

Health and Wellbeing Board

Minutes of the meeting held on 9 March 2016

Present

Councillor Richard Leese	Leader, Manchester City Council (Chair)
Councillor Paul Andrews	Executive Member for Adult Services
Lorraine Butcher	Joint Director of Health and Social Care Integration
Mike Deegan	Chief Executive, Central Manchester Foundation Trust
Mike Eeckelaers	Chair, Central Manchester Clinical Commissioning
Gladys Rhodes-White	Strategic Director of Children's Services
David Regan	Director of Public Health, Manchester City Council
Hazel Summers	Strategic Director of Adult Social Services
Vicky Szulist	HealthWatch
Dr Martin Whiting	Chief Accountable Officer, North Manchester Clinical Commissioning Group
Mike Wild	Chief Executive, Macc

Also Present

Damien Finn, Pennine Acute Hospital Trust
Chris Mayer, Pennine Acute Hospital Trust
Councillor Sheila Newman, Executive Member for Children's Services
Steve Mycio, Chair, Central Manchester Foundation trust
Geoff Little, Deputy Chief Executive (People), Manchester City Council
Barry Clare, University of South Manchester Hospital Trust
John Harrop, Manchester Mental Health and Social Care trust
Phillip Burns, South Manchester Clinical Commissioning Group

HWB/16/07 Gladys Rhodes-White and Dr Bill Tamkin

The Board noted that this was the last meeting for Gladys Rhodes-White and Dr Bill Tamkin. The Board thanked Gladys for her input and wished her well for the future. Dr Tamkin was stepping down from his role as Chair of South Manchester Clinical Commissioning Group as the end of March. The Board thanked him for his active role and support in the establishment and operation of the Board since it started in shadow form in 2012.

HWB/16/08 Minutes

Decision

To agree the minutes of the Health and Wellbeing Board meeting on 13 January 2016.

HWB/15/09 Manchester Safeguarding Children Annual Report 2014/2015

The Independent Chair of Manchester Safeguarding Children Board (MSCB) presented the Annual Report for 2014/15/ The report provided an account of the work of the Board and assurance that the MSCB undertakes its duties effectively and

efficiently. The report provides a retrospective account of the MSCB's activity during 2014-15.

A full Annual Report covering the 2015-16 year will be available in May 2016, and will set out the further actions taken to improve the operation of the Board, respond to the requirements following the Ofsted Review in 2014, and will demonstrate the impact of the Board in overseeing effective safeguarding in Manchester. Mr Ashcroft explained that he was appointed as the Independent Chair in September 2015. It was his role to speed up the pace of change for the Board in the context of the inadequate rating from Ofsted in 2014.

The Board recognised that the report was historical and substantial changes had taken place since the judgement. A member asked about the work done to engage with partners more effectively as this was one of the key criticisms of the Ofsted inspection. Mr Ashcroft explained that there was now better engagement with partners based on proposals that were developed at a workshop in November. Other work included a new Board structure to ensure people were placed at the right level, concentrating on performance and improvement and combined work with the Manchester Safeguarding Adults Board in areas where there was overlap. Embedding this work would take time but feedback was positive so far.

The Board welcomed the report and acknowledged that the next annual report would provide more detail on the work completed to date.

Decision

To note the report.

HWB/15/10 Manchester Health and Social Care Locality Plan Update

The Board received a report of the Joint Director of Health and Social Care Integration that provided an update on progress of the Plan in the context of national, regional and local policy, and how these changes influenced the development of the plan. The Locality Plan has three main programmes of work which were:

- A single commissioning service,
- A single hospital service for the city,
- "One Team" delivering community based integrated care

Work on each of these elements was already underway and progressing quickly. As such, the Locality Plan required updating to set out the scale of the challenge and the pace of change. Specific work being undertaken included financial modelling for the next five years, aligning the Plan with the CCG operational plans and revising the strategic plans and actions contained within the plan.

The Board acknowledged the reasons for the plan not being included within the papers for this meeting but requested that it was provided in the near future so that it could be reviewed. It agreed to consider the plan at the extra meeting of the Board on 27th April 2016. The Board agreed the recommendations and considered some elements of the Locality Plan in more detail.

Single Hospital Service Review

Sir Jonathan Michael, Independent Director of the Single Hospital Service Review presented a report that provided further detail on the progress made against the action plan for the development of a single hospital service for Manchester. He explained that the first phase of the review had been extended to enable maximum engagement with clinicians. This would be presented to an extra meeting of the Board in April. The second phase of the project would be presented to the Board in June as planned.

Chairs of the hospital trusts and Clinical Commissioning Group representatives confirmed that they had been fully engaged in the process and were confident that the review was on target. As further progress is made, commissioners will review how other programmes of redesign such as integrated care, primary care and out of hospital care fit in with the review. Provider representatives confirmed that all hospital trusts recognised the timeliness of the review and were committed to delivering a single service for Manchester.

Progress Update on the One Team Development and Implementation of the Local Care Organisation

The Board considered a report of the Manchester Provider Group, which provided an update on the development, and implementation of One Team and a local care organisation.

Originally, the Provider Group was established to lead the development of “One Team” and the set up of the local care organisation that will hold the single provider contract. The report described the progress made with this to date, the proposed changes to the Manchester Provider Group’s governance arrangements and the engagement with primary care and providers across the city in this process.

The Board welcomed the report and the proposed revised governance arrangements. Members recognised the opportunities that this piece of work provided to bring together transformation to out of hospital care and primary care. Members described the activities that were being undertaken to engage with GPs and all providers across the city. Officers clarified that opticians, dentists and pharmacists would be included in the revised membership of the Provider Group and would be represented.

In discussing the recommendations, the Board noted that the revised governance arrangements would not be in place until later in the year so the Board agreed to note the proposals and request a further report back to approve the proposals once they were finalised.

Health and Wellbeing Board Governance Review

This report was withdrawn from the agenda pending further clarification on legal issues on the proposed structure of the Board.

Homelessness and Health

The Board considered a report of the Strategic Director of Adult Social Care which set out the current challenges in relation to rough sleeping and homelessness in the city and the impact this has on health and wellbeing. It described how these problems were being tackled through partnership work across all sectors. The report also presented the draft Manchester Homelessness Charter to the Board.

The Board welcomed Dr Sean Jackson, Jez Green, Amanda Croome and Jenny Osbourne. They described some of the measures in place to improve the health of homeless people and explained that any strategy to deal with homelessness needed to include health as a priority. They described some of the complexities of homelessness, the experiences of homeless people, the challenges faced and the need to engage with all partners to prevent and overcome homelessness. The Board was asked to approve the Homelessness Charter which set out the vision and values for Manchester in relation to homelessness, and how all partners can take their share of responsibility for preventing and overcoming homelessness in Manchester.

Members discussed the perceptions of on street begging and how to tackle this problem. The Strategic Director explained that there was a need to educate people that giving people money did not resolve the problem in the long term. There were also issues around professional begging and tackling this as a criminal activity.

The Board discussed the measures in place to identify vulnerable groups such as care leavers and young people with mental health problems. The Strategic Lead confirmed that specific work was undertaken with each of these groups and it was important to include them. Officers explained some of the difficulties experienced by homeless people in accessing services, particularly around mental health and that this was an issue that needed to be addressed. The Board praised those specialist services such as Urban Village who supported homeless people to get into accommodation and access health services.

Dr Jackson explained that it was important to identify how health services responded to the issue of homelessness. Although accommodation was a crucial element, being homeless presented a significant risk of early death and poor health. Engaging partners from all sectors was necessary to address the wider problems. The Board recognised that homelessness needed to become a priority in all strategies and would need the commitment from organisations to support the development of the Charter.

Decision

1. Manchester Health and Social Care Locality Plan Update
 - (a) To note the ongoing work to update the Plan before a further submission to the GM Health & Social Care Devolution Team in late March 2016;
 - (b) To support the intention to ensure the Plan is reviewed and updated on a six monthly basis,
 - (c) To note the need for transformation priorities to better align objectives and delivery timescales.

2. Single Hospital Service review
 - (a) To note progress with the Manchester Single Hospital Service Review.
 - (b) To note the revised timeline for reporting arrangements.
3. Progress Update on the One Team Development and Implementation of the Local Care Organisation
 - (a) To note the revised governance arrangements for the Manchester Provider Group;
 - (b) To note the progress and plan regarding the development and implementation of the One Team approach.
 - (c) To note the progress and plan regarding the development of a Local Care Organisation.
 - (d) To note the progress with the governance and accountability arrangements before they move from shadow to full implementation and to request a report back to the Board to approve the proposals when they were finalised.
4. Homelessness and Health
 - (a) To endorse the Manchester Homelessness Charter and to commit organisational support to its development.
 - (b) To approve the proposal to ensure Homelessness is a priority topic for the Joint Strategic Needs Assessment in 2016.
 - (c) To endorse the Manchester Homeless Healthcare Standards to support equitable access and improved standards of healthcare services for homeless people.
 - (d) To agree that a new approach to the delivery of mental health services for homeless people is required which is beyond the current eligibility criteria
 - (e) To agree that healthcare funding for specialist homeless health services is a priority and should be placed on a secure and recurrent footing

HWB/15/11 Green and Healthy Partnership – Prospectus on Climate Change and Health

The Board considered a report to the Programme Director of Manchester Climate Change Agency which set out a Manchester-specific understanding of the relationship between health and climate change.

The report included the draft 'Green and Healthy Manchester: a prospectus for joint action on health and climate change'. This identified five priorities where joined up action could deliver more cost effective and sustainable improvements to health and

climate change, and the commitment of the current Green and Healthy Manchester Partnership to work with other partners to take forward the delivery of these priorities.

The Programme Director outlined some of the work done to date by the Manchester Climate Change Agency, working with ten of the city's third sector organisations who have extensive experience of working developing and delivering practical projects that improve the local environment and health. Other work included the establishment of Manchester: a Certain Future Steering Group to work towards the commitment to become carbon free by 2050. The Board was invited to appoint a member to join the Steering Group

The Board discussed the links between health and the environment and recognised the importance of the work that was being done to improve healthy lifestyles. The Board agreed to appoint Philip Burns (who would be appointed to the Board to replace Dr Tamkin) to join the Manchester: a Certain Future Steering Group.

Decision

1. To note the proposal to use the draft prospectus as the starting point for joint work on health and climate change and to provide any comments on its content.
2. To note the proposal to use the Partnership as the mechanism for delivering the Prospectus.
3. To note the zero carbon Manchester 2050 work, the establishment of a health-focussed element of the evidence base, and the potential to include a public health objective in the forthcoming climate change plan.
4. To recommend that Phillip Burns join the Manchester: a Certain Future Steering Group to support the zero carbon work.

HWB/15/12 Greater Manchester Learning Disabilities Fast Track

The Board considered a report of the Strategic Director of Adult Social Care which provided members with information about the NHS England "Transforming Care for People with Learning Disabilities and/or Autism" programme and the local implementation within Greater Manchester known as the GM Learning Disability Fast Track.

NHS England has identified Greater Manchester as a fast track area for learning disabilities and autism. This programme focuses on transformation activity to improve community based care and reduce the use of inpatient beds. As part of the programme, Greater Manchester has successfully bid for £3m from NHS England fund activities and improve the delivery of outcomes. The report described the challenges in this area, the activities planned as part of the programme and performance measures.

Decision

To note the report and agree to receive future updates about progress against attainment of the targets within the GM Learning Disability Fast Track Programme.

HWB/15/12 Joint Strategic Needs Assessment – Children and Young People

The Board considered a report of the Director of Children's Services and the Director of Public Health, which provided an update on the progress of the Joint Strategic Needs Assessment (JSNA) for children and young people. The Board was responsible for overseeing the production of the JSNA and it was submitted for approval to this meeting.

The Director of Public Health explained that the work to complete the JSNA was completed using the online model previously used for other JSNAs. This meant information was constantly updated and changing to ensure it stayed relevant. The Children's Improvement Board had approved the JSNA and was required to report how it was used in decision-making in Manchester. The Executive Member for Children's Services explained that the Children's Board had reviewed the JSNA and agreed to look at each area in more depth at future meetings.

The Board welcomed the JSNA and recognised the importance of all partner agencies using the information to inform their work. The Board acknowledged that there was a "Joint Commissioning Intentions Strategy" being developed based on this JSNA.

Decision

1. To note the report
2. To approve and formally sign off the development of the JSNA for Children and Young People as a completed action.

HWB/15/13 Health and Wellbeing Strategy refresh

The Board considered a report which presented an update on the draft revised Health and Wellbeing Strategy. The Joint Health and Wellbeing Strategy which responds to the health needs of the local population as set out in the Joint Strategic Needs Assessment. Overseeing the Strategy was a statutory responsibility of the Board. The existing strategy was agreed in 2013, has been amended to reflect changes from evolving programmes of work such as the Manchester Strategy and Greater Manchester health and social care devolution.

The Director of Public Health explained that the number of Board priorities had been reduced from 8 to 7. It was important that all partner agencies and Board took account and ownership of the Board priorities to ensure they were delivered. The Strategy was due to be published on the Manchester partnership website after the meeting.

A member suggested that each of the clinical commissioning groups and providers should take the strategy to their own Boards for approval to ensure that it aligned with each individual organisation's plans. The Board recognised that it was important that strategies such as this were translated into commissioning and delivery of actions to ensure that targets were met.

Decision

To note the report.

HWB/15/14 Health and Wellbeing Board Annual Report

A report of the Director of Public Health set out the draft annual report of the Health and Wellbeing Board. It described the role of the Board, its activities over the past year and planned actions for the future. The document needed to be finalised and the Board was asked to delegate authority to the Director of Public Health to complete the report. The report will be published on the Manchester Partnership website in April 2016.

Decision

1. To note the report.
2. To delegate authority to the Director of Public Health, in consultation with the Executive Member for Adult Health and Wellbeing to finalise the report.

HWB/15/15 Better Care Fund Quarter 3 2015/16 Quarterly Submission Report

The Board considered a report of the Deputy City Treasurer and the Chief Financial Officer of the clinical commissioning groups, which provided an update on the template submitted to NHS England for the Better Care Fund third quarter 2015/16 performance. The template measured performance against six key areas and was submitted under delegated authority to the Strategic Director for Families Health and Wellbeing, which had been agreed by the Board at a previous meeting.

The Head of Finance for Children and Families explained that there were town national conditions that were still unmet but were on target to be completed by the end of the financial year. The target for non-elective admissions had not been achieved for the period 1 January 2015 to 31 December 2015. He noted that there had not been a substantial overall increase in the level of admissions above 2014 levels.

Recommendation

To note the report.

HWB/15/16 Pooled Budgets

The Board considered a report of the Deputy City Treasurer and the Chief Financial Officer (CCGs) on the pooled budget arrangements of the "One Team" following the release of the Better Care Fund Guidance. The report contained further revisions to the proposed pooled fund in 2016/17, reflecting a range of health and care community based budgets associated with the first phase of implementation of the "One Team".

The Board discussed the rationale for carrying forward the priorities from the previous year in the context of the aims of the Locality Plan and Greater Manchester

devolution. The Director of Health and Social Care Integration explained that this was prescribed by NHS England as the Better care Fund was essentially separate from the regional and local context. Due to the timescales involved, it was proposed that the Board should delegate authority for the final submission to the Joint Director to ensure that this context could be taken into account.

Decision

1. 2016/17 Better Care Fund planning arrangements:
 - (a) To note the release of planning guidance and associated requirements;
 - (b) To endorse the retention of a risk reserve in 2016/17 for non-elective admissions (at the same level as 2015/16) and the roll forward of 2015/16 spending priorities to 2016/17 for initial planning purposes; and
 - (c) To delegate authority to the Joint Director for Health and Social Care Integration, to approve and submit the BCF submission in April 2016 on behalf of the Health and Wellbeing Board.
2. To note the latest update to the proposed pooled fund in 2016/17 and that work is underway to update the Partnership Agreement for implementation 1st April 2016.
3. To note the intention to retain existing financial risk management principles and arrangements in relation to the pooled fund for a further twelve months.
4. To note the intention to further develop the approach to pooling budgets including embedding new governance arrangements, scoping the range of related acute hospital activity linked to One Team, and the development of joint financial planning and risk management arrangements for 2017/18.