

Annual Delivery Plan - Summary Document (note detailed workplans and delivery milestones sit underneath this summary) includes summary of Place plans.					
Service Programme	Focus Area (* and bold indicates links through to NHS Operational planning Metrics)	Delivery By	Primary (BAF) risk mitigation **(descriptor below table)	Reporting route	Executive/Board Lead
<b>How we work as partners for the benefit of our population</b>	Delivery of actions around communications and engagement and compliance with the guidance on working with people and communities for example development of the Citizens panel and partnerships work with the VCFSE sector.	Mar-24 or earlier	BAF-P1	Transformation Committee	Clare Watson
	Delivery our Equality Diversity & Inclusion (EDI) obligations including development of a system wide EDI framework and strategy, in line with national, regional and local policy. Embedding EDI/implementing recommendation 2 of the Messenger Review	Mar-24 or earlier	BAF-P1	Q&P Committee	Clare Watson /Chris Samosa
	Board/Exec/Senior Leadership teams will develop their EDI capacity in order to make decisions through an EDI Lens and effectively influence the system.	Mar-24 or earlier	BAF-P1		
	Our Green Plan - Continue to deliver against Green Plan targets with a focus on systemwide initiatives to drive a joined-up approach to delivery	March -24 Net Zero by 2040	BAF-P10	Transformation Committee	Clare Watson
	<b>Deliver a programme of work to support wider social and economic development inc. Social Value/Anchor Institutions/regeneration, planning and including work to support the levelling up agenda.</b>	Mar-24	BAF-P1/P10	HCP	Clare Watson
	Delivery plans to ensure the Safeguarding our population with a focus on Safe at Home, Safe in our Communities and Safe Safeguarding Systems across C&M	TBD	BAF-P4	Q&P Committee	Chris Douglas
	<b>Develop an action plan to address Equality Human Rights Commission priorities to steps are being taken to tackle the inappropriate detention of people with a learning disability and autism and also at action to tackle disproportionate rates of detention of ethnic minority people under the Mental Health Act 1983'. Will need senior SRO / Feb. 2024</b>	Mar-24	BAF-P1	Q&P Committee	Clare Watson /Chris Samosa

<b>Population Health</b>	CM Population Health Board provides system leadership to support Place, Partners and Programmes to drive improvements in population health outcomes and reduce inequalities	<b>New programme established by March 2024, Ongoing delivery to 2028</b>	<b>BAF-P1</b>	<b>Transformation Committee (Population Health Board)</b>  <b>HCP (ATF Board)</b>	<b>Clare Watson / Prof Ian Ashworth</b>
	Social determinants of health: Continue to deliver the 5 year <b>All Together Fairer</b> (Marmot) Programme with a focus on development of a Children and Young People's Health Equity Framework, Supporting Anchor and Social Value Organisations, Improved utility of the Beacon indicators and delivery of All Together Inspired, a development programme on the Social Determinants of Health for system leaders.	<b>2028 (March '25 for CYP Health Equity Framework and dynamic measurement tool)</b>	<b>BAF-P1</b>		
	Establish a C&M <b>Prevention Framework and network</b> to strengthen coordinated and collaborative system-wide action on health, wellbeing and healthy behaviours (including smoking, alcohol, overweight & obesity, physical activity, mental wellbeing and MECC).	<b>Framework established by March 2024 and ongoing to 2028</b>	<b>BAF-P1</b>		
	<b>Reduce harm from alcohol</b> through strengthened integration of alcohol care (PROACT programme), development of an Alcohol CIPHA dashboard, digital Identification and Brief Advice (IBA), expansion of early detection and outreach projects, Blue Lights pilots to support those with complex lives, advocacy and inpatient detoxification.	<b>Reduced hospital admissions for alcohol-related conditions by 2028</b>	<b>BAF-P1</b>		

	Develop a whole-system <b>C&amp;M 'Smoke Free' strategy</b> , including but not limited to improved delivery of the NHS Treating Tobacco Dependency Programme, to strengthen delivery against the Smoke-free 2030 ambition.	<b>Strategy by March 2024 Improved TDD delivery March 2024 Ambition: Smokefree (&lt;5%) by 2030</b>	<b>BAF-P1</b>		
	Drive a whole-system approach to increase <b>physical activity</b> , with a focus on those facing the greatest health inequalities	<b>150,000 inactive people more physically active by 2026</b>	<b>BAF-P1</b>		
	<b>Establish C&amp;M oversight and accountability for Core20PLUS5</b> (adult and Children and Young People) and the <b>Healthcare Inequalities Improvement (HIIP)</b> programme.	<b>Mar-24</b>	<b>BAF-P1</b>		
	Screening Vaccinations and Immunisations: C&M system roles and responsibilities regarding Section 7a oversight and assurance updated in line with NHSE restructure and ICB requirements.	<b>TBC</b>	<b>BAF-P1</b>		
	System <b>strategic intelligence functionality &amp; capacity</b> aligned to drive and monitor population health management at Place and across programmes.	<b>Mar-24</b>	<b>BAF-P1</b>		
	Cross-cutting enablers support CM population health priorities, including communications, workforce development and research and development.	<b>Mar-24</b>	<b>BAF-P9</b>		
<b>Children &amp; Young People (CYP)</b>	Emotional Wellbeing and Mental Health - reducing MH admissions, improving access and equity of services, reduction in delayed discharges and development of a single Digital point of access.	<b>Mar-25</b>	<b>BAF-P2/P4/P5</b>	<b>CYP Board (Beyond Programme Board)</b>	<b>Chris Douglas</b>

	Healthy Weight and Obesity - Flattening the curve on obesity rates for CYP at both Reception and Year 6 assessments and increasing physical activity.	<b>March-25 March-28</b>	<b>BAF-P1</b>		
	Learning Difficulties, Disabilities and Autism: (LDD&A) - Increased number of neurodevelopmental & Autism CYP Referrals where reasonable adjustments are made with a care plan and or intervention (2023/24)	<b>Mar-24</b>	<b>BAF-P1/P4</b>		
	Epilepsy - Delivery of support plans including alignment with line with Core20PLUS5	<b>Mar-24</b>	<b>BAF-P1/P4</b>		
	Diabetes - Delivery of support plans including alignment with line with Core20PLUS5	<b>Mar-24</b>	<b>BAF-P1/P4</b>		
	Respiratory - Delivery of support plans including alignment with line with Core20PLUS5	<b>March 2024 Mar-25</b>	<b>BAF-P1/P4</b>		
	Oral Health - Delivery of support plans including alignment with line with Core20PLUS5	<b>Mar-25</b>	<b>BAF-P1/P4</b>		
	Implement the NHS Universal Family (Care Leaver Covenant) Programme so that care experienced young people have opportunities to be supported into roles within the NHS by October 2023.	<b>Oct-23</b>	<b>BAF-P1/P4</b>		
<b>Women's Health &amp; Maternity</b>	<b>Reduce stillbirth, neonatal mortality, maternal mortality and serious intrapartum brain injury. Implement actions from the 3-year Delivery plan for Maternity and Neonatal services including the actions from the Ockenden report, personalised care plans for 100% of women, grow and retain the workforce and tackle inequalities*</b>	<b>Mar-24</b>	<b>BA - P1/P4/P9</b>	<b>Transformation Committee (Programme Board via DTACAB)</b>	<b>Chris Douglas</b>
	Embedding measures to improve health and reduce inequalities in 2023/24	<b>Mar-24</b>	<b>BAF-P1</b>		
	Work to support Special interest groups including menopause, Paediatric and Adolescent Gynaecology and Endometriosis.	<b>TBD</b>	<b>BAF-P4</b>		
	Continued development of a Women's Health Strategy	<b>First Draft May-23</b>	<b>Multiple</b>		

	<b>Workforce - development work including the development of a gap analysis, development of a Gynae Nurse Network and sharing good practice. *</b>	TBD	BAF-P4/P9		
	Women's health engagement - development of a Women's Voices Network, Women's Health App and Women's Health Champions.	TBD	BAF-P1		
	Programmed work to support standardisation including a Referral triage SOP, Primary and Secondary care interface policy, mutual aid and joint procurement	TBD	BAF-P4/P6		
	Improving access including estates work and the development of Women's Health Hubs	TBD	BAF - P1		
<b>Diabetes</b>	Development work to support the 8- Care processes (8CP) / Treatment Targets.	Mar-24	BAF-P4	<b>Transformation Committee (Diabetes Strategic Oversight Group DTACAB)</b>	<b>Fiona Lemmens</b>
	NHS National Diabetes Prevention Programme (NDPP) decrease variation in uptake across the ICB and we will also deliver a robust communications plan.	Ongoing	BAF-P4		
	Development and delivery of a Structured Education (SE)	Mar-24	BAF - P1		
	Diabetes Type 1 Disordered Eating Programme (T1DE) - established T1DE programme providing this joint clinical service as one of 8 centres nationally.	Ongoing	BAF - P1		
	Continuous Glucose Monitoring (CGM) and Flash glucose monitoring with a focus on reducing the variation across the ICB and improve the uptake of this technology.	Ongoing	BAF-P2/P4		
	Development of Multi-Disciplinary Footcare Team provision (MDFT) to reduce major and minor amputation rates.	Ongoing	BAF-P4		
	DISN provision ensure sufficient Diabetes Inpatient Specialist Nurse (DISN) provision to meet the advised national ratio of 1 nurse for every 250 inpatients in the hospital settings across the ICB	Ongoing	BAF-P9		
	Continued work to reduce Health Inequalities	Ongoing	BAF - P1		
<b>Diagnostics</b>	<b>Increase the percentages of patients that receive a diagnostic test within six weeks in line with March 2025 ambition of 95%. *</b>	Mar-25	BAF-P3/P4	<b>Q&amp;P Committee (CMAST)</b>	<b>CMAST (Ann Marr)</b>

	Support plans to address elective and cancer backlogs and the diagnostic waiting time ambition. *		BAF-P3/P4		
	<b>Continued work to support expanding CDC's</b>		BAF-P3/P4		
	Network productivity - Deliver a minimum 10% improvement in pathology and imaging networks productivity by 2024/25 through digital diagnostics investments		BAF-P3/P4		
<b>Personalised Care</b>	Embedding personalised care approaches in our Virtual Ward services	<b>March-24 To March-28</b>	BAF-P4	<b>Q&amp;P Committee</b>	<b>Clare Watson</b>
	Access & use of Personal Health Budgets (PHBs) delivery of the 5-year plan is to achieve an increase in uptake of PHB's so that 12000 PHB's are in place by 27/28.		BAF-P4		
	Service review and redesign plans implemented		BAF-P4		
	Peer support - work to Increase confidence in personalisation conversations to achieve a PHB offer and thereby uptake (March 2024)		BAF-P4		
	Consistency of access - Improve efficiency and effectiveness of facilitative third party PHB providers across Cheshire and Merseyside through consolidation of commissioning arrangements (March 2026)		BAF-P4		
	Innovative solutions - Development of shared workplan for innovative care solutions with VCFSE		BAF-P4		
<b>Primary Care</b>	Delivery of the ICBs plan response to address the national Delivery plan for recovering access to primary care and deliver overall programme of work related to the national policy	<b>Plan to ICB Board October 2023</b>	BAF-P3/P4/P5/P6/P9	<b>System Primary Care Committee</b>	<b>Clare Watson</b>
		<b>Other detailed actions as per programme plan</b>			
	Post Pandemic Restoration /and increase of available General Practice appointments in line with the NHS planning guidance	<b>Mar-24</b>	BAF-P3/P4/P5/P6		

	Improving access to Dental Services including post pandemic restoration/increase in number of UDAs in line with the NHS planning guidance and delivery of our local Dental Recovery Plan and ambitions	Mar-24	BAF - P1/P4/P5/P6		
	Community Pharmacy Consultation Service - Increased participation in the Community Pharmacist Consultation Service in line with the NHS Planning Guidance	Mar-24	BAF-P3/P5		
<b>Cardiovascular</b>	<b>Delivery Programme around CVD Prevention including work address health inequalities and deliver on the Core20PLUS5 approach. *</b>	TBD	BAF-P1	<b>Transformation Committee (Cardiac Network Board via DTACIB)</b>	<b>Fiona Lemmens</b>
	Focused plans to support deliver against National Pathways to ensure better quality and safety of care across the pathway leading to better outcomes	TBD	BAF-P4		
	Work with NHS England Specialised Services to redesign Renal pathway	Mar-24	BAF-P4		
	Expanding access for Familial Hypercholesterolaemia (FH); enabling us to diagnose and treat those at genetic risk of sudden cardiac death	To Board July -23	BAF-P4		
<b>Community Health Services</b>	<b>Recovery plans to meet or exceed the 70% 2-hour Urgent Community Response (UCR) increasing utilisation of UCR by 20%, develop virtual wards and ensure utilisation*</b>	Mar-24	BAF-P3/P4/P5	<b>MHLDC Q&amp;P Committee</b>	<b>MHLDC (Joe Rafferty)</b>
	Work on Community Waiting times to eliminate waits of over 52 weeks for community care and reduce patients waiting over 18 weeks for a 1st appointment in a community clinic by 25%*	Mar-24	BAF-P3/P4/P5		
	Reduce unnecessary GP appointments and improve patient experience by streamlining direct access and setting up local pathways for direct referrals	Mar-24	BAF-P2/P3/P4/P5		
<b>Elective Recovery</b>	<b>Delivery the Elective Recovery plan to eliminate 65 week waits*</b>	<b>Mainly March 2024</b>	BAF-P3/P4/P5	<b>CMAST Q&amp;P Committee</b>	<b>CMAST (Ann Marr)</b>
	Onward Referrals work towards targeting a 30% reduction in the number of onward referrals and reduce outpatient follow up activity by 25% against 2019/20 baseline		BAF-P3/P4/P5		

	Increase in day case activity, targeting 85%, in line with Cheshire and Merseyside Plan		BAF-P3/P4/P5		
	Work to improve Theatre Utilisation - deliver planned, system average Theatre utilisation of at least 80%		BAF-P3/P4/P5		
<b>Neurosciences</b>	Access to acute neurological care - increase access to acute neurological care for patients to be assessed in a timely manner by an appropriate expert, to guide appropriate investigations.	TBD	BAF-P3/P4	Transformation Committee (DTACIB)	Fiona Lemmens
	Best Practice Pathways - roll out best practice pathways to other providers in Cheshire and Merseyside.		BAF-P3/P4		
	Stroke - Increase numbers of patients receiving thrombectomy treatment year on year and to maximise efficiency in the pathway.		BAF-P3/P4		
	Work with NHS England Specialised Services to redesign Neurorehabilitation pathway	Mar-24	BAF-P3/P4		
<b>Respiratory</b>	Diagnostic & Treatment Pathways - focused work to improve the effective management of respiratory long-term conditions and specifically COPD.	Dec-24 to Apr-27	BAF-P3/P4	Transformation Committee (Respiratory Network via DTACIB)	
	Spirometry Restart focus on increasing the number of clinicians trained to Association for Respiratory Technology & Physiology (ARTP) Standards for delivery and interpretation of spirometry	Apr-25	BAF-P3/P4		
	Pulmonary Rehab - Targeted work to increase appropriate referrals, reduce referral to assessment waiting times and increase completion rates for Pulmonary Rehab,	Jun-24	BAF-P3/P4		
	Greener inhalers - improve the long-term management of patients with COPD and Asthma (via the Pathways work) which will reduce reliance upon high use of short acting bronchodilators	Dec-24	BAF-P10		
	Early detection & proactive management - improve patient and family/carer education and supported self-management for people living with long term Respiratory conditions	Dec-24	BAF-P3/P4		



<b>Stroke</b>	<b>National Optimal Stroke Imaging Pathway (NOSIP) - implementation of Computed Tomography Angiography (CTA) and Computed Tomographic Perfusion (CTP) at all appropriate Hyper Acute Stroke Services</b>	<b>Jul-23</b>	<b>BAF-P3/P4</b>	<b>Transformation Committee (Integrated Stroke Delivery Network (ISDN) Board via DTACIB)</b>	
	<b>Delivery against NOSIP guidelines.</b>	<b>Dec-24</b>	<b>BAF-P3/P4</b>		
	<b>North Mersey Stroke Service Transformation - increase the bed base for stroke patients in North Mersey and provide patients with the correct facilities to enable appropriate rehabilitation to be offered and provided by completing the estates transformation work</b>	<b>Jul/ Aug 23</b>	<b>BAF-P3/P4</b>		
	<b>Sentinel Stroke National Audit Programme (SSNAP) Data - all routinely admitting stroke services to achieve SSNAP score of "B" or above.</b>	<b>Mar-24</b>	<b>BAF-P2</b>		
	<b>Hyperacute Stroke Services &amp; Thrombectomy - increase the percentage of stroke patients receiving thrombectomy to 4.5% and increase ambulance triage. (Working with NHS England Specialised Services)</b>	<b>Mar-24</b>	<b>BAF-P3/P4</b>		
	<b>Planned work to further develop Integrated Community Stroke Services</b>	<b>Mar-25</b>	<b>BAF-P3</b>		
	<b>SQIRe (Stroke Quality Improvement in Rehabilitation) - delivery of all 6 catalyst funded projects</b>	<b>Mar-24</b>	<b>BAF-P3/P4</b>		
	<b>Prevention - reduce the inequalities in secondary prevention of stroke through joint working with the CVD Prevention Programme. *</b>	<b>Ongoing</b>	<b>BAF-P1</b>		
<b>Urgent and Emergency Care</b>	<b>Delivery of the Urgent and Emergency Care recovery plan to support A&amp;E waiting times, improve bed occupancy rates, support work around NCTR, UCR and LOS, development of Virtual Wards and improve ambulance response times. *</b>	<b>Mar-24</b>	<b>BAF-P3/P4/P5</b>	<b>Q&amp;P Committee</b>	<b>Anthony Middleton</b>
<b>Mental Health</b>	<b>Priority national objectives for 2023/24 - improving access to services including IAPT, increase in the numbers supported by community mental health services, eliminate inappropriate OOA placements, recover the dementia diagnosis rate to 66.7% and Improve access to perinatal mental health services*</b>	<b>Mar-24</b>	<b>BAF-P3/P4/P5</b>	<b>MHLDC Q&amp;P Committee</b>	<b>MHLDC (Joe Rafferty)</b>

	NHS 111 'select MH option' - ensure that a single national 3-digit number exists for mental health crisis	Mar-24	BAF-P3		
	Continue work to support Addressing Section 136 delays	Mar-24	BAF-P3/P4		
	<b>Dementia - work towards exceeding the national standard of 66% of expected dementia diagnosis rates, support carers and increase the use of digital technology. *</b>	01/03/2024 others TBC	BAF-P2/P3	Transformation Committee (DTACIB)	Fiona Lemmens
	Suicide Prevention focus areas: a) increased awareness of suicide risks, promotion of suicide prevention messaging. b) Increased awareness of referrals to the commissioned 'postvention service'. c) Enhanced Real Time surveillance system embedded. d) Extended workforce (Capability).	Mar-24	BAF-P1/P9	HCP (NO MORE Suicide Partnership)	Clare Watson Prof Ian Ashworth Ruth du Plessis SRO for MHW, SP, SB for C&M Public Health collaborative
<b>Learning disability &amp; autism</b>	<b>Annual Health Checks - deliver on Annual Health Checks for people aged 14years plus*</b>	Mar-24	BAF-P1	Q&P Committee	Chris Douglas (Simon Banks)
	Continued work around Housing Needs Assessments and associated development and delivery	Mar-24	BAF-P1		
	Inpatient Care - reduce reliance on inpatient care, while improving the quality of inpatient care*	Mar-24	BAF-P3		
	Care and treatment reviews - ensure CTR's take place within the required timescales.	Mar-24	BAF-P3		
	An Autism Community Forensics Service will be developed in 23/24 which will support the discharge of people from forensic settings and ensure they are supported in the community.	Mar-24	BAF-P3		
	Positive Behaviour Support plan to develop in collaboration with place commissioners a Positive Behaviour Support specification for adults and CYP that will meet the needs of our population that is more targeted and accessible.	Mar-24	BAF-P3		
	The Transforming Care Programme will continue to align itself to the developments within the CYP Mental Health Programme	TBD	BAF-P3		

	Attention Deficit Hyperactivity Disorder (ADHD) - Our population will have consistent access to the diagnostic and support services.	TBD	BAF-P3	Place Transformation Group	TBC
<b>End of Life Care</b>	Recognising people are coming to the end of their life - planned work to identify individuals and ensure care is planned to include Advance Care Planning education and training for health and care staff.	Mar-24	BAF-P3	Transformation Committee (Palliative and End of Life Care Programme Board via DTAICT)	Fiona Lemmens
	Enabling information to be available electronically to support end of life care	Mar-25	BAF-P3		
	Access and sustainability - Population Based Needs Assessment (PBNA) completed for each of our Places to inform strategic direction and service planning	Mar-24	BAF-P8		
	Workforce action plans to address workforce gaps, developed for each of our places across Cheshire & Merseyside	Mar-24	BAF-P9		
	Engaging with people to identify the issues, related to end-of-life care, which are important to the people of Cheshire & Merseyside through engagement events and ensure they are reflected in the delivery plan	Jun-23	BAF-P3		
<b>2022-25 Workforce priorities</b>	Systemwide strategic workforce planning to ensure a health and care workforce that is fit for the future. (Cross reference to Leadership actions below)	Five-year plan by August 2024	BAF-P3/P5/P9	People Board	Chris Samosa
	<b>Creating New Opportunities across C&amp;M to grow our own workforce through the enhancements of our apprenticeship programmes, embed new roles, remove recruitment barriers, support work with Education, PCN development and foster greater links with primary and secondary care.</b>	Strategy and development plan by December 2023	BAF-P3/P5/P6/P9		
	<b>Focus on Promoting health and wellbeing to ensure appropriate health and wellbeing support for all staff</b>	Sep-23	BAF-P9		
	<b>Maximising and valuing the skills of our staff</b>	Apr-24	BAF-P9		
	<b>Cultivating a positive and inclusive culture</b>	Oct-23	BAF-P9		

	Focus on Workforce programmes and planning for example graduate schemes, international recruitment, workforce dashboard development etc.	<b>Dec-23 to Mar-25</b>	<b>BAF-P9</b>		
	Ensuring work is delivered around the digital upskilling for the wider workforce	<b>Mar-23 Others TBD</b>	<b>BAF-P2/P9</b>		
	<b>Leadership and system organisational development with a focus on cultural transformation, talent management and leadership development (cross reference to strategic workforce planning)</b>	<b>Sep-23</b>	<b>BAF-P9</b>		
<b>System Development</b>	Delivery work to develop and embed an agreed operating model for our system, working alongside system partners.	<b>Mar-24</b>	<b>BAF-P10</b>	<b>Executive Team</b>	<b>Graham Urwin</b>
	<b>Clinical and Care Professional leadership (CCPLO Steering Group (led jointly by the Nursing and Care, and Medical Directorates) The establishment of a CCPL steering Group (completed May 23). Production of the CCPL framework and accompanying action plan Work with the ICB Organizational development team to develop a 12 month delivery plan including the mapping of the current CCPL offer, including working with our higher education institution partners, establishment of a CCPL website, a CCPL conference, the promotion of CCPL groups at Place, develop a coaching and mentoring programme for clinical and care leaders in the ICS.</b>	<b>May 23 Mar-24</b>	<b>BAF-P3</b>	<b>DTACIB</b>	<b>Fiona Lemmens</b>
	Quality improvement work with our partners to ensure that we have an aligned Clinical Quality Strategy and associated improvement plans	<b>TBD</b>	<b>BAF-P3</b>	<b>Q&amp;P Committee</b>	<b>Chris Douglas</b>
	Support the delivery plans of Our Provider Collaboratives CMAST and MHLDC	<b>Mainly March 2024</b>	<b>BAF-5</b>	<b>Transformation Committee</b>	<b>CMAST/ MHLDC</b>
	Deliver our VCFSE Transformation Programme	<b>Mar-24</b>	<b>Multiple</b>	<b>Transformation Committee</b>	<b>Clare Watson</b>
	Continue work with Places to support the delegation of functions, establishing the oversight and assurance requirements which evidence and demonstrate Place leadership and discharge of the delegated duties.	<b>Mar-24</b>	<b>Multiple</b>	<b>Executive Team</b>	<b>Place Directors/Clare Watson/ Claire Wilson</b>

	Support system development by evolving our Commissioning and Corporate Services	Mar-24	BAF-P10	Executive Team	Clare Watson
	Further develop our Research and Innovation plans including the establishment of a Cheshire and Merseyside Research Development Hub.	Mar-24	Multiple	DTACIB	Rowan Pritchard Jones
	Digital and Data - Implementation of the 3 goals outlined in ICS Digital and Data Strategy published in November 2022.	Mainly from March 2024 to Mar-25	BAF-P2	DTACIB	John Llewelyn
	Further develop our plans to support Increasing Digital Inclusion.	Mar-23 to Mar-25	BAF-P2		
Effective Use of Resources	Development and delivery of a Cheshire and Merseyside a system wide financial strategy during the first half of 2023-24. *	Sep-23	BAF-P7/P8	Finance Investment and Resources Committee	Claire Wilson
	Delivery of the Finance Efficiency & Value Programme plans	March 2024 many TBD	BAF-P7/P8		CMAST/Claire Wilson
	Development and delivery of the Capital Plans	Mar-24	BAF-P2/P7/P8		Claire Wilson
	Development of system Estates plans to deliver a programme to review and rationalise our corporate estates.	Mar-24	BAF-P7/P8		Claire Wilson
	All Age Continuing Care- Design and implementation planning of an optimised Hybrid operational structure to enable effective, efficient, and equitable performance for Cheshire and Merseyside.	Nov-23	BAF-P4/P8	Executive Team	Chris Douglas
	Clinical Policy Harmonisation - Develop and implement a single suite of commissioning policies across Cheshire and Merseyside so that the commissioning of these services is consistent and applicable across Cheshire and Merseyside.	Oct-24	BAF-P4/P8	Executive Team	Clare Watson
<b>Our Place Plans (Detail on delivery dates see Place plans)</b>					
	<b>Core Areas of Focus</b>	<b>Delivery By</b>		<b>Enablers</b>	<b>Place Director</b>
<b>Cheshire East</b>	Cheshire East is a place that supports good health and wellbeing for everyone	Detail in Place Plans		People and Leadership	<b>Mark Wilkinson</b>

	Our Children and Young People experience good physical and emotional health and wellbeing.		(Workforce), Digital Solutions, Business Intelligence, Communications and Engagement, Estates and Finance.	
	The mental health and wellbeing of people living and working in Cheshire East is improved			
	That more people live and age well, remaining independent and that their lives end with peace and dignity in their chosen place			
<b>Cheshire West and Chester</b>	Increasing Self-Care and Peer Support – supporting Communities to flourish and managing people in their own homes.	Detail in Place Plans	People, Finance/Resources, Communications and Engagement (including the development of a Local Voices Framework), Estates, Business Intelligence and Digital	<b>Laura Marsh</b>
	Building Community Care - development of Integrated multi-disciplinary teams and supporting people in crisis to remain at home, enabling safe discharge.			
	Reducing reliance on the Acute sector/bed-based care – Improving flow including Health led interventions to reduce admissions.			
	Complete Clinical Services Review and implement any recommendations			
<b>Halton</b>	To improve the health and wellbeing of the population of Halton by empowering and supporting local people from the start to the end of their lives by preventing ill health, promoting self-care and independence, arranging local, community-based support and ensuring high quality services for those who need them.	Detail in Place Plan	One Halton Place Based Partnership Board  Leadership, Oversight and Delivery	<b>Anthony Leo</b>
	<b>Wider Determinant of Health:</b> Improve the employment opportunities for the people of Halton in particular where it affects children and families.			
	<b>Starting Well:</b> Enabling Children and Families to live Healthy Independent Lives.			

	<b>Living Well:</b> Provide a supportive environment where systems work efficiently and support everyone to live their best life.			
	<b>Ageing Well:</b> Enabling Older Adults to live Full Independent Healthy Lives.			
<b>Knowsley</b>	Enabling people to live healthier more independent lives through high quality seamless care.	Detail in Place Plan	Knowsley Healthier Together Board Planning, Estates, Finance, Digital and Medicines Management.	<b>Alison Lee</b>
	With a thriving inclusive economy with opportunities for people and business			
	With welcoming vibrant neighbourhoods and town centres			
	Where people are active and healthy and have access to the support, they need			
	Where people of all ages are confident and reach their full potential			
	Where safe and strong communities can shape their future			
<b>Liverpool</b>	System redesign of the whole urgent care pathway to improve flow, patient experience and sustainability – right care, right place, right time	Detail in Place Plan	One Liverpool  Engagement and Co-Production, Research and Innovation, Data & Digital, Estates and Quality & Performance	<b>Mark Bakewell</b>
	Improve population health and reduce inequalities through prevention and anticipatory care, focused on 5 cohorts of our population			
	Implement the opportunities identified in the Liverpool Clinical Services Review of acute and specialist services. The objective of the Liverpool Clinical Services review is to realise opportunities for greater collaboration between acute and specialised trusts to optimise clinical pathways in acute care in Liverpool. There are three critical priorities out of the 12 opportunities			
	Strengthen integrated working arrangements at place with system partners to align plans, resources, governance to support delivery			
	Making best use of resources for financial sustainability			

<b>Sefton</b>	A confident and connected borough that offers the things we all need to start, live and age well, where everyone has a fair chance of a positive and healthier future	Detail in Place Plan	Clinical and Care Leadership Communications and Engagement Digital Estates Medicines Optimisation Organisational Development Population Health Management	<b>Deborah Butcher</b>
	Reducing health inequalities: We recognise there are stark differences in the quality and length of life across Sefton and that we need to work together to prioritise those who stand to gain the most.			
	Service transformation: We know our provider partners are under increasing pressure and that we have to radically transform how we deliver services to local people.			
	Community first: We recognise our communities have a vital role in improving their health and wellbeing and we are committed to working with them and co-producing solutions together.			
<b>St Helens</b>	One Place, One System, One Ambition - Improving people's lives in St Helens together. Bringing people closer together, by tackling health inequalities in St Helens	Detail in Place Plan	Digital Transformation Population Health Management Workforce	<b>Mark Palethorpe</b>
	Ensure Children and Young People Have a Positive Start in Life			
	Promote Good Health Independence and Care Across Our Communities			
	Create Safe and Strong Communities and Neighbourhoods for All			
	Support a Strong, Thriving, Inclusive and Well-Connected Local Economy			
	Create Green and Vibrant Places That Reflect our Heritage and Culture			
	Be a Responsible Council			
<b>Warrington</b>	<b>Starting Well:</b> Every child should have the best start in life. The best start in life is about good physical and mental health for every child, about children being safe and growing up in settled families, about getting the best from school and education so they can lead successful	Detail in Place Plan	Communication and Involvement, Digital, Estates, Workforce and	<b>Carl Marsh</b>



	<p>adult lives. We want Warrington to be a place where children enjoy their childhoods and go on to achieve great outcomes.</p>		<p>Business Intelligence.</p>	
	<p><b>Staying Well:</b> Tackling the wellbeing factors and wider determinants that impact poor health including obesity and alcohol, focussing on improving outcomes for people experiencing poor mental health and those with learning disabilities and/or autism, additionally we will support those that are experiencing poverty.</p>			
	<p><b>Ageing Well:</b> Supporting people to live at home for longer. This theme will focus on developing the Single Front Door to support the delivery of interconnected services by directing residents/patients to services who have the skills, expertise, and capacity to care for them. Embedding a proactive care approach, maximising virtual wards, enhancing care in care homes, ensuring successful transfer of care when people move between care interfaces and supporting people to die with dignity.</p>			
<p><b>Wirral</b></p>	<p>The Wirral Health and Care Plan is a collaborative plan for how as health and care organisations we will work together to progress with our agreed priorities.</p>	<p>Detail in the Place Plan</p>	<p>Workforce, Digital maturity, Estates and sustainability and Medicine Optimisation.</p>	<p><b>Simon Banks</b></p>
	<p>Organise services around the person to improve outcomes.</p>			
	<p>Maintain independence by providing services the closest to home.</p>			
	<p>Reducing Health Inequalities across the Wirral population</p>			
	<p>Provide seamless and integrated services regardless of organisational boundaries</p>			
	<p>Maximise the Wirral Health and Care Pound</p>			
	<p>Strengthen the focus on wellbeing including greater focus on prevention and Public Health</p>			

<b>** Board Assurance Framework (BAF) Principal Risks</b>	
<b>Strategic Objective 1: Tackling Health Inequalities in Outcomes, Access, and Experience</b>	
P1: The ICB is unable to meet its statutory duties to address health inequalities	
P2: The ICB is unable to address inadequate digital and data infrastructure and interoperability which inhibits development of system-wide population health management and effective targeting of initiatives to reduce health inequalities	
<b>Strategic Objective 2: Improving Population Health and Healthcare</b>	
P3: Service recovery plans for Planned Care are ineffective in reducing backlogs and meeting increased demand which results in poor access to services, increased inequity of access, and poor clinical outcomes	
P4: Major quality failures may occur in commissioned services resulting in inadequate care compromising population safety and experience	
P5: Lack of Urgent and Emergency Care capacity and restricted flow across all sectors (primary care, community, mental health, acute hospitals, and social care) results in patient harm and poor patient experience	
P6: Demand continues to exceed available capacity in primary care, exacerbating health inequalities and equity of access for our population	
<b>Strategic Objective 3: Enhancing Quality, Productivity and Value for Money</b>	
P7: The Integrated Care System is unable to achieve its statutory financial duties	
P8: The ICB is unable to resolve current provider service sustainability issues resulting in poorer outcomes for the population due to loss of services	
P9: Unable to retain, develop and recruit staff to the ICS workforce reflective of our population and with the skills and experience required to deliver the strategic objectives	
<b>Strategic Objective 4: Helping the NHS to support broader social and economic development</b>	

P10: ICS focus on responding to current service priorities and demands diverts resource and attention from delivery of longer-term initiatives in the HCP Strategy and ICB 5-year strategy on behalf of our population