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HEALTH AND WELLBEING BOARD

MEETING, 8th JULY, 2015

Representing Bolton Council

Councillor Mrs Thomas (Chairman)
Councillor Morris
Councillor Cunliffe
Councillor Mrs Fairclough
Councillor A. Ibrahim
Councillor Haworth
Councillor Morgan

Representing Bolton Clinical Commissioning Group

Dr J. Bradford GP
Mr A. Stephenson
Ms S. Long

Representing Royal Bolton Hospital Foundation Trust

Mr M. Wilkinson (as deputy for Dr J. Bene)

Greater Manchester Mental Health Foundation Trust

Ms B. Humphrey

Representing Healthwatch Bolton

Mr J. Firth - Chairman

Representing Voluntary Sector

Ms K. Minnitt – Bolton CVS

Also in Attendance

Mr P. Najsarek – Chief Executive
Ms W. Meredith – Director of Public Health

Mr A. Crook – Children's and Adult Services Department,
Bolton Council

Ms R. Tanner – Children's and Adult Services Department –
Bolton Council

Ms M. Laskey – Bolton CCG

Ms A. Tgliu – Healthwatch Bolton

Mrs D. Lythgoe – Policy and Performance, Bolton Council

Ms E. Whiting – Policy and Performance, Bolton Council

Mrs S. Bailey – Democratic Services, Bolton Council

Apologies for absence were submitted on behalf of Dr C.
Mercer GP, Dr J. Bene, Mr A. Harrison and Dr W. Bhatiani.

Councillor Mrs Thomas in the Chair.

1. MINUTES OF PREVIOUS MEETING

The minutes of the proceedings of the meeting of the Board held on 29th April, 2015 were submitted and signed as a correct record.

2. LOCALITY PLAN

Ms S. Long gave a presentation on the Bolton 5 Year Locality Plan which was the joint health and care response relating to Greater Manchester Devolution.

By way of background information, members were reminded that the Bolton Health and Care Locality Plan would be a jointly owned strategic document produced as a direct response to the Devolution Manchester programme.

The Plan would reflect the joint strategic vision of Bolton CCG, Bolton Hospital NHS Foundation Trust, Bolton Council and Greater Manchester West NHS Foundation Trust and would be developed in conjunction with the voluntary sector and other key stakeholders across the Borough.

In addition, the Plan would set out ambitious actions for significant improvement in outcomes for the population of

Bolton through whole system reform and significant investment in early intervention and prevention.

The presentation went on to outline the main aims, objectives and vision of the Plan and highlighted the key requirements in its delivery to move to an outcome-based delivery model, further integration of services and investment in preventative care which would need to be funded alongside the traditional models of reactive care whilst the preventative care system delivered real improvement in health and wellbeing. Successful delivery of the Plan would depend on whole system collaboration to reduce inequalities.

With regard to Greater Manchester, the Board was advised that the Plan did not yet contain the elements that which were being developed across Greater Manchester which would bring significant additional benefits to the Locality. These would include transport, education, fire and police as well as potentially seeking:

- local alternatives to national targets;
- regulation of the whole system rather than individual organisations; and
- new permissions/authority to act.

Ms Long went on to outline the main ambitions of the Plan which in summary were to significantly improve health outcomes of the population of Bolton by 2020, including:

- infant mortality in the most deprived fifth of the population;
- life expectancy and narrowing the gap across Bolton's most and least deprived areas;
- improving mental health and wellbeing;
- reducing the number of people out of work;
- improving school attainment at early years foundation stage;
- reducing suicides and self-harm;
- reducing alcohol intake and alcohol related harm; and
- reducing the prevalence of long term conditions.

The presentation also outlined:

- the case for change;
- key challenges;
- how ambitions would be delivered; and
- associated timescales.

Following the presentation, members of the Board discussed the main issues and made a number of comments/observations, as follows:

- the financial funding gap of approximately £140m by 2020 was an estimate and was a substantial amount – the five year plan must offer a sustainable system to address the challenges raised by this shortfall;
- it was getting harder to identify the solutions to fix the gap;
- there was a need to include social values in the Local Plan;
- the timescales were challenging and the Plan must demonstrate how to bridge the gap;
- the importance of GP seven day availability;
- the importance of data sharing;
- the need to include mental health issues in the Plan;
- the inclusion of barriers in the Plan; and
- the need to ensure that Healthwatch was included in all consultation.

Resolved – That Ms Long be thanked for her informative presentation.

3. HEALTHIER TOGETHER UPDATE

Ms Long submitted a report which updated the Board on the Healthier Together Programme and the latest decisions that have been made to date.

The Board was reminded that Healthier Together was a key part of the wider programme for Health and Social Care Reform across Greater Manchester and was the building block

for a fully devolved health and social care system in Greater Manchester.

The report explained that under the Healthier Together hospital proposals, a number of single services would be formed which would involve networks of linked hospitals working in partnership to deliver high risk specialist surgery to meet higher quality standards and deliver improved outcomes to local people. This would involve a team of medical staff who would work together across a number of hospital sites within the single service.

In this regard, the report advised that prior to consultation, Greater Manchester commissioners had decided that there should be at least three single services in Greater Manchester, namely Salford Royal, Central Manchester Hospitals and the Royal Oldham. Each site would carry out high risk general surgery due to existing clinical services it currently provided and to ensure that all areas in GM had equitable access to specialist services. Each of these hospitals would work in a single service with other neighbouring hospitals in GM.

The report went on to advise that the Healthier Together Committees in Common (CiC) had discussed the issue of whether there should be one or two additional single services (making four or five in total), which hospitals should specialise in emergency medicine and general surgery and which hospitals should work in partnership. On 17th June, the CiC had decided that implementing four single services would be the best way to deliver hospital services in GM to improve standards of care and save lives.

The evidence showed that four single services would offer the same quality as five, however, it would be quicker and easier to recruit the additional doctors needed to run four single services and would be more cost effective.

Resolved – That the report be noted together with the decision of the Committees in Common to implement four single services for the delivery of hospital services in Greater Manchester.

**4. NHS BOLTON CLINICAL COMMISSIONING GROUP
BOARD UPDATE – MINUTES OF MEETINGS**

The minutes of the proceedings of the meetings of the Clinical Commissioning Group Board held on 24th April and 22nd May, 2015 were submitted for information.

Resolved – That the minutes be noted.

**5. BETTER CARE FUND QUARTER 4 2014/15 DATA
COLLECTION**

A copy of the latest data submission regarding the Better Care Fund Quarter 4 2014/15 was submitted to the Board for information.

Resolved – That the report be noted.

6. MONITORING REPORT

The Chief Executive submitted a report which monitored the progress of decisions taken at previous meetings of the Board.

Resolved – That the monitoring report be noted.

**7. DRAFT HEALTH AND WELLBEING BOARD
FORWARD PLAN 2015/16**

The Chief Executive submitted the draft Health and Wellbeing Board Forward Plan 2015/16 which would guide the work of the Board over the forthcoming Municipal Year.

It was noted that further items may be identified for inclusion in the Plan as a result of the Health and Wellbeing Board development session.

Resolved – That the draft Forward Plan be approved.

(The meeting started at 1.00pm and finished at 1.55pm)