

## **GM HEALTH AND CARE BOARD**

### **MINUTES OF THE VIRTUAL MEETING HELD ON 26 MARCH 2021**

Bolton Council	Councillor Susan Baines
Bury Council	Councillor Andrea Simpson Geoff Little
Manchester CC	Councillor Richard Leese (Chair)
Oldham Council	Councillor Zahid Chauhan Mike Barker
Rochdale Council	Councillor Dalaat Ali Councillor Allen Brett Steve Rumbelow
Salford CC	Mayor Paul Dennett Tom Stannard
Stockport MBC	Councillor Jude Wells Mark Fitton
Tameside Council	Councillor Brenda Warrington Councillor Eleanor Wills Stephanie Butterworth Steven Pleasant
Trafford Council	Councillor Jane Slater Sara Todd
Wigan Council	Councillor Keith Cunliffe Stuart Cowley
Bolton CCG	Wirin Bhatiani Su Long
Manchester Health and Care Commissioning	Ruth Bromley
Salford CCG	Tom Tasker
Stockport CCG	Emma Ince
Tameside & Glossop CCG	Asad Ali

Wigan CCG	Tim Dalton Craig Harris
GM Mental Health NHS Trust MFT	Rupert Nichols Kathy Cowell
Northern Care Alliance NHS	Michael Luger
NWAS	Daren Mochrie
Pennine Care NHS FT	Evelyn Asante-Mensah
Salford NHS FT	Chris Brookes
Tameside NHS FT	Karen James Jane McCall
The Christie	Roger Spencer
Wrightington, Wigan & Leigh NHS FT	Tony Warne
GM Mayor	Andy Burnham
GMCA	Eamonn Boylan Julie Connor Lindsay Dunn Andrew Lightfoot Liz Treacy Steve Wilson
GMCVO	Alex Whinnom
GM Joint Health Scrutiny Members	Councillor Shoab Akhtar Councillor Mark Cunningham Councillor Keith Holloway Councillor Colin McLaren Councillor Margaret Morris Councillor John O'Brien (Chair)
GM Health and Social Care Partnership Team	Warren Heppolette Claire Norman Sarah Price Janet Wilkinson
Primary Care Board	Stuart Allan Janet Castrogiovanni Luvjit Kandula

	Tracey Vell
Provider Federation Board	Martyn Pritchard
Public Health England	David Herne
VCSE Representation	Stewart Lucas Lynne Stafford

### **HCB 01/21 WELCOME AND APOLOGIES**

Apologies for absence were received from the following; Councillor Sean Fielding (Oldham Council) Christine Outram (The Christie), Dharmesh Patel (PCB), Jeff Schryer (Bury CCG) and Carolyn Wilkins (Oldham Council).

### **HBC 02/21 CHAIR'S ANNOUNCEMENTS AND URGENT BUSINESS**

Sir Richard Leese welcomed all to his inaugural meeting as Chair of the GM Health and Care Board. He placed on record his appreciation to the former Chair, Lord Peter Smith for his role in pioneering health and care devolution. Collective gratitude for his groundbreaking approach to delivering successful health and care integration across Greater Manchester was provided on behalf of the Board.

The Chair provided an overview of why he had been keen to take on the role of Chair of the Health and Care portfolio, and in doing so explained he felt there was further work to be done over the forthcoming five-year period with a re-emphasis on population health, reducing health inequalities and becoming a Marmot City Region. In addition, the further development of a place-based approach and the alignment of health and care spend with partners and communities were a priority.

Greater collaboration would be required to tackle unjustifiable variability across the system and improvements that would enable care closer to home. It was further recognised that there would be extensive learning from the experiences of the pandemic, a great deal of which could be embedded in everyday practice.

It was proposed that the White Paper 'Integration and innovation: working together to improve health and social care for all' would assist in the delivery of objectives for Greater Manchester over the next five years.

### **HCB 03/21 MINUTES OF THE MEETING HELD 31 JANUARY 2020**

Consideration was given to the minutes of the meeting held on 31 January 2020.

### **RESOLVED/-**

That the meeting minutes be approved as a correct record.

## **HCB 04/21 CHIEF OFFICER REPORT**

In presenting the Chief Officer report, Sarah Price, Interim Chief Officer, GM Health and Social Care Partnership (GMHSCP) thanked Sir Richard Leese for the support provided over the last twelve-month period.

The report provided the GM Health and Care Board with an update on issues relating to the Greater Manchester health and care system and the people who work in it. It featured system updates from the GM People Board, the Shining a Light on Suicide campaign, the 'Better Homes, Better Neighbourhoods, Better Health' programme, the Greater Manchester Community Coordination Cell and Hospital Cell, and an update on finance.

Key issues highlighted to the Board included:

- Dr Wirin Bhatiani had announced his retirement from his role as Chair of Bolton CCG. On behalf of the Board, thanks were extended to Wirin for his contributions over many years to both Bolton and Greater Manchester, particularly regarding his support for driving the work to reduce health inequalities and population health.
- Martyn Pritchard had been appointed as the new Interim Managing Director of the Greater Manchester Provider Federation Board. Martyn was acknowledged for his leadership at Trafford CCG and continuing work in an important role in GM.
- The significant role and contribution of staff throughout the pandemic was recognised. The Greater Manchester People Board, chaired by Karen James, continued to meet during 2020/21 to monitor delivery of the GM People Plan and oversee the allocation of HEE (Health Education England) Workforce Development investment.
- The GM Well-being toolkit created for all health and care staff was recommended as a resource to help the workforce navigate the current extensive wellbeing offers available in one handy guide.
- An overview of the work in mental health, in particular the campaign 'Shining a Light on Suicide' was provided.
- The Better Homes, Better Neighbourhoods, Better Health "Tripartite Agreement" between Greater Manchester Housing Providers, Greater Manchester Health and Social Care Partnership and Greater Manchester Combined Authority was outlined as an area of collaboration to prioritise good health in future decisions about planning, new homes, and the support offered to residents.
- An update on the development work of both system response cells set up in GM as a result of NHS England's emergency arrangements: the Community Coordination Cell and the Hospital Cell was provided.
- Members were informed of the current progress and focus of the vaccination programme in GM.

- The significant challenges to recovery applicable to the entire GM system were outlined in the overview of planning for elective recovery which was being led by the GM Hospital Cell and supported by the Community Coordination Cell.
- It was advised that the approach to financial management in the NHS in 2020/21 had been profoundly affected by the COVID 19 pandemic with the suspension of the normal NHS finance regime for the duration of the financial year.

**RESOLVED/-**

That the content of the report be noted.

**HCB 05/21 GM HEALTH AND CARE RESPONSE TO COVID-19 PANDEMIC**

The report provided a summary of how the health and social care system in Greater Manchester had responded to the COVID-19 pandemic over the last year and illustrated how partners in Greater Manchester continued to work collaboratively to meet the challenge of COVID-19 since March 2020.

The Health and Care Board were provided with an overview of the work done by the Greater Manchester Health and Social Care system in response to the COVID-19 pandemic, focusing on the significant work undertaken across all health and care organisations, the efforts of front-line staff and the coordination of the response at the Greater Manchester level enabling the provision of mutual aid and support, ensuring a collaborative GM response.

**RESOLVED/-**

That the update provided be noted.

**HCB 06/21 DELIVERING THE GM MODEL - VISION, OBJECTIVES, AND FUNCTIONS & BUILDING ON GM'S DEVOLUTION INTEGRATION EXPERIENCE – CREATING THE INTEGRATED CARE SYSTEM (ICS)**

Warren Heppolette, Executive Lead, Strategy and System Development, GMHSCP introduced a presentation which provided the foundations and principles of the approach to continue Greater Manchester's devolution experience by creating the GM Integrated Care System (ICS).

The key features of the GM and national processes and details of the GM journey were outlined. The Board were provided with a summary of significant achievements prior to Covid which were enabled by a strong foundation for system working.

It was recognised that there had been challenges with the delivery and the achievement of some of the objectives set out in the five-year plan to improve health and social care, *Taking Charge*. Notably relating to NHS constitutional standards along with a recognition of

unwarranted variation across GM in relation to access and standards of care delivery. The opportunities and proposals to address areas requiring improvement were outlined to Members.

An overview of the aims of the White Paper 'Integration and innovation: working together to improve health and social care for all' were provided alongside the objectives and priorities to improve the health and wellbeing of all the residents of Greater Manchester.

It was advised that the original objectives set out in Taking Charge and the MoU had been reaffirmed and in doing so four main priorities had been identified. GM's approach to implementation and the main features of the GM model were outlined. It was recognised that a programme of comprehensive engagement with all ten localities and system leaders leading to further refinements of the proposals outlined in the paper aligned to the Parliamentary process was required. Furthermore, it was proposed that the programme of engagement would focus on the key issues which had emerged from the work so far.

The transition period to achieve the changes were outlined and it was noted that the legislative timeline anticipated that the new arrangements would be in place by April 2022.

An update in relation to the work undertaken on Clinical, Care and Professional Leadership on behalf of the GM Medical Executive was provided along with assurance that the draft proposals would be shared across the system and extensive engagement would be undertaken. The value in the development of clinical, care and professional leadership in place to ensure accessibility was recognised. Lessons learned throughout the pandemic in relation to patient pathway transformation which were sensitive to patient need and working towards a value based health care system based on trust and collaboration at place across all sectors were considered. It was proposed that the revised ICS model would build on the maturity of relationships developed across GM over time. The collective system wide approach adopted throughout the pandemic was acknowledged and further collaboration was supported.

The Board reflected on the opportunities of the health devolution journey over previous years and provided support for the potential benefits of White Paper recognising the capacity to build on the strong partnership approach developed in GM over the last five years.

A focus on reducing health inequalities by engaging diverse citizens and communities in co-production was supported to improve health and life outcomes. The primacy of place and ensuring financial flows and budgets were devolved at place and neighbourhood level were considered imperative to respond to the wider determinants of health inequalities.

Additional strengthening of public service reform and partnership working across the whole public sector system was advocated. An asset-based approach to workforce and a

recognition of the skill base across organisations where staff faced a degree of uncertainty was recommended to reduce any staff movement away from GM.

Further clarity on next steps, detail of the engagement process and potential resource allocation were requested. It was suggested that the process of engagement would enable the formulation of co-designed draft proposals which would further develop the detail in areas such as resource allocation in a fully participatory manner. It was advised that the GM ICS would not be an institution but would instead represent all partners across the system in each of the districts and neighbourhoods within GM. The opportunities to design and develop specific objectives and ambitions relative to GM to confirm and pursue were emphasised.

In light of the pandemic, members considered the significant scale of the challenge faced by the health and care system in relation to elective care and it was proposed that financial clarity was important. It was suggested that the findings of the Marmot Review regarding the social and economic cost of health inequalities had exacerbated as a result of Covid and moving forward health and care reform should respond to the challenges faced.

Greater streamlining of bureaucracy to enable delivery on the front line appropriately resourced to best serve the people of GM acknowledging challenging times ahead was considered imperative.

In summary, the Chair acknowledged the comments made by the Board in relation to health inequalities and the route to tackle them by providing an enhanced focus on population health. The fundamental approach of public service reform was emphasised to be the design of services around people, of which place and communities were the route. The importance of stabilising the workforce during the change process was acknowledged to be of vast importance for which an approach was being developed. Consideration of how health and care expenditure was aligned to greater public service and private expenditure as part of the totality to maximise benefit for population health was emphasised. Furthermore, the purpose for financial flows needed to be clear.

It was proposed that the process of engagement would include cross representation across sectors and localities and comments made by the Board were acknowledged and would be explored in greater detail throughout the engagement process.

#### **RESOLVED/-**

1. That the proposal in relation to the vision and objectives for the NHS ICS body and the Health & Care Partnership together be approved.
2. That the process and proposed next steps to develop the GM collective approach to build upon all that has been achieved on the journey so far be approved.

#### **HCB 07/21 DATES OF FUTURE MEETINGS**

To be arranged and advised.