HEALTH AND WELLBEING BOARD

4 NOVEMBER 2014

PRESENT

Cllr J. Bennett Shadow Member for Adult Social Services & Community Wellbeing

D. Brownlee Corporate Director of Children, Families and Wellbeing

Cllr M. Cornes Exec Member for Children's Services
A. Day Chairman of Healthwatch Trafford

Dr. N. Guest Chairman of the HWB, and Chief Clinical Officer of Trafford CCG

G. Lawrence Chief Operating Officer of Trafford CCG

S. Webster Director of Bluesci

Cllr M. Young Vice-Chairman of the HWB, and Exec Member for Adult Social

Services & Community Wellbeing

Also Present

C. Baker- Joint Director for Children, Young People and Families (Health

Longshaw Care)

K. Calvin- Executive Director of Planning, Performance and Information of

Thomas Pennine Care NHS Trust, representing Michael McCourt Associate Director of Commissioning of Trafford CCG

D. Eaton Joint Director for Adults (Social Care)

G. Green Director of Operations and Nursing for Greater Manchester West

(Mental Health) NHS Trust

I. Khan Service Transformation Project Manager of Trafford CCG P. Whittaker Consultant in Public Health, representing Abdual Razzaq

In attendance

R. Sheikh Partnership Officer

R. Hughes Democratic Services Officer

APOLOGIES

Apologies for absence were received from D. Banks, B. Humphrey, Superintendent Liggett, M. McCourt, A. Razzaq, A. Vegh, C. Yarwood and M. McCourt

28. MINUTES

RESOLVED: That the minutes of the Health and Wellbeing Board meeting held on Tuesday 15th September 2014 be approved as a correct record.

29. DECLARATIONS OF INTEREST

No interests were declared.

30. ACTION LOG

RESOLVED: That the contents of the Action Log be noted.

31. RESHAPING TRAFFORD 2015/16 - BUDGET PROPOSAL

The Corporate Director for Children, Families and Wellbeing delivered a presentation which set out the Council's plans for Reshaping Trafford and gave an overview of how the budget proposals for 2015/16 would affect the delivery of specific services within the Children, Families and Wellbeing directorate (CFW). The Board were informed that significant savings had been made since 2010 from restructuring, collaboration, and reviewing operational and service delivery across the Council, with CFW having contributed £38m of the £75m savings already achieved.

It was explained that further reductions to the Council's central funding required additional savings of £57m by 2017/18, which would mean that the Council needed to significantly change the way services were delivered. It was envisaged that restructuring operations to deliver services less directly would enable a leaner version of the Council to continue to provide quality services and meet its minimum statutory obligations. The Board were guided through the savings that had been identified from the various budgets of the CFW directorate and the proposals for delivering these savings, and the process for consultation was outlined.

The Board were given an opportunity to raise questions in relation to the presentation, and the Corporate Director clarified the impact assessment process for managing the risks associated with reductions in each budget, which would be informed by the consultation process and would be fully accessible for Members.

RESOLVED: That the presentation be noted.

32. UPDATE ON HEALTH & SOCIAL CARE INTEGRATION

The Joint Director for Children, Young People and Families (Health Care) and the Joint Director for Adults (Social Care) introduced a presentation on the integration of health and social care services between Pennine Care NHS Trust and Trafford Council. A Service Delivery Model was outlined which was based on four geographic areas within Trafford, with North, West, South and Central district integrated neighbourhood teams anchored by a 'One Door' 24hr Central Assessment Service consisting of IV therapy, rapid response, an emergency duty team, urgent care, single point of access and hospital teams.

The strategic approach across all sectors was said to ensure that all services were aligned without any duplication between partners. It was noted that the staff consultation had been completed, appointments had been made for both the Joint Heads of Service and Joint Operational Managers, and work was now being done to develop a New Working Model.

In response to questions from the Board it was confirmed that success will be measured against agreed outcomes shared by Pennine Care and the Clinical Commissioning Group, and would be recognisable by increased rates of patients deflected away from hospitals. It was noted that patients would be able to

personally assess the quality of the services they receive through the Patient Care Co-ordination Centre when it is launched in August 2015, which will provide advice and co-ordinate health care through a single point of access.

RESOLVED: That the presentation be noted.

33. BETTER CARE FUND UPDATE

The Associate Director of Commissioning of the Trafford Clinical Commissioning Group (CCG), Julie Crossley, presented an update on the progress of the Better Care Fund initiative since a report had been presented to the Board at the previous meeting. The Better Care Fund plans had been submitted to NHS England on 19th September 2014, and were 'approved with conditions' specifying that the plans must further demonstrate how they will meet national conditions of protecting social care to ensure that people can still access the services they need, providing seven day health and care services, and meeting data sharing requirements. Although the fundamental approach was recognised as being suitable there were specific challenges that needed to be addressed before implementation, and the CCG and Trafford Council would not be able to commission new services until these conditions were met and full approval granted.

The Better Care Fund Steering Group had identified actions to mitigate risks and were developing an Action Plan for submission to NHS England by 14th November 2014, with the intention of engaging stakeholders and providers to revise and resubmit the Better Care Fund plans by 12th December 2014. It was planned that the scheme would then be implemented in April 2015.

RESOLVED: That the update be noted.

34. PRIMARY CARE

The Chief Operating Officer of Trafford CCG gave an update of the recent work undertaken for the CCG to take back responsibility for some aspects of primary care commissioning. The CCG were said to be preparing the area teams to take back commissioning arrangements, but that for some aspects of commissioning this would not be possible until 1st April 2015. The Board would receive more specific information once the arrangements were fully in place.

RESOLVED: That the update be noted.

35. CCG ESTATE STRATEGY

The Chief Operating Officer of Trafford CCG delivered a presentation which provided an update of recent developments with the CCG's estate. The CCG's Estates Group were said to have identified five Principles to underpin the development of the estate: integration, federation, community services, access and hard to reach groups. Plans were outlined for Community Integrated Centres including the Shrewsbury Street Village Project due to open in May 2017, and the Trafford Live Well Centre due to open in December 2016.

The Board were invited to raise questions in relation to the presentation and a discussion followed concerning the out of hours service, the potential of the former Trafford General Hospital site, the character of the Trafford Live Well Centre and how it will be occupied, the utilisation of the Partington site, opportunities for developments in Sale and the restrictions on the development of the old Altrincham Hospital site.

RESOLVED: That the update be noted.

36. CCG UPDATE

The Chairman gave an overview of the recent activity of the CCG. In addition to the information already covered at the meeting, the Board were updated in respect to the CCG's Operational and Resilience plan and the recently established North West Commissioning Support Unit, and received an update on the progress made under the Transformation Programme.

In response to questions from the Board, the Chief Operating Officer of the CCG clarified that the recent closure of a ward at Trafford General Hospital was a standard hospital efficiency procedure, and that wards can be quickly re-opened in response to clinical demand.

The Chairman also explained that recent problems with identifying patients requiring winter flu inoculation had been recognised and that Dr Kath Sutton, the lead on the inoculation programme, had put measures in place to address the problem and ensure that all eligible patients were contacted. A briefing note had been prepared, setting out how the issue was being addressed, which the Consultant in Public Health, Dr Paula Whittaker, agreed to send on to Councillor Joanne Bennett.

RESOLVED:

- 1) That the update be noted; and
- That the winter flu inoculation briefing note be sent to Councillor Joanne Bennett.

37. HEALTHWATCH UPDATE

The Chair of Healthwatch Trafford introduced a report which gave an update of the organisation's activity since the Board's last meeting.

RESOLVED: That the update be noted.

38. TRAFFORD PARTNERSHIP UPDATE

The Chairman referred the Board to the information report submitted by the Council's Partnerships and Communities Team, which gave an update of the Trafford Partnership's work in the last quarter.

RESOLVED: That the information report be noted.

39. KEY MESSAGES

The Chairman notified the Board that there had been a very positive response to the Healthier Together consultation in Trafford, with the third highest number of responses across Greater Manchester.

40. URGENT BUSINESS (IF ANY)

The Chairman took the opportunity to draw the Board's attention to an upcoming event, What does 'Good' Look like in Health and Wellbeing? Examples of success in Health and Wellbeing Boards from across the Region and Beyond, which would be held at Wigan Investment Centre on 20th November 2014. It was agreed that an information flyer would be circulated to members of the Board, who were invited to register their interest.

The meeting commenced at 6.30 pm and finished at 8.50 pm