

HEALTH AND WELL BEING BOARD
23/03/2021 at 2.00 pm



Councillor Stretton (Chair)
Councillors Ball, M Bashforth, Chauhan, Moores and Sykes

Mike Barker	Executive Director Commissioning and Chief Operating Officer (Oldham Council/Oldham CCG)
Mark Warren	Managing Director of Health and Adult Care Services
Gerard Jones	Managing Director of Children and Young People
Rebekah Sutcliffe	Strategic Director for Communities and Reform
Katrina Stephens	Director of Public Health
Tamoor Tariq	Oldham Healthwatch
Stuart Lockwood	Oldham Community Leisure
Emma Davison	First Choice Homes
Liz Windsor-Welch	Action Together
Claire Smith	Director of Nursing and Quality, Oldham CCG
Joanne Sloan	Dr Kershaws
Janette Olsen	Bridgewater NHS Foundation Trust

Also in Attendance:

Sian Walter-Browne	Constitutional Services
Mark Hardman	Constitutional Services

1 APOLOGIES FOR ABSENCE

Apologies for absence were received from David Jago, Dr John Patterson, Dr Keith Jeffrey, Majid Hussain, Carolyn Wilkins, Donna Cezair and Karen Worthington.

2 DECLARATIONS OF INTEREST

Tamoor Tariq declared a personal interest in the business of the Board generally by virtue of being an elected member of Bury Council and a member of the Bury Health and Wellbeing Board.

3 URGENT BUSINESS

There were no items of urgent business.

4 PUBLIC QUESTION TIME

No public questions had been received.

5 MINUTES OF PREVIOUS MEETING

RESOLVED – that the minutes of the meeting of the Health and Wellbeing Board held on 26th January 2021 be approved as a correct record.

HEALTH AND WELLBEING BOARD TERMS OF REFERENCE

The Board was advised that a review of the Council's Constitution was now largely complete and that final matters, including a refresh of the terms of reference of the Health and Wellbeing Board, were to be submitted to the Council meeting on 24th March 2021.

The terms of reference of the Health and Wellbeing Board are contained at Part 3 (Responsibility for Functions) in the Council Constitution and had been considered within a refresh exercise, focused on updating and refining content as opposed to presenting revised arrangements. The existing terms of reference of the Board were those as determined on formal establishment in 2012 meaning that subsequent organisational and governance developments impacting on the Board were not acknowledged and the terms of reference are silent on certain reporting arrangements that had been determined over time. The proposed revised terms of reference were submitted for consideration.

It had been proposed that the Board review the terms of reference in 12 months time but, in light of the recently published NHS White Paper, the anticipated legislative programme and changes in governance arrangements in the health and care sectors, it was suggested that a consideration in the autumn might be more appropriate.

RESOLVED that

1. the draft revised terms of reference of the Health and Wellbeing Board be noted and supported;
2. the Board terms of reference be further reviewed in autumn 2021 as legislative and governance proposals develop.

REFRESH OF THE LOCAL OUTBREAK PLAN

The Board was updated on Oldham's Local Outbreak Management Plan (LOMP) for Covid-19 and considered the refreshed version of the Plan. While local authorities have an ongoing statutory responsibility to have LOMPs in place for responding to emergencies in their areas, they had been tasked by Government to produce specific plans by, in the first instance, the end of June 2020 in response to the ongoing COVID-19 pandemic.

All local authorities had been asked to review and update their LOMP in March 2021 to incorporate the learning of the past nine months, to plan for the next phase of the response, to account for the associated funding, and to reflect potential changes in local roles, responsibilities and resources. The refresh also presented an opportunity to identify and share good practice and to reflect developments since the original plans were produced. Oldham's LOMP had been reviewed and an updated version

produced accordingly, in line with guidance provided by NHS Test and Trace for the refresh of plans.



The updated Plan was shared with the Contain Regional Partnership Team on 12th March 2021. NHS Test and Trace had acknowledged that the timeframe given for the refresh might not have allowed local systems to seek the necessary sign-off for their plans through the appropriate governance structures and, as such, there was an opportunity to amend and further develop the Plan in response to any feedback provided by the Board. The Regional Partnership Team would next review the Oldham Plan in order to gather information about good practice, issues, risks and opportunities to inform discussions with central Government.

Members of the Board expressed thanks to the Director of Public Health and to all the staff and partners who had contributed to the refresh exercise over the short timescale provided. It was noted that the Plan needed to be a dynamic document that could be adjusted to reflect both new circumstances and new learning. Greater awareness of working across Oldham had been gained through the pandemic, while there had been much learning and increased understanding of the impact of inequalities on health outcomes. An Inequalities Advisory Group had been established which was developing an Equalities Strategy and a Multi-Agency Poverty Action Plan which, alongside the LOMP, would enhance the recognition of and response to inequalities.

The work that had been developed to assist those with no digital access in being able to access support, including to Covid testing and vaccination, was supported. Noting reference to the development of communications with regard to financial support for those required to isolate, it was asked if this could include clear pathways for those applying for support. This issue was acknowledged, it being noted that it was also important people were aware of the availability of support before it was needed. People were concerned about job security which financial support alone would not resolve and work around this issue was needed with employers.

The Board was advised that Healthwatch had circulated the draft report arising from their Covid Survey for comment to those organisations identified within the recommendations and those in receipt of the draft were urged to respond. The final report would be published following receipt and consideration of responses received. Earlier comments made regarding inequalities were referenced, with the importance of having the patient experience and engagement considered and reflected in the addressing of inequalities being advised, along with the support this could provide in getting community support for a range of activities such as social prescribing and developments in primary care.

While recognising what had been done well to date, it was commented that the Board needed to consider what would be

done differently in response any future pandemic, reflecting on those lives lost and those who were still suffering and ensuring that learning would produce different, better results. The experience of the first lockdown, where people were more likely to seek and get support from family, friends and their local community, was noted and it was suggested that this support approach had been lost over time. There was a need to look to opportunities to re-invigorate such activity and support.

RESOLVED that the refreshed Oldham Local Outbreak Management Plan be endorsed.

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NHS WHITE PAPER - INTEGRATION AND INNOVATION: WORKING TOGETHER TO IMPROVE HEALTH AND SOCIAL CARE FOR ALL

The Board received a paper providing a briefing on the recently published NHS White Paper “Integration and Innovation: Working Together to Improve Health & Social Care for All”. The Secretary of State for Health and Social Care had asked NHS England in 2019 to identify and consult on what legislative changes were needed to fulfil the ambitions of the ten-year NHS long term plan, the White Paper being the result. The White Paper did not cover broader social care reform, giving instead a commitment to publish proposals for reform in the current year, but it did give some direction of travel for adult social care and for changes in public health.

The proposals in the White Paper were considered in the following themes –

- working together to integrate care – proposing statutory Integrated Care Systems (ICSs) with “dual structure” governance arrangements;
- reducing bureaucracy, including the removal of requirements on competition and procurement in the NHS; and
- improving accountability and enhancing public confidence – proposing the formal merger of NHS England and NHS Improvement and new powers for the Secretary of State.

Additional proposals, many related to public health and adult social care, would be set out in a Health and Care Bill, with legislation in place for implementation in 2022.

The principal focus of the briefing related to the working together to integrate care theme, it being noted that the forthcoming Health and Care Bill will support two forms of integration. Firstly, through the removal of barriers within the NHS and making “working together an organising principle”, NHS bodies were to have a “triple-aim” duty of better health and wellbeing for everyone, better quality of health services for individuals, and sustainable use of NHS resources, the intention being to help align NHS bodies around a common set of objectives with strong engagement with local communities; and secondly through greater collaboration between the NHS, local government and wider delivery partners to improve health and wellbeing outcomes for local people.

Local authorities and NHS bodies would be expected to work together in the ICS under one system umbrella. ICSs would be put on a statutory footing to allow stronger and streamlined decision making and accountability and have “dual structure” arrangements reflecting the two forms of integration – an ICS NHS body (or Board) and an ICS Health and Care Partnership, the composition and roles of each being considered in the briefing. The briefing further outlined proposals in respect of each theme and noted the government’s recognition of the significant pressures faced by the social care sector and the intention to bring forward proposals for reform aimed at ensuring everyone can access affordable, high quality, joined-up and sustainable adult social care.

Comment was made as to the need to fight to ensure that appropriate structures were introduced for Oldham, ensuring that local decision making that maintained the One Oldham approach was delivered, and ensuring that the voluntary sector was included in commissioning arrangements and thrived.

With regard to Social Care, it was noted that the Chancellor had been silent on the adult social care funding challenge in his recent financial statement, and reference was made to confusion around charging and the failure to enact provisions in Part 2 of the Care Act. The new assurance framework and the role of the Care Quality Commission in assessing delivery of local authority services was noted, though discussion was ongoing as to the form this might take. Arrangements regarding discharge assessments were similarly in need of further detail and consideration.

The frequent reference to Public Health in the White Paper was noted, though the need for further detail was suggested. References to obesity and fluoridation appeared as very specific issues, but it was suggested that this might relate to the requirement for primary legislation to introduce powers for the Secretary of State.

Possible future arrangements for Oldham were further considered, including the process by which Oldham could control what happens in Oldham, and the need to ensure that health inequalities, not explicitly written into the White Paper, were addressed and written into local modelling. The work ongoing at the various Boards across Greater Manchester to consider future arrangements was outlined. The White Paper strengthened the role of localities, and there was discussion around what would happen in Greater Manchester moving forward, what activities would take place where, and the implications of the disappearance of the CCGs.

RESOLVED that the report be noted.

It was noted that the next meeting of the Board was scheduled to be held on Tuesday, 22nd June 2021 at 2pm, with further meetings of the Board scheduled to be held on Tuesdays 27th July (Development Session), 14th September, 16th November, 14th December (Development Session) 2021, 25th January and 22nd March 2022 at 2.00pm.



The meeting started at 2.00 pm and ended at 3.00 pm