

TAMESIDE HEALTH AND WELLBEING BOARD

25 January 2018

Commenced: 10.00 am

Terminated: 12.00 pm

PRESENT: Dr Alan Dow (Chair) – Chair, Clinical Commissioning Group
Councillor Brenda Warrington – Executive Member (Adult Social Care & Wellbeing)
Councillor Gerald P Cooney – Executive Member (Healthy and Working)
Councillor Allison Gwynne, Executive Member (Clean and Green)
Louise Atkinson – Greater Manchester Fire and Rescue Service
Andrew Searle – Independent Chair, Tameside Adult Safeguarding Partnership Board
David Swift – Lay Member for Governance, CCG
Mark Tweedie – Chief Executive, Active Tameside
Liz Windsor-Welsh – Action Together
Superintendent Neil Evans - Greater Manchester Police
Steven Pleasant – Chief Executive, Tameside MBC, and Accountable Officer for Tameside and Glossop CC
Angela Hardman – Director of Population Health, Tameside MBC
Stephanie Butterworth – Director (Adults), Tameside MBC

IN ATTENDANCE: Debbie Watson – Interim Assistant Director of Population Health
Jessica Williams – Interim Director of Commissioning
Stephen Wilde – Financial Business Partner
Katherine Quinn – Quality Assurance Officer

APOLOGIES: Dr Christina Greenhough – Clinical Vice Chair & Lead for Mental Health, CCG
Sian Schofield – Pennine Care FT
Karen James – Chief Executive, Tameside and Glossop ICFT
Tony Powell – Deputy Chief Executive, New Charter
David Niven – Independent Chair, Tameside Safeguarding Children's Board
Julie Price – Department of Work and Pensions

28. CHAIR'S OPENING REMARKS

It was with great sadness that the stand in Chair announced the recent, sudden death of the Executive Leader of the Council, Councillor Kieran Quinn who had been the Chair of the Tameside Health and Wellbeing Board in his capacity as Executive leader of the Council. Those in attendance joined the Chair in a few moments silence to pay their respects and remember Councillor Quinn.

29. DECLARATIONS OF INTEREST

There were no declarations of interest submitted by members of the Board.

30. MINUTES OF PREVIOUS MEETING

The Minutes of the Health and Wellbeing Board held on 21 September 2017 were approved as a correct record.

31. TAMESIDE AND GLOSSOP PROPOSAL FOR EFFECTIVE URGENT CARE

Consideration was given to a report of the Interim Director of Commissioning and accompanying presentation explaining that the proposal for effective urgent care was considered at the Single Commissioning Board on 31 October 2017 and approval was given for formal consultation. She provided an update on the consultation that started on 1 November 2017 continuing to 6 January 2018 and meetings scheduled with interested parties.

The proposed integrated urgent care service would ensure people were seen by the right professional in the right place to meet their needs. It built on the trusted relationship with GPs making practices the key point for access for advice and treatment. Through the practice, Out of Hours service or NHS 111, people would be able to book appointments seven days a week in the most appropriate Primary Care service.

Walk-in access would be maintained but the proposal moved the Walk-in service at Aston Primary Care Centre to the hospital to create an Urgent Treatment Centre that was co-located with A&E and able to provide Primary Care services and access to diagnostics.

There were two options for the delivery of the integrated urgent care service. Both created an Urgent Treatment Centre based at the hospital site open 12 hours a day, seven days a week from 9.00 am to 9.00 pm. This would offer bookable, same day / urgent and routine general practice appointments and walk in access for urgent care. The options varied in the number of Neighbourhood Care hubs where bookable appointments could be made and when those hubs would be open.

It was reported that as of Tuesday 9 January 2018, 284 surveys had been submitted. 89% indicated they were registered with a GP in Tameside and Glossop. Respondents included people with caring responsibilities and people whose day to day activities were limited because of a health problem or disability.

The majority of respondents who had stated a preference preferred Option 2, as 63% stated Option 2 and 37% Option 1. Of those who chose Option 2, 27% mentioned a positive impact on local services in their response, 27% mentioned an increase in choice of service or location in their response and 18% thought Option 2 might have a positive impact on the availability of appointments.

Of those who chose Option 1, 3% believed that it had better weekend availability and 8% thought Option 1 might have a positive impact on the availability of appointments.

The survey would continue to be analysed and used to inform the final proposal that would be presented for decision to the Strategic Commissioning Board and Primary Care Committee in March 2018.

RESOLVED

That the process of engagement and consultation being followed to develop the integrated urgent care service be noted.

32. TAMESIDE AND GLOSSOP CARE TOGETHER ECONOMY 2017/18 FINANCIAL MONITORING REPORT / BETTER CARE FUND MONITORING REPORT

Consideration was given to a jointly prepared report of the Tameside and Glossop Care Together constituent organisations providing a 2017/18 financial year update on the month 7 financial position at 31 October 2017 and the projected outturn at 31 March 2018.

Details of the summary 2017/18 budgets, net expenditure and forecast outturn of the Integrated Commissioning Fund and Tameside and Glossop Integrated Care NHS Foundation Trust were

highlighted. Members of the Board were asked to note that there were a number of risks that needed to be managed within the economy during the current financial year, the key risks being:

- Significant budget pressures for the Clinical Commissioning Group relating to Continuing Care related expenditure of £4.4m.
- Children's Services within the Council was managing unprecedented levels of service demand which was currently projected to result in additional expenditure of £7.2m when compared to the available budget.
- The Integrated Care Foundation Trust was working to a planned deficit of £24.5m for 2017/18, however, efficiencies of £10.4m were required in 2017/18 in order to meet this sum.

In terms of the 2017/18 efficiency plan, the economy had an efficiency sum of £35.1m to deliver in 2017/18, of which £24.7m was a requirement of the Strategic Commissioner. Supporting analysis of the delivery against this requirement for the whole economy was outlined in Appendix A to the report. There was a forecast £4.1m under achievement of this efficiency sum by the end of the financial year, £3.5m of which related to the Strategic Commissioner. It was, therefore, essential that additional proposals were considered and implemented urgently to address this gap and on a recurrent basis thereafter.

The Strategic Commission's risk share arrangements in place for 2017/18 were also outlined in the report.

Health and Wellbeing Board members were reminded that the Better Care Fund was introduced during 2015/16 and had continued in the current financial year and Appendix B of the report provided supporting details of the 2017/18 quarter three Better Care Fund monitoring statement recently submitted to NHS England.

RESOLVED

- (i) That the 2017/18 consolidated financial position of the economy at 31 October 2017 and the projected outturn position at 31 March 2018 be noted.**
- (ii) That the significant level of savings required during 2017/18 to achieve confirmed control totals and the financial sustainability of the economy on a recurrent basis thereafter be acknowledged.**
- (iii) That the significant amount of financial risk associated with the achievement of financial control totals during this period be acknowledged.**
- (iv) That the 2017/18 Better Care Fund Monitoring report for the period ending 31 December 2017 be noted.**

33. CARE TOGETHER UPDATE

Consideration was given to a report of the Executive Member (Adult Social Care and Wellbeing) providing the Health and Wellbeing Board with progress on the implementation of the Care Together Programme and including developments since the last presentation in September 2017.

As reported at the last meeting, the governance processes implemented in the Programme Management Office had been commended by Greater Manchester Health and Social Care Partnership. The Clinical Commissioning Group Internal Audit function had also been commissioned to audit the effectiveness of systems and processes in place for Care Together governance and significant assurance was expected to be received in the next few weeks.

The third Board to Board to Board meeting involving the three key partners in Care Together took place on 12 December 2017 and reflected on the previous year, defined the benefits for a future care system and confirmed key milestones for 2018.

In terms of operational progress, revised governance arrangements for the Strategic Commission had been approved by Tameside Council and by the Clinical Commissioning Group Governing Body and the structure was attached to the report at Appendix B.

Consultation regarding Intermediate Care in Tameside and Glossop concluded at the end of November. This consultation had generated significant interest and responses and a report including a recommendation would be presented to the Strategic Commissioning Board on 30 January 2018.

As the Board had heard previously, consultation on urgent care was currently underway and due to conclude on 26 January 2018.

Work continued to determine the full remit for the Integrated Care Foundation Trust and to align services accordingly. Key in the development of the Integrated Care Foundation Trust was the continued transformation of Adult Social Care.

RESOLVED

That the update report be noted.

34. PUBLIC HEALTH ANNUAL REPORT

The Director of Population Health presented her annual report 2017 and accompanying animation focusing on the subject of air pollution generated by road traffic and the impact air quality had on health.

The main objective of the report was to highlight this issue which had until relatively recently been largely under reported. It sought to educate on the causes and risks of 21st century air pollution, how to protect against exposure to it and reduce pollution within communities.

There was already work taking place co-ordinated via the Greater Manchester Air Quality Action Plan and the report detailed what could be done locally in Tameside to complement this. It highlighted activities and interventions and calls to action from an individual perspective to that of business and communities acknowledging that the resultant health gain would be strengthened by acting together. The recommendations in the report were designed to be simple, manageable and realistic for residents and organisations to respond to locally.

The Board discussed engagement with residents, communities, businesses and the public sector who all had a role to play.

RESOLVED

That the content of the Public Health Annual Report 2017 be noted.

35. TAMESIDE SAFEGUARDING CHILDREN BOARD ANNUAL REPORT

Consideration was given to the annual report of the Tameside Safeguarding Children Board providing an overview of the partnership's safeguarding activity against its 2016/17 priorities. It identified particular areas of vulnerability or weakness and provided details of the strategic priorities and actions for 2017/18.

It was explained that it had been a particularly full and challenging year both locally and nationally and the Tameside Safeguarding Children Board had worked hard to fulfil its responsibilities in the face of many different events and circumstances in Tameside. Following the Ofsted Inspection in September 2017, the Board had continued to deliver the work that was already in place and implemented a number of changes in response to recommendations that were made through a comprehensive improvement plan. The Board's aims were varied but improving the voice of young

people, listening more to those represented and finding better, more modern ways of communicating with the people of Tameside were high on the priority list.

In conclusion, it was noted that the future organisation and structure of Local Safeguarding Boards was being examined and legislation was changing. The coming year looked to have many challenges and the Board would participate, with all partners, in continuing to make the children of Tameside safer.

RESOLVED

That the annual report 2016/17 of the Tameside Safeguarding Children Board be received.

36. TAMESIDE ADULT SAFEGUARDING PARTNERSHIP ANNUAL REPORT

The Independent Chair of the Tameside Adult Safeguarding Partnership Board presented the Annual Report 2017/17 setting out the activity and strategic work plan of the Safeguarding Board in Tameside and its partner organisations and agencies.

During 2016/17, the Tameside Adult Safeguarding Partnership Board had responded to 957 safeguarding concerns, an additional 79 concerns compared to 2015/16 and further detail on safeguarding activity was provided to give a flavour and nature and how much work was ongoing within adult safeguarding.

There were changes locally where health and social care were becoming more and more integrated and the close working relationship between not only them but also the Police was mirrored within adult safeguarding. It was important to understand the priorities of all partner organisations regionally as well as nationally and where responsibility sits and which body had governance on cross over topics such as domestic abuse, modern day slavery, sexual exploitation and self-neglect – four areas linked to safeguarding as a result of the Care Act.

In conclusion the Independent Chair outlined the Tameside Adult Safeguarding Partnership Board's priorities for 2017/18 as follows:

- Develop a protocol with the Health and Wellbeing Board, Tameside Safeguarding Children Board and the Tameside Adult Safeguarding Partnership Board to ensure aligned priorities and provide a joint strategy.
- Directory of services to be available to staff and the community to aid the Tameside Adult Safeguarding Partnership Board Prevention Strategy.
- Work to engage the community in the safeguarding agenda and empower individuals to take action.
- Raise awareness of Domestic Abuse of older people and where to get help.
- Raise awareness of financial abuse, safeguarding information, forms to prevent and support people at risk.
- Consider options to share learning regarding organisational abuse and neglect and acts of omission to ensure a proportionate and consistent response to Adult Safeguarding and reduce the number of Section 42 enquiries.

RESOLVED

That the annual report 2016/17 of the Tameside Adult Safeguarding Partnership Board be received.

37. UPDATE ON THE TRANSFER OF ADULT SOCIAL CARE FROM TAMESIDE MBC TO TAMESIDE AND GLOSSOP INTEGRATED CARE NHS FOUNDATION TRUST

Consideration was given to a report of the Executive Member (Adult Social Care and Wellbeing) providing a progress update to the Board on the transactional process of transferring Adult Social

Care services and some single commissioning functions from Tameside MBC into the Tameside and Glossop Integrated Care NHS Foundation Trust.

It was explained that the first round of the legal due diligence was procured by the Integrated Care Foundation Trust on behalf of the locality partners and the final report was received in July 2017. This work confirmed that there were no legal barriers to the transfer of Adult Social Care services and their associated operational commissioning elements as contained within the Strategic Commissioning Function. However, it had been identified that the proposed transfer of Tameside and Glossop Clinical Commissioning Group specific operational commissioning activities had a number of associated legal complexities. It had therefore been decided to delay this work and to concentrate efforts to deliver the successful transfer of Adult Social Care services.

A significant amount of work had been undertaken on reviewing potential risks and identifying benefits to support the production of an Outline Business Case. This had resulted in the timescales slipping for the transfer. There was further work in progress to update the programme plan with a greater appreciation of the detailed content needed to complete the Outline Business Case.

An evidence-based cost avoidance exercise was completed by the Social Care Institute of Excellence in August 2017 which reviewed and examined four key areas and their financial impact on the wider health and social care economy.

A significant proportion of the work undertaken within the economy had focused on reviewing the proposed Adult Social Care transaction to ensure there was a shared understanding amongst partners on the operational detail of each of the services. To facilitate this, two workshops had been held for Directors and senior officers on 15 September and 9 October 2017. The service managers undertook a review which helped to deepen the understanding of Integration Care Foundation Trust colleagues regarding some of the current challenges faced by the individual elements of the Integrated Urgent Care Team function and how these were being addressed by the system. Furthermore, the Integrated Care Foundation Trust and Adult Social Services held a half-day session for managers to learn about each other's respective services.

The outputs from the workshops and from the Social Care Institute for Excellence review were being incorporated into the Outline Business Case and further work was required to finalise the full range of benefits to be realised. There was also the requirement to agree the Risk Share Agreement between the Integrated Care Foundation Trust and Tameside MBC, including addressing the funding gap that currently existed, before all parties could approve the Outline Business Case for submission to NHS Improvement.

RESOLVED

That the content of the progress update be noted.

38. DEVELOPING AGE FRIENDLY COMMUNITIES

The Director for Adult Social Care presented a report which explained that population projections showed that in 2024 more than 1 in 4 people would be over 60. The report provided the background to the concept of age friendly cities as advocated by the World Health Organisation and the interconnection with the strategic objectives of the Greater Manchester Ageing Hub. It described the intention to co-ordinate local work promoting age friendly communities across Tameside.

A reporting relationship to the Health and Wellbeing Board was described and proposed a work outline for a new Tameside Age Friendly Steering Group to drive the changes needed so more people would benefit and enjoy a good later life. It would seek to:

- Serve as a champion for the community by developing a vision, gathering momentum and encouraging action.
- Develop a co-ordinated approach across the Health and Wellbeing Partnership, businesses, service providers and community organisations to make age friendly communities – this would be firmly rooted in collaboration with older people.
- Oversee and promote the implementation of an action plan that related to the Greater Manchester Ageing Strategy priorities.

The Steering Group would be led by the Director for Adult Social Care as the life course lead for Ageing Well. The membership was currently being determined but an early scoping meeting envisaged broad representation from the Health and Wellbeing Board partnership. An inaugural meeting would be held on 25 January 2018.

RESOLVED

- (i) That the requirement for a borough Age Friendly Strategy and how this work connected with the priorities of the Greater Manchester Ageing Hub and the Greater Manchester Age Friendly Strategy be noted.
- (ii) That the reporting relationship to the Health and Wellbeing Board through a new Tameside Age Friendly Steering Group that would drive the changes needed so older people would benefit and enjoy a good life be recognised.
- (iii) That a further report on progress would be presented to the Health and Wellbeing Board in June 2018.

39. HEALTH AND WELLBEING BOARD FORWARD PLAN 2017/18

Consideration was given to report of the Director of Population Health outlining the forward plan 2017/18 designed to cover both the statutory responsibilities of the Health and Wellbeing Board and the key projects identified as priorities.

RESOLVED

That the content of the forward plan 2017/18 be noted.

40. URGENT ITEMS

The Chair advised that there were no urgent items for consideration at this meeting.

41. DATE OF NEXT MEETING

To note that the next meeting of the Health and Wellbeing Board would take place on Thursday 8 March 2018 commencing at 10.00 am.

CHAIR