

Cabinet – 15 December 2021

Walsall Together Alliance Agreement

Portfolio: Councillor Keir Pedley

Related portfolios:

Service: Walsall Together

Wards: All

Key decision: Yes

Forward plan: Yes

1. Aim

- 1.1 The Walsall Together partners agreed to form an alliance with a primary aim to improve the health and wellbeing outcomes for the population of Walsall. The partners recognise that the successful implementation of the alliance requires strong relationships and the creation of an environment of trust, collaboration and innovation. The Alliance Agreement, approved by Cabinet in 2019, provides a formal mechanism in which the partners will work together to deliver the agreed governance arrangements and objectives of Walsall Together through a set of behaviours that are described in the agreement.
- 1.2 The existing Alliance Agreement has expired and this report makes recommendations to seek to grant an extension to the Alliance Agreement to 31st March 2022 to allow sufficient time to update the agreement in line with National guidelines, when they are issued.

2. Summary

- 2.1. The Walsall Together partnership seeks to improve health and wellbeing outcomes for the citizens of Walsall through the integration of health and care and support services. The Alliance Agreement is not a legal document, though it provides a formal mechanism in which the partners work together to deliver the objectives of the partnership.
- 2.2. A health and social care White Paper was published in February 2021, which sets out proposals for new legislation pertaining to the formal establishment of Integrated Care Systems (Black Country) and Place-Based Partnerships. Under these new arrangements, Walsall Together will be the place-based partnership for Walsall.

- 2.3. Further national guidance is awaited in relation to the proposed legislation. The extension to the Alliance Agreement is sought to allow sufficient time for the partnership to review, interpret and respond to the guidance as it becomes available. An updated Alliance Agreement will then be drafted to reflect the new context and will be presented across all Partner Governing Bodies for review.

3. Recommendations

That Cabinet grants an extension to the Walsall Together Alliance Agreement to 31st March 2022 and provides delegated authority to the Executive Director for Adult Social Care in consultation with the Portfolio Holder for Adult Social Care to extend this for a further 6 months, should this be required.

4. Report detail - know

Context

- 4.1. The Walsall Together Business Case was approved by Cabinet in February 2019 and the structure of the partnership was virtually integrated under an Alliance Agreement. Contractual accountability lines have since continued to be bilateral between commissioners and providers as in 2018/19. As per the business case, the commercial model from April 2019 to March 2021 was intended as a transitional period to allow for the development of the necessary governance, payment and contracting environment in which an integrated care operating model can be designed and implemented.
- 4.2. A health and care White Paper, *Integration and innovation: working together to improve health and social care for all*, was published in February 2021. It sets out legislative proposals for a Health and Care Bill, expected to come into force in April 2022. It proposes the establishment of Integrated Care Systems (ICSs), which will complement and reinvigorate place-based structures for integration between the NHS and social care.

Council Corporate Plan priorities

- 4.3. This proposal links to the Council's corporate priority 'People have increased independences, improved health and can positively contribute to their communities.'
- 4.4. The principles and actions contained within this report are in full accordance with the Marmot objective enabling all people to maximise their capabilities and have control over their lives.

Risk management

- 4.5. The White Paper reinforces the commitments made in the Walsall Together business case and aims to support progression of the integration agenda "further and faster in the interests of improving care" (King's Fund 2021) by removing the focus on competition and moving towards a new model of collaboration, partnership and integration. It does, however, also propose to give additional

powers to the Secretary of State for Health, and the extent to which implementation is being left to local determination could present a risk to the stability of existing place-based partnerships if, for example, the ICS seeks to harmonise what is delegated to each of the 5 places within the Black Country.

- 4.6. In the Black Country, the Walsall Together partnership is regarded as being relatively advanced in respect of the establishment of its partnership arrangements, associated governance and the scope and level of integration achieved to date. The partnership has been and continues to be in a strong position to influence the governance arrangements between system and place as they are finalised over the remainder of 2021/22.
- 4.7. There are options available to strengthen the governance arrangements within the Alliance Agreement. The partnership has commenced initial discussions with the Health & Wellbeing Board to explore how this relationship can be strengthened.
- 4.8. Further national guidance is awaited in relation to the proposed legislation for Integrated Care Systems and Place-Based Partnerships. A Walsall Together Partnership Board development session will be scheduled over the coming months, to allow for adequate review, interpretation and local decision-making in response to the guidance as it becomes available. An updated Alliance Agreement will then be drafted to reflect the new context and will be presented across all Partner Governing Bodies for review.

Financial implications

- 4.9. There are no financial implications as a result of this proposed extension to the current arrangements.

Legal implications

- 4.10. There are no legal implications. The Alliance Agreement is explicit in asserting that all partners are sovereign organisations. The Alliance is not a legal entity and as such is unable to take decisions separately from or bind the partners.

Procurement Implications/Social Value

- 4.11. None

Property implications

- 4.12. None

Health and wellbeing implications

- 4.13. The Walsall Together Partnership has a primary aim to improve the health and wellbeing outcomes for the population of Walsall. The business case describes an operating model that will significantly transform the way in which we deliver health and care to our population, increasing focus on prevention and building resilience in our communities such that our citizens remain independent and require less support from services that don't deliver the best outcomes.

Staffing implications

- 4.14. None

Reducing Inequalities

- 4.15. The implications for reducing inequalities have been taken into account. Walsall is an outlier in respect of inequalities in life expectancy, infant mortality rates and the number of deaths from preventable disease, all of which are inextricably linked to the level of deprivation and child poverty in the area. The population is culturally diverse with 23.1% of residents from minority ethnic groups. COVID-19 has wreaked a disproportionate impact on ethnic minority communities (EMCs). Most of Walsall's EMCs live in some of our most economically deprived wards, therefore experiencing a double deficit. This exemplifies the need for our joined-up approach across services. Bringing together statutory organisations with housing associations and VCS partners can reach those that might otherwise avoid statutory services and further engage EMCs.

Climate Change

- 4.16. This is out of scope for the Walsall Together partnership.

Consultation

- 4.17. Not applicable

5. Decide

In light of continued publication of additional guidance on the establishment of place-based partnerships, within the context of the proposed legislation, the Walsall Together Partnership Board has resolved to seek an extension to the current Alliance Agreement to 31st March 2022.

6. Respond

- 6.1. The Walsall Together Partnership Board continues to review the national guidance available in regard to the establishment of ICSs and place-based partnerships, and has commenced the process of drafting an updated Alliance Agreement.
- 6.2. How we plan for local services and local people is inextricably linked to the Joint Strategic Needs Assessment and delivery of improved outcomes. The Walsall Together Partnership is exploring options to formalise its relationship with the Health and Wellbeing Board, utilising the strength of the local democracy to reinforce the primacy of place.
- 6.3. It is important that we are able to evidence how we are meeting the needs of our population, making the best use of resources available and essentially performing well in terms of progress towards improving outcomes. As such, the partnership will seek to be more explicit in in how we will hold each other to account for delivery against our Outcomes Framework, reflected in the roles and responsibilities of our

Board and sub-committees, and in how the citizen voice will feature as a golden thread throughout everything we do.

7. Review

- 7.1. The proposed legislation will come into effect on 1st April 2022 and, as such, the associated national guidance and decision-making arrangements at Black Country level will need to be confirmed in advance.
- 7.2. The Walsall Together partners have resolved to review the current Alliance Agreement and present an updated draft for consideration by partner governing bodies in advance of 1st April 2022.

Background papers

Walsall Together Alliance Agreement

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7 December 2021



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Portfolio holder
Adult Social Care

7 December 2020