

**HEALTH AND WELL BEING BOARD**  
**17/03/2015 at 2.00 pm**



**Present:** Councillors Chauhan, Dearden and Harrison,  
Dr Zuber Ahmed, Sandra Good, Paul Grubic, Alan Higgins,  
Majid Hussain, Dr Keith Jeffery, Maggie Kufeldt and Judy  
Robinson, Richard Spearing, Superintendent Denise Worth and  
Kath Wynne-Jones.

Also in Attendance:

|                |   |
|----------------|---|
| Oliver Collins | Principal Policy Officer Health and Wellbeing |
| Fabiola Fuschi | Constitutional Services Officer               |

The Chair of the Health and Wellbeing Board welcome the students of Oldham Six Form College for attending today's meeting.

The Chair also congratulated the Oldham Dementia Partnership on receiving the Department of Health Local Hero Award.

**1 URGENT BUSINESS**

There were no items of urgent business received.

**2 DECLARATIONS OF INTEREST**

There were no declarations of interest received.

**3 APOLOGIES FOR ABSENCE**

Apologies for absence were received from Chief Superintendent Caroline Ball, Councillor Price, Gillian Fairfield, Raj Patel, Denis Gizzi, Dr. Ian Wilikinson, Ben Gilchrist, Cath Green and Michael McCourt.

**4 PUBLIC QUESTION TIME**

There were no public questions received.

**5 MINUTES OF PREVIOUS MEETING**

**RESOLVED** that the minutes of the Health and Wellbeing Board meeting held on 17<sup>th</sup> February 2015 be approved as a correct record.

**6 ACTION LOG**

**RESOLVED** that the content of the Health and Wellbeing Action Log document be noted.

**7 MEETING OVERVIEW**

**RESOLVED** that the overview of today's Health and Wellbeing Board meeting be noted.

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## **SADDLEWORTH & LEES DISTRICT UPDATE**

The Board gave consideration to a report of the Saddleworth and Lees District Coordinator on the work of the Health and Wellbeing Sub Group of the Saddleworth and Lees District Executive. It was noted that the Sub Group was longstanding and dynamic. It attracted the interest and the attention of different partner organisations. Its priorities were aligned to the life stages set out in the Health and Wellbeing Strategy and they reflected the needs of the district.

Projects and initiatives for the area that had been financed via the Public Health Funding allocation were outlined.

It was also noted that the Sub Group was keen to work with the Health and Wellbeing Board to gather information and to support projects that could benefit the wider community.

**RESOLVED** that the Update from the Health and Wellbeing Sub Group of the Saddleworth and Lees District Partnership be noted.

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## **OLDHAM 6TH FORM – HEALTH PERCEPTION SURVEY**

The Board received a presentation on the findings of the Health Perception Survey that had been conducted by the students of Oldham 6<sup>th</sup> Form College, following a project developed by the Healthwatch. The results of the research were presented by three groups of students who had taken part in the project. Members of the Board had the opportunity to raise questions and to make observations at the end of the presentation.

GP Provision, Teenage Pregnancy, Disability, Mental Health, Sexual Health and Dental Care were the health topics that had been selected by the students. Information had been gathered via consultations with peers and interviews with patients at health centres'. The recommendations and the conclusions that had resulted from the survey were shared with the Board. It was noted that a plan was already in place to address the sexual health issues that had been highlighted in the survey and Brook Sexual Health Service would meet with the students.

### **RESOLVED that:**

1. The results of the Health Perception Survey be noted.
2. It be noted that the collaboration between Healthwatch and Oldham Six Form College would continue with other health projects.

The Chair of the Health and Wellbeing Board thanked the students of Oldham Six Form College for their participation to today's meeting.

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## **BEST START IN LIFE SUB-GROUP**

The Board considered a report of the Head of Integrated Commissioning on the proposed terms of reference and membership of Oldham's Best Start in Life partnership, whose

establishment had been approved at the Health and Wellbeing Board on 20<sup>th</sup> January 2015.



The new partnership was a sub group of the Health and Wellbeing Board and its first meeting was due to take place on 1<sup>st</sup> April 2015. A stakeholder event was to be arranged in October 2015, to ensure that a holistic view of what meant to be young in Oldham underpinned the work of the partnership.

**RESOLVED** that the terms of reference and membership of Oldham's Best Start in Life partnership be agreed.

11 **INTEGRATED COMMISSIONING PARTNERSHIP (ICP) UPDATE**

The Board considered a progress report of the Director of Public Health on the activities carried out by of the Oldham's Integrated Commissioning Partnership (ICP) in February. The report was presented by the Executive Director Health and Wellbeing. The draft Section 75 Agreement and the Better Care Fund, the Mental Health Aftercare funding and the 0-4 Offer were highlighted as some of the topics on the ICP's agenda to promote the integration of care services via pooled budgets, joint commissioning and integrated care. The next meeting of the ICP was due to take place on 2<sup>nd</sup> April and further updates would be presented at the next Health and Wellbeing Board meeting.

**RESOLVED** that the progress report on the work of the Oldham's Integrated Commissioning Partnership be noted.

12 **CARE ACT IMPLEMENTATION UPDATE**

The Board gave consideration to a progress report of the Service Redesign Manager on the implementation of the Care Act 2014 (Care Act); this brought together different pieces of legislation and it also introduced new duties and powers for local authorities.

The Board was reassured that all the critical actions necessary to make Oldham compliant with the Care Act would be completed by 1<sup>st</sup> April 2015. This date also marked the beginning of the first phase of the implementation: a period during which local authorities shaped their operating models to meet the requirements of the new legislation. During this period the Government would also carry out a consultation process on the proposals relating to the second phase of the implementation of the Care Act: the introduction of a "Care Cap" and other funding reforms that would come into force on 1<sup>st</sup> April 2016.

In Oldham the Care Act had been used as a basis to deliver the transformation of services. A lead officer and a project team had been deployed to support the plan funded via an implementation grant.

The Board sought and received clarifications of the following points:

- What would be the major risk that the Council faced with the implementation of the Care Act? It was explained that the introduction of new care and support eligibility criteria could lead to an increased number of assessments.
- What would be the impact the new legislation on the private home care market? It was explained that an impact assessment exercise was currently taking place. It was also observed that, to mitigate the risks associated with the wider eligibility criteria, the Care Act provided a prevention framework and opportunities for integration and better partnership work.
- Did the Council work with communities on prevention, in particular what training was available for carers and non-professionals in general? It was clarified that training professionals and members of staff was a priority. However, plans were in place to deliver training to the voluntary sector in 2015/16, as this was a critical contributor to the prevention agenda.
- How would the Greater Manchester devolution agenda relate to the challenges of health and social care integration in Oldham? It was clarified that in the Care Act integration represented an ethos rather than a prescriptive task. However, it was noted that public communication and community engagement was pivotal during the transformation process.

**RESOLVED** that the progress report on the implementation of the Care Act 2014 in Oldham be noted.

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### **DEVOLUTION MANCHESTER & MULTI-SPECIALITY COMMUNITY PROVIDER**

A presentation on the Greater Manchester Health and Social Care Devolution was given by the Health and Wellbeing Executive Director and the Oldham Clinical Commissioning Group (CCG) Director of Performance and Delivery. The presentation outlined the devolution agreement, the timelines, the required activities, the governance and the future models.

The Board noted the presentation.

Members of the Board raised the following points:

- It was important to maintain the benefits of CCG's clinical expertise to commissioning.
- To focus on public engagement to ensure that people in Oldham would understand this change. Community should be used to help shaping the design of the system, where appropriate.
- Oldham would be in a privileged position, as it had already looked at practical integration. However, concerns existed regarding the risks associated with merging organisations and funding.

- This was a great opportunity and it would be unlikely to see it again.
- It was important to ensure that this was not the fusion of the two systems – health system and social care system – it needed to lead to a redesign to integrate the two systems totally.
- Key stakeholders were willing to be involved in the conversation as soon as possible.
- Population Health system models – how would it be possible to ensure that this was represented/built in.
- Governance would be important to avoid creating an over-inflated bureaucracy and it should include the community voice and third sector.
- Many risks attached, including not making the most of this opportunity. All stakeholders should approach this with clear minds and use it as a chance to re-examine existing plans and models.
- Principle of subsidiarity was welcomed, but no specific mention of localities. It would be necessary to ensure that Oldham's voice was heard in the Greater Manchester discussion/decision making process and to have the opportunity to opt out.
- How would it be possible to continue building capacity in the community/social care environment and thereby to reduce the pressure on clinical services?
- Next months would be key to determine how Oldham could shape the devolution process.

The Chair summarised the themes that had emerged during the discussion:

- To ensure that Oldham had a strong voice at Greater Manchester level.
- To reflect a population health model.
- To include providers, third sector and communities at the earliest possible opportunity and to embed into a new system governance.
- To take the opportunity of a lifetime and make sure that Oldham made the most of it.

**RESOLVED that:**

1. The Greater Manchester Health and Social Care Devolution report be noted.
2. The action points outlined in section 4 of the report be agreed.
3. Oldham Health and Wellbeing Board and its individual partners be committed to provide resources as and when required to ensure Oldham put itself in the best possible position to be ready for the full transfer of responsibilities in April 2016.
4. Oldham Health and Wellbeing Board be prepared to respond to the activity of the Shadow Greater Manchester Strategic Health and Wellbeing Board throughout 2015/16.

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**NHS OLDHAM CCG 2015/16 OPERATING PLAN**

The Board considered a report of Oldham Clinical Commissioning Group (CCG) Director of Performance and Delivery on the NHS Oldham CCG 2015/16 Operating Plan.

**RESOLVED** that the NHS Oldham CCG 2015/16 Operating Plan be approved.

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**JSNA & HEALTH PROTECTION SUB GROUP UPDATES AND APPENDICES**

**RESOLVED** that the minutes of the Joint Strategic Needs Assessment Working Group meeting held on 26<sup>th</sup> February 2015 and the minutes of the Health Protection Working Group meeting held on 12<sup>th</sup> February 2015 be noted.

The meeting started at 2.05 pm and ended at 4.05 pm