

**HEALTH AND WELL BEING BOARD**  
**26/06/2018 at 2.00 pm**



**Present:** Councillor Harrison (Chair)  
Councillors M Bashforth, Chadderton, Chauhan and Jacques

Dr Zubair Ahmad	Oldham GP Federation
Jill Beaumont	Director of Children's Social Care and Early Help
Noreen Dowd	Executive Director of Transition
Julie Farley	Oldham Healthwatch
Majid Hussain	Lay Chair Clinical Commissioning Group (CCG)
Dr Keith Jeffery	Oldham CCG
John Heywood	Greater Manchester Police
Merlin Joseph	Interim Director of Childrens Services
Stuart Lockwood	Chief Executive, OCL
Donna McLaughlin	The Pennine Acute Hospitals NHS Trust
Dr. John Patterson	Clinical Commissioning Group
Charlotte Stevenson	Interim Director of Public Health
Mark Warren	Managing Director Community Health and Social Care Services (DASS)
Carolyn Wilkins OBE	Chief Executive/Accountable Officer

Also in Attendance:

Rebekah Sutcliffe	Strategic Director of Reform
Vicky Sugars	Strategy, Partnerships and Policy Manager
Sian Walter-Browne	Constitutional Services

1            **APOLOGIES FOR ABSENCE**

Apologies for absence were received from Jon Aspinall, Zuber Ahmed and Nicola Firth.

2            **URGENT BUSINESS**

There were no items of urgent business received.

3            **DECLARATIONS OF INTEREST**

There were no declarations of interest received.

4            **ELECTION OF VICE-CHAIRS**

**RESOLVED** that Donna McLaughlin and Dr John Patterson were elected to be Vice Chairs.

5            **PUBLIC QUESTION TIME**

The following public question was received from Mr. J. Allen:

N.H.S launches public campaign to highlight new stronger protection around health and carer information.

On the 26th May I received this first of 3 main items from NHS England, also it is how this item going to achieve from the public, to fully understand the full aspect in what is being put forward, (the public campaign) for the people of Oldham. Also looking what others local authorities views and concerns in their own areas and taking on board items that may be helpful for Oldham.

I would like to ask:-

- 1) a. What is the concerns of the NHS, CCGs, HWB and registered social landlords on this item
  - b. With GP practices who have patient participation groups, will they be given a debate on this subject
  - c. How will this item be used to get aware to the general public of Oldham
  - d. For those people who do not use the internet get a chance to get involved in this public campaign
- 2) Will the Health & Wellbeing Board debate this item and take it on board with all its partners
- 3) If so will this be put to the public of Oldham, will there be a public consultation be taking place i.e. (through the internet and general meetings and replies from PPG groups to get a full consensus
- 4) If this is done, I would like to see a written report given so that the public voice is shown to have had a voice, also see what the outcome was.

The following response was provided:-

**1) a. What is the concerns of the NHS, CCGs, HWB and registered social landlords on this item**

All public sector organisations, including the NHS, CCG and Social Landlords have taken steps to ensure it is fully compliant with the GDPR regulations. The Health & Wellbeing

**b. With GP practices who have patient participation groups, will they be given a debate on this subject**

Patient Participation Groups are at liberty to set their own agenda's in discussion with their host practices.

**c. How will this item be used to get aware to the general public of Oldham**

The CCG is not planning any specific work with the public around GDPR. However it is planning to write to every household with patients registered with an Oldham GP, to notify them about arrangements for sharing patient records at the point of care.

**d. For those people who do not use the internet get a chance to get involved in this public campaign.**

The Chair indicated this would be further investigated and a response provided on the particular issue.

**2) Will the Health & Wellbeing Board debate this item and take it on board with all its partners**

The Board discussed the implications of GDPR and data sharing as an enabler to health and care integration at their development session in April (notes can be found attached to the Action log) and the feedback from this meeting is on today's agenda.



**3) If so will this be put to the public of Oldham, will there be a public consultation be taking place i.e. (through the internet and general meetings and replies from PPG groups to get a full consensus )**

A consultation was undertaken by the Department for Culture, Media and Sport in April and May 2017. As GDPR was implemented on 28 May 2018, no further consultation is planned either locally or nationally.

**4) If this is done, I would like to see a written report given so that the public voice is shown to have had a voice, also see what the outcome was.**

The responses to the Department for Culture, Media and Sport consultation were published on 7th August 2017. They can be found at the following link  
<https://www.gov.uk/government/consultations/general-data-protection-regulation-call-for-views#history>

The following further public question was received from Mr. J. Allen:

12 Million people to benefit from better joined up NHS and social care

How has this affected Oldham, mainly from the NHS A & E departments down to the grass routes within Oldham

I would like to ask:-

- 1) What improvements have been achieved within Royal Oldham Hospital, also to what advantage
- 2) What feedback can the CCG give us on Primary Care throughout Oldham
- 3) Has there been any improvement in Social Care throughout Oldham in social care and nursing homes, with the financial budget they have received
- 4) Has there been any increase in the financial budget to come from central government in the foreseeable future?

The following response was provided:-

**1) What improvements have been achieved within Royal Oldham Hospital, also to what advantage**

Royal Oldham Hospital, along with all other Hospitals across Greater Manchester, continues to experience high levels of demand for it's A & E services. Continued effort is being taken to ensure as many people are seen within the necessary 4 hour waiting time.

The Hospital continues to work with its partners to ensure patients are aware of other services they could use to meet their needs, rather than attend A & E, as well as to

ensure as smooth as possible discharge process is in place for those who have been admitted and received care.



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## **2) What feedback can the CCG give us on Primary Care throughout Oldham**

Developments in Primary Care are discussed at the CCG Primary Care Commissioning Committee. This committee meets in public and papers are published on the CCG website. The next meeting will be on 2nd August. The latest Primary Care work programme update is attached.

## **3) Has there been any improvement in Social Care throughout Oldham in social care and nursing homes, with the financial budget they have received**

Funding from a number of routes including the Improved Better Care Fund and the Council tax precept has been used to support Adult Social care infrastructure and ensure;

- Social Workers are funded to remain in post
- Investments in the market place which have included working with care homes to improve quality. There are no care homes in Oldham presently with a CQC rating of 'inadequate' and we are working with the homes rated 'requires improvement'
- Supporting the NHS services with safe discharges from the hospital
- Enhancing the support in extra care housing
- Supporting day services
- Short term care services
- Increasing fees to providers
- investing in home from hospital services
- Increasing reablement capacity to support hospital discharge and prevent admission

## **4) Has there been any increase in the financial budget to come from central government in the foreseeable future?**

Much of the funding is non recurrent and we are unclear of the financial position post 2020

## **6 MINUTES OF PREVIOUS MEETING**

**RESOLVED** that the minutes of the Health and Wellbeing Board held on 27<sup>th</sup> March 2018 be approved as a correct record.

## **7 ACTION LOG**

**RESOLVED** that the Action Log from the meeting held on 27<sup>th</sup> March 2018 be noted.

## DATA SHARING & INFORMATION GOVERNANCE

Consideration was given to a report that outlined the progress on data and information sharing.

The Board was informed that data and information sharing remained a critical enabler in delivering high quality joined up care for the citizens of Oldham. There had been a workshop in April that was a catalyst to confirm commitment from system leaders at the highest level to the importance of data and information sharing. A number of key actions had taken place since the workshop which were summarised into three areas; data sharing, risk stratification/ population health and Digital Strategy.

### Data Sharing

The Memorandum of understanding and Alliance Agreement had been signed by all parties by end of May. This included a commitment to have appropriate detailed agreements in place and to move to a population approach to health. A data sharing agreement for Oldham Cares was in development and would be signed off by all partners by September 18.

### Population Health

Agreement had been reached;

- To continue with the existing risk stratification EMIS tool
- To use our BI combined resource and clinical leadership to work with Salford to accelerate the roll out of (Global Digital Excellence Status) GDES tools into Oldham.
- To review this approach in six months' time (November 2018) and in between provide feedback through the Project Highlights Report to the Alliance Board.
- To make a bid to the Health Foundation for a BI integrated platform to support service development and data sharing at a neighbourhood level, the outcome of which would be known in late summer.

### Digital Strategy

Oldham Digital Strategy was in development and would be presented to Greater Manchester Health and Social Care Partnership in July. This included the development of digital solutions to support integration and data sharing.

**RESOLVED** that the progress was noted and the Board would receive quarterly updates on future developments.

## MEETING OVERVIEW

**RESOLVED** that the overview for the meeting be noted.

## URGENT PRIMARY CARE STRATEGY

The Board gave consideration to a report and presentation by Dr Shelley Grumbridge on the next steps in Urgent Primary Care in Oldham.



The purpose of the Urgent Care Strategy was to set out, in a single document, the future plans for commissioning and developing urgent care across Oldham to ensure it is effective, affordable and sustainable. Whatever the urgent need was, and in whatever location, the aim was to ensure that the population had access to the best care from the right person in the best place and at the right time.

The strategy document set out and defines the vision and strategic aims for urgent care in Oldham. It included a detailed description of current services including activity, quality and performance. The strategy finished by describing commissioning principles, priorities for system change, defining 'what good looked like' to drive outcomes-based commissioning and suggested metrics for monitoring system change and development.

The strategic aims were:-

*Strategic Aims:*

- 1. To provide better support for self-care.*
- 2. To help people with urgent care needs get the right advice in the right place, first time.*
- 3. To provide highly responsive urgent care services outside of hospital, so people no longer choose to queue in A&E.*
- 4. To ensure that those people with serious or life-threatening emergency care needs receive treatment in centres with the right facilities and expertise in order to maximise chances of survival and a good recovery.*
- 5. To connect all urgent and emergency care services together around place (population of 30-50k) so the overall system becomes more than just the sum of its parts. (Integration and transformation)*

The primary drivers were to:

- Achieve 91% towards the 95% 4 hour wait standard by March 2019
- Reduce A&E attendances by 24% by 2021
- Reduce non-elective admissions by 14% by 2021

The strategy set out the following priorities for change over the next three years:-

Our priorities for change across the urgent care system over the next three years are:

- Move to a more proactive management of long term conditions and those at risk of hospitalisation by taking a population approach

- More actively promote self-care and make it much easier for patients to access high quality, reliable information and services
- Ensure primary care – in hours and out of hours services – is the service of choice for patients to meet their urgent care needs
- 111 direct booking into the 7 Day Service
- Develop options locally for patients to access an “urgent care hub” in each GP Cluster with enhanced skills to manage long term conditions and cases which currently present to hospital.
- Continue to reduce ambulance conveyance rates
- Develop community pharmacies into urgent care providers
- Reduce ED attendance rates and 999 calls for urgent conditions
- For urgent mental health care, achieve parity with physical health care
- Develop a paediatric urgent care pathway, at cluster level
- Develop a frail elderly urgent care pathway dovetailed with a population health approach to falls prevention at cluster level
- Consider prioritisation of services by need to tackle health inequalities
- Create a business intelligence platform to analyse and understand the impact of the wider determinants of health at a neighbourhood level.

The Board asked for and received clarification on resources and staffing. They were informed the strategy was about joining everything together and managing situations before they became emergencies. Urgent care hub appointments would not be used to replace regular GP appointments.

The Board recognised that it was essential to ensure the needs of children were fully included and that the service needed to consider how best to support people at home rather than in hospital. Communication would be the key to ensuring people understood how to get the best out of the service.

**RESOLVED that** the Board noted the progress made and would receive further updates.

## **GM POPULATION HEALTH PROGRAMME**

The Board gave consideration to a report of the Executive Director for Population Health and Commissioning that provided an overview of activities undertaken in 17/18 towards the priorities set out in the Greater Manchester (GM) Population Health Plan.

The report covered:-

- Work to date to agree allocation of Population Health Transformation Fund monies against a number of strategic business cases and;
- Progress so far in terms of implementation of a number of early programmes of work as part of the plan.
- A forward look at future planned activities.

The Population Health Plan set our collective ambition for delivering a radical upgrade in population health; it was focused on five priority themes: The first three (start well, live well, age well) set out our approach to delivering population health consistently at scale across GM and taking the multiple opportunities across the life course to enhance quality of life. The Plan also set out our ambition to create a unified population health system across the GM economy which was organised to deliver at pace and scale. Our Plan also embraced the concept of asset-based community development and actively involving our communities as a way of doing business. The Board noted that Oldham was a pilot in many of the areas.

The report detailed the key activities undertaken in 2017/18 and the key achievements. Attention was drawn to the difference the population health plan devolution had made to everyday lives in Greater Manchester.

The Board asked for and received clarification as to how the Combined Authority linked into the other Greater Manchester Boards. They were informed that the Combined Authority had its own responsibilities and linked across Boards through the quarterly assurance meetings.

**RESOLVED that** the content of the report was noted and the continued implementation of the population health plan was supported.

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## **UPDATE ON GREATER MANCHESTER POPULATION HEALTH OUTCOMES FRAMEWORK AND COMMON STANDARDS AND THE OLDHAM CARE OUTCOMES FRAMEWORK**

The Board gave consideration to a report of the Joint Acting Director of Public Health that provided an update on the development of the Greater Manchester Population Health Outcomes Framework and Common Standards and the Oldham Cares Outcomes Framework.

In March 2017, the GM Health & Social Care Partnership agreed to a set of proposals to facilitate the creation of a unified population health system, to support the delivery of the GM Population Health Plan at pace and scale. This included a commitment to the reduction of unwanted and unwarranted variation in standards, improvement in population health outcomes, more consistent adoption of evidence based practice, and the enhanced use of benchmarking data.



Over time, this programme had developed to incorporate 3 core elements:

- A GM Population Health Outcomes Framework (as part of a single integrated assurance process)
- GM Population Health Common Standards
- Excellence in GM Sector Led Improvement Programme

On 29<sup>th</sup> March 2018 the GM Population Health Board agreed that the Framework and accompanying online dashboard would be used in future Locality Quarterly Assurance processes and would be tested during the 2017/18 Q4 Assurance Cycle. Work was ongoing to further develop the Framework and to identify alternative means of measuring desirable outcomes.

The GM Population Health Board also reviewed drafts of the first phase of the Population Health Common Standards covering prescribed and non-prescribed core public health functions, tobacco, sexual and reproductive health and oral health, and requested that localities note the development of standards and continue engage with this work to further develop a suite of standards to help improve outcomes, reduce inequalities locally and across GM.

The Oldham Cares outcomes framework set out a range of high level outcomes based on the key changes we want to see in Oldham over the next decade. These were the headline outcomes for Oldham Cares, which the whole system would work together to deliver, in order to improve the health of the population and the way the local health and social care system operates.

The outcomes framework and supporting indicators were agreed at the Health and Wellbeing Board in March 2018 and work to develop targets and ambitions for these indicators was being progressed.

#### **RESOLVED that**

- The GM Population Health Outcomes Framework and the intention for this to be used in Locality Quarterly Assurance processes be noted.
- The development of GM common standards and continue engage with this work to further develop a suite of standards to help improve outcomes, reduce inequalities locally and across GM be noted.
- The progress to date in developing the Oldham Cares outcomes framework and the proposed engagement of commissioners, alliance providers and health and wellbeing board members, to develop ambitions and targets for each indicator, for approval at the next meeting of the Board, be noted.

## CHILDREN'S HEALTH AND WELLBEING



The Board gave consideration to a report from the Assistant Director of Safeguarding and Partnerships that set out the key aspects of Oldham's emerging strategic framework and identified the role of the proposed Children and Young People's Strategic Partnership Board to deliver the ambition of Oldham being '**a place where children and young people thrive**'.

The Board were informed that a draft framework set out how Oldham's partner agencies intended to deliver the ambition for our children and young people and identified how by working together our key organisations and most importantly our children, young people and their families could create and sustain a great future where everyone had the chance to thrive wherever they live in the Borough and whatever challenges they might face.

Alongside the high level outcomes, the framework would set out the key commitments that Oldham partner agencies would make to children and young people such as –

- Every Oldham child will be supported to have the best start in life.
- Every Oldham child will be start school ready to learn.
- Every Oldham child will be prepared for adult life through their school education.
- Every Oldham child will be have the opportunity to study at a school rated good or better.
- Every Oldham child will be supported to achieve their ambitions for post-16 education.
- Every Oldham child will be offered the necessary protection and support if and when they need it.
- Every Oldham child will be supported to make their voice heard to help design and improve children and young people's services.
- Every Oldham child will be supported to enjoy being a part of and make a difference in their local community.

It was intended the framework would also ensure alignment to the emerging GM landscape including the 10 priorities set out in the Greater Manchester Health and Wellbeing Framework for Children and Young People. The three top priorities in the GM Framework were; **early years and school readiness**, **mental health and resilience** and the **prevention of avoidable hospital admissions**, all of which featured in local transformation programmes.

The Children and Young People Strategic Partnership Board would bring partners together in a formal way to ensure delivery of our ambition.

The Partnership Board would oversee the progress in achieving our objectives and partners would support and challenge each other to ensure that collectively and as individual organisations

our commitment to ensuring Oldham's children and young people thrive was relentless. In fulfilling its function, the Partnership Board would hold to account those thematic partnerships which had a particular area of improvement focus.

The Partnership Board would be accountable to the Health and Wellbeing Board.

The Lead Member for Children's Services would chair the Children and Young People Strategic Partnership Board and have reporting accountability to the Health and Wellbeing Board.

The Partnership Board would develop its own set of Key Performance Indicators drawn from existing KPI's across the system. Members of the partnership would play a crucial role in delivering our ambition and would represent statutory and non-statutory partner organisations.

**RESOLVED that:-**

- a) The Health and Wellbeing Board noted and endorsed the approach to establishing a strategic framework within which partners deliver on the ambition for Oldham to be a **'place where children and young people thrive'**.
- b) The Health and Wellbeing Board approved the proposal to establish the Children and Young People's Strategic Partnership Board.

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**SEND UPDATE**

The Board gave consideration to a report and presentation updating them on the Ofsted/CQC Inspection and Progress on Written Statement of Action (WSOA) May/June 2018.

The Board were informed that in October 2017, Ofsted and the Care Quality Commission (CQC), conducted a joint Inspection of Oldham to judge its effectiveness in implementing the disability and special educational needs (SEN) reforms as set out in the Children and Families Act 2014. Although this outlined areas of strength/further improvement it was determined that a joint Written Statement of Action was submitted to Ofsted because of significant areas of weakness in the local area's practice.

A joint Written Statement of Action (WSOA) from the LA/CCG was produced with input from key partners and submitted to Ofsted on 2 March 2018. WSOA approved by Ofsted - 22 March 2018. Ofsted noted that the statement of action could be further improved by having clearer outcomes and this has been responded to.

The WSOA was published on the Oldham SEND Local Offer on 23 March 2018. In line with a WSOA the LA and CCG were subject to joint Bi-Monthly Monitoring and Support reviews from the Department for Education (DfE) and NHS England (NHSE). 3 joint review meetings had been held in Dec18, Mar18 and May18 with DfE and NHSE to review progress against the

WSOA. Further meetings were due in July 2018 and September 2018.

In October 2018 the DfE would submit a report to the Minister detailing progress within Oldham. This report would also recommend whether progress against the WSOA was sufficient for ongoing oversight from DfE and NHSE to cease. Progress would be considered under each priority.

The Board understood that the agenda around SEND was very large and the need to produce constant progress reports had diverted resources. It was hoped these could now be freed up and they were informed that initial recruitment to the service would be over and above the structure to support the necessary change and deal with the huge influx of work. Progress on SEND would be reported to the Partnership Board.

**RESOLVED** that the extensive improvement was noted and further updates would be received.

15            **HEALTHWATCH OLDHAM WORK PROGRAMME**

This Item was deferred for consideration at the next meeting.

16            **DATE OF NEXT MEETING**

**RESOLVED** that the date and time of the next Health and Wellbeing Board would be a development session and would take place at Harry Burns Suite – First Choice Homes Oldham on 24th July 2018 at 2 p.m.

The meeting started at 2.00 pm and ended at 4.05 pm

