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HEALTH AND WELLBEING BOARD

MEETING, 10th DECEMBER, 2014

Representing Bolton Council

Councillor Morris (Vice-Chairman)
Councillor Bashir-Ismail
Councillor Cunliffe
Councillor Dean
Councillor Peacock
Councillor Mrs Fairclough

Representing Bolton Clinical Commissioning Group

Dr W. Bhatiani
Dr C. Mercer GP
Mr A. Stephenson
Ms S. Long – Chief Officer

Representing Royal Bolton Hospital Foundation Trust

Dr J. Bene – Chief Executive

Representing Healthwatch

Mr J. Firth - Chairman

Representing Voluntary Sector

Ms K. Minnitt – Bolton CVS

Also in Attendance

Ms W. Meredith – Director of Public Health, Bolton Council
Mr A. Crook – Assistant Director, Children's and Adult Services
Department – Bolton Council
Ms J. Hall – Programme Manager for Integration, Bolton CCG
Ms J. Robinson – Early Years Strategic Lead – Bolton Council
Mrs D. Lythgoe – Policy and Performance, Bolton Council
Mrs S. Bailey – Democratic Services, Bolton Council

Apologies for absence were submitted on behalf of Councillor Mrs Thomas (Chairman), Mr S. Harriss, Ms M. Asquith, Dr C. Mackinnon GP, Mr A. Harrison and Ms B. Humphrey.

Councillor Morris in the Chair.

35. MINUTES OF PREVIOUS MEETING

The minutes of the proceedings of the meeting of the Board held on 22nd October, 2014 were submitted and signed as a correct record.

Further to Minute 26, Ms Long reported that the findings from the Healthier Together consultation would be reported to the next CCG Board meeting.

Resolved – That the update be noted.

36. HEALTH AND SOCIAL CARE INTEGRATION AND BETTER CARE FUND UPDATE

The Director of Children's and Adult Services submitted a report which outlined the latest progress on health and social care integration in Bolton and Greater Manchester using the new standard reporting format.

Mr Crook advised that the programme was now starting to deliver changes.

Mr Firth referred to problems currently being experienced in terms of the 111 emergency number. Ms Long advised that this service was currently being redesigned and that she would raise the issues as part of the review.

Resolved – That the report be noted.

37. IMPROVING GENERAL PRACTICE IN BOLTON – A NEW BOLTON QUALITY CONTRACT

Dr Colin Mercer GP declared an interest in the following item of business in his capacity as a GP.

Ms S. Long submitted a report which outlined proposals to introduce new standards for GPs in the form of a Quality Contract.

The new standards would be part of investment in General Practice required in order to meet the Bolton Health and Wellbeing Strategy, the CCG Commissioning Plan and the Greater Manchester Strategy for Primary Care.

The report outlined the main aims and objectives of the Contract which would set clear standards for General Practice in Bolton which had been developed to:

- set a step-change requirement in quality;
- increase capacity in General Practice to improve the service offered to Bolton people and set a good baseline for the development of more integrated models of care;
- support the delivery of the Greater Manchester Strategy for Primary Care;
- reflect the balances aims of improved population health, better quality and patient experience of care and value for money;
- incorporate all local contracts with General Practice (except the most specialist);
- provide a consistency of offer to Bolton people, no matter which Practice they were registered with; and
- meet the commissioning priority of Bolton people for improved access to General Practice.

The standards had been based on detailed work carried out by the CCG in order to understand some of the key issues relating to General Practice and access. The key findings were summarised in the report, as follows:

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- most people expected to be seen on the same day if they had an urgent issue;
- the differences in whether people could book appointments ahead or had to ring on the day for appointments;
- continuity of care was strongly supported as important for serious or on-going problems – less so for minor issues;
- having the opportunity to request a GP of the same gender was important for certain circumstances;
- 55% supported seeing a nurse rather than a GP for less complex urgent needs, 45% said it depended on the situation and only 2% said they always wanted to see their GP;
- 86% supported GPs having time for longer appointments for those people with greatest need; and
- most felt that all GPs should offer more routine services for example, blood tests

The intention was for the Quality Contract to pay for itself as there was potential to deliver 100% return on investment in year 1, with additional longer term benefits to population health that the focus on prevention and early intervention would bring. It was noted that more detailed plans would come forward on delivery from individual practices at a later stage.

The report advised that the aim was to have the Contract in place for April, 2015.

Resolved – That the report be noted and that an update on progress be submitted to this Board at a future meeting.

38. HEALTH AND WELLBEING STRATEGY – STARTING WELL - PERFORMANCE REPORT – QUARTER 3 2014/15

The Director of Public Health submitted a report which updated the Board on the performance of the Health and Wellbeing Strategy as it related to the Starting Well chapter.

The report provided details in relation to each priority with some further commentary on the outcomes and an outline of the actions.

Ms Meredith highlighted that there had been a small improvement in children's oral health. However, performance in neighbouring authorities had also improved and Bolton's overall position was the third lowest in the North West. Action was being taken to address this.

With regard to breastfeeding, Ms Minnitt reported that performance was good and that much work had been undertaken to promote Bolton as a breastfeeding friendly town with many establishments now fully trained and equipped to deal with mothers who wish to feed their babies.

Resolved – That the report be noted.

39. STARTING TOGETHER, DEVELOPING WELL

A report of the Director of Public Health was submitted which outlined the findings to date in relation to the Early Years new delivery model and the next steps.

Ms J. Robinson gave a presentation to supplement the report which outlined the Early Years overall objectives, namely to increase the number of children who were ready for school age 5 years by making the best use of resources to improve outcomes for all children in their early years and close the gap in performance for the Early Years Foundation Stage Profile between the most disadvantaged children and the rest.

The proposals included the introduction of an integrated 8 stage assessment pathway for all children, core pathways and evidence based interventions.

Bolton was an early adopter of the proposals and was testing out the Model at the Oxford Grove Children's Centre reach area by engaging with all services working with children and families from pregnancy to 5 years. The findings from the Early

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Adopter were also detailed together with proposed next steps, which included:

- continuation of the early adopter and taking the learning forward to inform the roll-out;
- exploring opportunities to align existing multi-agency services and developing co-located early years teams across the Borough;
- further development of integrated/shared leadership of early years services;
- further review of the investment model and understanding current and to be costs; and
- development of a realistic investable proposition across key partners to inform a phased roll-out across the Borough from April, 2015.

Resolved – That the report be noted and that Ms Robinson be thanked for her informative presentation.

40. TRANSFER OF COMMISSIONING OF 0-5 CHILDREN'S PUBLIC HEALTH SERVICES

Councillor Bashir-Ismail declared an interest in the following item of business due to the nature of her employment.

The Director of Public Health submitted a report which updated the Board on the latest position regarding the transition of the Early Years public health commissioning responsibilities

The Board was reminded that Children's Public Health commissioning responsibilities for 0-5 year olds would transfer from NHS England to local authorities on 1st October, 2015. The Public Health Commissioning Transfer Programme Board had been established to coordinate and have oversight of the transition.

The report went on to outline the scope of the transfer, the responsibilities involved and current and proposed commissioning arrangements.

Resolved – That the report be noted.

**41. NHS BOLTON CLINICAL COMMISSIONING GROUP
BOARD UPDATE – MINUTES OF MEETING**

The minutes of the proceedings of the meeting of the Clinical Commissioning Group Board held on 24th October, 2014 were submitted for information.

Resolved – That the minutes be noted.

42. 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.

**43. HEALTH AND WELLBEING BOARD FORWARD PLAN
2014/15**

The Chief Executive submitted a draft Forward Plan which had been formulated to guide the work of the Health and Wellbeing Board over the forthcoming year.

Resolved – That the Forward Plan, as now submitted, be approved.

(The meeting started at 12.30pm and finished at 1.30pm)

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