# **Health and Wellbeing Board**

# Minutes of the meeting held on 27 April 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

Paul Marshall Strategic Director of Children's Services

Vicky Szulist HealthWatch

Mike Wild Chief Executive, Macc

### Also Present

Michael Greenwood, North Manchester Clinical Commissioning Group Councillor Sheila Newman, Executive Member for Children's Services Steve Mycio, Chair, Central Manchester Foundation Trust Barry Clare, University of South Manchester Hospital Trust John Scampion, Manchester Mental Health and Social Care trust Phillip Burns, South Manchester Clinical Commissioning Group

### HWB/16/17 Minutes

#### Decision

To agree the minutes of the Health and Wellbeing Board meeting on 9 March 2016.

## HWB/16/18 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 and the final version of the Manchester Health and Social Care Locality 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

The Joint Director of Health and Social Care Integration explained that this was the final version of the plan but it would continue to evolve, and be reviewed as it was implemented. The Plan formed Manchester's contribution to the Greater Manchester devolution plans. It also set out the scale and pace of the changes that were required across the city in the context of a very complex health and social care system. Since the Board considered the last version of the Plan in March, two additional priorities had been added on urgent care and transforming residential care.

The Board welcomed the plan and the priorities set out within it. A member noted that there was not enough evidence that health and social care partners were using

commissioning to support the recruitment of unemployed Manchester residents as the move towards a single commissioning service progressed. The Director of Health and Social Care Integration recognised this concern and explained that the plan sat in the context of wider public sector reform, the Manchester Strategy and the Social Value Act. The Council and its partners were committed to this within their procurement strategies.

A member asked about the children and young people mental health section of the plan and whether there were any opportunities to establish a bespoke service for 15-25 year olds. The Joint Director for Health and Social Care Integration explained that services for children and young people were still being developed. Discussions were underway at a Greater Manchester level but it was still a work in progress. The Director of Children's Services agreed that there was still some further work required.

The Board agreed to receive quarterly updates on the implementation of the Locality Plan. Members also recognised the importance of updates on each of the three pillars of the plan to ensure that all of them were developed at the same pace. The Clinical Commissioning Groups had written to leaders at the Council to ask to meet to agree and define how the single commissioning function would work. It was also important to recognise that there was a relationship between the Plan and Greater Manchester devolution but that it was not a top down model of change.

### **Decision**

- 1. To adopt the Locality Plan as the key strategic plan that underpins the radical transformation of health and social care provision in Manchester
- 2. To note that two additional priorities have been added to the Plan:
  - Urgent Care
  - Transforming Care
- 3. To note the intention to keep the Plan under regular review with any changes to be reported to the Board.
- 4. To receive reports on a quarterly basis on progress towards implementation of the Plan.

## **HWB/16/19 Single Hospital Service Review**

The Board considered a report of the Independent Director of the Single Hospital Service Review which described the first stage of the review, the responses from hospital trusts and the recommendations arising from this stage of the review. The Board was asked to endorse the recommendations from the first stage of the review and recommend that it progresses to the second stage.

Sir Jonathan Michael, Independent Director for the Review explained the first part of the review sought to consider the benefits of delivering a single service. There were some exemplary examples of the care provided in the hospitals across Manchester. However there was variation in the quality of services and health outcomes for residents across the city. Sir Michael explained that the three hospitals have different mixes of specialist and general services, different priorities and different ways of working. This has led to duplication in some services, variations in clinical outcomes, variation in patient experience and access to services. There is inefficiency and waste due to duplication and all hospitals are experiencing recruitment difficulties in shortage clinical staff groups. He also explained that clinicians and staff had been involved in the discussions of the review and the three hospitals all recognised the need for more collaboration across the city to ensure services were consistent.

The Chairs of each of the hospital trusts endorsed the recommendations in the review and explained that they had been fully engaged in this review. There were some concerns about ensuring that other changes across the city were implemented at the same pace as changes to hospitals. The CCG representatives acknowledged this and described the need for the out of hospital service to be developed alongside to ensure joined up health and social care services that met the needs of residents.

The Board welcomed the report and recognised the opportunities that the review brought to redesign services and provide better outcomes for the population. A member explained that the review should take account of the minimum services that should be available at each hospital to ensure that people don't have to travel for services that should be available locally. The Board recognised the importance of services being provided locally but also acknowledged that some services would have to be centralised to provide better standards of care.

Specific concerns were raised about North Manchester General Hospital. The Board recognised that the Chair and Chief Executive of Pennine Acute Hospital Trust had been fully engaged in the review and the viability of the hospital had been considered alongside the full review of the North East sector hospitals. Sir Michael explained that he was working closely with other hospital trusts and commissioners to provide assurance that the single hospital service review took account of other reviews that were underway across the conurbation. He also added that the detailed governance arrangements would be considered in the second stage of the review.

The Board discussed how the changes would be communicated to patients. Sir Michael explained the second stage of the review would consider the best governance arrangements and if the recommendations were accepted, there would be a wider consultation with patients. The Board recognised that it was important to communicate with patients but it was also crucial that changes moved at the right pace.

#### Decision

- 1. To endorse the first stage report and to accept the recommendations provided in section 6.1 of the report subject to the comments of the Board.
- 2. To note the feedback provided by the Boards of Central Manchester foundation trust, Pennine Hospital Acute Trust and University Hospital of South Manchester Trust

3. To recommend that the review proceeds to stage 2 and considered the governance and organisational arrangements that are best to deliver the service.

## HWB/16/20 Health and Wellbeing Board Governance

The Board considered a report of the Joint Director of Health and Social Care and the City Solicitor which proposed new governance arrangements for the Health and Wellbeing Board. The arrangements included changes to the membership and specific responsibilities of the Health and Wellbeing Board. These changes were set out in the report.

The Joint Director of Health and Social Care explained that the arrangements came from the governance review which had been completed in the autumn. The report sought the Board's approval to recommend that the Council changes the membership of the Board and the Health and Wellbeing Executive Group. Changes would also be made to the Council's constitution to take account of the changes to the Board's remit. Between Jan governance are finalised and make adjustments to Council constitution. There were some initial delays to finalising the membership of the Board while consideration was given to the statutory requirements of the Health and Social Care Act but the final proposals accommodated what the Board wanted to achieve.

The Board welcomed the increased and wider representation of primary care representatives on the Board and the Health and Wellbeing Executive. The Joint Director explained that one representative had been nominated via the Local Medical Council but she was in the process of checking whether this would be sufficient for all primary care organisations but this would be confirmed in the near future.

A member noted that there could be some potential conflicts of interest with the voluntary and community sector representative as the representative was likely to be from a provider. The Board agreed that each representative should have a named substitute so that they could step forward if any conflict occurred. The Chair reminded members that conflicts of interests could arise but this was unlikely as the board was not responsible for any commissioning decisions.

## **Decision**

- To note the proposed changes to the membership and responsibilities of the Health and Wellbeing Board to support the implementation of the Locality Plan;
- 2. To recommend that the Council appoints the new membership of the Board as set out:
  - Leader of the Council (Chair)
  - Executive Member for Adults (MCC)
  - Executive Member for Public Service Reform (MCC)
  - Executive Member for Children (MCC)
  - Chair, Central Manchester Clinical Commissioning Group
  - Chair, North Manchester Clinical Commissioning Group
  - Chair, South Manchester Clinical Commissioning Group
  - Chair, Central Manchester Foundation Trust
  - Chair, University Hospital South Manchester

- Chair, Penine Acute Hospital Trust
- Chair, Manchester Mental Health and Social Care Trust
- Voluntary and Community Sector representative
- Chair, Healthwatch
- Primary Care representatives
- Strategic Director of Children's Services
- Director of Public Health
- Strategic Director of Adult Social Services
- NHS Commissioning Board representative
- 3. To recommend that the Council agrees to the appointment of named substitutes for board members. These will be nominated via the Constitutional and Nomination Committee.