

HEALTH AND WELL BEING BOARD
20/09/2016 at 1.00 pm



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

Dr Zuber Ahmed	Oldham CCG
Jon Aspinall	GMFR
Jill Beaumont	Director of Community Services
Caroline Drysdale	Pennine Care NHS Foundation Trust
Denis Gizzi	Oldham NHS Clinical Group
Cath Green	FCHO
Alan Higgins	Director of Public Health
Carole Hugall	Bridgewater Community Health Care NHS Foundation Trust
Majid Hussain	Lay Chair Clinical Commissioning Group (CCG)
Maggie Kufeldt	Assistant Executive Director Joint Commissioning
John Lenney	Pennine Acute Hospitals NHS Trust
Jason Rain	Greater Manchester Fire and Rescue
Tariq Shah	Oldham GP Federation
Mark Warren	Director Adult Social Care
Dr Ian Wilkinson	Oldham CCG
Liz Windsor-Welsh	Action Together
Denise Worth	Greater Manchester Police
Kath Wynne-Jones	Oldham CCG

Also in Attendance:
Sian Walter-Browne Constitutional Services

1 APOLOGIES FOR ABSENCE

Apologies for absence were received from Dr Zubair Ahmad, Caroline Ball, Councillor Blyth, Peter Denton, Dr Keith Jeffery, Stuart Lockwood and Colin Scales.

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

The following public question was received from Mr James Allen:-

“After attending The Health and Care Innovation Expo 2016 on the 7th and 8th Sept there was talk on where we are on devolution on the 1st day, on the 2nd day patient and public involvement fully, at the early stages prior to items going to the relevant bodies.

I would like to ask:-

- 1) After the last Health & Wellbeing Board in July, about patient and public involvement was asked about, with no full commitment was given
- 2) You ask for people to attend meetings, when most of the talks have been done, how many patients and public were involved at the early stages
- 3) Can this body ensure that more patient and public involvement are set up to discuss points on health and wellbeing, before it goes to the blue papers goes to community stage
- 4) To ensure that those from the patient and public who were involved get feedback as soon as the final decision has been done on each item that comes under Health and Wellbeing governance and policy
- 5) I ask that this body to look into the expo's talks and forum to gather what was the final outcome, were the questions that was put forward at each session, that is relevant to each of this body

Knowingly the mainly item within the talks was finance on which each area has to work with, also cuts they have to incur each financial year”

The Chair gave the following response:-

“Thank you to your letter to the Health and Wellbeing Board dated 13 September.

Having reviewed the programme for the Expo, we assume you attended the session on ‘Health and Social Care Devolution’ led by Sir Howard Bernstein, Jon Rouse and Paul Baumann.

We think the second session you are referring to may have been on ‘Greater Manchester’s Visionary Approach to Integrated Care – Local Care Organisations’ delivered by Warren Heppolette, David Herne and Andrew Webb.

Thank you for bringing these to our attention. I will certainly request copies of the presentations and circulate these to the members of the Health and Wellbeing Board.

Addressing your specific points, the Oldham Locality Plan and work to develop the Integrated Care Organisation (ICO) arrangements for Health and Social Care in Oldham are very clear that the partners wish to systematically involve service users, carers and the wider public in developing and delivering the future health and care system in Oldham.

A lot of work is already going on to develop this engagement work. This include putting a team and structures in place and developing new ways of engaging to make sure everyone is heard.

The Oldham approach is underpinned by public engagement over a number of years by the partners which has consistently

shown a demand for seamless joined-up care, delivered closer to home, and this feedback has formed the basis for current plans.



In support of current work on the Locality Plan and ACMO there have been six open public events to date. Two of these focussed on the development of the Locality Plan (in October and March with both attended by over 200 people) and the other four (July, 95 residents registered to attended the four session) have focussed on the needs of specific groups – children and young people, people with long-term conditions, users of urgent care and the elderly. I believe you have attended at least four of these, so you will have a good idea of their content and format.

Your point about engaging early is very much accepted, and I can assure you that the pathway events were deliberately held at a point in time immediately after the initial scoping work but before detailed plans had been produced.

Going forward, there will be considerably more opportunities for service users, carers and the wider public to shape the development and delivery of health and care services. I have asked Mark Drury from the CCG, who is leading on the communications and engagement in Oldham, to get in contact with you to discuss these in more detail and hopefully hear your ideas”.

5 **MINUTES OF PREVIOUS MEETING**

RESOLVED that the minutes of the meeting held on 21st June 2016 be approved as a correct record.

6 **ACTION LOG**

RESOLVED that the Action Log be noted.

7 **MEETING OVERVIEW**

RESOLVED that the Meeting Overview be noted.

8 **CQC INSPECTION OF PENNINE ACUTE TRUST - IMPACT ON OLDHAM**

The Board gave consideration to a report that outlined the key issues regarding the Care Quality Commission (CQC) inspection of Pennine Acute Hospitals NHS Trust (PAHT). In particular, it focussed on the outputs of the inspection of The Royal Oldham Hospital site.

The report summarised the findings of the inspection. The CQC had advised on 77 ‘must do’ recommendations for the trust to action. There were a further 144 ‘should do’ recommendations that addressed the concerns raised in the visit. The recommendations covered all four sites and presented a substantial range of challenges to address.

The finding of the CQC inspection of February & March 2016 had been added to by the findings of a deeper and wider (in scope) diagnostic undertaken by Salford Royal Foundation Trust (SRFT) across a 100 day period from 1/4/2016. This had resulted in a combined action plan, summarised in the report, designed to stabilise the safety of services and then transform them to be safe on a sustainable basis.

Members asked for and received clarification on matters including:-

- How to achieve a more integrated approach
- Where and how the Board and its members could best assist
- How patients were being engaged

The Board noted there had been significant improvement since support had been given and that “caring” had always scored well. There was an opportunity to build a different approach and this gave something to build on. Members of the Board wished to be supportive and had access to people and services that could assist and make a difference

The Board were informed that the opportunities provided by “Healthier Together” may be the best way for partners to assist, by developing locality relationships and structures.

9

LOCAL CARE ORGANISATION AND TRANSFORMATION FUND UPDATE

The Board received a briefing that updated them on the development of an Integrated Care Organisation (ICO) in Oldham and the progress of the Transformation Fund bid.

The Board were informed that the health and social care community in the borough of Oldham were taking a whole-population approach to the transformation of health and care. The vision was for a resilient, healthy community, drawing on its own resources to stay well, and for great organised care to be available for those who needed it, when they needed it.

The principal vehicle for the achievement of this vision was a radically new form of advanced partnership between commissioners and providers in the borough, which would provide for highly streamlined decision-making and resource allocation at levels and a health and care system based around general practice and the wider primary care team. This partnership was the Oldham Integrated Care Organisation (ICO) which would be responsible for the strategic planning of all health and care in the borough, and the managed provision of the majority of health and care outside of the hospital. The ICO would interface with the North East sector (Bury, Heywood, Middleton and Rochdale and Oldham) commissioning arrangements where appropriate.

The briefing outlined how this would work across the North-East Sector and how systems would be transformed within the ICO. A

foundation had already been established and the briefing detailed how this would be built on, setting out the firm commitments from members to transform the provision of care through new and innovative approaches. Details of governance arrangements and the support for the new services were set out.

Members asked for and received clarification on the difference between the ACMO and the ICO. The ICO better described the way the partners intended to work.

The briefing informed the Board that an outline business case had been developed and that a bid would be made to the Transformation Fund for certain components. There would be a further six months of technical work before there could be full implementation.

The Board noted that, although the initial bid would be for limited aspects of the overall project, details of the anticipated future requirements would also be provided so the Transformation Fund could appreciate the full extent of the vision and proposal.

On behalf of Board Members, the Chair expressed her thanks to everyone involved for all their hard work in putting the bid together. It was noted that there was a lot more still to do and the Board were now confident they were moving in the right direction and would achieve their goals.

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AUTISM STRATEGY

The Board gave consideration to a report that outlined the key issues regarding the development of an Autism Strategy for Oldham. Partners involved in the strategy and its development included provider organisations, individuals with autism and their family members, as well as professionals from education, community, health and social care. The strategy was a joint strategy between the Council and the Clinical Commissioning Group (CCG).

The strategy was for children, young people and adults with autism who lived in Oldham. The aim was to improve both the design and delivery of services and support, by working better together to ensure improved outcomes for people and achieve better value for the money that was spent on commissioned services.

A key objective of the strategy was to increase awareness and understanding of autism across the borough, including services, organisations, businesses and the general public; with the ambition for Oldham to be acknowledged and receive formal recognition of being an Autism Friendly Town.

The Board requested and received clarification as to how public expectations would be managed, and how outcomes would be measured and audited.

RESOLVED: that the Health and Wellbeing Board

- 1) Approved the final version of the Joint Autism Strategy for Oldham,
- 2) Noted that the strategy would be published when Oldham Council's Cabinet had ratified the document later this year.
- 3) Noted that the Chair of the Health and Wellbeing Board would provide an introduction to the Autism Strategy.

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CARE & SUPPORT INFORMATION & ADVICE STRATEGY

The Health and Wellbeing Board gave consideration to a report advising them of the proposed Care and Support Information & Advice strategy/implementation plan.

The Board were informed that Local authorities had a newly defined set of duties, powers and responsibilities under the Care Act. One of those was to establish and maintain accessible information and advice services regarding care and support. The Act did not expect Local Authorities to provide all the information themselves, but they should "understand, co-ordinate and make use of" the resources available across the community.

Service users and/or carer groups had been involved in developing a survey as part of gathering baseline information and getting feedback on the draft priorities within the strategy. This included attendance at a recent Healthwatch forum. This feedback from service users/carers and the wider public had been positive. A range of stakeholders had also been included and would continue to have input as the implementation plan was rolled out, to ensure there was one coherent strategy and approach to the provision of care and support information and advice.

RESOLVED that the Health and Wellbeing Board

- 1) Approved the Care and Support Information & Advice Strategy/Implementation plan.
- 2) Noted the strategy would be published on the Councils external website.
- 3) Noted the Implementation plan would be delivered by April 2017.

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REGIONAL ASYLUM ACTIVISM PROJECT

The Board gave consideration to a report that looked at the health and social care needs of refugees and people seeking asylum. Oldham was one of the 10 local authorities nationwide with the highest concentration of asylum seekers, yet the Government had recently confirmed to Jim McMahon MP, that local authorities are not provided with specific funding to help deal with the impact of asylum seekers on local communities.

The Board was informed that the Greater Manchester Health and Social Care Devolution agenda offered unprecedented opportunities to tackle health inequalities and think differently about how to deliver services to refugees and people seeking asylum. However, proposed legislative changes in entitlement to free healthcare for overseas visitors and migrants threatened to increase barriers to healthcare for asylum seekers and refugees.

RESOLVED that

1. The Health and Wellbeing Board would:-
 - a) Consider the specific needs of asylum seekers and refugees under the work ongoing on the Oldham Locality Plan, including in Oldham's approach to building resilient communities, improving mental health and exploring new roles.
 - b) Consider and include the needs of these groups in the Joint Health and Wellbeing Strategy. Continue to include and update all available data on asylum seekers and refugees in the population domain of the Joint Strategic Needs Assessment for Oldham; work to identify and fill the "substantial information gap" in respect of this group identified in the population domain update of the JSNA 2014; and include refugee and asylum seeking communities in local research efforts under "Building Voice" in the JSNA.
 - c) Undertake to explore the potential impact of the charging regime proposed by the Department of Health on health services in Oldham, and the associated individual and public health risks, and to raise awareness of this impact with relevant local and national decision makers.
 - d) Raise awareness of the charging proposals via the Greater Manchester Combined Authority and GM Health and Social Care Devolution Strategy, and advocate for investment in specialist primary care services in Greater Manchester for people seeking asylum.
 - e) Call on Serco, the Home Office and Urgent Care 24 to provide more information about the health needs of asylum seekers dispersed to Oldham.
 - f) Invest in an education programme to help new arrivals understand how to access and navigate the NHS.
- 2) The CCG and Local Primary Care Practices would
 - a) Take full account of the available data and needs of this population in Oldham when commissioning and delivering healthcare services, including consideration of the need for specialist primary care services.

- b) Implement the 'best practice' guidance outlined in Section 4 of this briefing.
 - c) Implement NHS England's patient registration guidance.
 - d) Work with Hospital Trusts, the Home Office
- 3) The Council's Asylum Seeker Guide would be circulated to members of the Board



The meeting started at 1.00 pm and ended at 3.06 pm