

# Working better together for our communities

**Developing a memorandum of understanding (MoU) for joint working between:**

Cheshire & Merseyside (C&M) VCFSE alliance  
and

NHS Cheshire & Merseyside (NHS C&M)



**VS6**



**Cheshire & Warrington**  
Infrastructure Partnership

**Voluntary Sector**  
North West

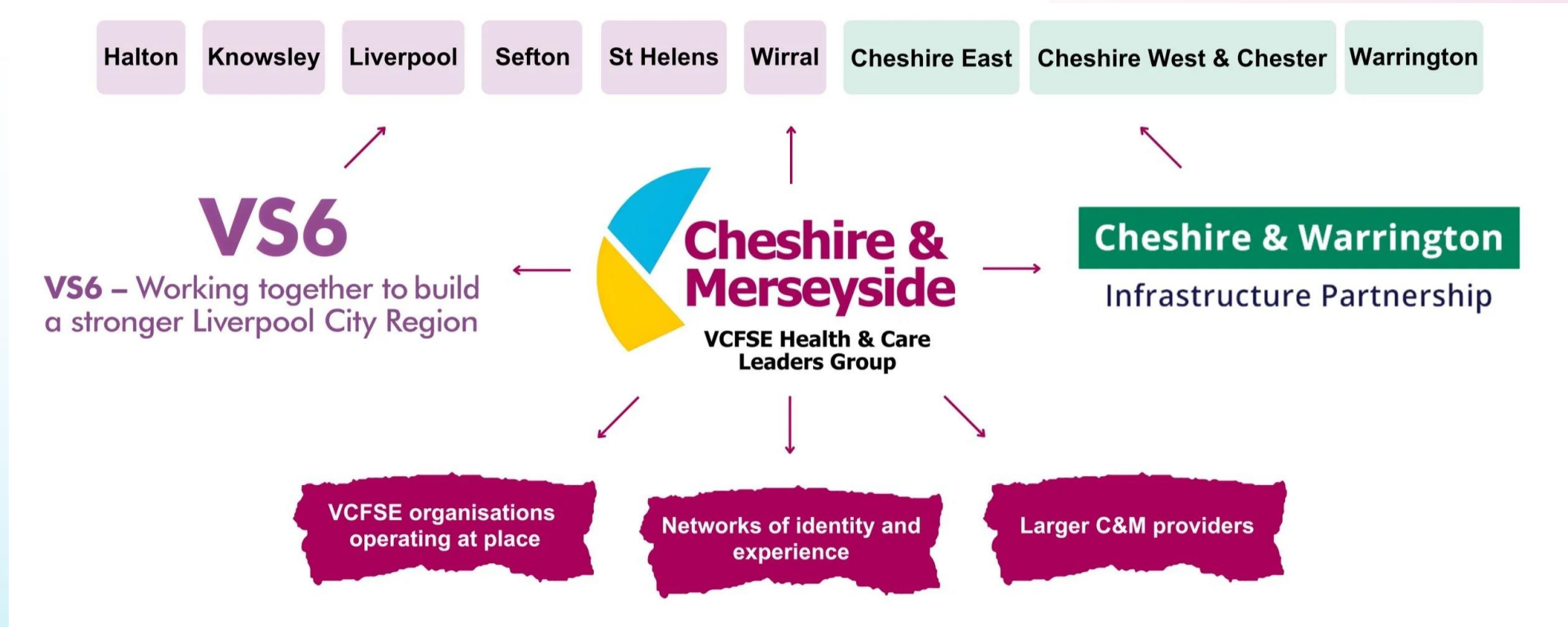
**NHS**  
Cheshire and Merseyside

# About our C&M VCFSE alliance

- We're one of an original 42 alliances created in the 2022 NHS reforms, when every health system in England was required to have one as part of establishing new integrated care boards (ICB)
- Our C&M VCFSE alliance is made up of C&M Health and Care Leaders (CMHCL) group and our two local infrastructure partnerships, VS6 and CWIP
- We have a supporting C&M VCFSE Health and Care Transformation Programme, funded by our ICB, NHS C&M
- Our work programme's informed by our shared system-wide health and care priorities and by the views of our VCFSE alliance



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# Why we're developing an MoU

- NHS C&M's new senior leadership confirmed their commitment to agreeing an MoU with our VCFSE alliance in January 2026, restarting the development process
- Will ensure recognition of our VCFSE alliance and wider sector as equal and valued partners in our integrated care system during period of change and challenge due to ongoing NHS reforms

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# Why have an MoU?

- **What is it?** - represents a commitment to partnership working between public and VCFSE sectors, with the aim of ensuring a strong and productive relationship for the benefit of communities. Sometimes called a compact, covenant, or partnership agreement
- **Why is it important?** - provides shared clarity on roles, expectations and accountability, reducing the risk of inconsistent engagement, unequal power dynamics and missed opportunities to deliver joined-up and better outcomes for communities.



# Where are they working well? – case studies

- [Greater Manchester \(GM\) VCFSE Accord](#) - Recognising the potential of civil society to address inequalities in the city-region
- [West Yorkshire Integrated Care Board VCSE MoU](#) – embedding the sector in decision-making, with tangible outcomes including representation on governance committees and additional funding allocated to VCSE partners
- [London Borough of Camden](#) - Providing unrestricted and long term funding
- [Barnsley Stronger Communities](#) - Improving local areas through co-production with communities



# National context - Civil Society Covenant

- A **principles-based agreement** between government and civil society (including VCFSE organisations)
- Sets out a **shared commitment** to reset and strengthen working relationships, recognising civil society as an independent, trusted partner in tackling social challenges and improving lives
- Published in July 2025, following **extensive co-design** with civil society organisations across the UK
- Provides a **national framework, expected to be implemented locally** through compacts, MoUs and partnership agreements, embedding the principles into governance, commissioning, service design and community engagement
- [Civil Society Covenant - GOV.UK](#)



# Civil Society Covenant – features & principles

- **Recognition and independence** – valuing civil society’s expertise, community trust and right to challenge and advocate
- **Partnership and collaboration** – early, meaningful involvement in policy, service design and delivery, not just implementation
- **Participation and inclusion** – strengthening community voice and reducing barriers to engagement, especially for under represented groups
- **Transparency and trust** – open communication, data sharing and clarity on roles, expectations and accountability.



# 1. Vision and ambition

- What should be the overriding vision and ambition of our MoU?
- What would good look like?
- Should our vision be focused on what the sector and NHS want to achieve together (like healthier communities etc), or should it be about a stronger, better positioned sector? Or is it about both?



## 2. Values and behaviours

- What should our values and behaviours for collective working between our VCFSE alliance and NHS Cheshire and Merseyside be?
- Should we start with **Civil Society Covenant** values and behaviours?
  - **Understanding** - demonstrating understanding of the challenges and pressures faced by all parties, respecting each other's roles and responsibilities
  - **Flexibility** - demonstrating ability to adapt to changing circumstances and adjust ways of working to innovate and include different types of organisations
  - **Mutual learning** - working together to ensure all parties can be open about what has worked well and what needs to improve
  - **Trust** - creating mutual trust by investing in relationships that recognise goodwill and build a shared purpose, communicating regularly, honestly and openly, acting with integrity and honouring commitments
  - **Open** - maintaining open channels of communication and respect, agreeing to disagree where necessary and seeking to resolve tensions without undermining collaboration
  - **Diversity, equality and inclusion** - promoting rights and responsibilities in how we work with each other and with communities, ensuring equity of access wherever possible



# 3. Principles

- What should be our principles for collective working between our VCFSE alliance and NHS Cheshire and Merseyside be?
- Should we start with the **Civil Society Covenant** principles?
- **Recognition and value** - Respect for independence and legitimacy | Recognition of value, role and different perspectives | Understanding responsibilities and constraints
- **Partnership and collaboration** - Early, regular and ongoing engagement | Creating the conditions for collaboration and innovation | Addressing barriers to delivery in partnership
- **Participation and inclusion** - Enable diversity, equity and inclusion | Engaging citizens and communities in decision making and delivery | Removing barriers to active participation to build a healthy democracy and community resilience
- **Transparency and data** - Engage in open, honest and transparent communication | Make evidence and data publicly available | Improve data development



## 4. Scope

- Who should our partners in our MoU be? – should it just be NHS Cheshire and Merseyside?



## 5. Aims and accountability

- What commitments should our integrated care board partners make to VCFSEs to ensure the sector can play its fullest role in achieving our joint priorities? For example:
  - **To increase the volume or overall value of NHS funded services delivered by VCFSEs**
  - **To ensure our VCFSE sector is consistently represented within leadership at every level**
- What is the most important of these commitments that would have the biggest impact for the VCFSE sector in the next 3-5 years?
- How might all partners in the MoU demonstrate they are taking action on its values, principles and commitments?
- What should happen when partners don't adhere to the MoU?

# Next steps

- We'll use all the views from sessions like this one to design our MoU
- Ongoing discussions with NHS C&M through to spring / early summer to agree our MoU
- We'll keep you updated with developments in a timely way via your usual / regular networks
- To add in more detail from your organisation you can complete a survey online here <https://www.surveymonkey.com/r/23SLLCT>

