

Health and Wellbeing Board

Minutes of the meeting held on 5 July 2017

Present

Councillor Richard Leese, Leader of the Council (Chair)
Councillor Bev Craig, Executive Member for Adult Health and Wellbeing (MCC)
Councillor Sheila Newman, Executive Member for Children's Services (MCC)
Dr Manisha Kumar, Manchester Health and Care Commissioning
Dr Denis Colligan, Manchester Health and Care Commissioning
Dr Ruth Bromley, Manchester Health and Care Commissioning
Kathy Cowell, Chair, Central Manchester Foundation Trust
Jim Potter, Chair, Penine Acute Hospital Trust
Mike Wild, Voluntary and Community Sector representative
Vicky Szulist, Chair, Healthwatch
Dr Carolyn Kus, Strategic Director Adult Social Services
David Regan, Director of Population Health and Wellbeing
Paul Marshall, Director of Children's Services

Apologies

Barry Clare, Chair, University Hospital South Manchester

HWB/17/18 Minutes

Decision

To agree the minutes of the Health and Wellbeing Board meeting on 15 March 2017.

HWB/17/19 Armed Forces Covenant and the health needs of Veterans across the Northwest

The Board considered the report of the Strategic Director of Adult Social Care which introduced a presentation by Dr Robin Jackson, NHS Armed Forces Network North West in respect of the Armed Forces Covenant and the health needs of Veterans across the Northwest.

The report described the work around developments for Veterans and Armed Forces was a high priority and built on recent success of the Canada Street Project via the BBC DIYSOS. A small officer group had formed to support the nominated Strategic Management Team Champion.

Dr Jackson described to the Board that there were 560,000 Veterans in the North West and 66% of these were aged over 65. He said that a survey had found that those aged 16-34 were more likely to report hearing loss; across all ages were more likely to report musculoskeletal problems and there was a significant increase in alcohol abuse in young early service leavers.

Dr Jackson said that Health and Wellbeing Boards should have a robust Joint Strategic Needs Assessment (JSNA), a process that looks at the current and future health and care needs of local populations to inform and guide the planning and commissioning of health, well-being and social care services within a local authority area. He said that the JSNA should address the health needs of veterans with a focus on, routine identification; the provision of evidence based services and the involvement of Veterans and their families in the production of the JSNA.

The Board then received a presentation describing the Armed Forces Covenant. Manchester City Council had signed the Armed Services Community Covenant on the 27th June 2013 alongside representatives of the military and Veterans charities. The application of the pledges contained within the Covenant had subsequently been driven by an officer steering group under the direction of Hazel Summers in her capacity as Senior Management Team Armed Forces Champion.

An event had taken place on 19 June 2017 which brought together the Lead Member for Armed Forces, Councillor Tommy Judge with local military and veteran organisations and wider stakeholders to showcase achievements to date and to launch a wider Armed Services Covenant Forum which would drive forward development utilising an “Our Manchester” partnership approach.

The Covenant Forum marked a shift to an “Our Manchester” approach and would meet on a six monthly basis around a key theme; inform and shape our forward action plans; Encourage collaboration and coordination across organisations; build the strong working networks and relationships; monitor the performance of the Covenant Steering Group and make a real difference in people’s lives.

The presentation described that the Covenant Forum web page had been created and this provided information on the aims and expectations of the Forum and key contact details. In addition services were to be progressively reviewed to support transitions and eliminate disadvantage in areas such as housing, school registration, social care, employment, voting and leisure access.

The presentation informed the Board that the JSNA in development at a Manchester and Greater Manchester level was seeking to provide Increased Access to Psychological Therapies (IAPT) commissioned and provided in line with Covenant, and there was an opportunity to strengthen a joint approach through Manchester Health and Care Commissioning. In addition there was to be a focus on the wider key determinants of health, such as housing and employment and skills.

The Board noted that all ten Greater Manchester authorities had signed up to the Armed Forces Covenant to support those who had served in the armed forces and their families.

Decision

The Board noted the recent developments and efforts to improve the support for Veterans and Armed Forces.

HWB/17/20 Workplace Health Baseline Assessment

The Board considered the report of the Director of Population Health and Wellbeing. The report introduced the Health and Wellbeing Board Workplace Health Baseline Assessment commissioned on behalf of Board.

The report described that the document represented the culmination of two years' work to deliver on a Health and Wellbeing Board recommendation to demonstrate public service leadership under the Strategic Priority 'bringing people into employment and ensuring good work for all'.

The report made findings in relation to workplace health practices across Board organisations, and recommendations for action at individual organisation level and system level.

The Board welcomed Sue Fowler-Johnson and Dr Claire Harris from Aspire and PACE. Aspire and PACE were North West based consultants that specialised in health and wellbeing, coaching, leadership and organisational development. Aspire and PACE worked with a range of stakeholders to enhance performance and promote positive wellbeing.

Sue Fowler-Johnson and Dr Claire Harris delivered to the Board a presentation that described the aims of the project they had undertaken; the key findings; recommendations and conclusions.

The Board were informed that data collection was ongoing across at all of the participating organisations to bench mark performance in the areas identified. The Board were informed that the data provided for Greater Manchester West Mental Health NHS Foundation Trust did not include data from Manchester Mental Health and Social Care Trust. The Board were also informed that the report did not include Primary Care data however the Local Care Organisations would be included in future analysis. In response to a comment regarding the increased levels of nurses and midwives leaving the profession the Board were informed that staff exit interviews had not been used in the collection of this data.

The Board commented that the use of language when describing mental health and stress needed to be consistent when recording this information. The Strategic Lead, Health and Employment acknowledged that there was a recognition of a need to ensure that this was recorded in a consistent way.

The Board welcomed the inclusion of the Voluntary and Community Sector in the report and noted that there existed a significant number of people in this group who were not formal employees.

The Board were informed that work was being developed at a Greater Manchester level, complimented by the Mayors Employment Charter to address the issue of work and health, and it was understood that work was recognised as a health outcome. The Board said that the data collected in Manchester could be used to stimulate and support change at a wider GM level and a reference was made to the work of the Joseph Rowntree Foundation in this area of work.

Decisions

The Board:

1. Notes the findings and support the recommendations in the report.
2. Agrees to receive further information on recommendations 1.1, 4.1 and 6.1 of the Recommendations for Action at the next meeting of the Board.
3. Agrees that the Manchester HR Directors Workforce Group will take lead responsibility for driving forward an action plan based on the report recommendations.
4. Agrees that a progress report is brought back to the Board in twelve months' time.

HWB/17/21 Manchester Arena Incident - Recovery: Welfare & Health

The Board considered the report of the Deputy Chief Executive, Manchester City Council and the Managing Director, Greater Manchester Association of Clinical Commissioning Groups. The report provided an overview of the work in relation to welfare and health as part of the recovery phase following the Manchester Arena incident on the 22 May 2017. The Board welcomed Rob Bellingham, Association of Greater Manchester Clinical Commissioning Groups who introduced the report.

Mr Bellingham described the work underway following the Manchester Arena incident and the transition from the response to recovery phase a multi-agency Recovery Coordination Group had been established and a recovery action plan had been developed in line with national guidance. Mr Bellingham described that an important aspect of the ongoing support to the victims leaving hospital care was the planning for their coordinated care following discharge. He said that that it was recognised that the victims were from other areas of the country, and these managed discharges were being coordinated with the patient's home areas.

The Board noted the effective and swift response of health partners to the tragic events of 22 May. A Board Member commented that there was a genuine sense of collaboration between all partners in the response. The Chair said that the response would be reviewed to help inform future civil contingency plans for the city.

The Board noted the positive and important response Schools had demonstrated in supporting young people across the city. Schools had supported young people's resilience by reiterating the message that it was safe to be a child in Manchester. The Board commented that support for young people needed to be ongoing, including during the summer holiday period and the autumn term as trauma was often delayed and support mechanisms needed to be available to young people when required.

The Board noted that one of the objectives of the working group included ensuring those affected by the attack did not feel forgotten as the world moved on. The Chair

recommended that the Board reviewed this and maintained oversight of this important area of work.

Decision

The Board supports the work being undertaken on welfare and health to assist recovery following the arena attack.

HWB/17/22 Manchester Health & Care Commissioning and Local Care Organisation procurement

The Board considered the report of the Executive Director of Planning and Operations, Manchester Health and Care Commissioning. The report provided an update on the development of Manchester Health and Care Commissioning and provided a progress report with regard to the procurement of the Local Care Organisation.

The Board welcomed Ed Dyson, Executive Director of Planning and Operations, Manchester Health and Care Commissioning who introduced his report.

The Board noted that the VAT implications that were reported were a national issue and not unique to Manchester.

Decision

The Board noted the report.

HWB/17/23 Manchester Local Care Organisation - Provider Update

The Board considered the report of the Chief Executive, Manchester Provider Board (MPB). The report described that the MPB had appointed an executive team to lead the development of the Local Care Organisation (LCO). The executive team were finalising a programme plan which would enable regular reporting to a range of forums, including the HWBB, to provide visibility and assurance around progress. The programme plan would be divided into three main areas: developing from vision to strategy, including implementation of new models of care, building the organisation, including organisational form and managing the change through transaction. There was an agreement between all partners as to priority new models of care for 2017/18 with implementation having begun around High Impact Primary Care and Home from Hospital roll out, with development work ongoing in all other areas. The Manchester Provider Board was also continuing to progress with the procurement process that was formally launched 10 March 2017.

Decisions

The Health and Wellbeing Board notes;

1. The appointment of the executive team to lead the development of the Local Care Organisation and programme plan;
2. The progress to date around implementation of new models of care and agreed priorities for 2017/18; and
3. The Manchester Provider Board's progress in the procurement process to date.

HWB/17/24 Manchester Single Hospital Service - Update on current position

The Board considered the report of the Director of the Single Hospital Service Programme. The purpose of the report was to provide the Board with a progress update on the creation of a Single Hospital Service for Manchester.

The Board welcomed Peter Blythin, Director of Single Hospital Service who introduced the report. He described that work was ongoing with the three statutory regulatory bodies, the Competition and Markets Authority; NHS Improvement and the Care Quality Commission and he was confident that the successful registration of the new Foundation Trust would be authorised on 1 October 2017. The Board commented that the name of the new Trust needed to reflect the move from an acute service to a more comprehensive health care provider.

In response to questions from Members of the Board regarding the reported communications and engagement activity, Mr Blythin said that they had received approximately 3500 responses to the survey of internal and external stakeholders and the theme that had emerged as a priority for staff was patient experience and safety.

The Board noted that the successful delivery of this first stage, the merging of Central Manchester University Hospital NHS Foundation Trust and the University Hospital of South Manchester NHS Foundation Trust would facilitate the incorporation of North Manchester General Hospital into the Single Hospital Service.

Decision

The Board notes the current position with the Manchester Single Hospital Service Programme.

HWB/17/25 Manchester Investment Agreement

The Board considered the report of the Joint Director Health and Social Care Integration. The report updated the Board on Manchester's application to the Greater Manchester (GM) Transformation Fund submitted in October 2016 and the steps being taken to confirm the Investment Agreement with GM and the wider Manchester Agreement with partners within the City to deliver the necessary changes in service delivery required to improve health and care outcomes and a financially sustainable system by 2020/21.

Decision

The Board notes the report.

HWB/17/26 Adult Social Care Reform Grant

The Board considered the report of the Strategic Director Adult Social Services and the City Treasurer. The report described that the 2017 Spring Budget included an announcement of an additional £2 billion for adult social care and a commitment to establishing a fair and more sustainable basis of funding in the future. The report detailed the allocations to Manchester City Council, the conditions attached to the grant and the principles for deployment to be used by Manchester Health and Care Commissioning. The funding was an integral component of a total reform programme, aligned to the Locality Plan, which also included the Greater Manchester (GM) transformation fund investment in the Manchester locality and a wider GM level adult social care transformation programme.

The report was provided as an update item for the Health and Wellbeing Board with a more detailed report on grant deployment proposals being reported to the next meeting. The funding had to be included within the Better Care Fund and as such, the Board would be asked to approve the proposed spending plans in due course.

Decision

The Board notes the report.

HWB/17/27 Better Care Fund Performance Quarter 4 2016/17

The Board considered the report of the City Treasurer, Manchester City Council and Chief Financial Officer, Manchester Clinical Commissioning Groups. The Better Care Fund (BCF) had been established by Government to provide funds to local areas to support the integration of health and social care. Section 75 of the National Health Service 2006 Act gave powers to local authorities and health bodies to establish and maintain pooled funds out of which payments may be made towards expenditure incurred in the exercise of prescribed local authority functions and prescribed National Health Service (NHS) functions.

The report provided the Health and Wellbeing Board with an overview of the template submitted to NHS England and Better Care Fund Support Team for Better Care Fund Quarter 4 2016/17 performance.

This report set out the response to the seven sections of the performance template, budget arrangements; national conditions; income and expenditure; supporting metrics; additional measures; year end feedback and a narrative.

Decision

The Board notes the report.