

## **Health and Wellbeing Board**

### **Minutes of the meeting held on Wednesday, 18 March 2020**

#### **Present:**

Councillor Richard Leese (Chair)  
Councillor Craig, Executive Member for Adult Health and Wellbeing  
Dr Ruth Bromley, Chair Manchester Health and Care Commissioning  
Paul Marshall, Strategic Director of Children's Services  
David Regan, Director of Public Health  
Bernadette Enright, Director of Adult Social Services

#### **HWB/20/07 Minutes**

The minutes of the meeting held on 22 January 2020 were submitted for approval.

#### **Decisions**

To agree as a correct record, the minutes of the meeting of the Health and Wellbeing Board held on 22 January 2020.

#### **HWB/20/08 COVID-19**

Consideration was given to the report of the Director of Population Health that provided a brief overview of the current plans to ensure the City of Manchester could respond effectively to the respective phases of the COVID-19 pandemic.

The report provided an introduction and background to the development of Coronavirus, both in a national and international context. The report further described the National Guidance published on 3 March 2020.

The report provided information on the Manchester response to the emerging situation stating that preparations to respond to COVID-19 had commenced in early January following an assessment of the emerging situation in Wuhan (Manchester's sister city) and Hubei Province.

The Board were informed that a decision had been made to rename the Manchester Health Protection Group which already had a formal link to the Manchester Health and Wellbeing Board, as the Manchester COVID-19 Locality Planning Group (MCLPG) for the duration of the pandemic.

The MCLPG would fulfil the functions of the 'Borough/City Pandemic Co-ordinating Group' as set out in the Greater Manchester Resilience Forum Pandemic Plan. The MCLPG would also report to the Greater Manchester Strategic Co-ordination Group and link to NHS COVID-19 Incident Management Teams and the Council's Resilience Forum.

The Board were invited to review the Terms of Reference that were provided with the report and are set out below. Included with this was the key responsibilities, membership and a draft of the current governance and reporting arrangements. The Board noted that the

governance and reporting arrangements would be further updated following discussions with Manchester City Council and NHS Organisations.

### **Terms of Reference**

1. Introduction
  - 1.1 The Manchester Health Protection Group is the established group for all health protection issues in Manchester. It meets quarterly and has a formal reporting and governance line to the Health and Wellbeing Board agreed in 2013. The group is chaired by the Director of Public Health.
  - 1.2 It is proposed to rename the Manchester Health Protection Group as the Manchester COVID-19 Locality Planning Group (MCLPG) for the duration of the COVID-19 national incident. This will ensure a direct escalation route to the Health and Wellbeing Board, chaired by the Leader of the City Council, and with all relevant Manchester NHS organisations represented on it. The Christie is not represented on the Health and Wellbeing Board because it is a regional centre, however, for COVID-19 they will link into the Manchester structures.
  - 1.3 Furthermore, the MCLPG will fulfil the functions of the “Borough Pandemic Co-ordinating Group” set out in the Greater Manchester Resilience Forum Pandemic Strategic Response Plan. The Plan does relate to an influenza outbreak situation but many of the general principles contained in the plan will guide the work on COVID-19.
  - 1.4 The MCLPG will report to the GM Strategic Co-ordination Group (GMSCG) and link to NHS Incident Management Teams and the Council’s Resilience Forum.
  - 1.5 The key responsibilities of the group are provided in Appendix 1 and these have been “lifted” from the GM Pandemic Plan document. They have been amended to reflect the evolving COVID-19 situation.
2. Membership
  - 2.1 The core membership of the group is attached as Appendix 2. A set of structure charts and reporting arrangements are attached as Appendix 3.
  - 2.2 People attending the meeting must have delegated authority from their respective organisations so that decisions can be made quickly. A number of workstreams/sub groups will be established to respond to the various phases of the UK outbreak, namely:
    1. Containment
    2. Delay
    3. Mitigation
    4. Research
3. Frequency of meetings
  - 3.1 It is planned to have weekly meetings for March and April with a review at the end of this period. It will be important to give sufficient time for sub groups to implement plans agreed.

- 3.2 All meetings will be structured with an agreed agenda and key actions will be recorded to enable rapid circulation of information.”

The Director of Adult Social Services provided an oral update by stating that a control room had been established to coordinate the response to the emerging situation and to provide support and advice to care providers. She advised that Personal Protective Equipment had been delivered to providers and the Care Quality Commission had expedited the registration of local providers to increase capacity within the sector. She said that the Manchester Local Care Organisation was actively working to identify and support any persons with complex needs to ensure the most vulnerable residents were supported at this time. She concluded by stating that the situation would continue to be monitored in line with Government guidance and legislation.

The Strategic Director of Children’s Services advised that the situation across a range of provisions and services, including schools, foster carers and Pupil Referral Units continued to be closely monitored and consideration given to how they can all be best supported in line with current Public Health England and the Department for Education guidance. He stated that day to day services were being reviewed and reprioritised, noting that consideration would be given to redeploying staff where appropriate to undertake other duties to support service and protect residents.

The Chair Manchester Health and Care Commissioning stated that changes had been introduced to Primary Care settings, noting the introduction of telephone triage for patients, recognising the need to protect both patients and colleagues. She stated that work force planning was underway and would be continually reviewed to respond and plan effectively during this period. She further advised that Manchester would lead on the response to support the homeless during this period on behalf of Greater Manchester.

The Executive Member for Adult Health and Wellbeing recognised and paid tribute to the commitment and dedication of all staff working across the public sector in their response to this emerging situation. Noting the work of the Council and its partners to effectively coordinate the support and serviced provided to protect the residents of the city. She recognised the role of the established local Neighbourhood Teams, working collaboratively with partners in the health service to support vulnerable residents and local community initiatives, such as food banks and other sources of support.

The Leader reiterated the comment of the Executive Member for Adult Health and Wellbeing by recognising the work of all staff during these difficult and challenging times. He acknowledged that in response to the emerging situation consideration would need to be given as to what services were provided by the Council and that staff resources would be utilised in the most appropriate way to ensure essential and critical services continued to be delivered.

The Leader further commented that he recognised that many Mancunians may experience financial difficulties during this period and he encouraged residents to contact the Council as soon as they were experiencing this for support and advice. He stated that there would be a need to reduce face to face contact and he encouraged residents to contact the Council via email, adding that IT systems were available in public libraries.

## **Decision**

To note the report and approve the formal establishment of the Manchester COVID-19 Locality Planning Group as set out in Annex A of the report, with the Terms of Reference as set out above.

## **HWB/20/09 MHCC and MLCO Operational Plans**

Consideration was given to the joint report of the Executive Director of Strategy, Manchester Health and Care Commissioning (MHCC), Executive Director of Strategy & Deputy Chief Executive Manchester Local Care Organisation (MLCO) that outlined the approach and progress to developing the MHCC Operational Plan for 2020/2021 and the MLCO Operating Plan for 2020/2021.

The report described that since 2019, planning leads from MHCC, Manchester City Council (MCC), MLCO and Manchester University NHS Foundation Trust Hospital (MFT) had worked together to ensure that the business, corporate and operational plans across the health and care system were aligned, and that planning and business processes had been streamlined as possible, minimising duplication that had existed in previous years, with all plans developed to take account of relevant national and local guidance.

The Board noted that the final versions of all plans would be published by the end of March 2020 and that the delivery of the plan was underpinned by a financial strategy and budget plan for 2020/2021, which had been developed with, and agreed by system partners.

### **Decision**

The Board note the approach to develop the MHCC Operational Plan and MLCO Operating Plan 2020/21 as described in the paper and the timescales for final publication of the plans.

## **HWB/20/10 Manchester Healthy Weight Strategy 2020-2025**

Consideration was given to the report of the Director of Population Health that provided an introduction to the Manchester Healthy Weight Strategy 2020-2025 which took a strong partnership approach to tackling obesity in the city. The report described that the strategy had been developed across four key themes; Food & Culture, Physical Activity, Environment & Neighbourhoods and Support & Prevention, it has been informed by a wide variety of stakeholders and supported the Public Health England guidance 'Reducing obesity is everybody's business' (Public Health England 2018).

The report described that the strategy had been developed over the previous ten months and followed the recent publication of the 'Marmot Review 10 Years on' highlighting the increasing gap in health inequalities between the wealthiest and poorest communities, and the increase in preventable deaths in deprived areas. Further noting that Public Health England guidelines had informed the content, methodology and development of the strategy.

The Board was asked to approve the strategy and all ten members would be invited to sign the Food Active 'Healthy Weight Declaration', a nationally recognised pledge which would demonstrate a strategic commitment to this area of important work.

### **Decisions**

1. To note the report.
2. To approve the Healthy Weight Strategy 2020-2025.
3. To sign the Healthy Weight Declaration.

## **HWB/20/11 Manchester's Approach to Prevention and Wellbeing Services – an update focused on social prescribing**

Consideration was given to the report of the Director of Population Health that provided an overview of current social prescribing provision in Manchester within the context of the Prevention Programme, and outlined the high level plans for the future development of prevention and wellbeing services in the city, through the 2021 Wellbeing Model.

The report described that the development of Manchester's five year Prevention Programme began in 2016, with the aim of the Manchester's Local Care Organisation (MLCO) to take a community-centred and asset-based approach to delivering care, and promote health and wellbeing for residents of the city, working through the MLCO's 12 Neighbourhood Teams, noting that the development of a coherent citywide social prescribing model was one of the core components of the Prevention Programme.

The report further described that the three delivery work streams of the Prevention Programme aimed to make a significant mid to long-term impact on the health of Manchester's population by reducing the occurrence of the mental and physical long-term conditions that led to poor health outcomes and quality of life, and impacted on the capacity and costs of the health and care system.

The Board were further informed of the city wide social prescribing model in Manchester, known as Be Well and would be delivered by the Big Life Company. This model was based on a set of principles that embodied the 'Our Manchester' approach, noting that social prescribing was a means of enabling health and social care services to refer people to a range of local, non-clinical support, often provided by voluntary and community sector organisations.

To support this activity, the report described that in the 2019 Long Term Plan, NHS England had committed to building the infrastructure for social prescribing in primary care by providing additional resource to Primary Care Networks (PCNs) to recruit social prescribing link workers as part of their multi-disciplinary teams. The majority of Manchester PCNs were currently working with the Big Life Company to recruit link workers aligned to current Be Well provision.

The Board further noted that an evaluation of the Prevention Programme would run for the duration of the programme and this would be delivered by an independent organisation who had been commissioned to carry this out. In addition, the 2021 Wellbeing Model set out the next stage of development of prevention and wellbeing approaches for Manchester, building on the successes of the Prevention Programme.

### **Decisions**

1. To note the report.
2. To endorse the approach to developing prevention and wellbeing support provision through the 2021 Wellbeing Model.

## **HWB/20/12 Collaborating for outcomes: Partnership Pilot - Maternity, LCO and Manchester City Council services**

Consideration was given to the report and accompanying presentation of Manchester City Council, Manchester Local Care Organisation and Saint Mary's Midwifery Service that provided an update on the partnership work undertaken to strengthen relationships and

collaboration across Manchester City Council's Early Years and Early Help Services and the Local Care Organisation's Children's Community Health Services and Saint Mary's Midwifery Service. The report described that to develop a strengthened partnership approach across these services, a practical pilot had been scoped that would inform future relationships between these services.

**Decision**

The Board support the delivery of the pilot in 2020/21.