

Health and Wellbeing Board

Minutes of the meeting held on Wednesday, 7 June 2023

Present:

Councillor T Robinson, Executive Member for Healthy Manchester and Adult Social Care (Chair)
Councillor Chambers, Assistant Executive Member for Healthy Manchester and Adult Social Care
Katy Calvin-Thomas, Manchester Local Care Organisation
Kathy Cowell, Chair, Manchester University NHS Foundation Trust
Amanda Smith, Chair, Healthwatch
Neil Walbran, Healthwatch
Paul Marshall, Strategic Director of Children's Services
David Regan, Director of Public Health
Bernadette Enright, Director of Adult Social Services
Tom Hinchliffe, Permanent Deputy Place Based Lead
Dr Murugesan Raja, Manchester GP Board
Dr Geeta Wadhwa, Manchester GP Board
Dr Doug Jeffrey, Manchester GP Board

Also in attendance:

Ben Squires, Head of Primary Care, NHS Greater Manchester
Jenny Osborne, Strategic Lead, Population Health Programmes
Sarah Hardman, Assistant Directorate Manager, Dental Hospital
Professor Jane Eddleston, Medical Director, Manchester University NHS Foundation Trust
Simon Walsh, Procurement Director, Manchester University NHS Foundation Trust
Nick Bailey, Director of Workforce, Manchester University NHS Foundation Trust
Kate McAuley, Team Leader, Manchester University NHS Foundation Trust

HWB/23/ Urgent Business

The Director of Public Health informed the Board that due to reporting deadlines, the Better Care Fund that was referred to at section 2.4 of the report titled 'The Formal Establishment of the Manchester Partnership Board' listed as item 5 on the agenda had been signed off by the Chair. He advised that a note for information relating to this would be circulated to members of the Board following the meeting.

HWB/23/08 Minutes

Decision

To approve the minutes of the meeting held on 25 January 2023 as a correct record.

HWB/23/09 The formal establishment of the Manchester Partnership Board

The Board considered the report of the Deputy Place Based Lead and the Director of Public Health that described that in January 2023, the Health and Wellbeing Board (HWB) had agreed the changes to the membership and chairing of the HWB. The report also referenced the work to establish the Manchester Partnership Board (MPB)

as a hybrid committee of the NHS Greater Manchester Integrated Care Board. The report provided an update on the role, purpose and priorities of the MPB.

The Director of Public Health stated that the Health and Wellbeing Board would remain a statutory committee and would consider the wider determinants of health, utilising and bringing together the expertise and knowledge of all partners. He commented that the HWB would receive update reports from the MPB, adding that they were due to meet formally in public for the first time that afternoon.

The Deputy Place Based Lead added that the MPB was a formal subcommittee of the ICB and had a distinct identity that was separate to the HWB.

The Chair commented that the HWB would be a critical friend of the MPB, adding that the HWB would receive quarterly update reports on the strategic priorities of the MPB. The Chair further noted the comments raised by a Board member who discussed the need for clarity on the process of decision making, adding that he would discuss this with the Chair of the MPB.

Decision

The Board note the report.

HWB/23/10 Oral Health and Dentistry

The Board considered the report of the Director of Public Health that provided a position statement on the oral health of the city's population and access to NHS dental services. It used a range of data to profile the oral health of Manchester residents, described the provision and use of NHS services, including action to recover from the impact of the Covid-19 pandemic, and information on patient and public feedback.

The report further summarised commissioned prevention and oral health improvement services for children and young people, adults and older people. The report placed a focus on health equity, highlighting known gaps in our knowledge and intelligence and the limitations this placed on our ability to understand and address health inequalities, and provided feedback from partners/providers in relation to a range of vulnerable or health inclusion groups.

Noting that the report made a distinction between dental oral health and wider oral health conditions (such as mouth cancer, gingivitis, halitosis etc).

The Board welcomed the comprehensive and detailed report, noting the stark picture it illustrated in relation to oral health across the city. The Board discussed that the work to tackle this was fundamental to the commitment to address wider health inequalities, in particular, noting the detrimental impact poor oral health had on vulnerable residents' health outcomes, with specific reference to Learning Disabled citizens and older citizens. The Board further discussed and recognised the importance of preventative initiatives around the issue of oral health, particularly in relation to young people. The Board stated that all opportunities and available levers should be used to address poor oral health.

The Head of Primary Care, NHS Greater Manchester advised the Board that work between commissioners and providers continued in an attempt to address this issue, adding that demand on NHS dental services outweighed provision, adding that this was a national issue and not confined to Manchester. He advised that work was ongoing to review the redistribution of provision across Manchester and Greater Manchester following a number of NHS contracts being 'handed back'. He advised that negotiations were ongoing with providers to encourage them to increase the number of NHS patients they would treat. He advised that information on individual practices could be found on the NHS UK website. He further referred to the ongoing discussions at a national level regarding an enhanced tariff to encourage and support practices to increase the number of NHS patients they could accommodate. In response to a request from the Chair he advised that he would provide a written summary of these activities so this could be circulated to all elected members for information.

A member of the Board stated that all partners should support activity and awareness regarding the importance of oral health. The Strategic Lead, Population Health Programmes commented that all partners would be consulted with as the Manchester specific action plan was developed, and she further welcomed the support offered from the Board in relation to this activity.

The Strategic Director of Children's Services welcomed the inclusion of looked after children in the list of groups identified as being vulnerable, adding that he would discuss with the Chair of the Corporate Parenting Panel the need to include consideration of this topic when they had a health themed meeting. In relation to a specific question raised regarding Unaccompanied Asylum Seeking Children (UASC) the Head of Primary Care, NHS Greater Manchester advised that he would clarify the position following the meeting.

The Chair stated that explicit consideration needed to be given to the impact of COVID-19 and young people within the action plan. The Chair further recommended that an update report on this and the wider activity be submitted for consideration by the Board towards the end of the year.

Decisions

The Board:

1. Support the development of a Manchester specific action plan to address poor levels of oral health in the local population, drive improvements to NHS dental services and reduce inequalities for the Manchester population.
2. Support the development of GM strategy and action to address locality requirements around oral health promotion and improved access.
3. Request that the Director of Public Health, in consultation with Greater Manchester NHS and the Manchester Local Care Organisation reports back to the Board on progress and the priority actions agreed by the end of the year.

4. Recommend that the Head of Primary Care, NHS Greater Manchester provide a briefing note that describes the actions being taken to improve NHS dental access across the city that can be circulated to all members of the Council.

HWB/23/11 Making Manchester Fairer: Tackling Health Inequalities in Manchester 2022-2027

The Board considered the report of the Deputy Director of Public Health that provided an overview of progress made during 2023 on the Making Manchester Fairer (MMF) Action Plan.

The Board noted that the Anti-Poverty Strategy (APS) had been formally adopted at Executive in January 2023 and was the main route to delivering against the MMF theme of reducing poverty and debt. It set out our vision that the whole of Manchester would work together to reduce poverty and lessen the impact of poverty on our residents. The strategy contained 53 actions across 12 priorities and 4 themes.

The report described that an overarching narrative had been developed by the Communication Teams that reflected that the Anti-poverty strategy was now part of the Making Manchester Fairer plan. This has also included bringing in the immediate Cost of Living support, so that there was a unified stance to the work and made the most of the city's combined networks.

The Board were informed that the first Making Manchester Fairer Programme Board took place in May after an extensive Expression of Interest process that recruited people to the board that were visibly reflective of Manchester's diverse communities (particularly those most impacted by health inequalities) and had a balance of different types of perspectives including organisational, professional and lived experience.

The Board were further informed that the development of governance and approval process for the Kickstarter Schemes allowed for the Children's element of the Supporting children, young people and their families scheme to begin implementation.

Further to the workstream and programme development, a number of theme leads had developed projects and initiatives that were designed to meet the aims and objectives of the actions under their themes and Manchester NHS Foundation Trust (MFT) had developed a Health Inequalities programme.

The Board heard from representatives from MFT who described the many actions and initiatives that had been implemented to address health inequalities. These included the establishment of an Equalities Lead at each site so as to develop local actions to respond to specific local needs; the establishment of an equalities dashboard; MFT acting as an anchor institution and supporting their staff; initiating programmes to recruit staff from the local population, recognising that this would further support the issue of staff retention and staff acting as advocates for health equity; using patient data to understand the needs of the local population and identify issues or gaps in provision so that interventions and programmes could be targeted

by working at a local level with Primary Care Networks and the Manchester Local Care Organisation. The Board were further advised that the Trust was seeking to employ a Consultant in Public Health to inform and support this area of activity. In response to a comment regarding digital exclusion, Professor Eddleston stated that the Trust were very mindful of this issue and due consideration would be given as to how this could be addressed as part of the ongoing work.

The Board welcomed the report and the update reported by the representatives from the Trust, stating that the work described demonstrated a commitment to place based working, the strength of genuine partnership working and an understanding of the needs of the local population that demonstrated that people were at the heart of everything that was described. The Board stated that the outcomes and impact of this approach needed to be reported and articulated, both at a local and national level and the Board was happy to support this. Professor Eddleston commented that she would be happy to provide an update presentation to the Board in six months' time.

The Chair, Manchester University NHS Foundation Trust stated that the MFT Board fully supported the vision and the work described. She stated the described approach provided a strong foundation on which to address health inequalities, support residents and end the 'revolving door' of health provision.

The Chair concluded the discussion by thanking the representatives from MFT for attending the meeting. He stated that it had been an important and constructive discussion. He invited MFT representative to attend all future meetings of the Board when Health Inequalities was to be discussed.

Decisions

1. The Board note progress made in implementing the Making Manchester Fairer Action Plan, the incorporation of the Anti-Poverty Strategy within the programme, and the work that is taking place across partner organisations to integrate the Making Manchester approach and principles system wide.
2. The Board recommend that a progress presentation be submitted for consideration in six months' time.