



**Integrated  
Care System**  
Nottingham & Nottinghamshire



**Nottingham  
City Council**



**Nottinghamshire  
County Council**

**NHS**

# Nottingham and Nottinghamshire Integrated Care System



# Partnership Agreement

## **1. Introduction**

We, the members of the Nottingham and Nottinghamshire Integrated Care System (ICS) Board, have agreed to establish a 'Partnership Agreement' to demonstrate our commitment to work effectively together for the benefit of all our communities and citizens.

The Agreement has been produced with high expectations of the benefits of partnership working but also with pragmatism and at pace. The Agreement has been co-produced for ICS Board members with over 200 people including local service users, members of the public, health and care professionals, partner organisations including in the community and voluntary sector, ICPs and PCNs.

This Agreement confirms our shared purpose together with some principles and ways of working that we have all agreed to sign up to. It then goes beyond principles to confirm a shared programme of work that is dependent on their practical application. The Agreement is about action and us living the principles rather than simply espousing them.

There is an opportunity and appetite to further develop thinking and establish a similar Collaborative Agreement with wider key stakeholders.

## **2. Shared Purpose**

The Agreement has been developed at a time when the full impact of Covid-19, on the health and wellbeing of citizens, is yet to be fully understood. However, it is clear that there has never been more of a need for an excellent health and care system working with, and for, the benefit of local people. This includes everyone across the population and placing particular importance on addressing the impact of inequalities on the lives of Nottingham and Nottinghamshire residents, enabling services to work for everyone – specifically, children and young people and adults across diverse communities, recognising the individual and specific needs of these groups. We will work with and for local people making sure to work with key representative community and voluntary sector organisations which understand the grass roots health and wellbeing needs and support needs of our communities.

We do not underestimate the challenges ahead as our NHS and social care system looks to recover and reset from the global pandemic but through this Agreement we commit to work together with the shared purpose of:

*“Every citizen enjoying their best possible health and wellbeing”*

## **3. The Role of the ICS**

In supporting, being compassionate and caring for local people, the role of the ICS is to enable health and care professionals to work together across organisational boundaries to maximise the use of our energies and resources. As big organisations in the Nottingham and Nottinghamshire community we have an ambition to go further

and influence national policy and other systems. Ways of working are being explored to make best use of opportunities in a socially and environmentally responsible way to improve the health and wellbeing of our citizens and staff.

The ICS comprises:

- 20 Primary Care Networks (PCNs) bringing health and care professionals together working with, and for, people at a neighbourhood level.
- Three Integrated Care Partnerships (ICPs) bringing together groups of PCNs to work collectively together at a place level in Nottingham City, Mid Nottinghamshire and South Nottinghamshire.

We commit to enabling our health and care professionals - working at neighbourhood, place and whole system level - to seek out and implement the types of change that will deliver enduring improvement in population health and wellbeing. We will do this by providing senior leadership, creating the conditions for success and ensuring follow through on our collective responsibilities. Key to this will be building on the strengths and assets in our local communities.

We have developed an ICS Outcomes Framework with the purpose of providing a clear view of our collective success. We agree to this becoming a live and populated document enabling us to measure progress towards our shared goals.

#### 4. Our Ways of Working

We have agreed three main principles, focused on what really matters, that will guide our ways of working together:

- We will work with, and put the needs of, our **citizens** at the heart of the ICS;
- We will be **ambitious** for the health and wellbeing of our local population and we will prioritise resources to where they have the greatest impact on health inequalities;
- We will prioritise making a positive local economic impact through our procurement and contracting;
- We will work as a system to be environmentally responsible, working collectively to improve air quality and to make healthy and sustainable travel choices easier;
- We will work to the principle of **system** by default, moving from operational silos to a system wide perspective.

These principles will be underpinned by the following core values:

- We will be **open** and **honest** with each other;
- We will be **respectful** in working together;
- We will be **accountable**, doing what we say we will do and following through on agreed actions.

## 5. The Collective Work Programme

The programme of work to which our Agreement applies encompasses four main strands:

- i. The development and on-going refresh of a five year strategy for the health and care system in Nottingham and Nottinghamshire. This strategy will be aligned to the local Health and Wellbeing strategies and Joint Strategic Needs Assessments.
- ii. The collective management of health and care service performance.
- iii. The delivery of a programme of health and care service transformation.
- iv. The development and maturity of the local Integrated Care System.

We will work with and involve citizens at every step of the way. We will also engage with our professionals to ensure joint ownership, and coherence of approach, between place, neighbourhood and the whole system working.

## 6. Keeping the Agreement Alive

For the Agreement to be a living force we are committed to providing a high degree of support for, and a high degree of challenge to, each other in upholding the agreed principles and ways of working.

This Agreement does not alter the statutory responsibilities of individual partner organisations. In addition, we recognise the right and need for individual organisations, PCNs and ICPs to pursue their own objectives along-side our whole-system ICS objectives, but these should be complimentary and we acknowledge that more will be achieved by working together. Moreover, we have agreed that efforts will be made to minimise the risks of negative unintended consequences from this for other partners, across the system, and to avoid any major “surprises”.

We all commit as signatories, to considering health inequalities and the contribution we make to wider determinants of health and wellbeing across our footprint and in all aspects of our services.

This Partnership Agreement will be governed by our Nottingham and Nottinghamshire ICS Board. The extent to which each of us is abiding by the Agreement will be assessed regularly, including at the end of each ICS Board meeting. We will also welcome external scrutiny as part of our commitment to living this Agreement.

## 7. Signing Up

We have agreed a process whereby this Agreement is signed up to by members of the ICS Board in agreement with their own organisational / partnership / network governing bodies or equivalent.

Signing the Agreement is agreed to signify the following:

- Agreement to the shared purpose outlined in section 2;
- Support for the role of the ICS as outlined in section 3;
- Commitment to the principles and values for partnership working confirmed in section 4;
- Support for the collective work programme detailed in section 5;
- Endorsement for the Agreement to be a living force.

## Signatures to the Partnership Agreement

ICS Board Member	Signature
Richard Henderson, Chief Executive East Midlands Ambulance Trust	
Amanda Sullivan, Accountable Officer NHS Nottingham and Nottinghamshire Clinical Commissioning Group / ICS Interim Executive Lead	
Jon Towler, Non-Executive Director, NHS Nottingham and Nottinghamshire Clinical Commissioning Group	
Michael Williams, Chair Nottingham CityCare Partnership CIC	
Louise Bainbridge, Chief Executive Nottingham CityCare Partnership CIC	
Thilan Bartholomeuz, Clinical Lead Mid Nottinghamshire Integrated Care Partnership	
Councillor Adele Williams, Nottingham City Council	
Mel Barrett, Chief Executive Nottingham City Council	
Hugh Porter, Interim Executive Lead, Nottingham City Integrated Care Partnership	
Alex Ball, Director of Communications and Engagement Nottingham and Nottinghamshire Clinical Commissioning Group and Integrated Care System	
Kathy McLean, Independent Chair Nottingham and Nottinghamshire Integrated Care System	
Nicole Atkinson, Clinical Lead Nottingham and Nottinghamshire Integrated Care System and South Nottinghamshire Integrated Care Partnership	
Stuart Poyner, Chief Finance Officer Nottingham and Nottinghamshire Integrated Care System	
Rosa Waddingham, Chief Nurse Nottingham and Nottinghamshire Clinical Commissioning Group and Integrated Care System	
Melanie Brooks, Corporate Director Adult Social Care and Health Nottinghamshire County Council	
Councillor Dr John Doddy, Nottinghamshire County Council	
Councillor Boyd Elliott, Nottinghamshire County Council	
Fran Steele, Director of Strategic Transformation, NHS England / NHS Improvement	
Paul Devlin, Chair Nottinghamshire Healthcare NHS Foundation Trust	
John Brewin, Chief Executive Nottinghamshire Healthcare NHS Foundation Trust / Executive Lead South Nottinghamshire Integrated Care Partnership	

Eric Morton, Chair, Nottingham University Hospitals NHS Trust	
Tracy Taylor, Chief Executive Nottingham University Hospitals NHS Trust	
Claire Ward, Interim Chair, Sherwood Forest NHS Foundation Trust	
Richard Mitchell, Chief Executive Sherwood Forest NHS Foundation Trust / Executive Lead Mid Nottinghamshire Integrated Care Partnership	
Tim Heywood, Primary Care Network Clinical Director representing South Nottinghamshire Primary Care Networks	
Gavin Lunn, Primary Care Network Clinical Director representing Mid Nottinghamshire Primary Care Networks	
Mike Crowe, Primary Care Network Director representing Nottingham City Primary Care Networks	