



Memorandum of Understanding

Between

Worcestershire Executive Committee

and

Worcestershire VCSE Alliance



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STATEMENT OF INTENT

The purpose of this MoU is to commit to new ways of working between sectors within Worcestershire. It establishes the framework for the culture within which we will work, by centring on our shared vision and values and putting people in our communities at the heart of everything we do. It builds on our partnership working and dynamic relationships, committing resources, energy and passion to integrated working to achieve our collective aims and objectives as equal partners. This is an adaptable and flexible framework that nurtures integration through living our values and promotes a culture that responds to learning.

Introduction

'VCSE organisations play a critical role within local health and care systems both as service providers and as vehicles for community engagement and voice. They are therefore important strategic partners for the Integrated Care System in terms of delivering improvements in health and wellbeing and reducing inequalities – which often involves working more closely with communities.

The involvement of VCSE organisations within formal ICS structures is open to local determination, but [national guidance](#) has set clear expectations that they should be involved both within the governance structures and in delivering key workstreams' (Kings Fund, 2022)

Herefordshire and Worcestershire Intergrated Care System aims to collectively:

- Improve *healthy life expectancy* for the whole population.
- Reduce *inequalities and disparities* between those with the best and worst health outcomes.
- Do so in the *most cost effective way* so that we maximise value for money for the taxpayer.

This is consistent with Worcestershire's Heath and Wellbeing Board Vision and Priorities:



From: Worcestershire's Health & Wellbeing Strategy

RATIONALE

To achieve Worcestershire's vision and priorities as well as address the wicked issues such as prevailing health inequalities, it is essential we form a strong, equal partnership.

Together we need to build on what has been effective and introduce new and innovative ways of collaborating in order to make significant progress.

The involvement of the VCSE Sector in the new Integrated Care Partnership, Worcestershire Executive Committee (Place Board) and Worcestershire Health and Wellbeing Board opens opportunities for better outcomes and relationships.

The VCSE Sector brings specialist expertise and fresh perspectives to public service delivery and is particularly well placed to support people with complex and multiple needs. It has a long track record in promoting engagement and finding creative ways to improve outcomes for groups with the poorest health, making it an essential partner in combating the inverse care law¹ and addressing health inequalities.

1 <https://www.kingsfund.org.uk/publications/articles/inverse-care-law>

Through the new Worcestershire VCSE Alliance and partner organisations, the VCSE Sector is developing new and robust approaches in gathering community intelligence and measuring the impact of its services.

WHERE WE ARE NOW

The VCSE and Public Sector in Worcestershire both have valuable assets and strengths that will help us achieve our shared goals in the county. Importantly, we need to agree on shared values that underpin our commitments to the way in which we behave and work, as stated below. This work has been supported by a process

that remains ongoing, whereby the sectors will need to facilitate conversations to understand our similarities and differences. Building relationships remains key to recognising shared goals, having difficult conversations when required and taking opportunities when they arise.

SCOPE

This MoU is to be signed by Worcestershire Executive Committee and partners including:

- Herefordshire and Worcestershire Health and Care Trust
- Worcestershire Acute Hospitals Trust
- Worcestershire County Council
- Worcestershire Health and Wellbeing Board

When we talk about the VCSE in Worcestershire, we mean voluntary organisations, community groups, the community work of faith groups, and those social enterprises where profits will be reinvested in their social purpose. This MoU is signed on behalf of the VCSE sector by Worcestershire VCSE Alliance.

This is a live document and the scope could evolve over time to include other organisations with an interest.

Working Together

The values and principles that underpin the relationships between the Voluntary, Community and Social Enterprise sector and the Integrated Care Board and other ICS partners, in particular the Worcestershire Executive Committee and Worcestershire Health and Wellbeing Board partners. These values and principles include:

Collaboration

We will take a whole system approach to addressing the health and care needs of the population of Worcestershire. This includes building a mutual understanding of our different approaches and ways of working, co-designing services where appropriate, tackling problems together and sharing responsibility, risk and resources.

Equity

We recognise that we approach our shared purpose from different organisational starting points and are committed to developing a new model of shared strategic decision making, planning and evaluating, in which everyone's expertise is valued. We will work together to remove barriers to inclusion.

Integrity

We will build trust and act with honesty and transparency. We will be solution-focused in our approach to difficult conversations; we will listen to and respect each other's views; we will be fair in how we share opportunities and recompense organisations

Subsidiarity

We recognise the principle of subsidiarity i.e. – the idea that every function and decision should be undertaken at the most local level. In Worcestershire this means the VCSE sector will work with the Integrated Care System (across Herefordshire and Worcestershire), at place level (Worcestershire), and at district/neighbourhood level (with district collaboratives, District Councils, local VCS organisations and Primary Care networks – in Redditch, Bromsgrove, Malvern Hills, Wyre Forest, Wychavon and Worcester City.

<https://www.good-governance.org.uk/publications/insights/place-in-integrated-care-the-noble-aim-of-subsidiarity>

VCSE Sector Commitments

- We will prioritise areas of our strategic engagement with the ICS/Place on VCSE capacity and a mutual agreement concerning where we add most value
- We will appoint representatives who have a mandate to be a voice for the VCSE sector. They will be appointed based on a commitment to maintaining their impartiality, reflecting diversity or perspectives, clearly articulating our collective messages and being transparent about the limitations of their reach. They will openly share information and opportunities with the VCSE sector.
- We will work collectively to take a strategic lead and define our priorities based on local intelligence
- We will collaborate within the VCSE sector to work strategically with the ICS; this includes building relationships and cohesion within the sector, exploring opportunities for joint working and sharing information and resources.
- We will participate in service design, strategic planning and prioritisation. With an ambition of undertaking commissioned work to support the ICS/Place to involve local communities and communities of interest in the planning and design of services.
- We will create volunteering opportunities, strengthening community cohesion and resilience by enabling local people to contribute their skills and time.

ICS Partners will: *(as already agreed for Worcestershire partners also working in Herefordshire)*

- Commit to engaging with the Alliance through: Worcestershire Executive Committee (Place Partnership Board), Worcestershire Health and Wellbeing Board and the Herefordshire and Worcestershire Integrated Care Partnership Assembly as appropriate

- Commit to co-production in service design with the VCSE
- Share population information with the VCSE to aid with developing VCSE planning and funding bids
- Use the Alliance to seek representatives for the VCSE in the health & care programmes. This ensures that VCSE representation is effective and that is not just down to an individual or organisation. It requires communication channels and active participation of a wider group, feeding in and holding their representative to account.
- Work with the VCSE as equal partners.

Place behaviours *(note: updates version to be included)*

As partners in Worcestershire 'Place', the VCSE Alliance agrees to work to create a culture which is in line with the place behaviours set out in the 'Worcestershire Plan' (currently under development):

- Proportionate universalism –to deliver a reduction in inequalities we may need to focus our effort / investment on discrete communities within Worcestershire
- Shared culture and agreed behaviour.
- Input from partners is equally valued / feel their contributions are recognised and valued
- Evidence based decision making
- Support and nurture partners
- Inclusive of broadest range of partners – care homes, domiciliary care services, other statutory partners, broader education?
- Data / driven Digital first
- Collaborative working
- Participating in the Place Development Programme – culture and behaviour and embedding this

How we will achieve this over the next 12 months

- A model for VCSE engagement and representation will be designed and developed and we commit to co-designing a policy of reimbursement that will support this model. This will include a definition of what being an 'equal partner' means in practice.
- It is critical that large numbers of staff and volunteers, at all levels of accountability and responsibility, understand our commitments, what that means for them and why it is important we are working in this way. We also intend to gather further ideas and hear from more people to inform our first review of this MoU. To achieve this spread and scale of knowledge exchange we will organise engagement and learning opportunities for the breadth of the sector. This will begin with senior leaders and continue as a rolling programme of co-learning and collaborative support activities.
- We will create new opportunities for cross sector thinking, interactions and joint delivery. This includes opening up existing training opportunities for both

sectors where possible. This should help build relationships, as well as share perspectives that will include opportunities for shared decision making.

- As the board and governance structures of both the VCSE and ICS at Place are developed and embedded over the coming 12 months, we will work together to identify the most effective ways to provide strategic influence.
- Joint working to ensure that the VCSE sector is actively supporting the ICS and to support statutory. Training that will assist in improving quality service deliver

Direction of Travel

It is important we hold a strategic and longer-term direction of travel based on the values and commitments specified in this agreement. We will review this MoU in 12 months' time, utilising case studies of where it has and has not been a success. It will then be reviewed on a regular basis to ensure it is still relevant for both sectors and supports partnership working and for the VCSE, has capacity to move beyond health and wellbeing.

Possible Future Work

- A co-developed/designed social value policy will be with a framework for how to effectively implement this across Place
- Working with system partners, a review of commissioning processes to ensure we are utilising the most appropriate and effective practices at our disposal.

Interdependencies

It is important to note this MoU does not stand alone and has interdependencies with other work being carried out, such as:

- The ICS/Place strategy on working with people and communities
- Terms of Reference for individual Boards within the ICS and VCSE sector