

# GATESHEAD HEALTH AND AND WELLBEING BOARD

DATE: 8th September 2023

TITLE OF REPORT: People@theheart Partnership Agreement

# **Purpose of the Report**

To consider the report attached that was discussed by the People@the heart
 Programme Board at its last meeting on the 16<sup>th</sup> August and support the sign-up by
 partner organisations to the People@theheart Partnership Agreement.

# How does the report support Gateshead's Health & Wellbeing Strategy?

2. The report supports the policy objectives of Gateshead's Health and Wellbeing Strategy 'Good jobs, homes, health and friends' as the People@theheart programme focuses on partner organisations working differently together to ensure better outcomes for people with multiple and complex needs (MCN), many of whom experience significant health and wellbeing inequalities.

#### **Background**

3. The attached report sets out the background, purpose, objectives and guiding principles of the People@the heart programme.

# **Proposal**

4. It is proposed that Partner organisations sign up to the Partnership Agreement.

#### Recommendations

5. The Health and Wellbeing Board is asked to support the sign-up by partner organisations to the People@theheart Partnership Agreement attached.

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Contact: Alice Wiseman (0191 433 2777) AliceWiseman@Gateshead.Gov.UK



# **Report Cover Sheet**

# Agenda Item: 8

Report Title:	Partnership Agreement			
Name of Meeting:	People@the heart Programme Board			
Date of Meeting:	16th August 2023			
Author:	Suzanne Henderson			
Sponsor:	Kirsty Robertson			
Report presented by:	Suzanne Henderson			
Purpose of Report	Decision:	Discussion:	Assurance:	Information:
	The Partnership Agreement details the background, purpose and objectives of the People@the heart programme. It is not a legally binding document but gives reference to what we are trying to achieve as a system in collaboration. The agreement gives a document of services to sign up to demonstrate their commitment to working differently to provide outcomes for people with MCN. The document can be used to refer back to for any challenges or where clarity is required. There is a single page document to sit alongside the pledge to be displayed in service for all staff and service users to have sight. It has been circulated for feedback.			
Paper previously considered by:	June 2023 p	oartnership pledg	e for discussio	n
Key Points for consideration	<ul> <li>Service user champions</li> <li>Awareness of agreement front line</li> <li>Named person to sign on behalf of each organisation</li> <li>Next steps for any organisation not willing to sign</li> </ul>			
identify Risks / Issues	Not signing up to the agreement may cause concern around the commitment which in turn could be a risk to programme delivery			

Recommended actions for this meeting:	<ul> <li>Sign the agreement today or arrange time for SH to visit.</li> </ul>
	Identify a service champion
	<ul> <li>Display the single page document and agree who</li> </ul>
	the sign up will be communicated across the
	organisation.

# **DATED January 2023**

# PARTNERSHIP PLEDGE

between

# **THE BOROUGH COUNCIL OF GATESHEAD**

and

# **GATESHEAD NHS FOUNDATION TRUST**

and

GATESHEAD SERVICES INVOLVED WITH PEOPLE WITH MULTIPLE COMPLEX NEEDS

(To be updated on sign up)

This agreement is dated January 2023

#### **Parties**

- (1) THE BROOUGH COUNCIL OF GATESHEAD of Civic Centre, Regent Street, Gateshead NE8 1HH
- (2) GATESHEAD NHS FOUNDATION TRUST of Queen Elizabeth Hospital, Sheriff Hill, Gateshead, Tyne and Wear, NE9 6SX
- (3) Partnership agencies who deliver services across Gateshead for people with Multiple Complex Needs (MCN)

#### 1. Background

- 1.1 The Council and Gateshead Health Trust have agreed to work together on the programme detailed in ANNEX A People@the heart. The delivery of the programme will also be inclusive of all other partner agencies in Gateshead who offer services to people with multiple complex needs.
- 1.2 The original People@the heart report was written and published following commissioned research form Gateshead Council in 2019. The People@the heart programme is designed to implement the recommendations in the report in conjunction with other organisations
- 1.3 The overall aim is to bring system change for the better for people with multiple complex needs.
- 1.4 The parties wish to record the basis on which they will collaborate with each other on the programme. This Memorandum of Understanding (**MoU**) sets out:
  - (a) the key objectives of the Programme;
  - (b) the principles of collaboration;
  - (c) the governance structures the parties will put in place; and
  - (d) the respective roles and responsibilities the parties will have during the Programme.

## 2. Key objectives for the programme

2.1 The parties shall commit to achieving the key objectives set out in ANNEX A to this MoU

#### 3. Principles of collaboration

The parties agree to adopt the following principles when carrying out the Programme

- (a) Collaborate and co-operate. Establish and adhere to the governance structure set out in this MoU to ensure that activities are delivered and actions taken as required;
- (b) Be accountable. Take on, manage and account to each other for performance of the respective roles and responsibilities set out in this MoU;
- (c) Be open. Communicate openly about major concerns, issues or opportunities relating to the programme and its work streams
- (d) Record and update all necessary programme paperwork including actions and risk logs.
- (e) Learn, develop and seek to achieve full potential. Share information, experience, materials and skills to learn from each other and develop effective working practices, work collaboratively to identify solutions, eliminate duplication of effort, mitigate risk and reduce cost;
- (f) Adopt a positive outlook. Behave in a positive, proactive manner;
- (g) Act in a timely manner. Recognise the time-critical nature of the Programme and respond accordingly to requests for support;
- (h) Manage stakeholders effectively;
- (i) Deploy appropriate resources. Ensure sufficient and appropriately qualified resources are available and authorised to fulfil the responsibilities set out in this MoU.
- (j) Act in good faith to support achievement of the Key Objectives and compliance with these Principles.

# 4. Programme governance

#### 4.1 Overview

The governance structure defined below provides a structure for the development and delivery of the Programme.

# 4.2 Guiding principles

The following guiding principles are agreed. The Programmes governance will:

- (a) provide strategic oversight and direction
- (b) be based on clearly defined roles and responsibilities at organisation, group and, where necessary, individual level
- (c) align decision-making authority with the criticality of the decisions required
- (d) be aligned with Programme scope (and may therefore require changes over time)
- (e) leverage existing organisational, group and user interfaces

- (f) provide coherent, timely and efficient decision-making
- (g) correspond with the key features of the Programme governance arrangements set out in this MoU.

# 4.3 Programme Board

- (a) The programme Board will provide strategic oversight, management and direction at programme and work stream level. It will provide assurance to the parties that the Key Objectives are being met and that the Programme is performing within the boundaries set out in this MOU. The Board shall be managed in accordance with the terms of reference.
- (b) The programme Board consists of representatives from each of the parties. The Programme Board shall have responsibility for the creation and execution of the objectives and work streams, and therefore it can draw technical, commercial, legal and communications resources as appropriate into the Programme Board. The core Programme Board members are:

Alice Wiseman - Chair

Kirsty Roberton - Programme SRO

Suzanne Henderson - Programme Lead

Dr Jenny Wright - jennifer.wright10@nhs.net (Consultant Trust)

Dr Georgina Butler - georgina.butler2@nhs.net (Gateshead GP)

Steph Downey - StephDowney@Gateshead.Gov.UK (adult social care)

Mel Bramwell - melonybramwell@gateshead.gov.uk (adult services)

Rebecca Tait - Rebecca. Tait@cntw.nhs.uk (CNTW)

Teresa Graham - teresagraham@nhs.net (business partner Primary care)

Kevin Ashurst - kevin.ashurst@northumbria.police.uk (Police)

David Carruthers - <u>David.Carruthers@northumbria.police.uk</u> (Police)

Julia Sharp - <u>JuliaSharp@Gateshead.Gov.UK</u> (PHE lead)

Richard Scott - richard.scott7@nhs.net (safeguarding nurse)

Des Hunter - <u>desmondh174@gmail.com</u> (fulfilling Lives Expert By experience)

John Costello - JohnCostello@gateshead.gov.uk (Gateshead system)

Jo Dixon - <u>Joanne.Dixon@justice.gov.uk</u> (head of Gateshead Probation)

Kirsty Sprudd - Kirsty.sprudd@nhs.net (Gateshead system associate director and ICB

Sarah Beat - <u>Sarah.Beat@cgl.org.uk</u> (GRP Service Manager)

Simon Reay - simon.reay@nhs.net (Mental health services)

David Newell - david.newell2@nhs.net (Directorate Manager Mental health Services)

Caroline Wills - caroline.wills@cntw.nhs.uk (Associate Director Learning Disability and Autism)

Jackie Buston <u>Jackie.Butson@dwp.gov.uk</u> (DWP)

Vicky Sibson – vickysibson@gateshead.gov.uk (Housing manager)

Kevin Scarlett - KevinScarlett@Gateshead.Gov.UK (Gateshead Housing)

Neil Bouch - Neilbouch@Gateshead.gov.uk (Service Director Localities & Housing Options)

Sheena Ramsey - Sheena.Ramsay@newcastle.ac.uk (Professor Newcastle University)

Mark Smith - MarkASmith@Gateshead.Gov.UK (Gateshead Council Reform)

Angela weeks - angela.weeks2@nhs.net (nurse practitioner)

Paul Thompson - paul.thompson@twfire.gov.uk (Group Manager West twfire)

Chris Dawson - Chris.Dawson@neas.nhs.uk (Deputy Chief Operating Officer, NEAS)

Catherine Hardman - catherinehardman@gateshead.gov.uk (Adult Social Care))

Carrie Ingram - Carrie.Ingram@neas.nhs.uk (NEAS)

Dot Smith - dot.smith@recoveryconnections.org.uk (Recovery Connections)

Ellie Grice - ELEANOR.GRICE@DWP.GOV.UK (DWP)

Gayle Fidler - Gayle.Fidler@neas.nhs.uk (NEAS)

Joanne Pendleton - joannependleton@nhs.net (Gateshead Trust)

Ree Gray - Rebecca.Gray@northumbria.police.uk (Police)

Luke Elton <u>luke.elton@oasiscommunityhousing.org</u> (basis)

# 4.4 Reporting

Work stream and programme reporting shall be undertaken at two levels:

- (a) Programme Board: Minutes and actions will be recorded at each Board meeting. Any additional reporting requirement shall be at the discretion of the Programme. This will include the completion of action and risk logs.
- (b) **Work stream meeting**: Minutes and actions will be recorded and will feed into the wider Programme Board to give updates on each area of work
- **(c) Organisational:** the Board members shall be responsible for drafting reports into their respective organisations as required for review and dissemination

# 5. Roles and responsibilities

5.1 The parties shall undertake the following roles and responsibilities to deliver the Programme:

Activity	Responsibility
Information gathering for cohort of people mist using services	Suzanne Henderson
Sending information about people who have most used services	Named person in each organisation
Arrange papers and programme Board delivery	Suzanne Henderson
Support and agreement from services to work differently to bring system change	All services signed up to the service
Ensure overall compliance of the programme	Kirsty Roberton, Alice Wiseman
Monitoring of outcomes and change based on work streams and objectives set	Suzanne Henderson

- 5.2 The parties have developed a delivery plan for the Programme (detailed in ANNEX A) which identifies the following:
  - (a) the key milestones for the delivery of the Key Objectives;
  - (b) what employees (other than employees identified in this MoU) will be required to work on the programme;

All plans and work streams are to be agreed by the programme Board

#### 6. Escalation

- 6.1 If either party has any issues, concerns or complaints about the programme, or any matter in this MoU, that party shall notify the other arties shall then seek to resolve the issue by a process of consultation. If the issue cannot be resolved within a reasonable period of time, the matter shall be escalated to the Board, which shall decide on the appropriate course of action to take. If the matter cannot be resolved by the Programme Board within 30 days, the matter may be escalated to the appropriate officers within each party's organisational structure.
- 6.2 Any issues from any parties involved should initially be raised with the Programme Manager Suzanne Henderson. Escalation from this is to Senior Responsible Officer Kirsty Roberton, followed by Executive Sponsor Alice Wiseman.

#### 7. Term and termination

7.1 This MoU shall commence on the date agreed by parties involved with the programme and shall expire on either 1<sup>st</sup> August 2024 or at a later agreed date should there be any further extension of the Programme.

#### 8. Variation

This MoU, including the Annexes, may only be varied by written agreement of the programme Board.

#### 9. Charges and liabilities

- 9.1 Except as otherwise provided, the parties shall each bear their own costs and expenses incurred in complying with their obligations under this MoU.
- 9.2 Current funding has been agreed awarded. Any additional costs are to be agreed by the programme Board. .

#### 10. Status

- 10.1 This MoU is not intended to be legally binding, and no legal obligations or legal rights shall arise between the parties from this MoU. The parties enter into the MoU intending to honour all their obligations.
- 10.2 This MoU is designed to show commitment from parties involved, to detail the purpose of the programme and to support the delivery across all services and partnership agencies in Gateshead.

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The programme Board has been established to bring representation from all relevant parties across Gateshead, who have the ability to drive change within their own

organisation and disseminate the work completed by People@the heart.

10.3

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#### ANNEX A People@the heart Programme

#### **Programme overview**

The Programme was agreed as a result of some multi agency research completed that looked into the services for people with multiple complex needs. This research produced a report that gave a series of recommendations on how the system could be changed and improved to better meet the needs of people with MCN.

From discussions between GHFT and Gateshead Council,. It was agreed that a post would be funded to implement these recommendations. The funding was provided through the local authority and hosted through GHFT.

The programme went live in August 2022 and has been funded for 2 years.

People@the heart is not a service, it does not directly work with people. It is a programme that is designed to work with existing services to look at improved and more effective ways of working, to bring services together and to implement the findings of the report.

There is a detailed programme plan that defines what needs to be achieved and a series of work streams that feed into the higher level plan. The work streams will be done in collaboration with all services involved.

#### The Key Objectives

The aim of the programme is to improve services for people with MCN. It is not deigned to be a project in its own right that directly works with people, but aims to bring services together to bring a collaborative approach. The overall vision is to have a whole system approach where services are connected and we have a "right door first time" approach. The programme will drive a new operating model in Gateshead where working in collaboration and removing system barriers becomes business as usual. We become "One Gateshead"

In order to achieve this overall vision, a series of separate work streams will be developed and completed to address the specific objectives identified and agree by the programme Board. These work streams will then feed into the wider overall vision.

Having real commitment from all services involved and the willingness to work differently will be key to the effectiveness and outcomes for this programme.

In addition to improving access to services for people with MCN, the programme will also look at the cost implications and how working differently can reduce system waste.

Workforce development and retention will also form part of the performance objectives, to support the staff to feel more valued and empowered to do their jobs.

Monitoring and planning will be done through a series of plans and that will be agreed by the Board. Risks to programme will also be recorded along with actions from key meetings.

People@the heart is funding for an initial 2 year period. After this time, a review will be completed on the effectiveness.

Proposed potential work streams are;

Improving DNA rates to outpatient and community appointments

Operational meeting for cohort identified for those most using emergency services

Bright spots meetings for staff to share good practice and outcomes

Professional peer training & support

Partnership pledge sign up

System connector role development

Cost saving and efficiencies - how much is it costing us now

Community involvement

Reduction is use of inappropriate emergency services

Place based working

Culture change in Gateshead, addressing professional prejudice

Hospital to rehab transitions

Prison transitional work

Redrock - new operating model for immediate response as preventative approach to DRD & near misses

Glossary of terms - new language

Data Sharing Agreement (DSA)

Housing access - information sharing, vetting's, barriers

The 4 initial priority work streams are:

DNA reduction across the system

Transition from hospital to community for those with drug and alcohol issues

Transition from Prions to community for people with drug and alcohol issues

Use of emergency services

#### The existing position and developments already made

Since the initial report was completed, there have already been some developments in terms of new services and projects being developed. It is important to have a flexible approach to the programme that can meet the changing needs and demands of services, funding and people. It is clear that there is already a lot of support available and excellent services in operation. What we need to develop further, is the joining together of these services and points of contact and navigation to remove the complexities and appropriate challenge to remove system barriers.

The system is ever changing, with new services and funding becoming available and others ending. Keeping a full up to date knowledge can be complex. Joining the system together can support this process.

It is important to map out current availability and discuss jointly the most appropriate routes of support where services complement each other and not become precious or anxious about others doing similar roles.

A phased approach to the programme has been agreed with clear definitions on what needs to be achieved at each stage.

# Diagnostics 4 months

Design Phase

4 months

- Information gathering
- •Relationship building
- Meetings with stakeholders
- Meetings with partner agencies
- Understanding the report and its recommendations
- •Formulation of Programme Board and Governance
- •Report on key findings from stakeholder meetings
- •Identify key workstreams and identify project plans
- •What does the system need to look like and agree objectives
- Programme plan
- Risks identified
- Formulation and agreements of Board and Governance
- •Links with other work streams
- Scoping
- •What does good look like?
- Data collection

Implementation month 8 into Y

- ·Board fully established
- Partnership pledge and objectives agreed
- •Sub groups in place
- Monitoting of outcomes
- •New approaches being trialed and evaluated
- Data collection

Review month 21-

24

- Evaluation of work completed against recommendations
- •Data Collection
- •What has worked?
- Work still to be achieveded
- •Exit planning and transitions to next phase

#### **Programme evaluation**

The programme Board will oversee the effeteness of the delivery and identifiable measurable objectives through the phases. The Programme manager will be responsible for initiating the Board meetings, discussions and areas of development. The SRO and Executive Sponsor also support the overall programme delivery.

The Board and those involved with the work streams will feedback and record outcomes throughout. These work streams will feed into the wider overall objectives.

The Trust, Council and partnership services will support the project evaluation process

Programme Board terms of Reference have been agreed.

# Meetings are to be;

- (i) Bi-monthly
- (ii) Attended named individuals from each of the partner organisations.
- (iii) Attended face to face where possible with Teams as an option. Meeting rooms will allow hybrid working
- (iv) Held with agendas and papers to be sent in advance of the meeting.

# **Partnership Pledge**



# People@the Heart

(Name of Service)

This is a commitment by the above service to work together with People@the Heart. This means, as a system, we want to work together to make things better for everybody who live and work in Gateshead. We want to be One Gateshead.

# What does this mean for people?

- Offer of support no matter which service you go to right door every time
- Appointments to be offered when you can attend
- Flexibility on appointments
- Support that meets your needs
- Support on what matters to you
- People working together with your needs at the heart
- Sharing information so you don't have to tell your story over and over again
- Removal of barriers that have stopped you getting support before

## What does this mean for workers?

- A commitment to work differently to bring better outcomes for people
- A commitment to empower staff to do their job
- A place where staff and services can be heard
- Opportunities for peer training, support and development
- Opportunities to share good practice
- Feeling part of a wider system
- A wider work force that work better together