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TRAFFORD COUNCIL

AGENDA PAPERS FOR HEALTH AND WELLBEING BOARD MEETING

Date: Tuesday, 1 December 2015

Time: 6.00 p.m.

Place: Committee Room 2 and 3, Trafford Town Hall,
Talbot Road, Stretford, M32 0TH.

A G E N D A	PART I	Pages
1.	ATTENDANCES	
	To note attendances, including officers, and any apologies for absence.	
2.	MINUTES	
	To receive and if so determined, to approve as a correct record the Minutes of the meeting held on 22 September, 2015.	1 - 6
3.	DECLARATIONS OF INTEREST	
	Members to give notice of any interest and the nature of that interest relating to any item on the agenda in accordance with the adopted Code of Conduct.	
4.	ACTION LOG	
	To receive a report of the Chief Clinical Officer, NHS Trafford Clinical Commissioning Group.	7 - 8
5.	TRAFFORD PARTNERSHIP REVIEW AND NEW PROPOSED GOVERNANCE AGREEMENTS FOR THE HEALTH & WELLBEING BOARD	
	To consider a report of the Head of Partnerships & Communities.	9 - 18
	Please note: the proposed new Terms of Reference for the Health & Wellbeing Board will be circulated separately prior to the meeting.	

Health and Wellbeing Board - Tuesday, 1 December 2015

6. LOCALITY PLAN

To receive a presentation of the Acting Corporate Director, Children, Families and Wellbeing, and the Chief Operating Officer, NHS Trafford CCG. Verbal Report

7. BETTER CARE FUND (BCF) - SUMMARY OF THE JOINT COMMISSIONING BOARD

To receive a report of the Chief Operating Officer, NHS Trafford Clinical Commissioning Group. To Follow

8. TRAFFORD CLINICAL COMMISSIONING GROUP UPDATE

To receive a report of the Chief Clinical Officer, NHS Trafford Clinical Commissioning Group. To Follow

9. TRAFFORD COUNCIL UPDATE

To receive a report of the Acting Corporate Director, Children, Families and Wellbeing. 19 - 26

10. PATIENT AND PUBLIC INVOLVEMENT UPDATE

To receive a report of the Chairman of HealthWatch Trafford. 27 - 30

11. KEY MESSAGES

To consider the key messages from the meeting.

12. URGENT BUSINESS (IF ANY)

Any other item or items which by reason of special circumstances (to be specified) the Chairman of the meeting is of the opinion should be considered at this meeting as a matter of urgency.

THERESA GRANT

Chief Executive

Membership of the Committee

R. Bellingham, S. Colgan, A. Day, Dr N. Guest (Chairman), Councillor J. Harding, G. Heaton, Councillor M. Hyman, G. Lawrence, Supt Liggett, M. McCourt, S. Nicholls, J. Pearce, A. Razzaq, S. Webster and Councillor A. Williams (Vice-Chairman)

Further Information

For help, advice and information about this meeting please contact:

Chris Gaffey, Democratic and Scrutiny Officer,

Tel: 0161 912 2019

Email: chris.gaffey@trafford.gov.uk

Health and Wellbeing Board - Tuesday, 1 December 2015

This agenda was issued on **Monday 23 November, 2015** by the Legal and Democratic Services Section, Trafford Council, Trafford Town Hall, Talbot Road, Stretford, M32 0TH.

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HEALTH AND WELLBEING BOARD

22 SEPTEMBER 2015

PRESENT

Dr N. Guest (Chairman)	Chief Clinical Officer, NHS Trafford CCG
Cllr B. Shaw (Vice-Chair)	Lead Member for Integration of Health and Social Care
A. Day	Chairman of HealthWatch, Trafford
Cllr J. Harding	Trafford Council
G. Heaton	Deputy Chief Executive, CMFT
Cllr M. Hyman	Executive Member for Children's Services
G. Lawrence	Chief Operating Officer, NHS Trafford CCG
Supt J. Liggett	Greater Manchester Police
J. Pearce	Acting Corporate Director, CFW
A. Razzaq	Director of Public Health
S. Webster	Director, Blusci

In attendance

J. Colbert	Acting Director Service Development, CFE
J. Crossley	Associate Director of Commissioning, Trafford CCG
A. Hackney	Associate Director of Transformation, Trafford CCG
K. Purnell	Head of Partnerships & Communities

Also in attendance

C. Gaffey	Democratic & Scrutiny Officer
S. Grant	Senior Partnerships & Communities Officer

APOLOGIES

Apologies for absence were received from R. Bellingham, M. McCourt and Councillor A. Williams.

15. MINUTES

RESOLVED: That the Minutes of the meeting held on 9 June 2015, be approved as a correct record and signed by the Chairman.

16. DECLARATIONS OF INTEREST

Interest was declared by Councillor Joanne Harding, who is a Senior Manager at Self Help Services, a mental health crisis service which is commissioned in Trafford.

17. ACTION LOG AND HWB STRATEGY PRIORITIES UPDATE

RESOLVED: That the progress against the actions on the Action Log and the delivery of Health and Wellbeing Board Priorities be noted.

**Health and Wellbeing Board
22 September 2015**

18. TRAFFORD PARTNERSHIP REVIEW AND NEW PROPOSED GOVERNANCE AGREEMENTS FOR HWB

The Board received a report of the Head of Communities and Partnerships, Trafford Council. The report, based on an earlier report which was brought to the Partnership Executive on 17 September, provided an update on the review of the Trafford Partnership and the latest proposals which were being considered by the Partnership Executive. It asked the Health and Well Being Board to consider how these proposals connected with the wider review of the Board.

Some Board Members questioned the perceived omission of the Third Sector from the plans presented in the report, and questions were raised about the plans' complexity as well as accessibility for residents. It was advised that the plans in the report were already dramatically simplified from previous drafts, but it was agreed that there was still work to be done and that these plans were not final. It was mentioned that the Stronger Communities Board would be in place to discuss community engagement.

Members commented that each Board's structure and remit would need to be clearly defined, as well as the relationships between the different Boards. This would be particularly important to ensure duplication of work by different Boards would be kept to a minimum.

The general feeling amongst the Board was that if Members received enough notice of the dates, then altering the meetings of the Health and Wellbeing Board to be quarterly morning meetings would be possible.

RESOLVED:

- (1) That the report be noted.
- (2) That the above comments on the proposals be noted.
- (3) That the Board supports the proposal for the November 19 Trafford Partnership event to have a health related theme.

19. LOCALITY PLAN

The Board received a presentation of the Acting Corporate Director, Children, Families and Wellbeing, the Acting Director Service Development Children, Family & Education, and the Head of Governance, Planning & Risk at Trafford Clinical Commissioning Group. It was confirmed that an electronic copy of the presentation would be circulated to Members after the meeting.

The presentation gave the Board a progress update on Health & Social Care Devolution and how this related to the Locality Plan. The background and vision of the Greater Manchester Devolution plans were outlined, before moving on to discuss the strategic plans. There was an emphasis on making significant progress on closing the financial gap, with a view of achieving fiscal neutrality.

**Health and Wellbeing Board
22 September 2015**

The Board were informed of the governance structures in place including the Greater Manchester Strategic Partnership Board and the Greater Manchester Joint Commissioning Board. Governance developed at Greater Manchester level would be supplemented by increasingly integrated arrangements at a locality / district level.

Board Members were advised that a working group had been established to draft the Locality Plan, chaired by the Acting Corporate Director for Children, Families & Wellbeing. The plan would articulate the health and social care vision for 2020 and how the financial gap in funding would be delivered. The Trafford Care Coordination Centre would be positioned as the 'big idea', and from this all other transformational developments would be positioned.

Finally, the Board were made aware that further engagement events had been planned; one for 6 October 2015, and another would be arranged for the third week in October, 2015.

Questions were asked about Trafford's responsibilities regarding the £2billion budget deficit and how this would fit in with the Locality Plan. It was advised that the corporate social responsibilities would be revealed on 25 November, giving a clearer picture of the situation. Questions were also answered regarding the Trafford Care Coordination Centre's design and function, and it was agreed that the Trafford Clinical Commissioning Group and the Central Manchester University NHS Foundation Trust would get together to discuss this further. It was confirmed that the Locality Plan would be made available to the public once complete.

RESOLVED: That the presentation be noted.

20. HALVE IT HIV PLEDGE

The Board received a report of the Consultant in Public Health, detailing Trafford's pledge to halve the proportion of people diagnosed late with HIV (CD4 count <350mm³) by 2020.

It was confirmed that the report had already been taken to a meeting of the full Council and the pledge was adopted by Trafford. Discussions were had on how awareness of the campaign could be raised within the Borough.

RESOLVED:

- (1) That the Board note the actions already in place in Trafford to identify and test people at risk of HIV.
- (2) That the Board recommend that all primary care health professionals should routinely offer and recommend an HIV test to patients at high risk in line with British HIV Association (BHIVA) guidelines.
- (3) That the Board gave support for public health to work with local community organisations to promote HIV testing among high risk groups.

21. CAMHS TRANSFORMATION PLAN UPDATE

The Board received a report of the Acting Director Service Development, Children, Family & Education and the Associate Director of Transformation NHS Trafford Clinical Commissioning Group. The report provided an overview of the progress of the Child and Adolescent Mental Health Services (CAMHS) review to date, and key actions going forward associated with the development of the Local Transformation Plan.

The report highlighted the importance of communication and engagement, and detailed the range of task and finish groups reporting to the steering group. It also noted that Clinical Commissioning Groups had been asked to develop 'Local Transformation Plans' that set out their intentions to reshape services for children and young people with mental health needs. Confirmation was received that the Eating Disorders funding would be recurrent and the release of future funds would be conditional on meeting the requirements of the assurance process.

Members were impressed with the level of engagement achieved with young people and thanked CAMHS for their efforts. Members requested data for Trafford hotspots for eating disorders and self-harm.

RESOLVED: That the Board noted the report and agreed to support the future sign off of the Local Transformation Plan for Children and Young People's Mental Health and Wellbeing.

22. BETTER CARE FUND (BCF) UPDATE

The Board received a report of the Chief Operating Officer, NHS Trafford Clinical Commissioning Group providing an update on the progress of the Better Care Fund for Trafford and the progress of the schemes. The report included a performance update on the Better Care Fund Key Performance Indicators, and confirmed that the steering group continues to meet on a monthly basis.

RESOLVED: That the report be noted.

23. TRAFFORD CLINICAL COMMISSIONING GROUP UPDATE

The Board received a report of the Chief Clinical Officer, NHS Trafford Clinical Commissioning Group. The report provided an update on the work of the NHS Trafford Clinical Commissioning Group and provided information and progress on key commissioning activities including the Trafford Care Co-ordination Centre, Primary Care Access, Resilience Monies and Healthier Together. It considered locality specific issues and referenced links to Greater Manchester and national issues where relevant.

RESOLVED: That the report be noted.

24. TRAFFORD COUNCIL UPDATE

The Board received a report of the Acting Director Service Development Children, Family & Education. The report highlighted relevant areas of commissioning activity that interfaced with the Public Health Outcomes Framework and the Health and Wellbeing Board strategy.

RESOLVED: That the report be noted.

25. URGENT BUSINESS (IF ANY)

(a) Transfer of services from Stretford Memorial Hospital

[The Chairman agreed to accept this item as a matter of urgent business to allow a timely update on the situation to Members]

The Board received a presentation of the Deputy Chief Executive, Central Manchester University NHS Foundation Trust, explaining the decision to close Stretford Memorial Hospital once all services and clinics had been transferred to alternative sites, hoped to be completed by the end of October, 2015.

After giving a brief background on the site, the presentation outlined the site's problems which ultimately lead to the decision. Limited clinical activity meant fewer people on site (staff and patients) in general, with particularly low numbers of people on site at some times of the week. Problems with ensuring that the site and the buildings were secure were identified, as well as evidence that the site was being used for drug-taking. The view was taken that there was only a limited capacity for staff to respond to any sort of medical or security emergency at the site.

Following a risk assessment by the senior management team, it was concluded that Stretford Memorial was not currently a safe or appropriate place for the provision of clinical services to patients, or for staff to work. Remaining services provided at Stretford Memorial would need to be transferred elsewhere to ensure the safety and welfare of patients and staff.

All clinics would be re-provided by the end October 2015, with patients being offered appointments at Trafford General, Altrincham or the main CMFT (Oxford Road) site, depending on their preference. Arrangements for re-providing mental health clinics were being discussed with Greater Manchester West Mental Health Trust. In the longer term, the hope would be to provide some services from the Shrewsbury Street development.

The presentation concluded by advising Board Members that the current action would be temporary to protect the safety and welfare of patients and staff. Discussions were taking place with partner organisations on options for the longer term use of the site, as well as having discussions with Trafford's Health Scrutiny Committee Chair and Vice Chair around the consultation requirements.

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Members of the Board agreed with the decision to close the site, but wanted to ensure that services were transferred efficiently, and that a long term solution was found for the area.

Questions were asked as to why the decision had been made so abruptly, as it had been clear for some time that facilities at the site were lacking. The Deputy Chief Executive, Central Manchester University NHS Foundation Trust agreed that there had been some previous concerns, but advised that the recent risk assessment completed by the senior management team ultimately confirmed that the site was not fit for purpose in its current state. The risk assessment findings accelerated the process, and the decision was made accordingly.

During discussions about the future of the site, it was suggested that an integrated care facility might be placed at the location. Trafford Clinical Commissioning Group stated they were keen to have something in the area, and confirmed they were in discussions about the possibility of joint working as the area bordered Manchester.

RESOLVED: That the presentation be noted by the Board.

26. PATIENT AND PUBLIC INVOLVEMENT UPDATE

The Board received a report of the Chairman of HealthWatch Trafford, providing an update on the work of HealthWatch Trafford since the last report June 2015. The report gave an update on specific areas of work and involvement, including Healthier Together, Devolution Manchester and a Chronic Fatigue Syndrome / ME Survey. The responses to the survey would be passed on to Members, and the Board was reminded that all HealthWatch reports could be accessed via their website.

RESOLVED: That the report be noted.

The meeting commenced at 6.05 pm and finished at 8.05 pm

TRAFFORD COUNCIL

Report to: Health & Well Being Board
Date: 1st December 2015
Report for: Information
Report of: Dr Nigel Guest, Chair of Health and Wellbeing Board

Report Title

Health and Wellbeing Board Action Log 22nd September 2015

Purpose

The Action Log provides an update on the actions from the Health and Wellbeing Board meeting on 22nd September 2015

Recommendations

That the actions are confirmed as complete at the Health and Wellbeing Board.

Contact person for access to background papers and further information:

Name: Sarah Grant, Senior Partnerships & Communities Officer x3881

ACTIONS ARISING: Health and Wellbeing Board Meeting 22nd September 2015

Action Ref No.	Meeting Date	Item No.	Item	Action	Action Lead	Status
1	22/09/15	4	HWB strategy priorities update	Confirm what the established common assessment framework is with regards to alcohol	Gina Lawrence	To be actioned for update at HWBB 01/12/15
2	22/09/15	5	Trafford Partnership Review	Trafford Council and CCG to meet to align health and wellbeing strands in the new Trafford Partnership structure with GM devolution	John Pearce Gina Lawrence Kerry Purnell	To be actioned for update at HWBB 01/12/15
3	22/09/15	6	Locality Plan	Circulate the Locality Plan presentation by John Pearce	Sarah Grant	To be actioned for update at HWBB 01/12/15
4	22/09/15	6	Locality Plan	CCG and CMFT to meet to discuss Trafford Care Coordination Centre	Gina Lawrence Gill Heaton	To be actioned for update at HWBB 01/12/15
5	22/09/15	7	Halve It HIV Pledge	Check 2015 HIV prevalence data is not yet available	Abdul Razzaq	To be actioned for update at HWBB 01/12/15
6	22/09/15	8	CAMHS Transformation Plan Update	Provide data for Trafford hotspots for eating disorders and self-harm	Adrian Hackney	To be actioned for update at HWBB 01/12/15
7	22/09/15	12	Patient and Public Involvement Update	Circulate results of Chronic Fatigue Syndrome / ME survey to Board members	Ann Day	To be actioned for update at HWBB 01/12/15
8	09/06/15	n/a	Better Care Fund Update	Joint financial plan to be finalised and reported to the board at the next meeting	Gina Lawrence	To be actioned for update at HWBB 01/12/15

TRAFFORD COUNCIL

Report to: Health & Well-Being Board
Date: 1st December 2015
Report for: Information/Action
Report of: Kerry Purnell, Head of Communities & Partnerships,
Trafford Council

Report Title

New Terms of Reference for the HWBB and its place within the new Trafford Partnership structures

Purpose and Summary

This report outlines recommendations made by the Governance Task group which met to consider the new Trafford Partnership structures adopted by the Trafford Partnership Executive. It also presents revised Terms of Reference and membership for the HWBB for consideration/amendment and recommendation that they be taken to the Trafford Council meeting for adoption in January 2016.

Recommendation(s)

The HWBB notes the contents of this report and, subject to Trafford Council approval (where applicable):

- Agrees the recommendations made by the Governance Task Group
- Agrees the revised Terms of Reference and membership for the HWBB (subject to approval by Trafford Council in January 2016)
- Agrees to move HWBB meetings in line with the new quarterly arrangements adopted by the Trafford Partnership beginning on 22/1/16

Contact person for further information:

Name: Kerry Purnell Extension: 0161 912 2115

1 Recommendations from the last HWBB meeting

- 1.1 At the HWBB meeting on 22nd September feedback was provided by the Third Sector representative and the Health Watch representative that the proposed structures needed to be clearer about the role of the Third Sector at a strategic level and about how communities are represented as well as how the new structures can be made more 'public-facing'.
- 1.2 As a result the communities chart (Appendix D) was drafted to emphasize what sits within the grey shaded box in the middle of the strategic chart, e.g community and neighbourhood structures, assets and projects, and to clarify links between communities, Localities and the SCB.
- 1.3 In addition a strategic Third Sector Forum has been added as a place where the key Third Sector organisations in Trafford can come together to share best practice, access support

to develop their role as infrastructure providers and maximise opportunities for collaboration.

- 1.4 The HWBB requested a small governance task and finish meeting be held to look at the new Trafford Partnership structures and revise the purpose, TOR's and membership of the HWBB.

2 Recommendations from the HWBB Governance task group

- 2.1 This meeting took place on Friday 13th November and the following observations and recommendations were agreed to be presented to the HWBB:

- The new Joint Commissioning Board will be directly accountable to the GM Commissioning Board but its work needs to be sighted by the HWBB so that commissioning is informed by the JSNAA and health and wellbeing priorities.
- Equally delivery against the Trafford (Locality) Plan will be accountable to the Trafford and the GM Joint Commissioning Boards but the HWBB and the Trafford Partnership Executive need to have oversight as the Plan is so cross cutting.
- The Joint Commissioning Board will have a number of sub-groups of which Children, Families and Young People, and Mental Health are 2 agreed so far. Others are to be proposed and developed and will form part of the TP structures and report into the Joint Commissioning Board.
- The role of the HWBB moving forward needs to be more strategic. It does not have a commissioning function but, through a positive relationship with the Joint Commissioning Board, should help shape strategic commissioning decisions and those concerning structural reform in Health and Social Care, as well as providing oversight and reassurance to delivery against its own key priorities. Such influence will make it a more attractive forum for Chief Executive officers from health care providers to attend alongside other key strategic partners.
- The HWB Delivery Board be disbanded.
- The HWBB should set a number of key priorities (5-10) based on those in the Trafford (Locality) Plan, the CAMHs strategy and relevant data such as the JSNAA, the indices of Multiple Deprivation and Public Health profiles, as well as reflecting GM agendas emerging from the GM Joint Commissioning and GM Early Intervention and Prevention Boards.
- The HWBB will ensure delivery against these priorities either through Task and Finish (service reform) project groups or by delegating the priority to a relevant thematic partnership.
- A Performance dashboard should be put in place with a single performance and exception report brought to each quarterly meeting. Written reports at relevant intervals will be received from the thematic partnerships, Safeguarding Boards and project groups.
- There is merit in the Safeguarding Boards, Safer Partnership and Sports and Physical Activity Partnership having a place on the HWBB so that the HWBB is sighted on broader issues affecting the health and wellbeing of Trafford residents and the partnerships themselves have a broader understanding of strategic issues affecting the borough.

3 Decisions taken by the Trafford Partnership Executive 19/11/15

- 3.1 The Executive adopted the final version of the 3 structure charts shown in the appendices.

- 3.2 The Executive agreed the new arrangements for the Partnership will go live from the beginning of the new year, agreed the 4 whole day dates for 2014 and discussed potential themes to focus on.
- 3.3 The Executive empowered the HWBB, the Growth Board, the Strong Communities Board and all thematic partnerships to revise and adopt new TORs and membership as appropriate.
- 3.4 After the simultaneous meetings of the 3 strategic Boards each will be able to share key messages with the other Boards.

4 Trafford Partnership dates 2016

Friday 22nd January 2016

Friday 15th April 2016

Friday 15th July 2016

Friday 21st October 2016

- 4.1 The HWBB will meet between 10 am and noon at the same time as the Growth Board and the Strong Communities Board.
- 4.2 A networking session will be held over lunch between noon and 2pm where the 3 boards can share key messages
- 4.3 The proposed theme for the January 2016 networking session is the 'renaissance of the Trafford Partnership'

5 HWBB Terms of Reference

- 5.1 'Locally Agreed Functions' for the Board have been included to reflect the recommendations made in section 2 above.
- 5.2 Membership has been amended to offer places on the Board for the Independent Safeguarding Chairs and the Chair of the Sports and Physical Activity Partnership. GMP remain on the Board in their capacity as Chair of the Safer Trafford Partnership.
- 5.3 Consideration should be given about named substitutes being agreed to ensure consistency of attendance and representation.

6 Recommendations

- 6.1 The HWBB notes the contents of this report and, subject to Trafford Council approval (where applicable):
- Agrees the recommendations made by the Governance Task Group
 - Agrees the revised Terms of Reference and membership for the HWBB and recommends them to the Trafford Council Executive for adoption.
 - Agrees to move HWBB meetings in line with the new quarterly arrangements adopted by the Trafford Partnership beginning on 22/1/16

Appendices:

A TOR and Membership of Health and Well Being Board

B TP Strategic Structure Chart

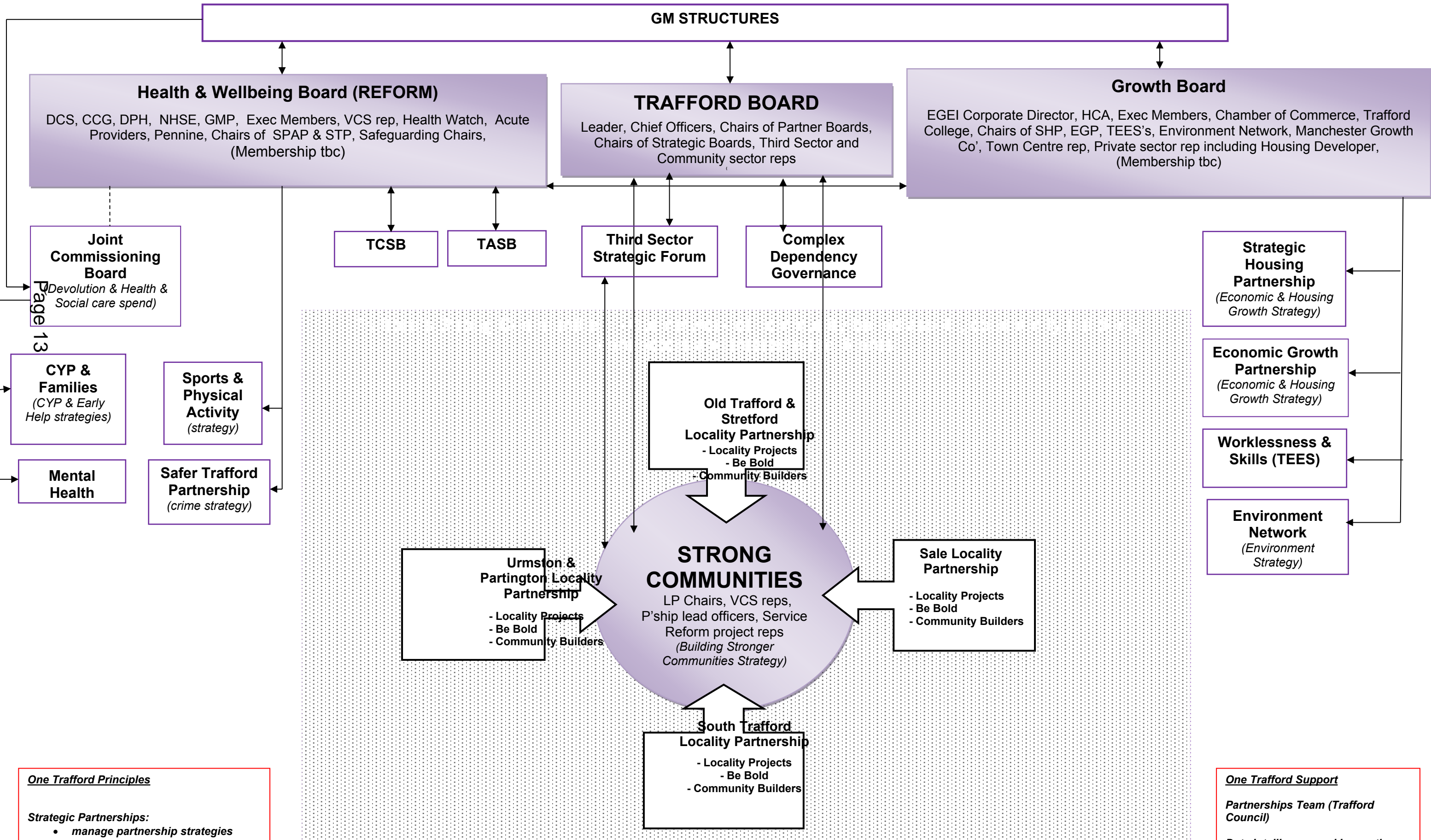
C TP Structure Chart with service reform projects
D TP Structure Chart with Communities

Background Papers

TP Executive reports on the TP review (March, June, Sept, November 2015)

DRAFT

Trafford Partnership Structure - Strategic



One Trafford Principles

Strategic Partnerships:

- manage partnership strategies
- Accountable for delivery of partnership strategic priorities

One Trafford Boards:

- Sponsorship and active leadership of PSR/Service Integration projects

Key



One Trafford Boards



Strategic Partnerships



PSR & Service Integration projects (forms One Trafford Work Plan)



Locality Partnerships

One Trafford Support

Partnerships Team (Trafford Council)

Data Intelligence and Innovation Lab (partnership)

Performance and Accountability Framework (partnership)

Strategic Funding Network

Trafford Partnership Review Summer 2015

Principles

- Nimble, agile, flexible enough to respond to the changing landscape
- Role of partnership is to deliver collaboratively 'only what public services can' and 'what can be co-produced across the sectors and with communities' whilst providing links between localities and strategic partnerships and vice versa in order to lead, create and empower strong communities. Ensures that our communities underpin the whole Partnership.
- Fosters new, 'disruptive' and innovative ways of working
- Facilitates holistic, integrated services which breakdown barriers between organisations and strategic partnerships
- Is preventative rather than reactive
- Using an ABCD and Community Building approach, enables communities to support themselves, whilst managing expectations and maintaining a contract of delivery
- Fosters a strong and vibrant third sector
- Equality in partnerships across the sectors and with communities through active participation and co-production (a 'Trafford' partnership not just a public services one)
- Strong and effective leadership (including within own organisations, to overcome blockages at middle-management)
- Partners are accountable to each other and the communities we serve and are open to challenge

Functions:

- To develop and deliver the 2021 Vision – the Community Strategy for Trafford
- To maximise all opportunities afforded to Trafford by the GM Agreement
- To be ahead of the curve – influence the GM Agreement not simply be a part of it
- To use technology to our advantage
- To develop and deliver Partnership thematic strategies and implementation plans which add value beyond each partners' business as usual
- To champion and deliver innovative, cross cutting Service Reform projects which shape demand and improve outcomes for communities
- To get things done

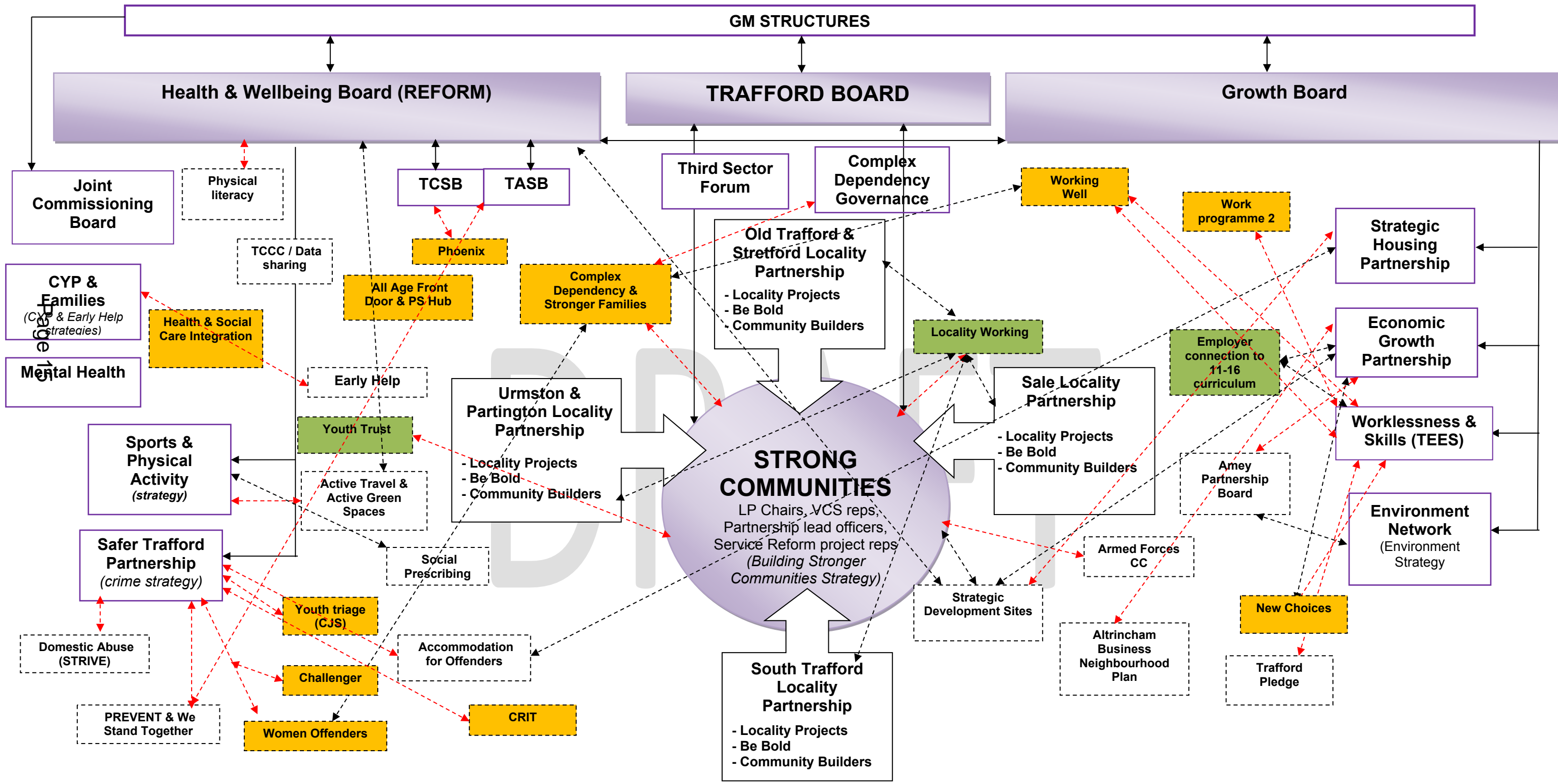
Structures:

- Health and Wellbeing, Growth and Strong Communities are the 3 main Boards. Selected members of each come together to form the 'One Trafford' Board
- One Trafford Board members each champion and lead a sponsored Service Reform Projects
- The 3 Boards lead and oversee progress against the One Trafford Work Programme projects
- The PSR Leads group is currently a Council only forum providing a direct link to the GM PSR work streams. The main focus is complex dependency and in order to progress this to the next level it is proposed to make it a partnership forum into which the GM PSR projects report. PSR Leads will also be represented at the One Trafford Boards.
- Strategic Partnerships are responsible for performance against their partnership strategies and implementation plans. They will ensure that their governance structures and reporting arrangements are fit to deliver their strategies and provide accountability
- Service Reform projects (shown in dashed boxes) will be time limited and delivered through task and finish arrangements or as part of strategic partnership implementation plans.
- Delivery against all Service Reform projects and Locality Plans is ultimately the responsibility of all stakeholders, partners, partnerships and Boards.
- Each partner signs up to clear commitment

Processes:

- Identify specific and tangible Service Reform projects which form an annual Work Programme, some sponsored directly by the Exec, others championed by the Boards and delegated to task and finish groups or strategic partnerships
- Task & Finish arrangements do not necessarily require meetings to progress work. Can be achieved in the most appropriate way for the task/project.
- Progress against Locality Plans and Be Bold initiatives will be reported to the SCB by the Locality Partnerships and any blockages to performance will be raised for escalation as appropriate
- A transparent performance framework for each strategic partnership and each Service Reform project will be established
- HWBB, SCB and GB meet quarterly for a full day. Morning session - HWB, GB and SCB meet separately. Networking event including lunch with a potential for a theme and a guest speaker. Afternoon session - One Trafford nominees meet to review progress against work programme and to assess opportunities, risks and threats to overall performance.

Trafford Partnership Structure - Projects



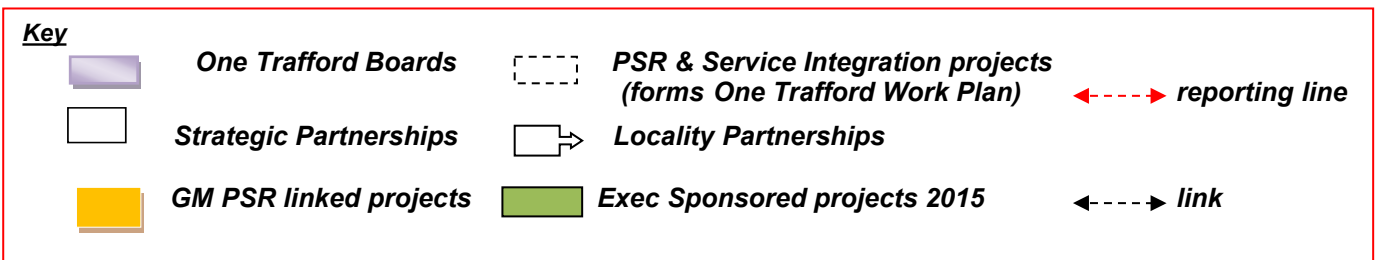
One Trafford Principles

Strategic Partnerships:

- manage partnership strategies
- Accountable for delivery of partnership strategic priorities

One Trafford Boards:

- Sponsorship and active leadership of PSR/Service Integration projects



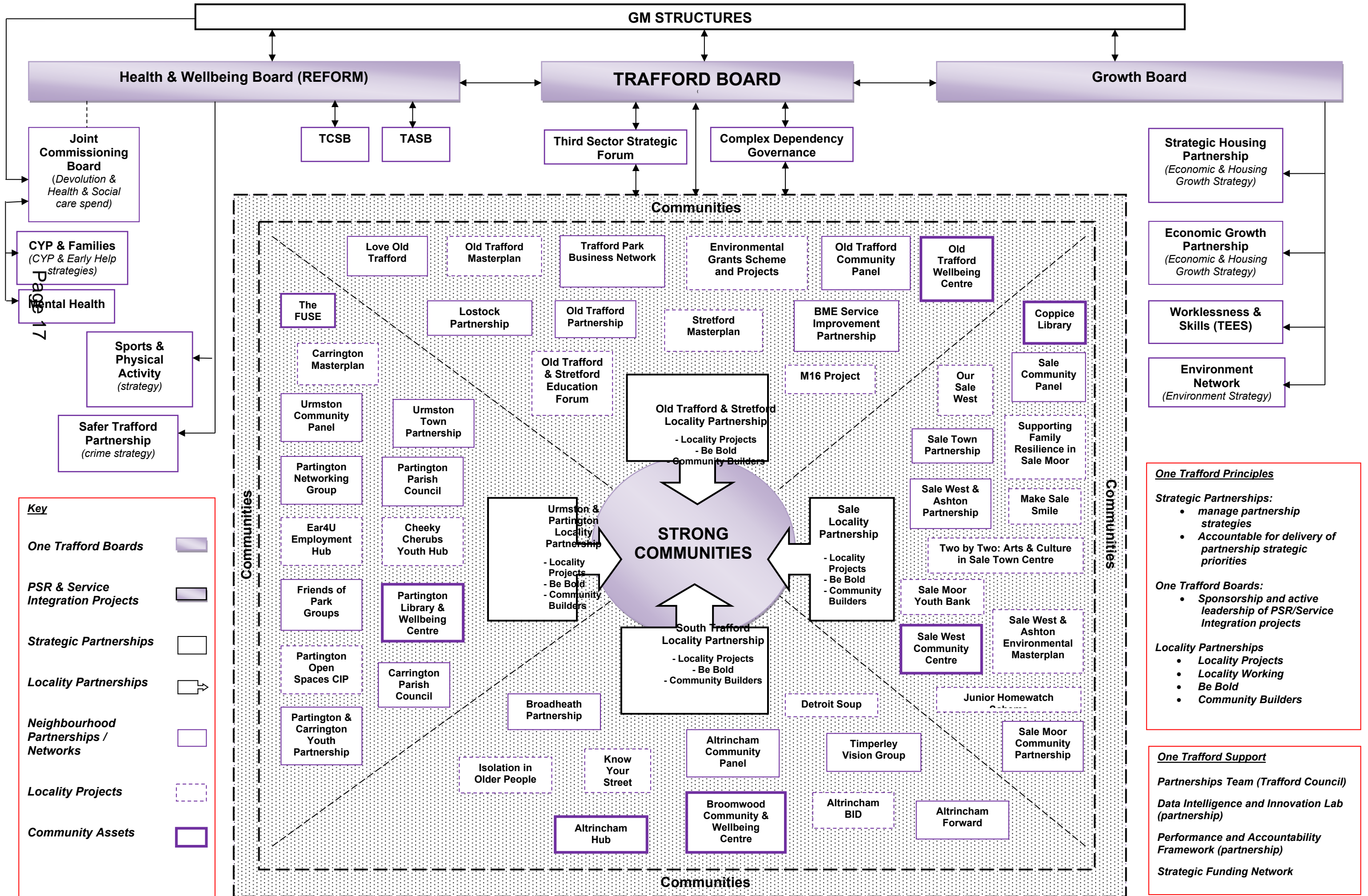
One Trafford Support

- Partnerships Team (Trafford Council)
- Data Intelligence and Innovation Lab (partnership)
- Performance and Accountability Framework (partnership)
- Strategic Funding Network

Project Sponsor suggestions

Sponsor	Projects
Sean Anstee	Leaders Lounge
Theresa Grant	Working Well Work Programme 2
John Lamb	Armed Forces Covenant Complex Dependency & Stronger Families
Joanne Hyde	PREVENT
John Pearce	All Age Front Door/Public Service Hub Early Help
Helen Jones	Employer-schools curriculum Strategic Development sites Altrincham Neighbourhood Plan
Matthew Gardiner	
Mary Doyle/Jim Liggett	Challenger DA Strive programme
Dr Nigel Guest	TCCC & Data Sharing Health & Social Care Integration
Roger Sutton	Youth Trust Locality Working
Chris Fletcher	Trafford Pledge
Joan Scott	
Andy Worthington	Active Travel & Active Green Spaces Physical Literacy
Abdul Razzag	Social Prescribing
Stuart Tasker	Women Offenders Accommodation for Offenders
Tony Holt	CRIT
Bob Postlethwaite	Pheonix (SEAM & CSE)

Trafford Partnership Structure - Communities



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TRAFFORD COUNCIL

Report to: Health and Well Being Board

Date: 18th November 2015

Report for: Information

Report of: Corporate Director, Children, Families & Wellbeing

Report Title

Trafford Council Update

Summary

An update to the Health and Well Being Board on key Trafford Council developments.

Recommendations

The Health and Well Being Board note the Trafford Council update report.

Contact person for access to background papers and further information:

Name: Abdul Razzaq (Director of Public Health). Ext. 1391.

Trafford Council Update

1. Health and Well Being Strategy Update

At the June 2015 meeting of the Health and Wellbeing Board, it was agreed that the work plan for the existing strategy (to 31st March 2016) would be modified to focus on the following four key areas:

- Physical activity.
- Cancer screening.
- Older people (in particular, reducing non-elective emergency admissions).
- Alcohol misuse.

Progress has been made on developing programmes within each of these areas, and this paper gives some brief information on this. The name of the lead contact for each area is also included, should further information be required on any element. All the groups are including monitoring of impact within their remit, and particular attention will be paid to the impact of these programmes on reducing health inequalities.

Increasing uptake of cancer screening: lead Helen Gollins

- A Trafford Local Cancer Implementation Group chaired by Trafford's CCG Head of Scheduled Care group is set to meet in November. This group will pull together all the activity around cancer happening across borough including cancer screening.
- Voice of BME have been commissioned to improve cancer screening (and NHS Health Check) uptake in the North Locality. They have been delivering information sessions across the locality and featured on Legacy FM in October.
- Public Health and the CCG are working together to sustain and improve cervical screening rates across the Borough.
- Plans for a community engagement and communication programme are under development.

Reducing the impact of alcohol: lead Paula Whittaker

- The Trafford Alcohol Strategy for 2016-19 will be complete by April 2016. It is being developed by the multi-agency Trafford Alcohol Steering Group; drafts will be shared in the New Year.
- Key to this strategy will be the aim to train all frontline staff to have identification and early intervention conversations with all clients and patients. Many staff are already trained in brief interventions but to maximise the reach and *make every contact count* this needs to be spread beyond healthcare staff to take advantage of every opportunity to change behaviour. An alcohol brief intervention plan to train all frontline staff across all health and social care services in Trafford is being developed.
- Public health is currently developing a map of alcohol harm for Trafford by ward which will be completed by the end of January 2016.

- Data from the NHS and the police is also being combined to produce an alcohol harm scoring tool that will be used to provide public health responses to licence applications.
- The use of a common assessment tool across Phoenix Futures and Greater Manchester West for detoxification patients is currently being piloted

Increasing physical activity levels: lead Eleanor Roaf

The Sport and Physical Activity Partnership has been progressing its work on the following three priorities from the Greater Manchester Moving Strategy:

- To increase the number of people walking and running.
- To increase the number of people cycling.
- To promote physical literacy in the early years, at school and at home.

In order to achieve these, we are working on the following projects:

- Working with primary care and patients to understand how best to promote physical activity.
- Piloting a new falls rehabilitation scheme.
- Learning from the Liverpool East Activity Partnership (LEAP).
- Working with Transport for Greater Manchester and British Cycling on identifying and promoting new cycle routes within Trafford.
- Working with the Health Visiting team and Greater Manchester Moving on promoting physical activity and play in early years.

Older people and reducing non-elective emergency admissions: Lead Eleanor Roaf

Trafford remains an outlier for the number of falls among older people, and in order to address this, a multi-agency strategy for Bone Health and Falls Prevention has been agreed, and is now being implemented. Within this we have identified a particular need for work to be undertaken on **reducing falls among residents in nursing and residential homes** as we have high numbers of admissions from this sector. We have held a multi-agency meeting to scope the work required and to produce an action plan for delivery, and we have a follow up meeting arranged for the end of November 2015.

We have also identified resources to recruit a Falls Co-ordinator, to promote and quality assure falls prevention activity classes across the borough.

2. Department of Health (DH) Public Health in Year Reductions 2015/16

As part of wider government action on deficit reduction, the Department of Health (DH) was asked to deliver savings of £200 million in the financial year 2015 to 2016 through reductions to the Public Health Grant to local authorities (LAs). The consultation period ran from 31st July – 28th August 2015.

After considering the consultation responses, Department of Health decided to proceed with the savings by reducing each local authority's (LA) grant by an equal percentage of 6.2%. This was option C in the consultation document. The saving will be implemented through a reduction in the fourth quarterly instalment of the grant, which will be brought forward from January 2016 to November 2015.

Department of Health (DH) received 219 responses from LAs, stakeholders, third sector organisations and individual members of the health and care workforce. Out of the total of 152 LAs in England with public health duties, 123 (81%) responded.

For Trafford the flat 6.2% reduction equates to an in year reduction of £773K.

3. Department of Health (DH) ACRA Public Health Proposed Target Formula 2016/17

In January 2013 the Advisory Committee on Resource Allocation (ACRA) made recommendations on the public health formula, which contains separate components to estimate the need for different public health services.

Since then, there have been significant developments, including:

- the transfer of children's 0 to 5 public health services to local authorities from October 2015.
- the identification of other relevant datasets (in sexual health and substance misuse services) for use in the formula.

Additionally, the Secretary of State has commissioned ACRA to:

- update the existing public health formula to take account of the changes and recommend a revised formula that could be used to target public health resources.
- develop a formula for a single target allocation covering both existing services and the newly transferred children's 0 to 5 services.

A consultation ran from 8th October to 6th November 2015 where ACRA sought feedback on the proposed target formula for 2016 to 2017, including:

- seeking to develop a modelled standardised mortality ratio (SMR) for use in the longer term.
- the 16 SMR groups outlined in the document.
- the proposed new substance misuse formula component.
- the proposed new sexual health services formula component.

- the proposed new services for children under 5 years formula component.

Trafford Council submitted a co-ordinated AGMA WLT (Wider Leadership Team) Greater Manchester agreed response to the consultation. The response stated that the combined impact of the proposals in this consultation are not supported by Trafford Council and the leaders in Greater Manchester. Given the importance of investment in prevention to meet the objectives of the GM Health and Social Care devolution proposition, the proposals in this consultation represent the wrong direction of travel.

4. Public Health Annual Report

The Public Health Annual Report is the report of the Director of Public Health and aims to be an accessible, innovative report outlining the good work taking place across Trafford to improve the health and wellbeing of our communities and prevent ill health. The editorial is being led by Sepeedeh Saleh (Public Health Registrar) with oversight from Consultants in Public Health and contributions have been accepted from various groups and individuals involved in Public Health work across Trafford.

After approval by the Director of Public Health, the report will pass through the consultation process and we aim for the official launch by March 2016.

5. Trafford Joint Strategic Needs and Asset Assessment (JSNAA)

The Joint Strategic Needs Assessment is a comprehensive assessment of current and future health and social care needs of the community: these are needs that could be met by the Local Authority, Trafford Clinical Commissioning Group (CCG), or the local NHS. The purpose is to improve health and wellbeing and reduce inequalities locally. Trafford Local Authority and CCG have equal and joint duties to prepare the JSNA under the Health and Social Care Act 2012.

The previous JSNA is being refreshed and expanded to include assets and produce a Trafford Joint Strategic Needs and Asset Assessment_JSNAA.

Currently Trafford's JSNA sits within the *infotrafford* website. The JSNA is presented as PDF chapters that cover sections of the life course as well as significant conditions such as cancer and mental health.

The new JSNAA will be an interactive and innovative product that will be accessible to the public, professionals, partner agencies and the voluntary and third sector using the *infotrafford* website.

6. Healthy Life Expectancy

Although Trafford's life expectancy, for men and women, is slightly higher than the England average, this masks considerable variation across the borough. In general, residents in the north of the borough typically have lower life expectancy than those in the south.

This is also reflected in the healthy life expectancy in the borough, **Life expectancy** (LE) is an estimate of how many years a person might be expected to live, whereas **healthy life expectancy** (HLE) is an estimate of how many years they might live in a 'healthy' state. HLE is a key summary measure of a population's **health**, and is an important indicator of the need for health and social care and services in an area. In Trafford, the healthy life expectancy, especially for women at age 65, is lower than would be expected from our life expectancy. Addressing this, and getting it closer to the England average, would lead to significant improvements in our population's health and wellbeing, and reduce their need for services.

Data on healthy life expectancy are also included in the health indicators used to make up the Index of Multiple Deprivation. While Trafford has relatively low levels of deprivation and is in the top third of local authorities on this measure, its health statistics are considerably worse. Trafford is in the bottom third of English authorities on this measure.

The following link <http://www.infotrafford.org.uk/deprivation#options> shows the map of health deprivation and disability by area in Trafford.. This domain measures the risk of premature death and the impairment of quality of life through poor physical or mental health. The domain measures morbidity, disability and premature mortality but not aspects of behaviour or environment that may be predictive of future health deprivation. We have further data, from the recent RSA study, shows that we perform particularly badly in the care of people with mental illness, who show disproportionate levels of physical illness and early death.

It is recommended that the Health and Wellbeing Board concentrates its energy and resources on identifying the multi-agency actions required to improve healthy life expectancy in Trafford. This will make a significant difference to health and wellbeing in the borough, and on the need for health and social care services.

7. Delivery of Cervical Cytology by Trafford Integrated Sexual Health Service

Local authorities are mandated to commission and fund comprehensive, open-access HIV/STI testing services, STI treatment services (excluding HIV treatment) and contraception services for the benefit of all persons of all ages present in their area. NHS England is responsible for commissioning and funding the National Cervical Screening Programme.

Currently 30% of Trafford sexual health appointments are being used in Greater Manchester clinics outside Trafford resulting in a projected over-spend in the sexual health budget for 2015-16 of £466,000. Through the public health transformation programme Trafford Council has negotiated a reduction in the value of the Bridgewater Community NHS FT contract of £250,000.00 for the financial year 2015-2016 to partly cover this overspend. In addition to this the Trafford Health and Wellbeing Board has recently highlighted the need for the integrated sexual health service to increase the number of diagnoses of sexually transmitted infections (STIs).

In response to these two issues it has been agreed that Bridgewater Community NHS FT will cease providing specific appointments solely for routine cervical cytology. Bridgewater are not commissioned to provide routine smear appointments and do not receive payment for the smears they undertake. They are commissioned to offer smears to women as part of a holistic service where a patient presents for an alternative service. In 2014/15 Bridgewater performed 1,454 smears for women registered at Trafford practices - this is just 3% of the Trafford total. Whilst this is not a big contribution to the Trafford figures the use of dedicated appointment slots has had a big impact on the ability of the service to meet its targets on diagnosing STIs. Also the appointment only sessions have extremely high Did Not Attend (DNA) rates. Bridgewater will continue to offer cervical cytology to women who attend for sexual health appointments as part of a holistic service.

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**Healthwatch Trafford Update
November 2015**

The staff and Board of Healthwatch Trafford (HWT) continue to meet with local groups and residents of Trafford as well as having our scheduled meetings with stakeholders, local commissioners and providers of services.

We continue our regular, monthly drop-ins at

- Broomwood Wellbeing & Community Centre
- Trafford Centre for Independent Living
- Trafford General Hospital
- Altrincham Hospital.

Healthwatch staff and volunteers have attended the following events, meetings and forums:

- CCG Locally Commissioned Services Review Group
- CMFT Trafford Division Liaison Meeting
- Moorside MH Unit Liaison meetings
- Mental Health Exchange Forum
- CCG Public Reference and Advisory Panel (PRAP)
- GP Education Events
- Primary Care Co- Commissioning committee
- HW Information & Signposting Group
- Personalisation Co-Production Group
- Locality Partnership Board (North)
- Greater Manchester Healthwatch Meeting
- North West Healthwatch Meeting
- Youth Cabinet meetings
- TCCC Comms and Engagement Implementation Group
- Trafford Information network
- Health & Well Being Board
- Information & Signposting Meeting GM
- Trafford Signposting and Accessibility Delivery Group
- Diverse Communities Board
- Quality Surveillance Group (NHS England LAT)
- D C Primary Care Quality Surveillance Group. (NHS England LAT)
- Healthier Together

2. Below is an update on specific areas of work and involvement since the last update.

Healthier Together

We continue our involvement with the Healthier Together Program.

We are involved with the Patient, Carer and Community Advisory Group.

HWT Chair represents this group on the Clinical and Patient Safety Group.

GM Healthwatch Network has representation on the Committee in Common.

Greater Manchester Devolution.

Greater Manchester Healthwatch Network continues to work with the GM Devolution Team.

G M Healthwatch has representation on the Strategic Plan Leadership Group and the Communication and Engagement Group.

We are working with the CCG and Local Authority communications teams on the development of a plan to inform the citizens of Trafford about GM Devolution and the Locality Plan for Trafford.

Drop-Ins

We continue our drop-ins in healthcare settings. These enable us to engage with patients, carers and visitors in a variety of healthcare settings. They provide us with a wealth of information to what is seen as good or requires improvement in the services provided for Trafford residents.

Monthly drop -ins are scheduled to take place at Trafford General Hospital and Altrincham Hospital.

At a recent drop- in at Manchester Eye Hospital we engaged with 150 patients. Many of these posted information on our Patient Experience Platform. Overall patients were very positive about the clinical care received. Negative comments related to length of waiting times and accessibility issues by visually impaired patients.

At the last 3 Drop-ins which took place at Altrincham Hospital information was gathered from 325 people.

All information gathered is shared with the relevant providers and a formal report is submitted to them for comment.

Reports from both of these drop-ins will be available on the HWT website.

Young People involvement in Primary Care

Local and national evidence highlights that there are still barriers to accessing GP surgeries for young people. These include:-

- A lack of knowledge about /awareness of GP services and their rights when accessing those services.
- Difficulties experienced in accessing GP services appropriate to their needs.
- Little involvement in the design of future services.

Healthwatch Trafford aims to work with GP practice staff and young people to support GP practices to meet the national “Your Welcome”- quality criteria for young people friendly services (DoH 2011) ensuring services are accessible, appropriate, confidential and non judgemental for young people.

13 Trafford GP practices have expressed an interest in engaging with Healthwatch Trafford on this scheme 5 young people have been recruited so far. The young people will be involved in mystery shopping and appraisal of Practice websites.

Mental Health Exchange Forum

A meeting of this group took place at the end of September. The theme of the meeting was Crisis. 25 members of the group attended a mixture of users of MH services and providers.

Superintendent Jim Liggett gave a presentation on the Home Office Innovation Fund Specialist Mental Health Practitioner Pilot and its role out in Trafford. Joanne Harding from Self Help Services gave an update on the work of the Sanctuary in dealing with low level mental health crisis.

Enter and View

A schedule of Enter and View visits of health and social care areas has been arranged to take place in 2015.

We are actively recruiting Enter and View volunteers. Four new recruits are currently undertaking training.

A planned Enter and View visit to Beverley Park Nursing Home took place in October and 2 planned visits will be made to Care Homes in Trafford before the end of the year. The report of the visit to Beverley Park will be published on the Healthwatch Trafford website once we have received their comments.

We are currently working in partnership with Manchester Healthwatch and have recently paid Enter and View visits to wards 7 8 9 at Manchester Royal Infirmary. A report of the visit has been submitted to CMFT and once their comments have been received the report will be available on the Healthwatch Trafford website.

Patient Experience Platform

Healthwatch Trafford has been working with the CCG and the LMC on the roll out of the Patient Experience Platform to all GP Practices in Trafford.

Widget details have been sent to all Trafford GP’s and should be embedded on to all Practice websites.

Information and Signposting: (Period -- 18 August to 14 November)

- Since the last update there have been 325 contacts with the public.
- There have been 48 instances of signposting or information requests from the public.
- There have been 18 concerns / complaints logged with us in this time.

- There have been 140 experiences logged on the Patient Experience Platform. 15 of these being from non Trafford residents.
- **Twitter.** We have 95 new followers making a total of 1335 followers.
- We have been mentioned 93 times We have made 270 tweets
- Impressions (number of people our tweets are visible to) 60500
- Profile visits 1118
- **Facebook.** We have 83 likes. Posts 15

Web site:

- There have been 1,555 visits to our website
- 2,970 pages have been viewed
- We have had 1,233 users
- We have published 75 new stories
- We have listed 8 events and 3 consultations
- E&V Reports available 12
- How to guides and explanations. 10

Signposting directory

- 16,500 copies of our new signposting directory have been distributed.

Ann Day
Chair Healthwatch Trafford
November 2015