

GM HEALTH AND CARE BOARD**MINUTES OF THE MEETING HELD ON 31 MAY 2019 AT TRAFFORD TOWN
HALL**

Bolton Council	Councillor David Greenhalgh Sue Johnson
Bury Council	Councillor Rishi Shori Geoff Little
Manchester CC	Councillor Bev Craig Councillor Richard Leese Joanne Roney
Oldham Council	Councillor Sean Fielding Rebekah Sutcliffe
Rochdale Council	Councillor Allen Brett Councillor Sara Rowbotham Steve Rumbelow
Salford CC	Mayor Paul Dennett Ben Dolan
Stockport MBC	Councillor Elise Wilson Pam Smith
Tameside Council	Councillor Brenda Warrington Councillor Eleanor Wills Stephanie Butterworth Ian Saxon
Trafford Council	Councillor Andrew Western Sara Todd
Wigan Council	Councillor Peter Smith (Chair) Councillor David Molyneux Alison McKenzie-Folan
Bury CCG	Jeff Schryer
Manchester Health and Care Commissioning	Ruth Bromley Ian Williamson
Salford CCG	Tom Tasker
Stockport CCG	Mark Chidgey

Trafford CCG	Sally Johnston Martyn Pritchard
GM Mental Health NHS Trust	Rupert Nichols
Manchester Foundation Trust	Kathy Cowell Caroline Davidson
Manchester LCO	Michael McCourt
Tameside Foundation NHS Trust	Karen James
The Christie	Thomas Thornber
Wigan, Wrightington & Leigh NHS Trust	Tony Warne
GM Commissioning Hub	Rob Bellingham
GM Mayor	Andy Burnham
GMCA	Eammon Boylan Julie Connor Lindsay Dun Liz Treacy Tom Whitney
GMCVO	Alex Whinnom
GM Cancer	Rachel Allen
GM Health and Social Care Partnership Team	Katie Galvin Louise Hayes Warren Heppolette Dr Richard Preece Sarah Price Jon Rouse (Chief Officer) Vicky Sharrock Steve Wilson
GM Hospices	Martin Foster Eamonn O'Neal
Health Innovation Manchester	Ben Bridgewater
Healthwatch	Jack Firth
NHSE/I	Bill McCarthy
Palliative Care Strategic Clinical Networks	Elaine Parkin Dr David Waterman

	Kim Wrigley
Patient Advocate GM Cancer	Ian Clayton
Primary Care Advisory Group (GP)	Tracey Vell
TfGM	Kate Brown

HCB 24/19 WELCOME AND APOLOGIES

The Chair welcomed all to the meeting and highlighted to those new members the unique partnership in GM as reflected in the agenda.

Apologies were received from Robert Armstrong, Evelyn Asante-Mensah, Darren Banks, Wirin Bhatiani, Chris Brookes, Tim Dalton, Mike Deegan, Chris Duffy, Andrew Foster, Anthony Hassall, Su Long, Bob Morris, Tony Oakman, Steven Pleasant, Jim Potter, Jim Taylor, Neil Thwaite, Caroline Kurzeja, Christine Outram, Nicky O'Connor, Janet Wilkinson.

HBC 25/19 CHAIR'S ANNOUNCEMENTS AND URGENT BUSINESS

In welcoming the newly appointed NW Regional Director for NHSE/I, Bill McCarthy, the Board agreed that Item 5 – The role of the North West Regional Office of NHSE/I was taken before Item 4 – Chief Officer Update.

HCB 26/19 MINUTES OF THE MEETING HELD 8 MARCH 2019

Consideration was given to the minutes of the meeting held on 8 March 2019.

RESOLVED/-

That the meeting minutes be approved as a correct record.

HCB 27/19 THE ROLE OF THE NORTH WEST REGIONAL OFFICE OF NHSE/I

Bill McCarthy, North West Regional Director, NHSE/I provided an outline to the Board on the aims of the developing role of the regional office and evolving relationship with Greater Manchester.

Priorities for the region were highlighted as follows;

- The delivery of better life chances and the removal of health inequalities within the most deprived communities through prevention and early intervention.
- A continuing commitment to NHS constitutional standards. It was highlighted that through extensive engagement, patients have identified performance, particularly around A&E as an indication of their expectations from a good health and care system. Concerns were highlighted with the four hour performance in Urgent and Emergency Care and mental health services in the North West region.

- The safety and quality of services and care provided being paramount and at the heart of clinical leadership and managerial oversight.
- The integration of public and health and care services around 'place'. It was acknowledged that GM is advanced in this area of implementation referenced within the NHS Long Term Plan. The mobilisation of primary care networks and redesign of acute specialist services to provide a sustainable health and care system focussed on place was recognised. The importance of technology and innovation and role of universities was highlighted as an opportunity for further alignment.
- The potential for health as a huge employer with unlimited purchasing power to become a development partner contributing to the economic development for the benefit of citizens in partnership with public services, community groups and local government within place.

The Board were advised that although the regional office has obligations to provide statutory functions, at the forefront is the partnership with devolved and local systems to deliver the ambitions for citizens and patients. The bipartisan relationship is both supportive and challenging. Fundamentally, the characteristics of the partnership across the region include complementary skills with capability and capacity to deliver better outcomes for communities served.

The Chair welcomed the overview provided and in doing so explained that although there are areas of good practice across GM, the challenges in performance for example in Urgent and Emergency Care are acknowledged and subject to improvement plans.

A member welcomed the potential repeal of Section 75 of the Health and Social Care Act 2012 and highlighted that since April 2015, approximately £10.5bn of contracts have been commissioned to private sector providers. The opportunities for GM to provide direct delivery and further integration of services was welcomed and the regional director was requested to provide his views with regards to the direction provided by NHS England in this regard.

In respect of this, Bill McCarthy anticipated that in the current climate, the rate of change will depend on the pace of the legislative process. It was acknowledged however that as previously identified in the priorities for the region, there are further opportunities for health to be a broader partner for both economic and social development. Nonetheless, it was suggested that there are occasions when other providers outside of the mainstream public service family, including the voluntary sector are better placed to provide health and care services in partnership which are the best for the population.

On behalf of the Board, the GM Mayor thanked Bill McCarthy for the work provided in support of the vision for Greater Manchester. He explained the limitations to drive change in health by a fragmented approach to delivery by multiple organisations and recommended the GM White Paper on Unified Public Services where the physical, mental and social needs of individuals are recognised. It is accepted that health should be a consideration in every policy which public bodies are responsible for. The GM

White Paper articulates this along with the acknowledgment that treatment alone will not address the challenges faced. He requested that NHSE regionally and nationally support the collaborative GM system as a test bed where new concepts and approaches to population health can be proved.

In support of this, Bill McCarthy referred to the priorities outlined with regard to health status and inequalities. He identified the importance of developing a simplified, proactive approach to support the most vulnerable groups at neighbourhood level who often have complex conditions with chaotic experiences from life and the care they receive. He welcomed the unique innovative approaches being developed in GM and recognised the opportunities being created to provide integrated support.

RESOLVED/-

That the update be noted.

HCB 28/19 CHIEF OFFICER'S REPORT

Jon Rouse, Chief Officer, GM Health and Social Care Partnership (GMHSCP), provided the GM Health and Care Board (the Board) with an update on activity relating to health and care across the Partnership. The update included key highlights relating to performance, transformation, quality, finance and risk. A summary of the key discussions and decisions of the Partnership Board were also provided. Key issues highlighted included;

- Professor Craig Harris has been appointed to the role of Managing Director and Accountable Officer for Wigan CCG and Andrea Green has been selected for the role of Accountable Officer for Stockport CCG.
- Linda Buckley has been appointed to the role of Director of Strategy and Transformation / Locality Director - Cheshire and Mersey in the new NHSE/I structure. The Board noted their thanks and appreciation to Linda as a great asset to GM pivotal in her role as Delivery and Improvement Director, Greater Manchester & Lancashire, NHS Improvement and Associate Lead for Delivery and Improvement, GMHSCP.
- 2019/20 was highlighted as a pivotal year for the Partnership as plans are developed in the context of the NHS Long Term Plan, the new Greater Manchester Health and Social Care Prospectus, and the Greater Manchester Unified Model of Public Service Reform. How the Partnership will both meet this ambition and respond to the LTP implementation framework in the second five-year plan that will be published in the autumn.
- Primary Care Networks have been described by NHS England as a cornerstone of the NHS Long-Term Plan. They are designed to enable the provision of proactive, accessible, coordinated and more integrated primary and community care improving outcomes for patients. Greater Manchester has already pursued a networked model of primary care based around populations of 30-50,000. Work is underway to reconcile the new nationally contracted Network proposals

with the work of Local Care Organisations' through neighbourhood models of care.

- An overview of system performance against the standards that the Partnership are monitored against were outlined and the table at 1.3 of the report highlights NHS activity levels. It was agreed that the reduction in referrals is encouraging and shows that primary care is becoming more effective at managing demand within the community. The key non-elective activity year-on-year growth figure of 2.6% is more disappointing but this does mask variation between localities with Salford, Rochdale, Bolton and Stockport all achieving less than 2% growth. Bolton was highlighted as the best performer at 0.2% growth, -0.5% against plan.
- Steve Wilson, Executive Lead, Finance and Investment provided a finance update on the financial position as at month twelve. The Board were informed that GM as an economy has again delivered an outturn position significantly better than plan for the third year in succession. It was advised that despite the £91.9m surplus at month twelve, there remains a significant financial challenge for GM health and care services in 2019/20 and beyond.

A member commented that despite the overall strong financial performance, the information with regard to Local Authority break even position in table 4.7 was misleading as the forecast outturn position for Local Authorities is a year-end overspend of £52.3m. Furthermore, it was suggested that the speed of transformation and improved performance will be enhanced if the surpluses were invested without delay.

It was confirmed that the surplus of just over 1% stays within GM for the purpose of health and care. The additional funding has been allocated nationally as a result of the strong financial position with the condition that this is reflected on the bottom line. With regard to the presentation of the Local Authority financial position, it was proposed that further discussions were undertaken with GM Treasurers to consider a better way of presenting the information in the future.

Dr Tom Tasker, Clinical Chair, Salford CCG provided the Board with reassurance with regards to Primary Care networks and the positive development approach by GP practices to service delivery and collaborative working. He further highlighted the information included in the appendices in relation to quality in care homes. It was reported that Salford has demonstrated an improvement in CQC ratings from 60% requiring improvement or inadequate to 15%. It was advised that this has been achieved by adopting a collaborative approach to improvement methodology.

The GM Mayor requested the Chief Officer to provide clarification of the implications for Greater Manchester in relation to the recent episode of Panorama which focused on allegations of physical and psychological abuse of individuals with learning disabilities at Wharton Hall Care Home in County Durham. He requested confirmation of a realistic achievable timescale when GM residents with learning disabilities and complex needs will no longer be placed in specialist residential facilities.

The Chief Officer described the abuse scandal as appalling, immoral and potentially criminal. An update on the transforming care programme was provided and it was advised that during 2017/18, good progress was being made on the vision to eliminate the requirement for individuals to be placed in an institutional setting for an extended period of time. However, during 2018/19, targets had not been met and there was a requirement to undertake above and beyond recovery work to meet trajectories for 2019/20.

The Board were informed that the objective for adults with learning disabilities and complex needs being cared for in specialist care facilities will not be zero. This is due to specific conditions instructed by the Ministry of Justice with regards to individuals required to be looked after in medium secure and above facilities. Furthermore, it was advised that under the correct circumstances, high quality care home facilities for individuals with learning disabilities can provide effective assessment and treatment in the short term. The Chief Officer agreed though that the vision for GM residents with learning disabilities is that as many as possible live in the community with the correct level of individual support.

RESOLVED/-

That the content of the report be noted.

HCB 29/19 UPDATE ON GM CANCER PROGRAMME

As the former Chair of the GM Cancer Board, Dr Richard Preece introduced a report which set out progress towards an ambition to bring curative treatment to an additional 1,300 people with cancer by 2021 and deliver huge outcomes in other benefits, patient experience and the streamlining of care.

It outlined areas of pioneering activity, provider collaboration, patient and carer co-production, investment announcements and an indication that further innovations are set to follow. A more comprehensive picture of the work in progress to deliver a better experience and better outcomes for our cancer patients was provided.

In support of the item, Tom Thornber, Director of Strategy at The Christie presented the Greater Manchester Cancer's Annual Report for 2018 and highlighted the progress made against the comprehensive Greater Manchester Cancer Plan, published in 2017.

Ian Clayton, GM Cancer User Involvement Group supplemented the update with an overview of the challenges and gaps that exist to progress in the delivery of the highest priorities of cancer performance. He summarised the three main barriers and risk as;

- A lack of aspiration to go above and beyond mandated government targets despite the freedoms under devolution. The Board were requested to provide system leadership to change ambitions as part of devolution.
- A resistance to change which is embedded across the system. The Board were encouraged to provide support to drive resistance from the system and it

was highlighted that those worst performers are the most challenged to change.

- The funding model was described as weak due to being built on non-sustainable sources.

As a member of the GM Cancer User Involvement Group, he thanked the Board for the opportunity to be provide an overview of the key challenges and be represented at both the Cancer and Health and Care Board.

The Chair welcomed the improvements made and acknowledged that there was further work to be done to address the challenges identified. A member described the opening of the proton beam centre at The Christie as a tremendously positive provision in GM which will make a significant difference to the lives of patients.

In support of the progress detailed in the report, the GM Mayor accepted more focus was required. It was suggested that rather than process targets, the performance area of focus should be one and five year survival rates form cancer compared to the rest of the country. He advocated that in order to improve survival rates, earlier diagnosis in primary care will provide better results.

A member highlighted the positive data form the lung health checks carried out in Liverpool which has been rolled out across Manchester and Salford. Referral and conversion rate figures from primary care with regards to early diagnosis and a reduction in emergency admission as a route for earlier diagnosis was requested.

It was confirmed that in line with NICE guidance, referral rates have significantly increased in GM which has resulted in further pressure on providers of diagnostic services. However, conversion rates from referrals has stayed the same, therefore further work is required to deliver on these aspirations.

A member referred to the recent public consultation undertaken by Manchester City Council on the ambitious plans for the redevelopment of the Paterson site at the Christie. It was confirmed that the Partnership are in support of the plans which have patient need embedded as a critical component of research development.

Overall Dr Richard Preece highlighted that the annual report demonstrates the activity across the system to close the gap on survival rates in GM compared to the rest of the country. It was recognised that although there are further improvements to be made, GM has made quick and effective progress. It was reported that although targets and standards provide focus, a key area of acceleration for the forthcoming year is on key cancer pathways so people are provided with diagnosis more quickly which will ultimately impact on earlier diagnosis and survival rates.

RESOLVED/-

1. That the progress made against the 2017 Greater Manchester Cancer Plan and wider achievements of the integrated cancer system in 2018 be noted.
2. That the delivery of the plans through the work of the GM Cancer Board, its memberships and the wider partnerships be supported and promoted.

3. That the request for the Board to provide leadership and support to address the barriers and challenges outlined be acted on.

HCB 30/19 GREATER MANCHESTER APPROACH FOR PALLIATIVE AND END OF LIFE CARE: PROGRESS UPDATE

Dr Richard Preece, Executive Lead for Quality introduced Kim Wrigley, Senior Programme Manager, GM, Eastern Cheshire Strategic Clinical Network, GMHSCP to provide an update on progress, on the GM approach to Palliative and End of Life Care.

The Board were reminded that as part of the plan to elevate Palliative and End of Life Care by the GMHSCP Board in May 2018, it was agreed there would be the development of the Greater Manchester Palliative and End of Life Care Commitments, supporting Framework and delivery plan.

It was advised that the appended document; *The Greater Manchester Commitments, to Palliative Care Individuals Approaching or Within the Last Year of Life* have been developed over recent months and along with the pending Framework bring together many years work and activity aiming to improve the quality and provision of palliative and end of life care, across GM and are now subject to completion of the GM governance requirements.

Eamonn O'Neal, Chief Executive, St Ann's Hospice provided an overview of the role of the seven independent adult hospices across the conurbation and explained the collaborative partnership approach across Greater Manchester. The Board were requested to recognise the strong alliance together and throw the strategic clinical networks of the hospices to offer additional benefits to the people of GM, the Partnership and the NHS as part of the complete solution to palliative care.

David Waterman, Clinical Lead Palliative and End of Life Care emphasised the variation of where people in GM are dying including home, hospital, care home and hospice. The role of the End of Life and Palliative programme board to work alongside the wider system to address the inconsistency in standards across a number of areas, in particular place of care and death was highlighted. An overview on the development of the GM commitments, a pledge to the citizens of Greater Manchester and the development of the supporting framework were outlined to the Board. It was advised that the framework will be presented to the necessary governance groups along with a large user forum prior to presentation for formal endorsement by the Board in July 2019.

The Chair commented that the percentage of people dying in hospital was significantly high and unfavourable for patients and their families. He also acknowledged the increasing work undertaken by the hospices in the community.

RESOLVED/-

1. That the GM Commitments be endorsed.
2. That the next steps of the process as described be supported.
3. That the framework be presented to the Health and Care Board in July 2019 for endorsement.

HCB 31/19 HEALTH INNOVATION MANCHESTER UPDATE INCLUDING UPDATE ON THE PHARMACEUTICAL MOU

Ben Bridgewater, Chief Executive, Health Innovation Manchester introduced a report which provided an update on the progress made by Health Innovation Manchester since it was established in 2017 and the delivery of the ambition of the GM Memorandum of Understanding with the pharmaceutical industry.

This was supplemented by a presentation which provided an overview of work to accelerate innovation across Greater Manchester. The members, governance structure and strategic aims were outlined to the Board.

It was advised that innovation is aligned to the needs of Greater Manchester by the adoption of a system wide approach to the qualification, assessment and prioritisation of innovations within the health and social care system.

The wide range of innovation programmes active in all ten localities along with snapshots of innovation programmes were outlined to the Board.

RESOLVED/-

That the progress outlined in the update be noted.

HCB 32/19 MANCHESTER LOCALITY PRESENTATION

Ian Williamson, Accountable Officer, Manchester Health and Care Commissioning introduced a presentation to illustrate the partnership collaborative approach to the respiratory programme across the city.

Councillor Bev Craig, Executive Member for Health and Wellbeing, Manchester City Council provided a summary of the challenges faced in Manchester with respiratory disease. An overview of the newly formed organisations across Manchester who deliver standardised integrated health and care services as the driver to radically improve the health outcomes for people's lives was provided.

Dr Ruth Bromley, Clinical Chair, Manchester Health and Care Commissioning explained the collaborative work undertaken at both locality and GM level where there is both clinical and commissioning representation within the respiratory programme work streams. An overview of some of the success so far including the CURE project and lung health checks which are focussed on providing preventative population health measures to communities with health inequalities was provided.

RESOLVED/-

That the presentation be noted.

HCB 33/19 DATES AND TIMES OF FUTURE MEETINGS

The following dates and times of future meetings were noted:

- Friday 26 July 2019, Oldham Civic Centre, West Street, Oldham, time to be confirmed.
- Friday 13 September 2019, time and venue to be confirmed

RESOLVED/-

That the dates and times of future meetings be noted.