



**AGENDA PAPERS MARKED 'TO FOLLOW' FOR
HEALTH AND WELLBEING BOARD**

Date: Friday, 11 January 2019

Time: 9.30 a.m.

Place: Meeting Room 9 Trafford Town Hall, Talbot Road, Stretford M32 0TH

A G E N D A	PART I	Pages
(a) VCSE ENGAGEMENT (Pages 1 - 14)		1 - 14
(i) <u>VCSE Representatives on the Health and Wellbeing Board</u> To receive a verbal update from the Chair of the Health and Wellbeing Board and to approve the appointment of two VCSE Representatives.		
(ii) <u>Trafford VCSE Collective</u> To receive a presentation from Thrive Trafford and the Trafford VCSE Collective.		
(a) START WELL BOARD (Pages 15 - 18)		15 - 18
To receive a report from the Executive Member for Children Service's.		
8. MENTAL HEALTH PARTNERSHIP		19 - 22
To receive a report from Lead Commissioner Mental Health & Learning Disability and to receive an update on Trafford's integrated social prescribing model.		
(a) DELAYED TRANSFERS OF CARE FROM HOSPITAL AND CQC ACTION PLAN (Pages 23 - 34)		23 - 34
To receive a report from the Director of Integrated Services, Trafford Council & Pennine Care.		

JIM TAYLOR

Interim Chief Executive

Health and Wellbeing Board - Friday, 11 January 2019

Membership of the Committee

Councillors S. Johnston (Vice-Chair), K. Ahmed, M. Bailey, J. Baugh, J. E. Brophy, D. Eaton, C. Daly, C. Davidson, J. Harding, H. Fairfield, Dr. M. Jarvis, J. Lamb, J. Lloyd (Chair), M. Noble, M. Roe, R. Spearing, W. Miller, E. Roaf, A. Worthington, P. Duggan, S. Radcliffe, Rooney and Hemingway.

Further Information

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

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This agenda was issued on **Thursday 3 January 2019** by the Legal and Democratic Services Section, Trafford Council, Trafford Town Hall; Talbot Road, Stretford, Manchester, M32 0TH.

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Development of a VCSE sector Collective for Trafford Health and Wellbeing Board

11th January 2019

Page 1

Agenda Item 6a

Purpose of Presentation

Update Health and Wellbeing Board on the work to:

Page 2 Engage VSCE Sector in the Design and Development of a VCSE led Health and Well Being Collective

Why a Collective?

Support the transformation of health and social care in Trafford through effective engagement with the VCSE sector

Development of a stronger more sustainable VCSE sector in Trafford working together aligned to the strategic commissioning intentions of the Borough

Reduce the demand on formal costly areas of health provision through development of person centred approaches to health care provision

Why the VCSE Sector?

The sector;

- can lead the prevention agenda by providing activity and resource to help people have good health and well being
- already works in localities and delivering local services that meet the needs of neighbourhoods (41% of VCSE organisations in Greater Manchester work in specific neighbourhoods)
- often works with the most marginalised in society who often have the greatest need for the right health and social care
- can deliver whole care pathways, supporting the transition in and out of care
- offers a huge resource including people and buildings working in the health and social care sector
- can lever in other resource, not otherwise available to formal health care providers

Page 4

Strategic Fit

Page 5

- Local (Transformation agenda, Public Sector Reform)
- Regional (Greater Manchester Health and Social Care Partnership)
- National (Five Year Forward Plan, Realising the Value)

“Stronger partnerships with VCSE organisations”

“a thriving VCSE sector can work alongside people and the health and care system to improve health and well being”

Market Support

- VCSE Sector Survey Results (2018) – Key priorities

Increasing engagement of VCSE sector to have a strategic influence

Improving collaboration between the VCSE and public sectors

- LCA
- CCG
- Communities and Partnership Team
- VCSE sector
- THRIVE

Working Undertaken to Date

- A VCSE Working Group from 5 commissioned organisations; Age UK Trafford, Bluesci, Citizens Advice, Home-start Trafford & Salford, LMCP
- Considered how a VCSE Response to social prescribing might be developed
- Development of an operational model and the idea of a collective
- Presented to Social Prescribing Workshop (September 21st)
- Feedback from workshop, VCSE sector survey, commissioners, Council, LCA support for a collective model
- VCSE Workshop to develop the Collective
- Working Group established to develop model/business plan/ implementation plan
- 1st meeting of the Group taken place

Page 7

What the Collective might look like?

- Membership Organisation
- Elected Officers from the VCSE Sector
- Own Staff and Resource
- Governed by Terms of Reference

Page 8

Terms of Reference

- Vision
- Aims
- Objectives
- Values/Core Principles
- Membership

Operating Arrangements

- Membership Process/Frequency of Meetings
- Joint bidding, lead body and implementation
- Commissioner Engagement/Co-design
- Structure and Governance
- Sub groups
- Conflict of interest
- Other operating issues
- Termination

Benefit to Commissioners

- Participation in co-design process
- Streamline service through pooled budgets
- Direct route to access the views of individuals, families and communities that will encourage participation in service design and delivery
- Access to expertise in specific areas of service delivery
- Flexible multi-disciplinary response to meet local need
- The capacity to respond to commissioning frameworks based on the delivery of outcomes
- Ability to access funding that public agencies would not be able to access independently

Benefit to the Sector

Page 12

- Improved strategic relationships with service commissioners and strategic policy leads and opportunity to influence the operating environment
- Opportunity to develop and deliver joined up services at a local level
- Access to capacity building support leading to increasing the number and strength of VCSE organisations in Trafford
- Increased quantity and quality of local volunteering
- Opportunities to work in partnership with other VCSE providers
- Opportunity to share good practice and learning opportunities based on an ethos of mutual support

Benefit to Residents

- Person centred approach to improving health and well being
- Encourages residents to take responsibility for health and well being
- Supports improved mental and physical health
- Works in localities and therefore responds to local needs

Next Steps/Timeline

- Presentation of the model and engagement with LCA at the VCSE Strategic Forum (January 23th)
- Sign off from wider VCSE sector
- Working Group to develop Action Plan/Timetable

Health & Wellbeing Board Sub Group Pro-forma

11th January 2019

Name of Sub Group:	Start Well Board	Chair of Sub Group:	Cllr Jane Baugh Executive Member for Children and Young People	Responsible Officer:	Helen Gollins Public Health Consultant Trafford Council
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	Strategic Priority	Actions for delivery	Expected Outcome	Timeline for delivery
1	Healthy Weight <ul style="list-style-type: none"> Provide strategic leadership to ensure that Trafford is a place that creates an environment that supports healthy choices. Ensure that children, young people and their families receive appropriate support and interventions to achieve and maintain a healthy weight. Completion of the National Child Measurement Programme with above average uptake Documented service offer for children and families as being overweight, obese or underweight identified through the NCMP 	Develop and implement a Healthy Weight Strategy for Trafford, which includes policy developments and impacts on the wider determinants of health, i.e. education, licensing and environment.	<ul style="list-style-type: none"> Prevalence of overweight and obese as measured by NCMP Reduction in levels of obesity and overweight children in reception and Year 6 	Meeting to discuss development of strategy and related policies to be arranged.
2	Physical Activity <ul style="list-style-type: none"> Provide strategic leadership to secure system change for physical activity and sport for children and young people. Ensure that children aged 0-4 have the best active start in life with physical literacy prioritised as a central feature of Start Well. Make Trafford the best place in England for children, young people and young adults aged 5-19 to grow up, developing their life chances through a more active lifestyle, with a focus on reducing inequalities. 	Engage with Sports and Physical Activity Partnership to determine current activity and where the board could influence.	<ul style="list-style-type: none"> % of children aged 5-15 meeting national physical activity guidelines (At least 60 minutes (1 hour) of moderate to vigorous intensity physical activity (MVPA) on all seven days in the last week) % of Trafford children aged 2-15 who are active or fairly active 	Sports and Physical Activity Officer has joined Board. January meeting received presentation from Trafford Leisure. Ongoing engagement from the Board.
3	Improving mental wellbeing and resilience (including Adverse Childhood Experiences) <ul style="list-style-type: none"> Provide strategic leadership to support good mental health and improved resilience amongst our 0-19 year's population. Improve child mental health, and ensure parity of esteem with 	Engage with Trafford's Mental Health Partnership to: <ul style="list-style-type: none"> review current practice 	<ul style="list-style-type: none"> % of schools and college in the borough participating in recognised whole 	Ongoing

	Strategic Priority	Actions for delivery	Expected Outcome	Timeline for delivery
	<p>physical health.</p> <ul style="list-style-type: none"> • Shift the focus of care to prevention, early intervention and resilience and deliver a sustainable mental health system for children and young people. • Support a whole systems approach that includes involvement from the independent and third sector, to improve the mental health and wellbeing of individuals and their families. • Support the most vulnerable children and young people to help reduce the risk of developing poor mental health, and those with existing mental health conditions from deteriorating further. The Start Well Board with strengthen the existing approach to supporting people with complex needs with a particular focus on inequalities. 	<ul style="list-style-type: none"> • identify gaps in the evidence • Develop actions to address these gaps and provide evidence and feed into the development of local transformation plans 	<p>school / college programme</p> <ul style="list-style-type: none"> • Hospital admissions as a result of self-harm (10-24 years) • % of children and young people screened for Childhood Experiences in education, health and social care assessments. 	
4	<p>School Readiness</p> <ul style="list-style-type: none"> • Provide strategic leadership to secure system change for improving rates of school readiness across Trafford. • To increase the number of children who are ready for school and to reduce the gap between all children and children who receive free school meals. • To meet or exceed the national average for the proportion of children reaching a 'good level of development' by the end of reception 	<p>Develop and monitor a Trafford Readiness to School Action Plan and place based focus locality plans.</p>	<ul style="list-style-type: none"> • increase the number of children who are ready for school • reduce the gap between all children and children who receive free school meals 	<p>A robust, multiagency, School Readiness plan for Trafford Borough and specific place based plans for North Locality and Partington are being implemented and monitored. Objective is to improve the proportion of children who are school ready and reduce the inequalities by 2023.</p>
5	Contribution to HWB Priorities	To work with the Alcohol		

	Strategic Priority	Actions for delivery	Expected Outcome	Timeline for delivery
	<ul style="list-style-type: none"> To reduce alcohol related harm Substance misuse 	<p>Steering Group to review alcohol related admissions for young men aged under 18 years in Trafford and develop an action plan to halt and reduce this trend.</p> <p>The board to receive information about substance misuse in Trafford.</p>	<ul style="list-style-type: none"> Alcohol related admissions for males aged under 18 years reduces. Board assurance about prevalence and service offer/response. 	<p>Delayed until March meeting</p> <p>Board receive presentation from Public Health Intelligence and Commissioning and were assured.</p>

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Health & Wellbeing Board Sub Group Pro-forma

11th January 2019

Name of Sub Group:	Trafford Mental Health Partnership	Chair of Sub Group:	Ric Taylor – Lead Commissioner Mental Health & Learning Disability NHS Trafford CCG	Responsible Officer:	Sarah Grant - Senior Partnerships and Communities Officer Trafford Council
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	Strategic Priority	Actions for delivery	Expected Outcome	Timeline for delivery
1	Mental Health Strategy Development	<ul style="list-style-type: none"> Half Day Planning Workshop bringing together the widest range of Trafford partnerships to create broad mental health and cross cutting priorities (22nd Jan) Learning from other strategies to be incorporated into this work particularly from 'Nearest Neighbours' and 'Right Care' comparators as well as Greater Manchester Sub Group of the Trafford Mental Health Partnership to be constituted to develop detailed proposals. 	<p>Trafford Mental Health & Wellbeing Strategy in place to cover period 2019 – 2021 as a minimum.</p> <p>It is understood that a longer term plan reflective of the government's intentions to develop a 10 year plan with 5 year funding cycle prioritisation will be necessary and this will be in place by 31.03.2021 at the latest but in reality much sooner.</p>	31.03.2019
2	Five Year Forward View Local Priorities: <ul style="list-style-type: none"> Children & Young People's Mental Health Perinatal Mental Health Adult Mental Health – Common Mental health Problems 	<ul style="list-style-type: none"> Subject area specific task and finish groups to continue to report performance, progress and exceptions to Trafford Mental Health Partnership 	<p>Incremental and 2021 targets to be achieved</p>	<p>FYFVMH Targets are incremental (yearly) with final targets for delivery 31.03.2021.</p>

	<ul style="list-style-type: none"> • Adult Mental Health – Community, acute and crisis care • Suicide Prevention • (Acute) Out of Area Placements 			
3	Primary Care Mental Health and Wellbeing Service	<ul style="list-style-type: none"> • One year resource agreed for Trafford wide implementation of full model • Project Brief prepared to develop model utilising lead provider / LCA principles • Social Prescribing (Care Navigators and Volunteering Service) to be integrated in to the PCMHWS 	Full service model implemented for minimum of 12 months	01.04.2019 – 31.03.2020
4	Patient and Citizen Forum	<ul style="list-style-type: none"> • As part of the process to develop a Mental Health & Wellbeing Strategy this important area will be prioritised • Clarity will be sought regarding the reach and scope of such a forum and whether in fact it should be broader than mental health so as to enable influence across a range of integrated commissioning intentions and the broadest support for parity of esteem. 	Model and development process to be agreed in line with timescales identified against priority area '1'	31.03.2019

PRIMARY CARE MENTAL HEALTH & WELLBEING AN INTEGRATED APPROACH

Using opportunities brought by transformation and integration brings together:

- * Transformation to Primary Care at Scale
- * Public Health
- * *Connecting People to Communities* programme
- * Local Care Alliance
- * One Trafford Response

Development and Governance Vehicle

Trafford Primary Care Mental Health & Wellbeing Service
Lead Provider GMMH

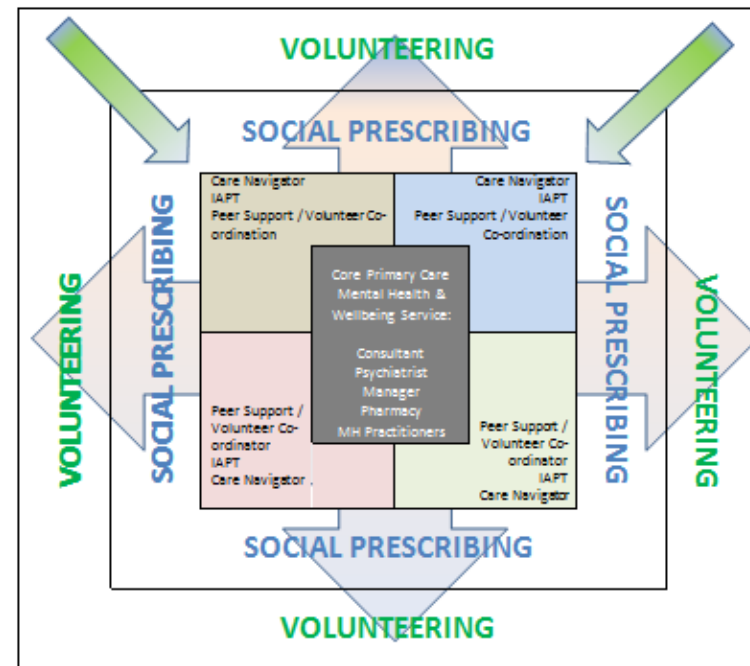
Page 21

Creates Opportunities:

- * To trial and embed new ways of working
- * Promote prevention of mental ill health and encourage positive steps for good mental health
- * Reduce isolation
- * Reduce avoidable demand
- * Reduce variation
- * Reduce inappropriate prescribing – e.g. of anti depressants
- * Support and embed third sector colleagues in redesign of health and care services
- * Improve access to services and to wider public and voluntary sector support
- * Target vulnerable groups and individuals

Key Characteristics

- * Strategically driven
- * Clinically excellent
- * Socially Conscious
- * Prevention at its core
- * 'Virtual Referral Cycle' – we will link services to people and people to services



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Health and Well Being Board

CQC update
January 2019

Page 23

Agenda Item 9a

CQC reviewed Trafford's progress against the plan

- The local Health and Social Care system review of **Trafford** was undertaken by CQC in October 2017 and was followed by a local summit and the development of a system action plan.
- CQC was subsequently asked in October 2018 to report on 9 of the first 12 local authority areas subject to review by conducting a monitoring exercise to establish how local systems have progressed since their review.
- This was completed for Trafford using a data submission/review and a telephone conference to explore the progress to date.
- The outcomes have been received and indicated a sustained improvement and overall positive feedback re the completion of the actions agreed .
- They commented on the significant improvement in relationships across the system and the Local Care Alliance developments.

• Page 24

Overall Dashboard (Nov 18)

Theme	Programme	Scope and intention	RAG
Theme 1	Urgent Care Front Door Streaming Theme sponsor – Mandy Bailey	Support the Trust in the achievement of the 95% 4 hour target whilst also helping to support the flow of non-elective patients into the hospital. Pilot in streaming at Wythenshawe ED Dec 18 – May 19.	Green
Theme 2	Risk Stratification Theme sponsor – Richard Spearing	Improved identification of patients at risk of hospital admission - those most likely to be responsive to evidence based preventative care and coordinating care to enable them to remain at home as long as possible. Interventions with a high value for money score. Pilot in smoking cessation Dec 18 – May 19.	Green
Theme 3	Further development of the DTOC position Theme sponsor - Diane Eaton	Continue and further improve the position of Delayed Transfers of Care, with a focus on the Wythenshawe site which remains the outlier. The target is 3.3% (17 across all sites)	Green
Theme 4	Extension of the enhanced care home team offer (TECHT) including palliative and end of life care Theme sponsor - Richard Spearing	Deliver a multi-disciplinary nurse lead team into all care homes and housebound people in Trafford. The outcomes are to improve the quality and outcomes for the population and reduce the demand on 999 ambulance calls and conveyances to hospital along with reduced A&E attendances and unplanned admissions for people in care homes.	Red

Page 25

Urgent Care Front Door Streaming Pilot

Supporting patient flow and achievement of 4hr wait and 15min triage at Wythenshawe

A model has been implemented on 4th December 2018 which employs streaming by a senior clinician - prescribing Advanced Nurse Practitioner or GP- at the front door providing a model of see and treat and also streaming where appropriate. Originally in operation 10am – 10pm 7 days per week based on the data analysis indicating these are the times of peak patient flow.

- Release of Transformation Monies has been formally agreed and enacted.
- Manchester CCG have agreed to fund 50% of the investment in the spirit of working together and will be part of the evaluation of the model going forward.
- Patient governance and escalation points agreed with Mastercall.
- Accountability through LCA and Urgent Care Delivery Group agreed.
- Daily reports provided by Mastercall, reporting dashboard and evaluation methodology developed.

Learning so far

- Identified in mid/late December that the model may work better with dual clinicians involved in the pilot.
- Decision taken late December 2018 to reduce the hours of delivery from 12pm-6pm and double up on the ANP/GP provision to create a more robust process.
- Numbers seen are increasing under this model.
- First data due beginning of February.



Smoking Cessation Pilot – Stop before the Frost

Trafford’s aim is to reduce adult prevalence from 12.7% to 9.0% (about 6,500 smokers) by end of 2020

- Targeted programme of smoking cessation for patients with a diagnosis of COPD with a correlating high rate of both exacerbations and subsequent admissions to secondary care, initially in **five practices**. Working with TCC these risk stratified patients will then receive an offer of an enhanced support -programme titled Stop before the Frost – a GP led programme of NTR and behavioural support helping patients quit smoking.
- Running alongside this a pilot to provide e-cigarettes to people in manual/routine occupations and/or social housing – run by Public Health – based on Salford model (quit rate 60% over 4 weeks). Free e-cigarette starter pack trialled in **six pharmacies** as part of enhanced smoking cessation offer. Scheduled training for participating practices and pharmacies.
- Public Health funded additional LES for all practices who wish to take part in enhanced service.
- Pathways agreed with TCC, Mastercall, Primary Care and practices and implemented 2 Jan 19.

Page 27



Delayed Transfer of Care

To continue and further improve the position of achievement of the 3.3% DTOC position

- Planning commenced after Easter 2018 giving more preparation time.
- Health and Social Care Winter Action Plan – complete and sent out to the system earlier than usual.
- Additional Discharge to assess beds in place and dynamic purchasing process agreed to support the system as required through out winter.
- Pathways for mental health redesigned and tested.
- Increased social workers on South site in place.
- Deputy Flow Manager and Strategic Service Manager have a presence on site to support the team.
- Ascot House IMC enhanced with pharmacy support and additional works completed in line with CQC requirements.
- Home for Christmas campaign launched 3rd December 2018 to maximize discharges in the run up to Christmas. (160 discharges achievement).
- Winter pressures funding allocated in line with the priorities including mental health, leadership at south site, discharge to assess beds and complex packages of care.

Page 28



Slide Board Transfer



Trafford Enhanced Care Home Team Update

Expand the existing nurse led TECHT team (nursing and residential home) service to be operational in all nursing and residential homes by 31 March 2019

- Service is currently operation in six care homes, proving reactive care through a triage system to manage residents' health conditions, thus minimizing and managing exacerbations and unnecessary emergency transfers to hospital
- An evaluation processes that has been ongoing has shown less impact than expected ,therefore a workshop to look at learning to date has been set up on 17th January.
- Trafford is committed to a model of care for residents of care homes and will work with providers to use the learning to date to design an effective model of care .
The Local care Alliance will be instrumental in future design and delivery .

Page 29



SO WHAT !!!!

- Last year we achieved 91 discharges including from Ascot House.
- This year approx.160 discharges were completed in the same period of time.
- Delay activity was massively reduced.
- Working on the list of people who are medically optimised but not ready to go home yet.



Impact—24th December 2018

Page 31

Community Flow Report 24-12-2018 PM [Read-Only]

Date:		24th December 2018				Time:	
Control Room Lead:		Sophie Davy/Debbie Walsh					
Trafford Acute DTOC (8am reporting)							
Hospital	Total no. DTOC	NHS	SS	Both	MO		
Wythenshawe	7	6	1	0	27		A Completio
MRI	0	0	0	0	0		B Public Fu
TGH	5	5	0	0	13		C Further n
SRFT	1	1	0	0	15		Di Care Hom
TOTAL	13	12	1	0	55		Da Care Hom
Trafford Non Acute DTOC (8am reporting)							
Wythenshawe	Total no. DTOC	NHS	SS	Both	MO		
OPAL	0	0	0	0	8		E Care pacl
Trafford Waits in Community							
Service	No. Waiting						
SAMS	TBC						
POC	TBC						
CEC	2						
Urgent Care Nursing	0						
Urgent Care Therapy	0						

28th December 2018

Page 32

Community Flow Report 28-12-2018 [Read-Only]

	A	B	C	D	E	F	G	H	I	J	K	L
2												
3												
4												
5			Date:	28th December 2018								
6			Control Room Lead:	Sophie Davy/Debbie W								
7												
8												
9												
10												
11												
12												
13			Trafford Acute DTOC (8am reporting)									
14			Hospital	Total no. DTOC	NHS	SS	Both	MD				
15			Wythenshawe	3	3	1	0	33				
16			MRI	0	0	0	0	0				
17			TGH	5	5	0	0	19				
18			SRFT	0	0	0	0	12				
19			TOTAL	8	8	1	0	64				
20												
21												
22			Trafford Non Acute DTOC (8am reporting)									
23			Wythenshawe	Total no. DTOC	NHS	SS	Both	MD				
24			OPAL	1	1	0	0	11				
25												
26			Trafford Waits in Community									
27			Service	No. Waiting								
28			SAMS	TBC								
29			POC	TBC								
30			CEC	2								
31			Urgent Care Nursing	0								
32			Urgent Care Therapy	0								
33												
34												
35												

7th January 2019

Page 33

Community Flow Report 07-01-2019 [Read-Only]

Date: 07 January 2019

Control Room Lead: Sophie Davy/Debbie W

Trafford Acute DTOC (8am reporting)					
Hospital	Total no. DTOC	NHS	SS	Both	MO
Wythenshawe	10	9	1	0	40
MRI	0	0	0	0	0
TGH	3	3	0	0	21
SRFT	2	1	1	0	16
TOTAL	15	13	2	0	77

Trafford Non Acute DTOC (8am reporting)					
Wythenshawe	Total no. DTOC	NHS	SS	Both	MO
OPAL	0	0	0	0	14

Trafford Waits in Community	
Service	No. Waiting
SAMS	3
PDC	4
CEC	4
Urgent Care Nursing	0
Urgent Care Therapy	0

Next phase of work



- Evaluating winter and the impact of the new schemes.
 - Managing a very busy January.
 - Developing further work to support patients with a stay over 7/14/21 days.
 - Developing ward based pathway decision making.
 - Care homes support evaluation and agreement re the designs and roll out.
- Local Care Alliance development days to look next phase of delegated work within the model of integrated care going forward.
- Developing further work between Trafford coordination centre and North West Ambulance service to support people who have fallen.
- Developing Commissioning strategy for urgent care in natural communities with Manchester looking at populations across Local Authority and CCG boundaries.

Page 34