

**HEALTH AND WELL BEING BOARD**  
**24/09/2019 at 2.00 pm**



**Present:** Councillor Harrison (Chair)  
Councillors M Bashforth and Sykes

Dr Bal Duper	IGP Federation
Chief Supt. Neil Evans	Greater Manchester Police
Donna McLaughlin	Alliance Director, Oldham Cares
Dr John Patterson	Clinical Commissioning Group
Katrina Stephens	Director of Public Health
Julie Farley	Healthwatch
Nicola Firth	Royal Oldham Hospital
Sarah Maxwell (substitute)	Oldham Community Leisure
Jayne Ratcliffe (substitute)	Community Services and Adult's Social Care

Also in Attendance:

Andrea Entwistle	Principal Policy Officer - Health and Wellbeing
Mark Hardman	Constitutional Services Officer
Kaidy McCann	Constitutional Services
Julie Winterbottom (item 9)	Oldham Royal Hospital
David Garner (item 12)	Head of Special Projects – Adult's Social Care
Angela Barnes (item 13)	Strategic Partnership Manager - Community Services and Adult Social Care
Andrew Sutherland (item 14)	Director of Education – Skills and Early Years

**1            APOLOGIES FOR ABSENCE**

Apologies for absence were received from Mike Barker, Majid Hussain, Val Hussain, Dr Keith Jeffery, Merlin Joseph, Stuart Lockwood, Vince Roche, Claire Smith, Mark Warren, Liz Windsor-Welsh and Councillor Ball.

**2            URGENT BUSINESS**

There were no items of urgent business received.

**3            DECLARATIONS OF INTEREST**

There were no declarations of interest received.

**4            PUBLIC QUESTION TIME**

There were no public questions received.

**5            MINUTES OF PREVIOUS MEETING**

The minutes of the meeting of the Health and Wellbeing Board held on 25<sup>th</sup> June 2019 were received.

Further to Minute 7 (Minutes of the Health Scrutiny Sub-Committee), it was commented that while the requested information had been received, this did not indicate a final position or the current status of IVF provision in Oldham. On being advised that the current provision was for one round of treatment, a request was made for details of the decision making on this issue.

Further to Minute 12 (Updates from Sub-Committees), it was commented that reference to the 'Older People's Alliance' should refer to the 'Oldham Cares Alliance'.

**RESOLVED** that:

1. Subject to the amendment within Minute 12 of the words 'Older People's Alliance' to read 'Oldham Cares Alliance', the minutes of the meeting of the Health and Wellbeing Board held on 25<sup>th</sup> June 2019 be approved as a correct record.
2. Details of the decision making in respect of IVF provision in Oldham be circulated to Members of the Board.

**6 MINUTES OF THE HEALTH SCRUTINY SUB-COMMITTEE**

**RESOLVED** that the minutes of the meeting of the Health Scrutiny Committee held on 2<sup>nd</sup> July 2019 be noted.

**7 RESOLUTION AND ACTION LOG**

**RESOLVED** that Resolution and Action Log from the meeting held on 25<sup>th</sup> June 2019 be noted.

**8 MEETING OVERVIEW**

**RESOLVED** that the Meeting Overview be noted.

**9 ROYAL OLDHAM HOSPITAL SCAPE ACCREDITATION**

The Board received a report presenting the journey the Emergency Department at the Royal Oldham Hospital had undergone in achieving three consecutive green NAAS (Nursing Assessment Accreditation System) assessments and reaching SCAPE (Safe, Clean and Personal Care) status.

Julie Winterbottom, Lead Nurse of the Emergency Department, introduced a presentation to the Board which outlined the NAAS process and the 13 Nursing Core Standards, which were scored against the elements of Environment, Care and Leadership with an overall RAG rating being given based on the outcome of each standard. The SCAPE Accreditation was established at Salford Royal Hospital in 2008 and was introduced at Oldham in 2016, with the first assessment undertaken in March 2017. The decision to award SCAPE status to the Emergency Department was approved by the Trust Board on 29<sup>th</sup> July 2019.

The Board noted that Oldham was the first Accident and Emergency Department to receive a green rating and

consistently improving results and that the Department, originally built for 230 visits per day, was the busiest in Greater Manchester regularly receiving around 315-415 patients a day. Consequently the accreditation would be set as a benchmark for the rest of Greater Manchester.

Members queried what additional processes had been put in place to help achieve Accreditation. The Board was informed that a Senior Sister was on duty on every shift, a safety checklist was required for each patient which ensured the patients safety, and that all forms and information were now being provided in one clear format creating consistency. Members of the Board commented that the Department was the 'Frontline of the Frontline' and it was queried whether the Police would be able to work like the Department and improve on the services they provided. An invitation was given to the Police to visit the Department. The Board requested that a letter of thanks and praise be sent to the Accident and Emergency Department on behalf of the Board.

**RESOLVED** that:

1. The update in relation to the Royal Oldham Hospital's Emergency Department achieving SCAPE Accreditation be noted.
2. A letter of thanks and praise be sent to the Accident and Emergency Department on behalf of the Board.

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**CHILD DEATH OVERVIEW PANEL – STATUTORY RESPONSIBILITIES AND REVISED GOVERNANCE ARRANGEMENTS**

The Board received a report providing an overview of the statutory responsibilities of the Bury, Rochdale and Oldham Child Death Overview Panel (CDOP), including revised governance arrangements and an outline of the Child Death Arrangements Implementation Plan.

The Bury, Rochdale and Oldham CDOP had been set up by Child Death Review Partners, the Bury, Oldham and Heywood, Middleton, Rochdale CCG's and Bury, Oldham and Rochdale Councils, to review the deaths of children under the requirement of the Children Act 2004 and Working Together to Safeguard Children 2018 statutory guidance. The purpose of the CDOP is to undertake a review of all child deaths up to the age of 18 living within the covered areas, irrespective of the place of death.

The Board was informed that the CDOP was accountable to the Health and Wellbeing Boards in Rochdale, Oldham and Bury and that the function was no longer under the Department for Education. The Annual Report of the CDOP was due to be considered at the next meeting of the Health and Wellbeing Board at which further detail could also be considered. It was noted that the Panel was chaired by a Consultant in Public Health with the position rotating between the three Public Health Teams every two years, with Oldham next to Chair the Panel.

Further to a particular issue that Healthwatch were to discuss with Public Health outside the meeting and in response to a query, the Board was informed that all child deaths, including suicides fell under the remit of the CDOP, though babies who were stillborn and lawful planned terminations of pregnancy were excepted.

**RESOLVED** that the statutory responsibilities of the Child Death Overview Panel, the changes to governance and the transfer of accountability for the Panel to the Health and Wellbeing Boards in Bury, Rochdale and Oldham be noted.

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### **GM COMMON STANDARDS FOR POPULATION HEALTH - UPDATE**

Further to Minute 10 of the meeting held on 25<sup>th</sup> June 2019, the Board received a report providing an update on the local work being undertaken on the Greater Manchester (GM) Common Standards for Population Health to develop ways to use them locally in line with existing standards and measures and consider how they linked to local outcomes and services.

In addition to the standards for seven population health themes provided in the first publication of GM Common Standards for Population Health, there was an overarching standard covering prescribed and non-prescribed public health functions. It was identified after a review, summarised in an appendix to the submitted report, that Oldham met or partially met all aspects of the standard with the exception of the weight management offer for children and families. The Board was informed that it would be addressed through a new healthy weight strategy and a review of weight management commissioning.

Members queried the overarching role of the standards with regards to the Oldham Locality. It was specified to the Board that the standards were primarily a tool used to assess the aspiration of the Borough and how Oldham compared to peers across the rest of GM. While the standards were not compulsory they could be used to drive outcomes to support localities achieve the best health gain. The standards created a reduced variance and enhanced consistency in the recording of health data and so would improve the measurement of population health across GM.

**RESOLVED** that the update on the local work on the Greater Manchester Common Standards for Population Health be noted.

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### **BETTER CARE FUND**

The Board received a report seeking agreement for the Oldham Better Care Fund (BCF) Plan 2019-20 from the Health and Wellbeing Board prior to submission to NHS England for approval.

The BCF, administered by NHS England, the Department of Health and Social Care and the Ministry of Housing, Communities and Local Government, provides a mechanism for joint health, housing and social care planning and commissioning whilst bringing together ring-fenced budgets from CCG allocations and funding paid directly to local government. For 2019-20 in Oldham, the total value of the BCF was £30,772,550 which included Disabled Facilities Grant and winter pressures funding.

Access to the Fund was based on four national conditions being satisfied:

- an agreed plan signed off by the relevant Health and Wellbeing Board and the constituent local authorities and CCGs;
- a demonstration that the area will maintain the level of spending on social care services from the CCG minimum contribution in line with the agreed uplift;
- that a specific proportion of the area's allocation is invested in NHS-commissioned out of hospital services, which may include seven-day services and adult social care; and
- a clear plan on managing transfers of care including implementation of the High Impact Change Model for Managing Transfers of Care which includes adoption of the centrally set expectations for reducing Delayed Transfers of Care (DTC).

There were an additional four national metrics required to be collected and submitted as part of the designated reporting mechanism:

- Non-elective admissions;
- Admissions to residential and care homes;
- Effectiveness of reablement; and
- Delayed Transfer of Care

The Board noted that Oldham continued to perform well on reducing DTC and ranked the second lowest for DTC within Greater Manchester. Oldham also ranked third lowest for Social Care attributed to DTC but performed less well on the number of long-term residential placements.

Looking ahead, it was queried how the BCF would reflect the changing landscape of provision going forward. Members were advised that advance guidance for 2010/21 did reference Primary Care Networks and, for the first time, housing. In light of developments and the guidance it was necessary to review the Locality Plan to ensure it reflected the current and developing landscape.

**RESOLVED** that the Oldham Better Care Fund Plan be agreed and submitted to NHS England for approval.

## GM CARERS CHARTER AND COMMITMENT TO CARERS

The Board received a report advising on the Greater Manchester (GM) Carers' Charter and Commitment to Carers and sought the formal commitment of the Board to delivering on the ambition of support to Carers locally.



The GM Social Care Partnership had charged the Adult Social Care Transformation Programme in February 2017 with delivery of four transformation priorities, one of which was to re-shape the current offer and support available to unpaid carers across GM. The Commitment to Carers (attached as an appendix to the report) was developed to encourage the commitment of organisations to improve the experience of unpaid carers across GM, the Commitment outlining a vision for carers and setting out how, through collaborative working, the offer to carers would be improved across the region.

The GM Carers Charter (attached as an appendix to the report) was designed by carers, voluntary, community and social enterprise groups, Councils, NHS England and NHS organisations in Greater Manchester, building on the aims of the Care Act 2014 and agreeing to acknowledge, respect and provide support and opportunities for carers. All partners were tasked to bring together best practice from local and national reviews into a comprehensive resource that all localities could use to inform their local delivery models and a GM Exemplar Model for Carer Support had been developed which focused on the following six critical priorities for support -

- early identification of carers;
- improving health and wellbeing;
- carers as real and expert partners;
- getting the right help at the right time;
- young carers and young adult carers; and
- carers in employment

These six priorities had been adopted as the basis for the Oldham Carers Strategy 2018 – 2021 which had been approved by the Board in September 2018. The inclusion of all GM information within the Oldham Strategy was noted, along with the work undertaken by the Oldham Partnership which included the acknowledgement of carers' voices and the reflection of the breadth and diversity of caring roles. In discussion, the Board noted that the Carers Partnership could not operate in isolation as certain outcomes required evaluation or delivery by others such as the Learning Disability or Dementia Partnerships. This was acknowledged and appropriate action plans were to be developed.

A consideration was given to the identification of and support to Carers given by GP surgeries, a matter which had been subject of CQC inspection considerations also. While GPs would hold a Carers' register, the data held could not be shared and so appropriate linkages to the Partnership and the Strategy were under consideration. A safeguarding consideration by Adult

Care had noted an issue concerning carers and bereavement where a vulnerable person might be left alone and even more vulnerable. It was noted that carers were targeted by the unscrupulous, for example when a partner died, and this was something that needed further consideration.

**RESOLVED** - That the Greater Manchester Carers Charter and the Commitment to Carers be approved and adopted.

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## **SEND STRATEGY**

The Board received a report advising of the development and key highlights of Oldham's new Special Educational Needs and Disability (SEND) Strategy. The Strategy, which among other matters was seeking to address the five issues highlighted within a SEND Inspection undertaken two years previously, was in the final round of consultation. Inspectors were currently attending at the Council and were being presented with the evidence of improvements and the time that had been taken to build the vision and collaborative approach between the partners with an interest and input into SEND matters.

The ambition was for Oldham 'to be a place where children and young people thrive', the mission of the SEND Strategy being that 'We want all our children and young people with special educational needs and disabilities (SEND) to achieve well in their early years, at school and in further education, find employment, lead happy, healthy and fulfilled lives and have choice and control over their support'. The SEND Oldham Partnership believed that all children and young people, including those with SEND, should be:

- able to be educated in the borough where they live;
- able to access opportunities that prepare them to be successful in life, learning and work;
- able to access appropriate high-quality support to build their emotional resilience and improve their health and wellbeing;
- safe and happy when taking part in all experiences; and
- listened to and actively involved in decisions that affect their lives and communities

The key outcomes of the Strategy have shaped and directed a Development Plan which focused on the following key priorities for improvement:

- Every child and young person is a confident communicator;
- Every learning setting is inclusive;
- Every young person is ready for adulthood; and
- Every child and young person is a part of their community

The Board was advised that impacts in the community should become visible if significant improvement could be made in these areas over the coming three to five years. This gave

importance to the final consultations which would ensure that all partners were signed up.



The Board noted the benefits of keeping education, health and social care together as one and, with regard to the objective of inclusivity, the need to ensure the accessibility of schools. Noting issues of the physical accessibility of schools, the Board was advised that the issue was wider than just adaptations and included considerations such as waiting lists and school place planning. With regard to completion of Education, Health and Care Plans, it was confirmed that these were being dealt with in a more timely manner, with 90% now being completed within timescale. Improvements were also being seen in relation to health and social care inputs and to presentation.

**RESOLVED** – That the mission and outcomes of the Special Educational Needs and Disability (SEND) Strategy be endorsed, and the Board gives its support to the use of the approach undertaken to develop this Strategy being applied to other strategies in Oldham.

15 **CLOSING REMARKS**

The Chair noted that this would be the last meeting of the Board attended by Donna McLaughlin, Alliance Director, Oldham Cares and by Andrea Entwistle, supporting Policy Officer to the Board. Both were thanked for their services to the Board and wished well in their respective new roles.

16 **DATE AND TIME OF NEXT MEETING**

**RESOLVED** that the meeting of the Board be held on Tuesday 12<sup>th</sup> November 2019 at 2pm.

The meeting started at 2.00 pm and ended at 3.49 pm