

Shadow Health and Wellbeing Board Minutes of the meeting held on 14 November 2012

Present

Councillor R Leese	Leader of The Council – In The Chair
Liz Bruce	Strategic Director for Adults, Health and Wellbeing
Mike Deegan	Chief Executive, Central Manchester Foundation Trust
Tracy Ellery	Interim Chief Executive, Manchester Mental Health and Social Care Trust
Councillor G Evans	Executive Member for Adults Services Central Manchester Clinical Commissioning Group
Karen James	Acting Chief Executive, University Hospital South Manchester
David Regan	Director of Public Health
Ian Rush	Chair of the Manchester Safeguarding Adults Board and the Manchester Safeguarding Children's Board
John Saxby	Chief Executive, Pennine Acute Hospital Trust
Dr Martin Whiting	North Manchester Clinical Commissioning Group
Mike Wild	Director of Macc (Manchester Alliance for Community Care)
Ian Williamson	Central Manchester Clinical Commissioning Group (substitute for Mike Eeckelaers)

Unable to be Present: Mike Eeckelaers and Bill Tamkin

SWHB/12/34 Minutes

Decision

To agree the minutes of the meeting on 19 September 2012 as a correct record.
There were no matters arising from the minutes.

SHWB/12/35 External Study into the Future of Health and Social Care in Manchester

In July the Board endorsed a proposal to commission an external assessment to describe what the outcome of moving more health provision into the community in Manchester would look like in practice. This was to consider the impacts in different areas of the city of integration of health and social care alongside the reconfiguration of acute services (Minute SHWB/12/21). That assessment had been undertaken by McKinsey & Company management consulting firm, and Penny Dash and Paul Morgan of the McKinsey presented an overview of the findings.

The five key findings of the study were described:

1. the population of Manchester is younger, more deprived and with worse health outcomes than national averages
2. there is variation in acute care admission levels, but overall level of acute use is high, compared to similar parts of the country
3. the existing plans for delivering Integrated Care need to be extended
4. extending the Integrated Care programme will require upgrading of out-of-hospital care facilities

5. acute capacity will need to be addressed to match demand, improve quality of care, and reduce unnecessary costs

It was explained that the conclusions of the study were not, of themselves, new or unprecedented, but that these issues had not had the same prominence or necessity in the “times of plenty” in the recent past. However, the pressure on resources across all health and social care providers was making it necessary to secure better care and budget savings concurrently. Given the powerful case made by the findings of the study, the Board agreed to examine at the next meeting proposals from the Driver Group on how to bring about the required changes and to extend the existing plans for delivering integrated care.

Decisions

1. To welcome the report.
2. To thank Penny Dash and Paul Morgan for the presentation.
3. To ask the Driver Group to report to the next meeting

SHWB/12/36 Healthy Work and Skills

The link between meaningful employment and good health is well established. A joint report by the Director of Public Health and the Interim Head of Regeneration highlighted the findings and recommendations of the Healthy Work and Skills theme of the Joint Strategic Needs Assessment (JSNA) and sought endorsement of future collaborative work with the Work and Skills Board and Core Cities Health and Wellbeing Group.

The highest concentrations of incapacity benefit claimants live in areas of the city where deprivation is high, where there are concentrations of low income households, low skills and educational levels, poor nutrition and poor physical and mental health. The report explained that in Manchester half of all claims for incapacity benefit related to mental health conditions and showed the increase over the past four years of the number of prescriptions issued for the treatment of depression and anxiety disorders.

The contribution of the Work Capability Assessment procedures in helping people move from benefits into employment were described, along with the likely effects of the Welfare Reform Act. There was also evidence of much good practice that could be developed and the Core Cities discussion paper on a local health and work strategies was appended to the report.

The Board welcomed the work that was being done to help break the links between unemployment and poor health. The benefits and positive effects of employment on people’s mental health were stressed. It was recognised that many people who suffer from low-level mental health problems could be helped by as much by gaining employment as from the medical treatments they were likely to receive. In this way it was felt that there was much that the organisations represented on the Board might

be able to do in their role as major local employers, as well as providers and commissioners of health and social services.

Decisions

1. To note the report and to agree to work in collaboration with the Work and Skills Board on this strategic priority.
2. To endorse the Core Cities report, 'Towards a Local Health and Work Strategy' which is summarised in Appendix 1 of the report, and to work through the Core Cities to progress actions.
3. To agree that a Clinical Commissioning Group lead represents the Board on the Work and Skills Board (The Director of Public Health will remain a member of the wider Work and Skills Partnership to support this work).
4. To agree to support the delivery of primary care and health interventions that will help people to move into, sustain and/or return to work.

SHWB/12/37 Progress on Establishing HealthWatch

The report of the Strategic Director, Adults, Health and Wellbeing provided the Board with an update on the development of the HealthWatch Manchester function. There were three main sections in the report:

1. the outcome of the public consultation on HealthWatch that had been undertaken between July and September 2012, which had generated 677 responses;
2. a report on progress with the HealthWatch Manchester specification and procurement; and
3. a description of the collaborative project approach across Greater Manchester to put in place the Independent Complaints Advocacy Service.

Concerns were expressed by some Board Members about the adequacy of the budget proposed for HealthWatch. It was explained that the Manchester Voluntary and Community Sector Health and Wellbeing Forum was concerned that initial proposals on funding for Healthwatch would not be enough for the organisation to fulfil its role. Given that Manchester's health and social care economy is a complex system, it was put to the Board that when in place Healthwatch Manchester would have a demanding brief to work with three hospitals, adults and children's social care, GPs surgeries and other health and care facilities. The Strategic Director responded to this by explaining how the proposed budget had been developed and how the organisation should be able to work with the budget available.

Decision

To note the report, the progress made and future plans, and to request an update in March 2013.

SHWB/12/38 Joint Health and Wellbeing Strategy

At its last meeting the Board had approved proposals for the structure of the Joint Health and Wellbeing Strategy (Minute SHWB/12/32). The Board was now presented with a draft of the Strategy for comment.

It was agreed that the draft should be further revised to incorporate the findings of the work by McKinsey (Minute SHWB/12/35 above). It was also felt that there was a lack of assertiveness in the approach set out in some part of the draft and that the actions to be undertaken by organisations represented on the Board, as well as those sought from other employers, could be more clearly arranged in the document.

Decisions

1. To asked that the Strategy be updated to incorporate the view of the Board expressed at the meeting.
2. To note the proposals for the further development of the Strategy as set out in the report.

SHWB/12/39 National Commissioning Board and the Role of the Greater Manchester Local Area Team

Warren Heppolette, the designated Director of Operations and Delivery at the GM Local Area Team, outlined the work and roles of the National Commissioning Board and of the Greater Manchester Local Area Team (GM LAT). The LAT would have a relationship with the 12 CCGs across Greater Manchester and would be working with AGMA on sub-region initiatives such as the Community Budget.

Given the important work the LAT had to do there was a discussion on how the Area Team could be represented on the Board. Mr Heppolette undertook to discuss possible involvement or Board membership with colleagues on the LAT.

Decisions

1. To thank Warren Heppolette for his contribution to the meeting
2. To note the remit of the Local Area Team
3. To extend an invitation to the LAT to nominate an appropriate person to join the Board

SHWB/12/40 Next Meeting

Decision

The date of the next meeting is Wednesday 23rd January 2013 at 10:00am in Committee Room 11, Manchester Town Hall.