

HEALTH AND WELLBEING BOARD

21 OCTOBER 2016

PRESENT

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| Matthew Colledge (in the Chair) | Chair, NHS Trafford CCG |
| Jill Colbert | Interim Director Children Families and Wellbeing |
| Gina Lawrence | Chief Operating Officer Trafford CCG |
| Victoria Bellamy | Chief Inspector GMP |
| Councillor K Carter | Deputy Shadow Exec Member Adult Social Services & CFW |
| Councillor M Hyman | Executive Member for Children's Services |
| Bob Postlethwaite | Chairman Chair of Trafford Safeguarding Children Board |
| Eleanor Roaf | Interim Director of Public Health |
| Ann Day | Chairman HealthWatch Trafford |
| Paul Savill | Superintendent GMP |
| Carlos Meakin | Borough Commander GMFRS |
| Helen Darlington | Director Fitbods, Third Sector Representative |

In attendance

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| Karen Ahmed | Director of all age commissioning |
| Matt Graham | Director of Strategy UHSM |
| Kerry Purnell | Head of Partnerships and Communities |
| Paul Helsby | Programme Assurance Lead |
| Billy Myers | GMFRS |
| Mark Jarvis | Trafford CCG |
| Joanne Bryan | Commissioning Officer |
| Louise Wright | Sports Relationship Manager |

Also in attendance

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| Sarah Grant | Senior Partnerships and Communities Officer |
| Alexander Murray | Democratic and Scrutiny Officer |

APOLOGIES

Apologies for absence were received from Councillor A. Williams, Silas Nichols and Richard Spearing.

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13. MINUTES

In response to item 3 of the minutes;

“Stuart Webster of Bluesci had resigned from his position as the Third Sector Representative on the Health and Wellbeing Board, and the process of appointing a new member was underway.”

The Chairman welcomed Helen Darlington from Fitbods who had been appointed as the Third Sector Representative following a robust application and interview process.

RESOLVED:

- 1) That the Minutes of the meeting held on 15 July 2016, be approved as a correct record and signed by the Chairman.
- 2) It be noted that Helen Darlington was appointed as the third sector representative.

14. DECLARATIONS OF INTEREST

No declarations of interest were made.

15. TRAFFORD PLAN UPDATE - LOCALITY PLAN

The Interim Corporate Director, Children, Families and Wellbeing gave a presentation to the Board updating them on the progress of the Trafford Transformation Plan. The presentation covered a brief reminder of the main points of Trafford's locality plan including the vision for how services would be delivered in Trafford and how the financial gap could be closed. For Trafford this was to be achieved by all organisations working closely together to meet shared outcomes.

The transformation bid covered how health and social care would look in five years and how this was to be achieved. A number of key challenges were highlighted to the board including the remodelling of primary care, the ageing population within Trafford and the cost of care homes.

The Chief operating officer for Trafford CCG told Board members that the Trafford Care Coordination Centre (TCCC) would play a central role in the transformation plan. The TCCC was designed to bring together data from all interactions with participating organisations to coordinate the delivery of services for all Trafford residents. The utilisation of this data would be pivotal to streamline processes and reduce duplication within the health and social care economy.

The transformation fund consisted of £450 million over 5 years for the whole of greater Manchester. A large amount of the monies available would go to the acute trusts with the remaining funds being divided according to the bids made by each area. As such, all bids required as much evidence as possible in order to show that the investment would provide the best outcomes. The bid also had to include

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ways to measure the proposed outcomes and milestones to be achieved so that funding could be provided in stages over the five year period.

The board were informed that a dress rehearsal of the application process was going to be conducted in December 2016. The presentation which had been given at the meeting was to be circulated with the minutes.

RESOLVED:

- 1) That the presentation given by the Interim Corporate Director, Children, Families and Wellbeing be circulated to board members with the minutes of the meeting.
- 2) That the update be noted.

16. PUBLIC HEALTH WORKING GROUP

The interim director of Public Health updated the Board on the progress made at the first meeting of the Public Health Working Group. The meeting was focused on deciding the purpose of the group. The group decided to look at five areas for healthy life expectancy; smoking, alcohol abuse, mental health, screening and physical activity. These areas were chosen because if they can be tackled it would be a great step towards reducing health inequalities within Trafford.

The group considered what the role of public health was to be going forward. The interim director of Public Health went through the three key tenants of the new wave of public health. The three tenants were; to invest in the activities that give health value to the individual, to make healthier choices easier to make and to make unhealthy choices more difficult to make. It was hoped that by 2021 Trafford would be the best out of its statistical neighbours and that inequalities between boroughs would be minimised.

RESOLVED:

- 1) That the update be noted.

17. PERFORMANCE REPORTS - PUBLIC HEALTH PRIORITIES

The interim director of Public Health presented a report on the Public Health priorities for 2016/17. The report gave a brief overview of each of the workstreams that Public Health would be working on during the year. These were; Health Protection, Health and social care quality and Population Health Improvement. The report also detailed the underpinning work including the creation of the updated Joint Strategic Needs Assessment which would feed into all of the workstreams. Board members were given the opportunity to ask any questions but no further information was required.

RESOLVED:

- 1) That the report be noted.

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(a) Vision to Reduce Physical Inactivity

The Sports Relationship Manager delivered a presentation to the Board on reducing physical inactivity. The presentation described the need for health services to move away from a sport focus to a healthy living focus in order to maximise the quality of life measured in years (QALY) of Trafford residents. A Healthy Living approach would involve promoting activities such as taking the stairs rather than the lift and people going for a walk during their lunch break.

In order for this to be achieved pledges for partner organisations were proposed. The presentation included examples of partner pledges and what they may entail. The Board agreed to active partner pledges in principle and discussed the possible shape the pledges should take. The Head of Partnerships and Communities stressed that accountability had to be a key part of the pledges.

RESOLVED:

- 1) That the Sports Relationship Manager be thanked for her presentation.
- 2) That Active Partner Pledges be agreed in principle.

(b) Smoking

The Local Public Affairs and Campaigning Officer for Cancer Research UK gave a presentation to the Board on the continuing battle against tobacco and tobacco related cancer. The presentation asserted that smoking is still a major health problem within the UK. In Manchester smoking was still the number one cause of cancer and the rates of smoking were higher than the national average. Within Trafford the average number of smokers overall was 16.4% (below the national average) however, vast inequalities between parts of the borough were hidden by that figure as there were some areas where up to 40% of the population smoked.

The Local Public Affairs and Campaigning Officer informed the board that the level of smoking only reduced when there were interventions. The presentation covered the financial benefits to the health economy of a person quitting smoking with every £1 spent on prevention returning £10 in savings. The presentation also listed the ways in which organisations could reduce smoking levels and that doing this would have a high impact on reducing health inequalities in healthy life expectancy.

Board members asked what was being done in Trafford around primary prevention. The Interim Director of Public Health informed the board that Trafford were taking an all age approach and that the strategy would be brought to a later meeting. Public Health were also conducting a CLearR audit and would bring the results to the Board once completed.

RESOLVED:

- 1) That the Local Public Affairs and Campaigning Officer for Cancer Research UK be thanked for her presentation.
- 2) That the smoking strategy for Trafford be brought to a future meeting of the Health and Wellbeing Board.

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- 3) That the results of the Trafford CLear Smoking Audit be brought to the HWBB once completed.

18. LOCAL TRANSFORMATION PLAN FOR CHILDREN AND YOUNG PEOPLE'S MENTAL HEALTH AND WELLBEING

The Commissioning Officer presented the refreshed Local Transformation Plan (LTP) for Children and Young People's Mental Health Services. The key element of the LTP was focused upon transforming the Healthy Young Minds (CAMHS) service to a stepped care model. The stepped model would ensure that mental health support was effective across the whole system instead of being focused on specialist support.

Implementation of this approach would require training and consultation support for early help professionals. Investment had been made into a number of services during 2016/17 to reduce waiting times, increase preventative support and introduce a community eating disorders service. The board were informed that continued investment from Trafford CCG would fund further work on these priorities and would also aid the implementation of GM initiatives to improve out of hours and crisis care.

The Board agreed the LTP with one board member pointing out that Trafford's Transformation Plan for Children's services had been recognised as one of the best in the Country. It was also raised that whilst Trafford was doing well nationally there was still a drive to improve services up to the standards of other Countries in relation to Children's Mental Health services.

RESOLVED:

- 1) That the Commissioning Officer be thanked for her presentation.
- 2) That the Transformation plan be agreed.

19. SINGLE HOSPITAL REVIEW

The Chief Operating Officer for Trafford CCG updated the board on the progress of the Single Hospital Review project being led by Sir Johnathan Michael. The review looked at the delivery of services within Manchester by three Acute Trusts. Two of the three trusts were Central Manchester Foundation Trust (CMFT) and University Hospital of South Manchester Foundation Trust (UHSM). The project looked at ending the culture of competition between the affected trusts and creating a new culture of collaboration.

The project would involve the sharing of services, staff and expertise between the trusts in order to create new, more efficient, pathways for patients. In addition the project would ensure that residents from all areas covered by the trusts received the same high standards of care. The first stage of the project would involve CMFT and UHSM forming a single service. The second stage whereby North Manchester General Hospital would join the service would follow shortly after.

The Chairman of HealthWatch Trafford informed the board that there was a lot of concern about this project amongst Trafford residents and what it would mean for services in the area. The Chief Operating Officer for Trafford CCG responded

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saying that the project now had a full communication and engagement plan in place for Trafford and that this would allay the concerns of Trafford residents.

RESOLVED:

- 1) That the update be noted.

20. PUBLIC SERVICES REFORM UPDATE

The Head of Partnerships & Communities presented a report updating the Board on the progress of the Trafford Public Service Reform (PSR) programme. The report covered the PSR governance, Trafford's alignment of Health and Social Care Transformation with PSR, work stream updates and the next steps of the programme. The Workstream update covered the new operating models, feedback from the One Trafford Response exercise and Place Based integration.

The appendices of the report showed how the various programmes of work would intertwine and support each other going forward. The Head of Partnerships & Communities stated that the PSR programme had excellent levels of buy in at a strategic level and that one of the biggest challenges going forward was to transfer this to frontline staff along with the integration of IT systems.

RESOLVED:

- 1) That the report be noted.

21. NEW HEALTH DEAL FOR TRAFFORD

The Chief Operating Officer for Trafford CCG updated the Board on the recent progress of The New Health Deal for Trafford. The Board were reminded that the New Health Deal for Trafford had gone out to consultation 4 years prior when the accident and emergency department (A&E) at Trafford General Hospital was closed. The New Health Deal for Trafford had now entered its final phase whereby the Urgent Care Centre (UCC) which had been established at Trafford following the closure of A&E moved to a GP and Nurse led model from a consultant led model.

The Board were informed that due to issues in other parts of the Greater Manchester Health landscape the plans to change this service had occurred earlier than expected. This meant that the proposed changes had not come to the Board for information before they were implemented. As of the meeting the new service had been running for two weeks and was doing well.

RESOLVED:

- 1) That the update be noted.

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22. KEY SUCCESSES, CHALLENGES AND RISKS FOR THE LUNCHTIME SESSIONS AND TRAFFORD PARTNERSHIP BOARD

The Chief Operating Officer for Trafford CCG stated that there was a huge amount of work being carried out in Trafford. A major challenge for the Board was to ensure that it was positioned in the correct way in order to maximise its effectiveness in facilitating the continued integration and collaboration of the various aspects of the ongoing work.

The meeting commenced at 09:30 a.m. and finished at 11:55 a.m.