



MEMORANDUM OF UNDERSTANDING

Between
The Kent and Medway Voluntary, Community and Social Enterprise
Sector and
The Kent and Medway Integrated Care Board



MARCH 23, 2023

Memorandum of Understanding

This document is a written understanding between **Kent and Medway Integrated Care Board** (NHS Kent and Medway) and the **Voluntary, Community and Social Enterprise (VCSE) sector¹ in Kent and Medway**. It sets out how these partners will engage and collaborate to embed the VCSE sector in system level governance and decision-making arrangements across the Kent and Medway Integrated Care System (ICS), to ensure better health and well-being outcomes for the local population.

It should be noted that Kent County Council and Medway Council have formal statutory arrangements that place certain duties and responsibilities on them with regarding to working with and supporting the VCSE sector. This MOU between NHS Kent and Medway and the VCSE sector compliments these arrangements.

Similarly, this MOU also compliments the ambitions set out in the [Kent County Council Civil Society Strategy](#) for Kent 2021-2024 and the [Medway and Swale Voluntary and Community Sector Strategic Framework](#).

1.0 Introduction

The 2022 NHS Act put Integrated Care Systems (ICSs) on a statutory footing, alongside the establishment of new NHS Integrated Care Boards (ICBs). As part of this there are four defined purposes to all Integrated Care Systems:

- Improve outcomes in population health and healthcare
- Tackle inequalities in outcomes, experience, and access
- Enhance productivity and value for money
- Help the NHS support broader social and economic development

The breadth of the Kent and Medway ICS, across upper and lower tier local authorities, the VCSE sector, the NHS, and Healthwatch, puts us in a unique position to identify opportunities for wider partnerships to strengthen our collective approach to achieving the above core purposes and overall improving people's lives.

However, effective and sustained achievement can only be made possible through genuine integrated collaboration and partnership arrangements across all key stakeholders, including the large number of VCSE organisations.

¹ The term VCSE sector in Kent and Medway, refers to 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 outlines the working relationship and arrangements that we wish to achieve between the VCSE sector and the NHS, alongside similar arrangements with other partners.

2.0 Purpose and Scope

This Memorandum of Understanding (MoU) serves as a framework for collaboration between VCSE leaders and Kent and Medway organisations, that will support delivery of the Kent and Medway ICS strategies, and other thematic strategies and delivery plans.

The MoU confirms that VCSE representatives will be involved in the development, governance and delivery of these strategies, including the co-design of relevant activities, and will thus play a key role in efforts to build a resilient local economy, address inequalities and inequity, and improve the health and wellbeing of people who live, work, and study in Kent and Medway.

This Memorandum of Understanding is not a contractual agreement. It is a serious declaration – agreed upon voluntarily by equal partners – of the commitment, resources, and other considerations that each party will bring. It carries moral weight but does not impose legal obligations.

3.0 Kent and Medway Integrated Care Board

NHS Kent and Medway Integrated Care Board (better known as NHS Kent and Medway, or the ICB) is the statutory NHS organisation that plans and buys healthcare services to meet the needs of our population. There are 1.9 million people living in Kent and Medway and the NHS has an annual budget of over £3.2 billion.

The ICB is accountable for developing strategy and overseeing delivery of plans to meet the required outcomes that improve the health and care of the population. The ICB is also responsible alongside the local authorities for the development and oversight of a wider [Kent and Medway Integrated Care Strategy](#) that improves the well – being of the population and enhances social and economic development. As part of this, the ICB has primary accountability for:

- Allocating resource
- Securing provision of high quality, effective services
- Overseeing assurance and performance management to secure effective delivery
- **Establishing joint working and governance arrangements for collaborative and integrated working**
- Ensuring effective, inclusive clinical, professional and citizen involvement

Funding flows from the ICB to partners through the contracts it holds with them for services and outcomes, and whilst the ICB is not responsible for the arrangements individual organisations put in place, it is accountable for ensuring the system as a whole meets its statutory and mandatory duties.

3.1 Vision and Purpose

The ICB and wider Integrated Care System has developed the following vision and purpose:

“We will work together to make health and wellbeing better than any partner can do alone”

This means we will:

1. Give children the best start in life and work to make sure they are not disadvantaged by where they live or their background and are free from fear or discrimination.
2. Help the most vulnerable and disadvantaged in society to improve their physical and mental health; with a focus on the social determinants of health and preventing people becoming ill in the first place.
3. Help people to manage their own health and wellbeing and be proactive partners in their care so they can live happy, independent and fulfilling lives; adding years to life and life to years.
4. Support people with multiple health conditions to be part of a team with health and care professionals working compassionately to improve their health and wellbeing.
5. Ensure that when people need hospital services, most are available from people’s nearest hospital; whilst providing centres of excellence for specialist care where that improves quality, safety and sustainability.
6. Make Kent and Medway a great place for our colleagues to live, work and learn.

4.0 Kent and Medway Voluntary, Community and Social Enterprise Sector

The VCSE sector in the UK is estimated to have a combined turnover of £58 billion, employs 3 million people, and contributes 3% to GDP. The Kent and Medway VCSE sector is made up of over 4,000 registered charities and social enterprises (80% of which have under £100,000 turnover), arts and heritage, and churches.

The sector provides a wide range of services and support, including housing and homelessness advice, carer support, drug and alcohol treatment, wellness and fitness activities, social clubs, and community centres. There is no organised structure due to its diversity, as all are independent legal entities with their own aims and objectives, and independent trustees.

Specific VCSE organisations in Kent and Medway have established a VCSE Steering Group, to enable the sector to work collaboratively on shared issues, and to help advocate for the sector with statutory bodies. This group is independent. There is also a specific NHS sub-committee which includes all the VCSE ICS appointed leads, and the leads of each of the 4 Health and Care Partnerships (H&CPs) in Kent and Medway. The VCSE partnerships covered under this agreement include the Kent and Medway Steering Group and its subcommittees, and its leaders are representatives of the sector, rather than individual organisations.

This subcommittee meets quarterly and is focused on ICS activities and strategies. Each H&CP now has an alliance lead organisation, which helps to bring local VCSE groups together, to share updates and strategies which affect them. In delegating responsibilities and functions to H&CPs, NHS Kent and Medway will seek to assure these alliances are part of each local H&CP governance arrangements, in line with the wider ICS.

The VCSE structure is depicted in figure 1.0 overleaf.

5.0 Principles for Joint working

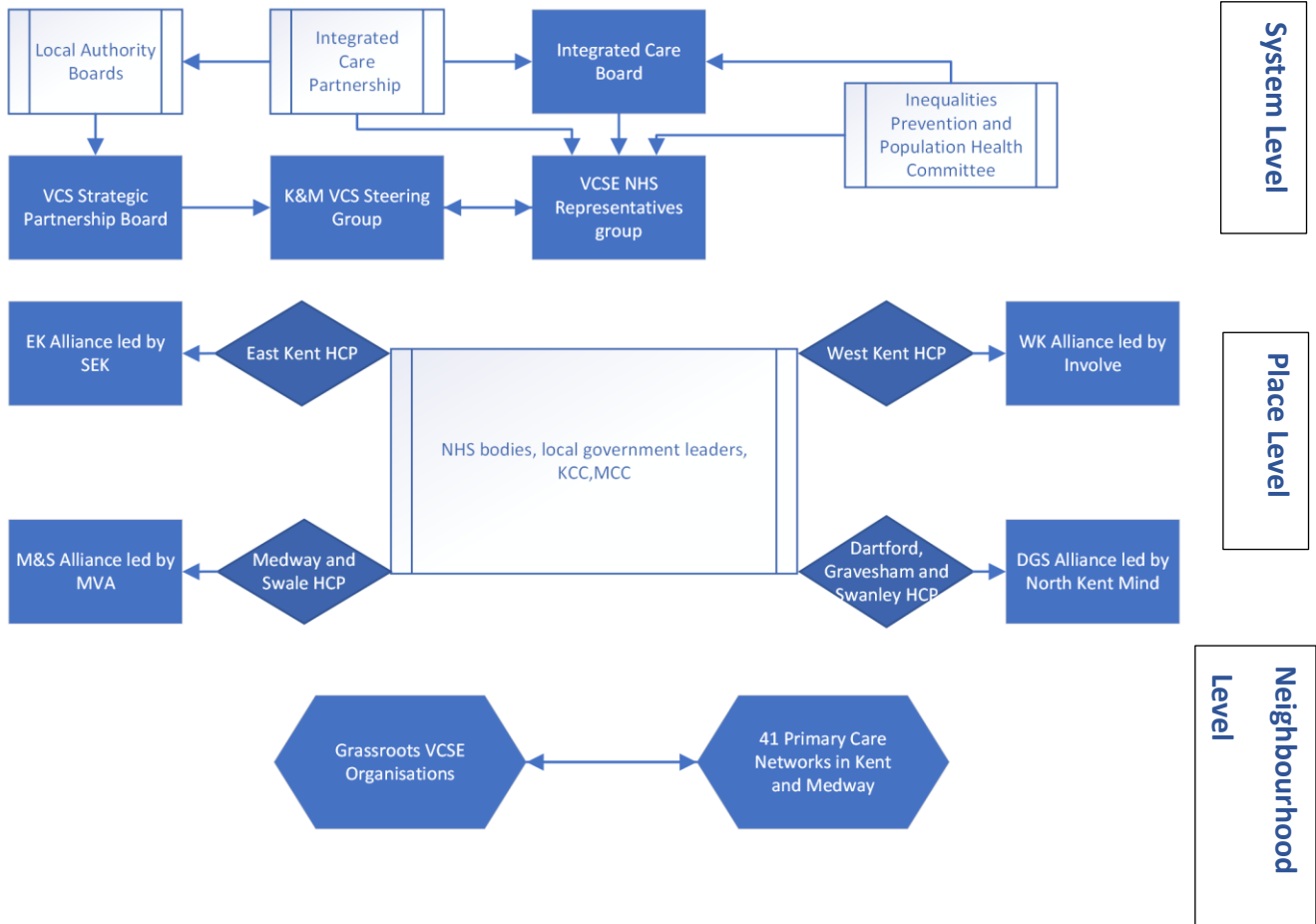
Notwithstanding statutory and regulatory responsibilities of individual organisations, Kent and Medway ICS is founded on the principle of equal partnership, to work with and for the communities across the county.

Partners have dual responsibility in nurturing the culture and behaviours of a system that works together to improve health and well-being for local people. In undertaking its work, partners will respect the following key partnership principles:

- Come together under a distributed leadership model and commit to working together equally
- We view each other as constructive partners. We will commit time in learning about each other's sectors, fostering mutual understanding and incorporating our knowledge into our practises and behaviours.
- Use a model of decision-making that seeks to find consensus between system partners and make decisions based on unanimity as the norm, including working though difficult issues where appropriate
- Operate a collective model of accountability, where partners hold each other mutually accountable for their respective contributions and actions
- Focus on improving outcomes for people, including improved health and wellbeing and reduced health inequalities
- Ensure co-production and inclusiveness throughout the Integrated Care System (ICS) is championed
- Support the triple aim (improved population health, quality of care and cost control), the legal duty on statutory bodies to collaborate and the principle that decision-making should happen at a local level where that is the most appropriate approach

- Draw on the experience and expertise of professional, clinical, political, voluntary and community leaders
- Create a learning system, sharing improvements across the system geography and with other parts of the country, crossing organisational and professional boundaries

Figure 1.0 VCSE Structure at System, Place and Neighbourhood Levels



6.0 Kent and Medway Integrated Care Board and VCSE Sector commitments and agreed actions

The following commitments have been agreed between NHS Kent and Medway and the VCSE sector. They are entered into voluntarily and are based on the above principles recognising the roles and responsibilities of leadership figures in ensuring these are evenly distributed and recognised across the whole of Kent and Medway.

6.1 Undertakings by the ICB

6.1.1 Commitment 1

To adhere to the commitments outlined in this document in relation to the strategic planning and design of health and well-being services, for the benefit of the Kent and Medway population in collaboration with our VCSE partners.

We will achieve this by:

- Committing to ongoing dialogue with the VCSE sector and respecting them as equal strategic partners.
- Establishing joint working principle that ensures appropriate VCSE representation and contribution in all key strategic planning and design areas.
- Providing support that enables adequate VCSE contribution on relevant groups including the Kent & Medway ICB, its committees and local Health and Care Partnerships groups.
- Establishing joint programmes to address key inequalities which bring together the VCSE sector with public and private sector partners to drive action through collaboration.

6.1.2 Commitment 2

To coordinate activities with VCSE representatives that will add value to the health and wellbeing of the people of Kent and Medway.

We will achieve this by:

- Engaging closely with voluntary sector groups who support the work of the Kent and Medway system, place and neighbourhoods, and to take targeted action to improve health outcomes for the population of Kent and Medway.
- Working together with the VCSE sector to provide strategic leadership and support to the work addressing issues relating to inequity and inequalities.
- Welcoming input from the VCSE sector to ensure senior ICS system leaders are informed about what is important to the sector and communities.

6.1.3 Commitment 3

To effectively plan with and support the VCSE sector in their work across the ICS and ICB.

We will achieve this by:

- Working with partners to develop and implement a sustainable long-term strategy that supports VCSE leadership and engagement capacity and capability to deliver the visions and plans of the ICS². This will include agreeing how we best focus our collective resource to have the greatest positive impact on health and wellbeing.
- Exploring how we might better utilise the intelligence and data held by the statutory bodies and the VCSE sector, and data sharing where practicable, to inform decision making and collaborating to establish our priorities in accordance with local intelligence.

² Whilst this commitment recognises the skills, knowledge and expertise of the VCSE sector in addressing health inequalities and population health matters, it does not confer any obligation to commission VCSE services to address these. This would be achieved through individual contracts between VCSE organisations and the ICB or other partners.

6.1.4 Commitment 4

To provide the necessary leadership and engagement support to the VCSE sector that enables it to effectively contribute across the ICB and ICS as an equal partner.

We will achieve this by:

- Having a named Senior Responsible Officer (SRO) from the ICB Executive Team to support the emerging Voluntary Sector Alliances in building effective partnerships across the ICS area.
- Ensuring the SRO is supported by other ICB functions as appropriate to deliver this commitment.
- Engaging with our partners to highlight and secure their respective responsibilities that will enable the VCSE sector to effectively contribute to the ICS's strategic planning and design agendas.
- Ensuring appointed VCSE delegates have a vested commitment to fairness, diversity, effectively communicating our common messages, and transparency regarding their reach, and actively sharing knowledge and opportunities with VCSEs.

6.2 Undertakings by the VCSE

6.2.1 Commitment 1

We will work together with our partners to achieve our goal of permanently reducing inequalities and inequity across Kent and Medway, addressing the social, environmental, and economic determinants of health and wellbeing.

We will achieve this by:

- Providing effective VCSE leadership representation on relevant groups across the integrated care system, including the ICB and relevant H&CP boards.
- Establishing joint programmes with our partners to address key priorities, bringing together the VCSE sector with public and private sector partners to drive action through collaboration.

6.2.2 Commitment 2

We will embed the VCSE sector as a key delivery partner of services for communities in Kent and Medway.

We will achieve this by:

- Embedding the learning from the review of the Kent & Medway VCSE Steering Group.
- Encouraging VCSE involvement in place/community-based population health management programmes, where relevant to the VCSE sector.

- Increasing the understanding of each other; building knowledge and understanding of the VCSE sector with Health and Statutory sectors and vice versa to drive forward joint strategies to tackle place-based issues.
- Engaging with our partners to influence the development of Kent and Medway primary strategies and strategic frameworks.

6.2.3 Commitment 3

We will work together to build a sustainable and resilient VCSE sector that can continue to address local health and care challenges and unlock the huge potential of securing strong and vibrant communities.

We will do this by:

- Working collaboratively to support the implementation of the ICB principles, where appropriate, and the work aligned to [Kent County Council Civil Society Strategy](#) and [Medway and Swale Voluntary and Community Sector Strategic Framework](#).

6.2.4 Commitment 4

We will focus on the needs and goals of individuals, looking at how we co-ordinate services to help people of all ages keep well, get well and stay well.

We will do this by:

- Building on the knowledge base gained from various activities such as Community Navigation and Social Prescribing projects across Kent and Medway, we will continue to develop a responsive and person led community which can identify gaps in provision and support individuals to live well.

7.0 Joint Working approach - Making it Work/Next Steps

The publication of this Memorandum of Understanding in itself will not change anything. Positive and lasting change will depend on pro-active delivery of the commitments alongside a number of other important factors:

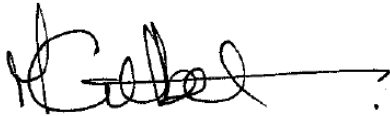
- Embracing the principles of the MoU and promoting its adoption across the ICB, NHS, VCSE sector, and all other partners.
- Regular review of the commitments within this MoU and progress against the implementation of these.
- Developing, strong, open, honest and transparent relationships, where candid conversation and challenge can take place, within a supportive and constructive environment.
- Developing a framework to resolve disagreements and complaints.

7.1 Variation and termination

This Memorandum of Understanding may be varied with the agreement of both parties in writing.

8.0 Signatures

On behalf of the K&M ICB:



Mike Gilbert, Executive Director of Corporate Governance
NHS Kent and Medway

On behalf of the K&M VCSE Sector:



Josephine McCartney, Chief Executive
Kent Community Foundation

9.0 Appendix



Civil-Society-Strategy
-for-Kent (002).pdf



Medway and Swale
VCS Framework_Final