan is delivered. Key to this is that the system identifies those opportunities that provide the best return and be able to expedite these quickly to ensure that the financial gap is reduced in 2018/19 whilst producing a longer-term 3-5 year plan.

The Healthy Wirral programme recognises and supports the aspiration to live within our means as a system and the aim to maximise the value of the Wirral pound, by ensuring that this is invested in place based care that will deliver evidenced based, quantifiable quality outcomes for the population of the Wirral. A key outcome of the current programme will be the development of a plan to achieve system financial sustainability, through service transformation and the delivery of system wide QUIPP and CIP programmes.

5.0 LEGAL IMPLICATIONS

The Healthy Wirral programme will be delivered within the statutory and legal frameworks set for health and care in England.

6.0 RESOURCE IMPLICATIONS: ICT, STAFFING AND ASSETS

These are being considered within the *Healthy Wirral* programme and provided by the participant organisations.

7.0 RELEVANT RISKS

The *Healthy Wirral* Partners Board is developing a Board Assurance Framework that will identify the principles risks to the delivery of the strategic programme aims and how these will be mitigated. The most significant risks are a further deterioration of the financial position of the Wirral health and care economy and of associated clinical and performance standards. These can only be mitigated by the adoption of an “acting as one” approach as described above.

8.0 ENGAGEMENT/CONSULTATION

Engagement and consultation will take place as the programme progresses at all stages. Communications and Engagement is identified as a key enabling work stream for the programme and a communications and engagement strategy is being developed.

9.0 EQUALITY IMPLICATIONS

The Healthy Wirral programme will give due regard to the need to eliminate discrimination, harassment and victimisation, to advance equality of opportunity, and to foster good relations between people and who share a protected characteristic (as cited under the Equality Act 2010) and those who do not share it. The Healthy Wirral programme will also give regard to the need to reduce inequalities between patients in access to, and outcomes from health and care services and to ensure services are provided in an integrated ways where this might reduce health inequalities. Moreover the Healthy Wirral programme comprises a wide range of delivery projects and the governance structures in place for the programme require the work streams to individually review their equality, quality and privacy impact assessments.

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APPENDICES

Appendix 1 Summary of *Healthy Wirral* programme work streams

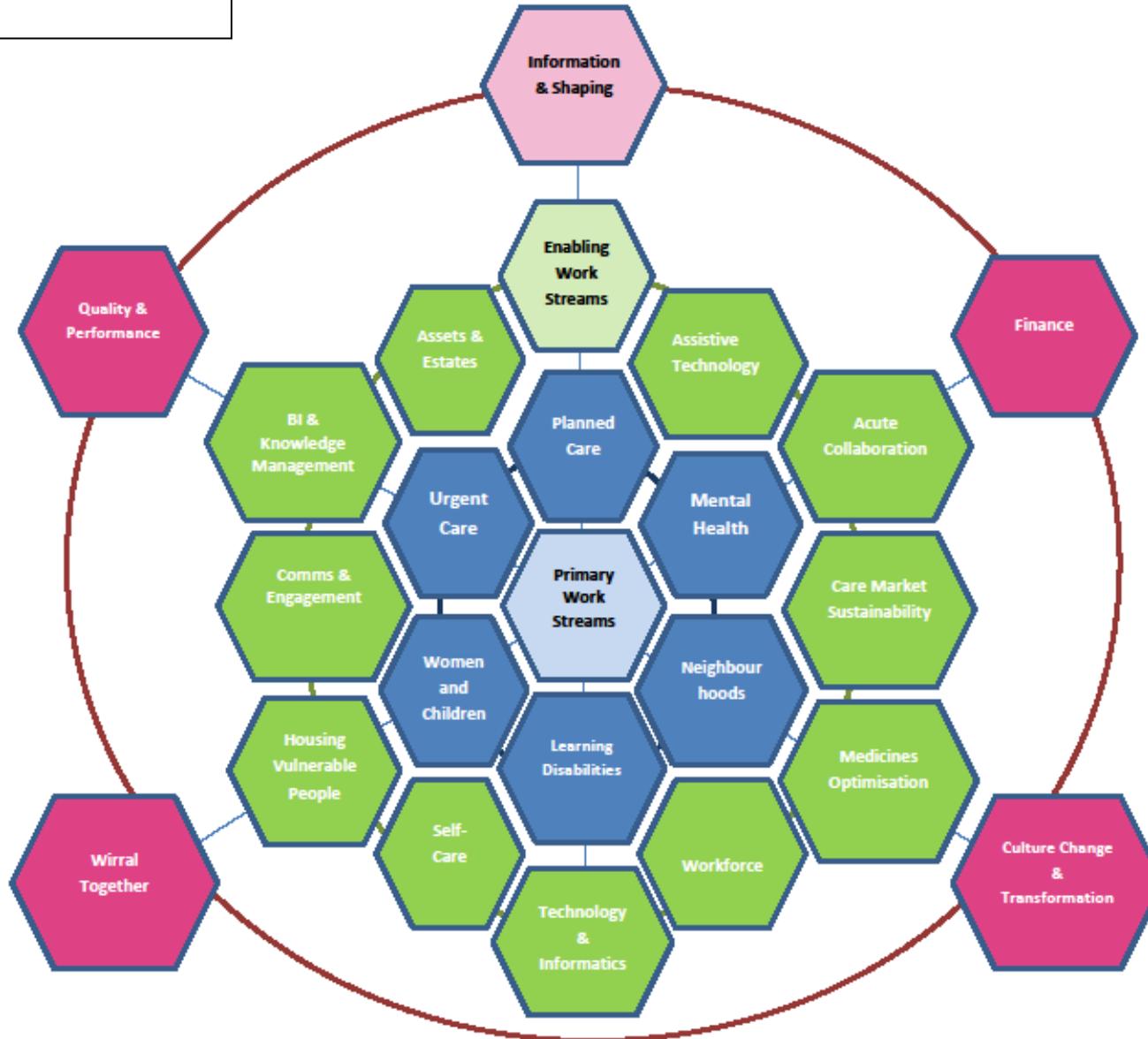
Appendix 2 *Healthy Wirral* Memorandum of Understanding

REFERENCE MATERIAL

SUBJECT HISTORY (last 3 years)

Council Meeting	Date

Appendix 1: Summary of *Healthy Wirral* Programme Work Streams



Memorandum of Understanding
Delivering System Sustainability through the
Healthy Wirral Programme

Date of Agreement

1.0 The *Healthy Wirral* Mission and Vision

System partners across Wirral have agreed a shared Mission Statement and Vision for the borough. Our Mission is:

‘Better health and wellbeing in Wirral by working together’.

We have also agreed a broad vision which is

‘To enable all people in Wirral to live longer and healthier lives by taking simple steps of their own to improve their health and wellbeing. By achieving this together we can provide the very best health and care services when people really need them, as close to home as possible’

Recognising the need to live within our means as a system, we also aim to maximise the value of the Wirral pound, by ensuring that this is invested in place based care that will deliver evidenced based, quantifiable quality outcomes for the population of the Wirral

To achieve this, there is an expectation that all system partners will be committed to working towards acting as one in the interests of delivering the best outcomes for the Wirral Population within available resources

2.0 The Memorandum

This Memorandum of Understanding ('MOU') sets out the terms and understanding between and is entered into by the following organisations/individuals:

- Wirral Community NHS Foundation Trust (WCT)
- NHS Wirral Clinical Commissioning Group (WCCG)
- Wirral University Teaching Hospitals NHS Foundation Trust (WUTH)
- Cheshire and Wirral Partnership NHS Foundation Trust (CWP)
- Wirral Borough Council (WBC)
- Primary Care Wirral Federation
- Wirral GP Federation (GPW-Fed) Ltd

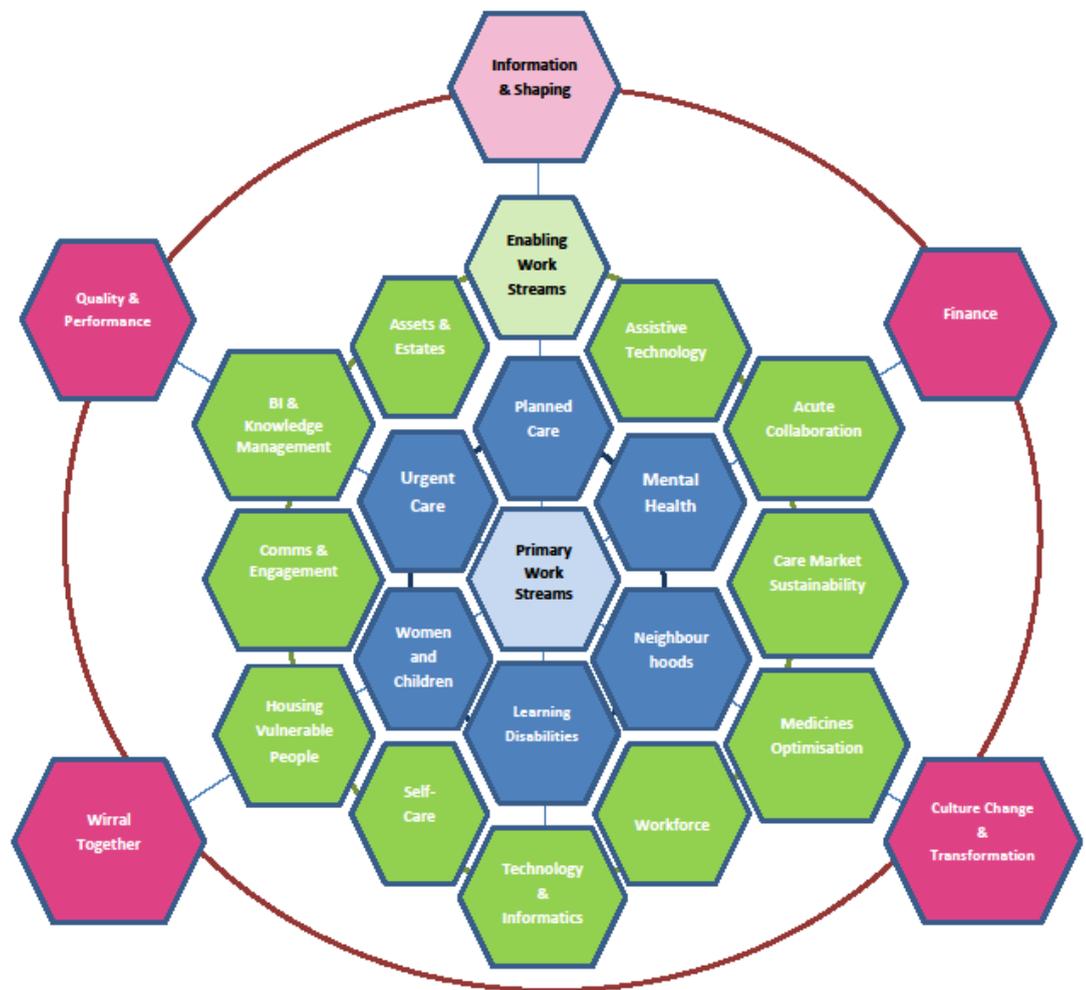
For the purposes of this MOU hereinafter referred to collectively as the 'Parties'. The MOU reflects an intent between the Parties to work together collaboratively to achieve the system ambition for long term financial and clinical sustainability. This requires the Parties to work collaboratively to deliver sustainable transformation across the system and meet the key challenges of:

1. **Acting As One** – exemplified in actions and behaviours. Delivering net system benefit
2. **Improving population health** – delivering the *Healthy Wirral* outcomes around better care and better health using a place based approach.
3. **Clinical sustainability** –sustainable, high quality, appropriately staffed, organisationally agnostic services.
4. **Financial sustainability** – managing within our allocation, ensuring cost effectiveness, avoiding duplication and unnecessary costs, delivering efficiency and better value.

This work is being undertaken within the broader national and regional context of the Five Year Forward View which sets out a clear goal that *“the NHS will take decisive steps to break down the barriers in how care is provided between family doctors and hospitals, between physical and mental health, between health and social care.”*

This will be pursued through the delivery of the *Healthy Wirral* Delivery Programmes summarised in figure 1 below. The programme is designed to enable system-wide collective problem solving and to implement ambitious transformation for health and care delivery. The Parties will collectively & collaboratively consider how new models of care and potential future organisational arrangements can best support delivery of agreed plans. For the avoidance of doubt, this reference relates to “system” working and is not intended in any way to assume any formal organisational structural change.

Figure 1: Healthy Wirral Delivery Programme Summary



3.0 Delivering the achievement of System Financial Stability

In order to deliver the ambitions of the *Healthy Wirral* vision the parties will commit to the Achieving System Financial Sustainability (ASFS) programme. This will be pursued through the formal process of the Capped Expenditure Programme- Lite (CEP-Lite) as established by Cheshire and Merseyside Health and Care Partnership.

A detailed summary of the process is provided at Appendix 1. The three key elements of the programme include:

- Review and stress test existing plans
- Deliver the recommendations in the Next Steps on the NHS 5 Year Forward View ten step efficiency plan (1)
- Consider the difficult decisions that would further control expenditure

Benefits include:

- Transparency between the different organisations on financial plans, assumptions and operational challenges.
- Joint ownership of the challenge to reduce expenditure to an affordable level within the system.
- Additional savings identified and achieved.

This MOU describes the relationship between the Parties to facilitate effective co-operation, collaboration, alignment and behaviours in relation to the Programme.

The high level process map below shows the six key steps to deliver net system savings and further opportunities:

4.0 Commitments of the Parties under this MOU

Through *Healthy Wirral* the Parties will bring together commissioners and providers to collectively develop and deliver a System Sustainability Plan including the ASFS process and CEP-Lite; detailed in appendix 1. This process will look beyond individual organisational boundaries in order to achieve system transformation including a net reduction in the overall cost of delivering health and care services, whilst achieving the best possible outcomes for the population they serve.

The Parties confirm their intent to actively engage and work collaboratively and in good faith at all times in connection with the *Healthy Wirral* programme described above. All organisations and their staff will participate fully in the development and delivery of the *Healthy Wirral* System Sustainability Plan and be open, honest and transparent in all dealings with the other organisations involved, recognising that the partnership operates on the understanding that no decisions or actions are taken to the detriment of any partner without a clear benefit to the partnership.

All parties will ensure that through collectively aligning engagement behaviours and care pathways they achieve effective and efficient outcomes aligned with the principles of place-based care.

The Parties agree to joint ownership of the financial challenge and any agreed actions resulting from the process. In order to facilitate this, the Parties are committed to develop a risk and gain share process to support the transformation of current and future service provision, ensuring system mechanisms are in place to ensure patient safety is not put at risk.

The Parties will work together to ensure the effective stewardship of the financial resources available to them and will share skills, knowledge, experience and resources effectively and in a prioritised way to achieve system financial sustainability whilst delivering the best possible health and care outcomes for the people of Wirral.

The Parties will work collaboratively, in good faith and in the spirit of partnership and transparency so that the health and care needs of the Wirral population are met. Engaging effectively with clinicians and operational leads across the system, the parties will demonstrate commitment to deliver transformational change through the development of place-based, clinically effective and organisationally agnostic health and care pathways. The parties will work collectively and in partnership with Wirral people to deliver improved population health.

5.0 Roles and Responsibilities of Parties

All Parties involved accepts collective responsibility for all the decisions and actions agreed collectively by the participating organisations.

Resources and expertise will be shared between the Parties.

The Parties will remain accountable for the delivery of key performance targets and ensuring patient safety and quality but will have a collective responsibility to work across organisations to support those accountabilities.

The Parties to this MOU agree to make available information and data arising from the programme (subject always to compliance, where relevant, with obligations owed by any Party under the General Data Protection Regulation) and to provide other reasonable support to facilitate the projects wider adoption.

The methodology the Parties use to analyse opportunities will be evidence-based and supported by the available data and intelligence. All participating organisations agree to share the most up to date data and metrics from comparative performance indicators and enabling programmes such as Carter, 'RightCare' and GIRFT. All participating organisations agree to share all data required to support the process to develop and deliver the Plan. The parties will commit to system wide reporting for the Health & Care Partnership and regulators; incorporating performance and quality as well as finance.

The Parties will use evidence to demonstrate the value of the services they provide and ensure that change is evidence based and co-produced with the communities they serve and subject to post completion review to substantiate expected outcomes.

6.0 Governance and Management of Risk

Governance and oversight of the programme will be undertaken on behalf of the Parties by the *Healthy Wirral* Partnership Board and subject to the accountabilities enshrined within the terms of reference of this board. Detailed governance structures are provided in Appendix 2.

All Parties agree to provide information and appropriate representatives to meet as required in order to facilitate the delivery of the Project.

It is recognised that organisations are statutorily required to work within the regulatory frameworks of their individual regulators. This may lead to situations where partners may have to agree to operate as a system at risk. In managing such risks the parties will develop, maintain and review an assurance framework through the *Healthy Wirral* Partners Board; establishing and mitigating principle strategic system risks

7.0 Confidentiality

The Parties reaffirm that as part of the collaboration between them they will keep confidential any information classified as confidential and will not disclose the same without the prior consent of the relevant Party whose confidential information it is.

8.0 Dispute resolution

The Parties will endeavour at all times to work constructively and in partnership to deliver the programme within the resources available. If any conflicts or disputes arise the Parties will enter into constructive dialog in order to ensure continuity of service and performance.

Every effort will be made to resolve disputes through discussion with all Parties. Any unresolved issues will be escalated to the appropriate Nominated Officer as listed below within each Party.

9.0 Termination

The MOU will terminate on completion of the Programme, as agreed in the detailed system sustainability plan but notwithstanding that, it will terminate in any event no later than **1 September 2021**

10.0 Legal Status

This MOU is not intended to be a legally binding arrangement between the Parties. The Parties shall not seek redress through any legal process to enforce any of the terms of this MOU.

11.0 Duration

The duration of the Programme is anticipated to be from **1 September 2018 to 31 August 2021** this may be revised and/or extended by mutual agreement of the Parties.

12.0 Appendices

Appendix 1	Summary of Capped Expenditure-Lite (CEP-Lite) Programme
Appendix 2	<i>Healthy Wirral</i> programme governance structures

This Memorandum of Understanding is made this

Date:_____.

Signed for and on behalf of **the Wirral Community NHS Foundation Trust:**

Signed:

Date:

Print name:

Position:

Signed for and on behalf of **the Wirral University Teaching Hospital:**

Signed:

Date:

Print name:

Position:

Signed for and on behalf of **NHS Wirral Clinical Commissioning Group**

Signed:

Date:

Print name:

Position:

Signed for and on behalf of **Cheshire and Wirral Partnership NHS Foundation Trust**

Signed:

Date:

Print name:

Position:

Signed for and on behalf of **Wirral Borough Council**

Signed:

Date:

Print name:

Position:

Signed for and on behalf of **Primary Care Wirral Federation**

Signed:

Date: Print

name:

Position:

Signed for and on behalf of **Wirral GP Federation (GPW-Fed) Ltd**

Signed:

Date:

Print name:

Position:

Appendix 1

Steps to Achieving System Financial Sustainability (ASFS) – CEP-Lite process

Introduction

In addition to the financial elements of the regulatory frameworks for providers and commissioners, NHS England (NHSE) and NHS Improvement (NHSI) also use a number of measures and programmes for individual organisations facing financial challenges, including control totals, special measures and more recently the Capped Expenditure Process (CEP).

The CEP is the first programme to apply across a health and care system, including both commissioner(s) and provider(s), although still within the existing regulatory frameworks and within Cheshire & Merseyside it is proposed that we voluntarily adopt a similar process called CEP-Lite. Within the Wirral system as part of the *Healthy Wirral* Acting as One programme ('lock-in') event all system partners have agreed to adopt this CEP-Lite process.

The three key elements of the programme include:

- Review and stress test existing plans
- Deliver the recommendations in the Next Steps on the NHS 5 Year Forward View ten step efficiency plan (1)
- Consider the difficult decisions that would further control expenditure

Benefits include:

- Transparency between the different organisations on financial plans, assumptions and operational challenges.
- Joint ownership of the challenge to reduce expenditure to an affordable level within the system.
- Additional savings identified and achieved.

The data and metrics from the Carter Review, 'RightCare' and Getting It Right First Time (GIRFT) provide insight into opportunities for organisations to investigate. These programmes have focused on providers or commissioners however there seems to be an acknowledgement that there would be benefits in bringing these together to support systems to identify opportunities for reducing unwarranted variation and inefficiencies.

Healthy Wirral partners have considered the 'RightCare' opportunities identified for the system which will require engagement from all providers if the process is to lead to cost reduction. Wirral is able to share the benefit of a single 'RightCare' delivery partner to provide system support. GIRFT is clinically led and a more bottom up approach but has not been visible to commissioners; however the *Healthy Wirral* programme will provide the framework for identified clinical leads within the Wirral footprint to make the links with 'RightCare', where appropriate, and progress at pace.

In view of the benefits already demonstrated in the CEP communities, the Health & Care Partnership is proposing to offer an approach for other economies in C&M, in support of achieving system financial sustainability. This is not to replace the existing regulatory

frameworks rather to supplement and facilitate the learning from the CEP communities to others within the STP.

Entry Requirements

In order for *Healthy Wirral* to fully implement the offer, the following will be required:

- Commitment from all organisations to actively engage in the ASFS process
- Openness, honesty and transparency
- High support / high challenge
- Acknowledge, then park legacy issues
- Commitment to cost reduction, recognising there will be transitional costs, to a level affordable within funding envelope and combined control total.
- Commitment to collaborate with partners.
- Commitment to support and facilitate the engagement of clinical and operational colleagues across the system.
- Commitment to system wide reporting for the Health & Care Partnership and regulators; incorporating performance and quality as well as finance.
- Agreement to examine the potential savings from schemes that may seem unpalatable, identifying the patient, political and policy impact, in order to demonstrate that the system has considered all options, some of which may subsequently be ruled out but on an informed basis.
- Ensure a system mechanism is in place to ensure patient safety is not put at risk.

The high level process map below shows the six key steps to deliver net system savings and further opportunities:



Job Cards

With the support of *Healthy Wirral* system CEOs/AOs, the Directors of Finance (DoFs), facilitated by the Health & Care Partnership Director of Finance, will together undertake the tasks outlined within 'Job Cards' incorporating the following:

- Establish the overall resource envelope available to the system, combining the funding streams flowing from CCGs, NHSE (Direct Commissioning and Specialised) and other sources (e.g. training income to providers from Health Education England)
- Provide an analysis of total costs for each organisation, identifying recurrent and non-recurrent and the proportion fixed and variable.
- A transparent full review of all existing financial plans and assumptions; forecast outturn and risks, including impact on STF.
- Reassess plans with the knowledge of partners' plans and spend profile.
- Identify all that will not deliver a net system benefit in the current financial year; consider whether there would be a net system benefit after a transitional period.
- Through the review of plans across the system, identify areas where savings could be achieved, either recurrently or non-recurrently.
- Agree a common understanding of the underlying position in the system, being the medium term challenge to be addressed to secure sustainability, with the breakdown by organisation.
- Provide an analysis of current and planned borrowings including the associated revenue costs.
- Review the available metrics for the system to identify opportunities for addressing unwarranted variation in clinical quality and productivity, including GIRFT, RightCare and Carter. Identify 3-5 target areas to initially focus attention and identify operational and clinical leads to investigate and take action.
- For each savings scheme:
 - Identify and assess the potential political and patient impact, the impact on delivery of NHS performance and policy and the deliverability for the current financial year.
 - Identify all the partners involved.
 - Identify a single lead.
 - Identify the actions required, with measurable outcomes and milestones for delivery.
 - Identify the barriers and the enablers to delivery.
- Agree the system reporting arrangements for all savings schemes to a single forum with CEO/AO representation.
- Agree a single lead is identified to coordinate a single, system-wide financial report.
- Agree a single lead to liaise with the Health & Care Partnership DoF and other system leads to facilitate shared learning across C&M.

- Agree with the relevant Local Authority, the extent to which the financial position can be incorporated as well as input to the identification and delivery of savings programmes.

WIRRAL HEALTH AND CARE SYSTEM

