

GM HEALTH AND CARE BOARD

MINUTES OF THE MEETING HELD ON 16 MARCH 2018

Alzheimer's Society	Sue Clarke
Bury Council	Councillor Andrea Simpson Pat Jones-Greenhalgh
Bury CCG	Stuart North
Bolton CCG	Wirin Bhatiani
Carbon Literacy	Phil Korbel
Christie NHS FT	Tom Thorber
Dementia United	Rachel Volland
GM Mayor	Andy Burnham
GMCA	Lindsay Dunn Jamie Fallon
GM ACCGs	Rob Bellingham
GM H&SC Partnership Team	Karishma Chandaria Warren Heppolette Claire Norman Nicky O'Connor Dr Richard Preece Sarah Price Jon Rouse Vicky Sharrock Steve Wilson
GM Cancer Team	Claire O'Rourke David Shackley
GMCVO	Alex Whinnom
Healthwatch	Peter Denton
Manchester Foundation Trust	Kathy Cowell Darren Banks
Manchester Health and Care Commissioning	Ian Williamson

NW Boroughs Healthcare NHS FT	Simon Barber
Oldham Council	Councillor Eddie Moores
Oldham CCG	Julie Daines
Pennine NHS Trust	Karen Clough
Primary Care Advisory Group (Optometry)	Dharmesh Patel
Primary Care Advisory Group (Pharmacy)	Adam Irvine
Provider Federation Board	Ryan Donaghey
Rochdale MBC	Councillor Sara Rowbotham
Salford CC	Charlotte Ramsden
Salford CCG	Anthony Hassall
Salford Royal NHS Foundation Trust	Chris Brookes
SCN	Jeff Schryer
Stockport CCG	Gaynor Mullins
Stockport MBC	Councillor Wendy Wild
Tameside MBC	Councillor Brenda Warrington Steven Pleasant
Tameside NHS Foundation Trust	Karen James
Trafford Council	Gill Colbert
Trafford CCG	Cameron Ward
Wigan Council	Councillor Peter Smith (in the Chair) Stuart Cowley

Also present at the meeting was Alan Mills, to provide his experiences as a resident of GM living with dementia.

HCB 01/18 WELCOME AND APOLOGIES

Apologies were received from;

Councillor Allan Brett, Eamonn Boylan, Matt Colledge, Julie Connor, Mayor Paul Dennett, Alan Dow, Noreen Dowd, Theresa Grant, Ranjit Gill, GM Deputy Mayor Beverley Hughes,

Tony Hunter, Kevin Lee, Councillor Richard Leese, Claire Molloy, Bob Morris, Councillor John Murray, John Patterson, Jim Potter, Councillor Rishi Shori, Steve Rumbelow, Jim Taylor, Tracey Vell, Dorothy Whittaker and Carolyn Wilkins.

HCB 02/18 CHAIR'S ANNOUNCEMENTS AND URGENT BUSINESS

The Chair passed on his appreciation to the personnel mentioned in the report of the Chief Officer and thanked them for their contributions to the Health Partnership and the Board.

HCB 03/18 MINUTES OF THE MEETING HELD 19 JANUARY 2018

The minutes of the meeting held 19 January were agreed as a true record.

RESOLVED/-

To approve the minutes of the meeting held on 19 January 2018.

HCB 04/18 CHIEF OFFICER'S UPDATE

Jon Rouse, Chief Officer, Greater Manchester Health and Social Care Partnership (GMHSCP), provided an update on key items of interest across the GMHSC Partnership.

The following items were highlighted;

- It was reported that a 'devolution difference' communications and engagement campaign had been launched that week which aimed to demonstrate to staff, stakeholders and the public how health devolution was making a difference to the lives of the people of Greater Manchester. A devolution difference 'toolkit' would be available to assist staff and partners share the key messages and practical examples of successes;
- The World Health Organisation had announced that day that GM would be designated the UK's first Age Friendly City Region. Greater Manchester Combined Authority was working in partnership with the Centre for Ageing Better to develop and share innovative approaches to ageing across the city-region;
- GM had been successful in their bid to the Department for Digital, Culture Media and Sport for a significant grant to roll out fibre infrastructure. It was advised that this was fundamental for the ambition for digital interoperability and innovation within health and care. The Board were informed that this would be followed up by a bid to obtain status to become a digital care exemplar, which would attract additional resources to accelerate the interoperability of the digital system across GM;
- With regard to Urgent and Emergency Care performance, the Chief Officer paid tribute to the whole front line workforce in and out of hospital who had continued to deal with a level of unrepresented demand for services which had put significant pressure on patient flow. The work at Fairfield Hospital and Rochdale Infirmary was highlighted as an example of how working together across the health and care system could produce an incredible level of performance of maintaining A and E four hour performance;
- The Care Quality Commission (CQC) report into Pennine Acute Trust (PAT) had rated them as 'requires improvement' with 'good' leadership. This had improved from the previous overall inadequate rating. Although ongoing work was still required, it was noted that all inadequate ratings had been eliminated and 70% of all services were rated as either good or outstanding which demonstrated great progress;

- The CQC report into Greater Manchester Mental Health Trust had found them 'good' overall with 'outstanding' leadership. Credit was extended to all the staff involved in the merger of Manchester Mental Health Trust with Greater Manchester West Mental Health, for recognising the opportunities and making improvements a year into the Trust acquisition;
- Steve Wilson, Executive Lead, Finance & Investment, GM Health and Social Care Partnership provided the Board with an update on the financial performance of health and social care. It was reported that the current position for 2017/18 indicated a surplus of £1.3m against a planned deficit of £17.6m. Credit was extended for all the hard work undertaken in the individual organisations across the system. It was advised that the surplus was likely to grow once CCGs released the risk reserves that had been set aside. However, the Board were reminded that significant one off items had fed into the performance and there would be challenges over the forthcoming financial years.

The Chair reiterated his credit on behalf of the Partnership to staff across the system who have worked during high levels of demand over the winter period. The emphasis of the Partnership to work together to divert patients to treatment in the community was considered fundamental to secure improvements across the system.

RESOLVED/-

To note the update report.

HCB 05/18 SCHOOL READINESS – THE HEALTH CONTRIBUTION TO EARLY YEARS

Sarah Price, Executive Lead, Population Health and Commissioning, GMHSCP introduced a report which outlined the health contribution to improving levels of school readiness in GM.

The Board were informed that good health in the earliest years of a child's life was vital to achieving the ambition of making the greatest and fastest improvement to the health, wealth and wellbeing of the 2.8 million people of Greater Manchester. There was a firm commitment to transform the system from expensive and reactive to prevention and early intervention and at no stage was this considered more important than the 1001 critical days from conception to age two years.

The report identified how health partners were working with wider partners to develop a shared co-ordinated work programme to ensure that school readiness was a key priority across Greater Manchester. It had been identified that pregnancy and birth provided a critical window of opportunity when parents were particularly receptive to advice, support and guidance.

Karen Clough, Specialist Midwife in Public Health Surveillance, Saving Babies Lives at Pennine Acute Hospitals NHS Trust supplemented this with an update on the work being done to help people to give up smoking during pregnancy.

It was reported that rates of smoking during pregnancy varied across Greater Manchester, with some of the highest rates in Pennine. For example, smoking at delivery rate in Rochdale reached 17.4 % in February, which was well above the national average of 10.8%.

An overview of the Greater Manchester smokefree pregnancy scheme called Baby Clear which would enable women to access specialist help for their smoking addiction was provided to the Board. It was advised that the Greater Manchester approach was on a larger scale than projects delivered before, was research backed and based on changing the culture around smoking in pregnancy. Throughout, the consistent message would be, that smoking in pregnancy would result in ill health for mother and baby.

It was believed that with the expertise of staff, enthusiastic leadership, funding and the commitment that the GM smokefree pregnancy scheme provided, a real difference to smoking rates in pregnancy could be achieved. This could ultimately improve the health of women and families and would have long term impacts on the health of future generations, giving children in Greater Manchester the very best start in life in a smoke free environment.

Members offered their support for the report and the Baby Clear programme but highlighted the constraints of resources and the financial sustainability across localities for the vital programme of work. It was agreed that cuts to local government budgets made the implementation of the programmes difficult. However, new monies allocated from the transformation fund allowed investment into such programmes often in the most deprived communities. The Board were provided with an update on the digital fund and it was reported that funding had allowed for the roll out of mobile technology for health visitors which had enabled them to work more efficiently providing more time to support families. However, due to controls totals for both Tameside and Stockport not being agreed with NHS Improvement, access to capital funding for such investment was not available in those areas which was thus having a direct impact on families. Lobbying for access to discretionary capital, regardless of individual agreement on control totals would continue for those areas and be supported by the Partnership.

A member asked for clarification that the Baby Clear programme was only focused on tobacco smoking or included e cigarettes and vaping products. It was confirmed that at this stage tobacco related smoking was the primary focus.

The appetite for water fluoridation for the region in order to have the biggest impact on dental health inequalities was discussed and it was suggested that although it was a significant cost, it was a challenge that the Chair was keen to support and lead on.

The Chair offered support for the strategy but requested further information as to how the strategy would deliver the behaviour change required. It was suggested that the voluntary and community sector were utilised in order to influence behaviour change where possible. It was proposed that further information was requested from the GM School Readiness Board as to how the strategy would be implemented across the ten localities and in the service delivery areas where this would make a difference across the Partnership.

RESOLVED/-

1. To note the content of the report and commit ongoing support to the ambition to increase the number of children who are school ready in GM;
2. To continue to lobby NHSI and Central Government on the accessibility of discretionary capital for all localities;
3. To provide further consideration to fluoridation across the region;
4. To request further details from the GM Schools Readiness Board on the implementation of the health contribution to school readiness.

HCB 06/18 CHILDREN AND YOUNG PEOPLE MENTAL HEALTH PROGRAMME UPDATE

Simon Barber, Chief Executive, North West Borough Health Care and Chair of the Children and Young Peoples Mental Health Implementation Board provided an overview of the delivery to date of the Children and Young Peoples Mental Health Programme. It was reported that one in ten young people have a diagnosable mental health condition and 75% of adult mental illness begins before the age of 18. The Greater Manchester mental health ambitions, the achievements and the programme priorities for 2018-21 were outlined to the Board. Key reforms which included mental health leads in every school, new teams to support schools to meet mental health needs and shorter waiting times to get help and the deliverables were highlighted.

A video clip from a patient's story demonstrating the community eating disorder service was presented providing an insight into the collaborative work having an impact across GM. The service was developed on the core values of the thrive model which provided help, advice and the support required.

The Mayor of Greater Manchester welcomed the pace of the GM Mental Health Children and Young People Programme, but highlighted the importance of ensuring that consideration was provided to the voice of young people and their call for a curriculum for life. It was suggested that the Youth Combined Authority were invited to be involved in the development of the model outlined and highlighted that mental health was central for the wider life advice for children and young people. He further added that there should be specific connections to the wider life readiness agenda being developed and clear commitments to care leavers and young carers with regards to mental health.

In support of the programme, members reiterated the comments made by the Mayor with regard to children, young people and their parents being involved in the development of the pathways to ensure that a child friendly approach is adopted. It was highlighted that looked after children are often placed in boroughs where they have not originated from, it was recommended that this vulnerable group continue to receive the correct support and attention wherever they live. It was confirmed that the looked after children cohort were included within the whole programme and in particular with regard to the implementation of the crisis care model.

The Board welcomed the key reforms proposed with regard to support for schools and asked if there would be additional resources allocated alongside training. It was advised that training would be provided prior to any additional funding that maybe announced in the forthcoming Green Paper which would allow GM to be in a better placed position.

As localities faced increasing substantial financial challenges and new models of care were developed, innovative ways to engage the voluntary sector in the programme was emphasised as significant. Furthermore, the connection of models across the GM footprint and the sharing of best practice operating in districts was considered to be necessary. It was advised that the successful models implemented in localities would be developed to deliver single service specifications and consistency across GM.

The Board considered the role of technology and the growing body of research and evidence that suggested that social media impacted on the health and wellbeing of young people. It was proposed that further consideration and connections were made with the digital strategy

to ensure that the acceleration of the digital agenda did not have further bearing on the health and wellbeing of young people.

A member representing the voluntary sector provided the Board with reassurance that there had been a considerable level of engagement with young people, particularly with Children and Adolescent Mental Health Services commissioning and the work undertaken with young carers. There was a further offer of support from Healthwatch networks to help to develop the emerging agenda of mental health support for transition between Children's and Adult's services. The Board were informed that the voluntary sector and national charities had been engaged and were key partners in the delivery of all the identified workstreams.

It was confirmed that young people had assisted in the development of the programme and had provided consideration to the language used prior to implementation. Further engagement with the Children and Young People's Mental Health Implementation Board was being considered in order to provide an effective interface to monitor and provide an understanding as to whether programmes were beginning to make a difference to children and young people.

In welcoming the report, the Chair suggested the Children and Young People's Mental Health programme should be considered by the Youth Parliament. He reiterated the comments made by the Board with regard to the role of the voluntary and community sector.

RESOLVED/-

1. To note the progress update provided;
2. To note the comments from the Board with regard to continued children, young people, parental and carers involvement in service delivery and communication;
3. To provide the Children and Young People's Mental Health programme to the Youth Parliament for consideration and comment.

HCB 07/18 DEMENTIA UNITED

Anthony Hassall, Chief Operating Officer, Salford CCG provided the Board with an update on the Dementia United programme. It was highlighted that Dementia United continued to be a priority for Greater Manchester and the opportunities and developing work plan to mobilise a strategy and system response for people living with dementia and those who care for them aligned to the GM dementia standards was outlined in the report.

Anthony introduced Alan Mills, Sue Clarke and Dr Jeff Schryer to the Board and in doing so described them as being the important people to provide a view of the work being done to meet the strong commitment made to make GM the best place to live in the world with dementia. It was reiterated that there was a strong commitment to co design by involving those living with dementia, their carers, the voluntary sector and clinicians working in the field. Credit was extended to Sir David Dalton who had initiated the programme of work in GM.

An overview of the facts, aims of the programme, the journey so far and further work plan development was outlined to the Board. Alan Mills, who had been diagnosed with early on set dementia and Alzheimer's provided members with his experiences as a resident of GM living with dementia. He outlined the emotional and peer support that people with dementia required and described the variations offered at the specialist centres that perform further diagnosis and memory tests.

Sue Clarke from the Alzheimer's Society supplemented this by explaining that she had worked in the field of dementia over the last ten years across GM. She emphasised that people are more aware of the issues which those who have been diagnosed with dementia are living with and further encouraged members of the Board to provide support.

Dr Jeff Schryer, a GP in Bury provided an overview of the unique way in which Dementia United were working in partnership with people who suffer from dementia and their carers to help develop pathways. He provided an example of the work across the health and social care system and explained how it was making a difference to service delivery and provision.

The Chair thanked the individuals for the collective presentation which highlighted the exciting work underway to support people living with dementia. The Mayor of GM, reiterated his appreciation and acknowledged that support for people with dementia needed to be provided as well as the support delivered to people with cancer. He reflected that it had been confirmed that GM was the first UK's city region to be receive age friendly status by the World Health Organisation, which reaffirmed the strength of plans and vision. He suggested that the focus should be on age friendly rather than the dependency in order to achieve the full potential. It was confirmed that £1 million of funding had been announced by Sport England to promote physical activity for older people along with a GM Festival of Ageing on 2-15 July 2018, funded by the Heritage Lottery. It was emphasised that the language around contribution rather than dependency was important to the wider sense of maximising people's independence.

The Board were provided with an insight into the scheme introduced at Super League side Wigan Warriors reaching out to supporters with dementia and helping to tackle loneliness in the community. The club had set up a Rugby Memories group where fans of the team meet up once a week to watch an old game and reminisce about the glory days.

RESOLVED/-

1. To note the content of the report and proposed engagement with GM governing groups and localities;
2. To endorse the direction of travel;
3. To note the positive appreciation from the Board for the powerful presentation;
4. To note the announcement that GM was the first UK city region to receive Age Friendly status;
5. To note the announcement by Sport England that £1m of funding would be available to promote physical activity for older people;
6. To note the GM Festival of Ageing on 2-15 July 2018.

HCB 08/18 UPDATE ON CANCER WORK

Dr Richard Preece, Director of Quality, GMHSCP introduced a report which provided the Board with an update on cancer work across the Greater Manchester network. The report provided an overview, key data with associated commentary and outlined future priorities. The 2017 Report of the Greater Manchester Cancer Board, published in February 2018 which outlined many of the signature programmes in more depth was appended to the report.

It was reported that good progress was being made against the targets described in the 4-year GM Cancer Plan of Feb 2017 and also the cancer related aspects of the NHS planning guidance. The current highest priorities related to delivering accelerated pathways in lung,

colorectal, prostate and upper gastrointestinal cancer, alongside specific additional work in lung cancer, and delivery of the recovery package.

David Shackley, Medical Director and Claire O'Rourke, Lead Nurse, Greater Manchester Cancer supplemented the report with an overview of the highlights from the previous year and the forthcoming priorities from a professional perspective and progress for patients. Members were encouraged to attend the first GM Cancer Conference scheduled for 26 November 2018.

In welcoming the report the Chair acknowledged the work of the GM Cancer Board and the impressive achievements made in a short space of time.

RESOLVED/-

1. To note the progress made across the GM Cancer system;
2. To endorse the current approach and priorities;
3. To note the encouragement for members to attend the GM Cancer Conference on 26 November 2018.

HCB 09/18 HEALTHWATCH IN GREATER MANCHESTER – PROGRESS UPDATE

Peter Denton, Healthwatch Liaison Manager, Healthwatch in Greater Manchester introduced a report which provided an update of the first year of the GM Liaison function and identified development areas for Healthwatch for the coming year.

The report highlighted the statutory functions of local Healthwatch, particularly in terms of its role in assessing the quality of health and care services and in supporting community engagement.

It was reported that local Healthwatch priorities had been mapped against GM Health and Social Care plans. It was noted that Healthwatch priority activity with the Partnership was closely aligned with implementation of the Mental Health Strategy; Theme 3 Standardisation of Acute Hospital Services activity; and supporting effective engagement in the development and implementation of locality plans.

It was confirmed that Healthwatch had secured representation on a range of the Partnership's governance boards for both Mental Health and Theme 3 as well as at a strategic level. Healthwatch had also developed a process of aggregating patient, service user and carer feedback to inform its role on the GM Quality Board.

RESOLVED/-

1. To receive and note the contents of this report;
2. To reaffirm support for all members of the Partnership to work collaboratively with Healthwatch both at locality and Greater Manchester levels.

HCB 10/18 CARBON LITERATE HEALTH AND SOCIAL CARE – SALFORD LOCALITY PRESENTATION

Charlotte Ramsden, Strategic Director for Community, Health and Social Care, Salford City Council introduced a presentation on behalf of Councillor John Merry, Deputy City Mayor, Salford Council. The Board were provided with an overview of the impact of the Boxing Day

floods in 2016, with regards to adopting a commitment to become more carbon literate and responsible.

The Board were informed of the collective work to develop the opportunity across health and social care to become carbon literate and the ambition to make Greater Manchester one of the leading green cities in Europe. It was advised that to help realise these ambitions, a landmark Green Summit would be held on 21 March 2018.

Phil Korbel, Director Carbon Literacy Project described the added value in engaging people to participate in carbon literacy in order to prevent harm and promote well-being. The scale of the challenge in GM to obtain zero emissions by 2038 in response to the Paris Agreement was highlighted to the Board.

It was advised that Salford CCG would be the first carbon literate NHS organisation. Anthony Hassall informed members that Salford CCG would take forward the issue of carbon literacy and the impact of pollution across GM health and social care providers and CCG's.

The Mayor highlighted the opportunities from a health and economic perspective and encouraged organisations to make a pledge at the Green Summit. The individual benefits for organisations in terms of savings along with an overview of the GM plastics campaign to eliminate single use plastics was provided to the Board.

RESOLVED/-

1. To note the update provided;
2. To note the drive to eliminate single use plastics in GM;
3. To provide further consideration as individual organisations to making a pledge in advance of the Green Summit.

HCB 11/18 DATES OF FUTURE MEETINGS

Friday 11 May 2018	10:00am – 12:00 noon	Council Chamber, Manchester Town Hall
Friday 13 July 2018	10:00am – 12:00 noon	Council Chamber, Trafford Town Hall
Friday 14 September 2018	10:00am – 12:00 noon	Number One Riverside, Rochdale Council