

HEALTH AND WELL BEING BOARD
21/06/2016 at 2.00 pm



Present: Councillor Dearden (Chair)
Councillors Chauhan, Moores and Price

Dr Zuber Ahmed	Oldham CCG
Jon Aspinall	GMFR
Peter Denton	Healthwatch Oldham
Caroline Drysdale	Pennine Care NHS Foundation Trust
Sandra Good	Pennine Acute
Alan Higgins	Director of Public Health
Majid Hussain	Lay Chair Clinical Commissioning Group (CCG)
Maggie Kufeldt	Assistant Executive Director Joint Commissioning
Stuart Lockwood	Oldham Community Leisure
Dr Ian Wilkinson	Oldham CCG

Also in Attendance:

Vicky Sugars	Strategy, Partnerships and Policy Manager
Sian Walter-Browne	Constitutional Services
Kaidy McCann	Constitutional Services

1 **APOLOGIES FOR ABSENCE**

Apologies for absence were received from Councillor Harrison and Dr Keith Jeffery.

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**

RESOLVED that the minutes of the meeting held on 1st March 2016 be approved as a correct record.

6 **ACTION & RESOLUTION LOG**

RESOLVED that the Action and Resolution Log be noted.

7 **MEETING OVERVIEW**

RESOLVED that the Meeting Overview be noted.

HEALTHWATCH OLDHAM/OLDHAM SIXTH FORM COLLEGE RESEARCH PROJECT



The Board gave consideration to a report that updated them on the research project, the aim of which was to give students and their families an opportunity to make local stakeholders in health and care aware of the topics that interested them and what their views/experiences of these were.

This year the students had chosen to research:

- Eating disorders
- Intensive care (with a focus on young people)
- Paediatric care (with a focus on people with the highest levels of need)
- Mental health
- Junior doctors
- Children's dental health
- Teen pregnancy
- Substance misuse
- Smoking and quitting
- A&E waiting times

The students presented a short video of their key findings.

RESOLVED that:

1. The report and presentation be received and noted.
2. The Health and Wellbeing Board members would receive copies of the final report in July and cascade this to relevant people in their organisation.
3. The locality plan transformational programme leads would receive copies of the final report in July and consider how these could shape their public engagement around the planning and implementation of their programmes.

HEALTH PROTECTION SUB-GROUP

The Board gave consideration to a report that brought to their attention two documents that had been considered by the Health Protection Sub-Group.

The purpose of the Health Protection Sub-Group of the Health and Wellbeing Board was to develop an approach to Oldham's response to health protection issues, including protection from infectious diseases, environmental hazards and emergency preparedness.

The Board considered the Oldham Emergency Health Economy Capabilities and Contacts document and noted:-

- This document had been developed to supplement the "Greater Manchester Outbreak Plan" at an Oldham level ensuring the right people were contacted at the right time

to ensure that the borough was resilient and could respond appropriately to outbreaks. It focused on the most likely outbreak scenarios and provided the contact details should an outbreak control team need to be called, and an immediate response made by health and social care partners across the borough.

- It had been designed to ensure that an appropriate lead from each organisation was contacted as they would know which member of their service would need to be called, and was therefore output/effect focused e.g. identifying clinical staff to provide antibiotics to a large number of school children both in and out of normal working hours.
- The Master Document would be held by Public Health at Oldham Metropolitan Borough Council (OMBC).
- Each organisation was responsible for ensuring that their contact details are kept up to date
- Each organisation would be emailed on a three monthly basis and requested to complete and update even if this is a nil return.
- The document would be shared with the following organisations on a need to know basis, shared with only those staff who had a need to know as part of their role responsibility:
 - OMBC On Call Team
 - Pennine Acute Hospital Trust
 - Pennine Care Foundation Trust
 - NHS Oldham Clinical Commissioning Group
 - Greater Manchester Public Health England Centre

The Board also considered the CCG Emergency Planning, Resilience and Response and noted:-

- The CCG was now a fully compliant organisation, improving from partial compliance 12 months ago.
- All CCGs in Greater Manchester were also fully compliant.
- Oldham's provider partners were judged to be partially compliant.
- Providers would be challenged on this through the North East Health Emergency Resilience Group (HERG).

RESOLVED that:-

1. The report and appendices be noted

2. Support would be continued for the work of the Health Protection Group and its constituent organisations towards its aims and objectives.



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10

LOCAL CHILDREN'S SAFEGUARDING BOARD – MEMORANDUM OF UNDERSTANDING

The Board gave consideration to a Memorandum of Understanding that set out the expectations of the relationship and working arrangements between Oldham's Local Safeguarding Children Board (LSCB), Oldham's Safeguarding Adult Board (SAB), Oldham's Health and Wellbeing Board (HWB), Oldham's Best Start in Life Partnership (BSLP) and Oldham's Community Safety and Cohesion Partnership (CSCP). It covered their respective roles and functions, arrangements for challenge, oversight and scrutiny, and performance management.

The chair of the LSCB, the chair of the SAB, the chair of the HWB, the chair of the BSLP, the chair of the CSCP and the Director for Children's Services had formally agreed to the arrangements set out in the document.

The Board noted the arrangements would be subject to review in 3 years from the date of the agreement unless there was a significant change in the central government advice about these boards or any of the boards felt the arrangements were not working satisfactorily.

The report set out the background to the arrangements and the roles and inter-relationships of the various bodies that were signatories to the Memorandum.

RESOLVED that the contents of the Memorandum of Understanding be noted.

11

OLDHAM LOCALITY PLAN AND ACCOUNTABLE CARE MANAGEMENT ORGANISATION (ACMO) PROGRESS

The Board gave consideration to a report that set out the progress made with regard to establishment of the ACMO since the last meeting, outlined the key risks being managed by the programme and indicated the milestones for the next 2 months. Detailed progress reports were made on the work undertaken in the last two months.

It was noted that there would be work undertaken to refresh the locality plan, especially in relation to financial issues and further detail was provided as to the work streams that would begin in July.

The Board was updated on the changes to the transformation programmes, both in terms of their titles, and also in terms of their number. There were currently six transformation programmes, as follows:

- Establishing an accountable care management organisation (ACMO)
- Mental health is central to good health
- Starting well: Best start in life
- Thriving communities
- Health and social care integration
- Prevention

The work to develop the programme mandates had already identified a number of key issues, including the following:

- All of the programmes had a vital relationship with the accountable care management organisation; making sure that this relationship is clear, agreed and well-understood was important.
- All of the programmes had connections with each other, and with the three underpinning strategies. Further work was needed to describe these connections so that they could be managed as effectively as possible
- All of the programmes were likely to benefit from an agreed approach to programme management, which made best use of the resources available in the borough, at least across both the Council and the CCG
- All of the programmes needed further work on the detail of their expected benefits, including the measures that would be used to indicate the achievement of those benefits. This would include the assessment of the financial benefits arising from each programme, which would be a contribution towards the Oldham 'financial gap.'

The Board were informed that all partners wanted both horizontal and vertical integration, and that the ACMO would produce healthy financial sustainability. It was accepted that there would be a need to clearly articulate the care pathway design and it was understood that consultation would be both early and meaningful.

Clarification was sought as to the future role of the Board and information was provided that the detail of how this was going to work was being explored. It was accepted that all partners needed to get the best value out of the commissioner/provider integration.

The Board discussed the detail of the issues of branding, consultation and engagement, and the expected behaviour changes.

RESOLVED that:-

3. The report and appendix be noted
4. Regular updates be provided to future meetings.

GM TRANSFORMATION FUND

The Board received a report, originally taken to the GM Strategic Partnership Board on 27th May 2016, that outlined the next steps following the assessment of Locality Plans; the support that had been put in place to assist in their further development; and the processes to secure their consideration for access to Transformation Fund Monies.



The Board were informed that each bid was expected to be robust and challenging. The Fund was for innovation, not day-to-day activity and funding could cease if the expected benefits were not being delivered. Bids were also expected to be detailed, not just high-level.

The Board **RESOLVED** that:

1. The progress in applying support to the development of Locality Plans following the assessment would be noted;
2. The request for localities and GM themes to confirm their consideration in line with the agreed Transformation Fund Financial Process be recognised
3. The development of a Transformation Fund Oversight Group to advise the Executive in taking their decisions about the Fund, be supported;
4. The work to develop documentation including an initial Proposal Template and draft Investment Agreement be noted;
5. The development of a GM Dashboard to both inform decisions and monitor the application of the Fund against those agreements to track the impact of the Fund and the Locality Plans more broadly, be supported.
6. That Denis Gizzi be asked to provide an update on the work of the Transformational Fund Oversight Group to the next meeting.

PRIMARY, SOCIAL AND COMMUNITY CARE CLUSTER INTEGRATION – EARLY ADOPTER UPDATE

The Board received an update on the progress of the Early Adopter Programme, with a further detailed report to be brought to the meeting in July.

Over the last 2 years there had been alignment of health services into the PCMH and there was now the opportunity to move forward with whole system integration, to work towards the achievement of the accountable care management organisation. This was a whole-system integration, with a difference in how services were delivered, allowing for a more co-ordinated response to the patient.

A Steering Group had been set up with Director-level representation. Being an early adopter gave the opportunity to test what was different and had required a complete re-configuration of services.

The experience had been very positive, with all partners very committed to making it work.

RESOLVED that:-

1. The report be noted
2. A full report be provided to the next meeting.

14

EQUALITY IMPACT ASSESSMENT UPDATE

The Board gave consideration to a report that provided an update on the progress of embedding an equality analysis into Oldham's Locality Plan.

It included:

- An overview of both the Local Authority and CCG duties and responsibilities in terms of assessing equality and health impacts
- A draft combined equality and health impact screening and assessment form
- The plan to embed equality analysis in the forward development of the specific projects detailed in the Implementation Plan
- Outstanding issues in relation to the process

The Board noted that equality and health impacts were shared equally between OMBC and the CCG. It was necessary to be ready to roll out a combined screening and assessment form, and feedback had shown the documents attached to the report were believed to be robust.

The Board were informed that specific groups of people could be added as appropriate.

It was **RESOLVED** that:

1. The duties and responsibilities in regard to equality and health impact be noted
2. The dates of the training sessions for colleagues from Oldham Council, Oldham Clinical Commissioning Group and other lead partners be noted
3. The Board would send any comments they had to Jenni Barker

15

MANCHESTER SINGLE HOSPITAL SERVICE REVIEW

The Board gave consideration to a report concerning the Single Hospital Service Review, led by Sir Jonathan Michael, which was commissioned by Manchester City Health & Wellbeing

Board and had begun in January 2016. The first stage of this review, which identified the benefits of adopting a Single Service Model, was presented to the Manchester City Health and Wellbeing Board on the 27th April 2016. The second stage of the review was presented on the 8th June 2016.



The review had concluded that the organisational form most likely to support the enablers and to deliver the benefits of a Single Hospital Service would be the creation of a new NHS organisation that would take responsibility for the full range of services currently provided by Central Manchester University Hospitals NHS Trust (CMFT), University Hospital of South Manchester NHS Foundation Trust (UHSM) and by Pennine Acute Trust (PAT) on the North Manchester General Hospital (NMGH) site.

It was noted that it was important that the creation of this type of organisation did not adversely affect other hospital services within Greater Manchester. The NMGH hospital site currently formed only part of the Pennine Acute NHS Hospitals Trust, which also provided hospital services to the North East Sector of Greater Manchester from Oldham, Bury and Rochdale. The impact that the potential transfer of NMGH, to a new city-wide organisation, could have on other hospitals in the North East Sector needed to be fully assessed and any resulting risks to the stability of clinical services needed to be appropriately managed.

The Board was informed that there would be a significant impact on Oldham, as residents currently use Manchester hospital services. It was understood that developments in Oldham would also have an impact on Manchester.

RESOLVED that:

1. The report be noted
2. Sir Jonathan Michael or another senior member should be invited to present their proposals to a future meeting of the Board
3. That a further update would be provided to a future meeting

The meeting started at 2.00 pm and ended at 4.05 pm