

THE CABINET

MEETING, 24TH FEBRUARY, 2020

Councillor Greenhalgh	Leader's Portfolio
Councillor Haslam	Highways and Transport
Councillor Muslim	Stronger Communities
Councillor Baines	Wellbeing
Councillor Warren	Environmental Service Delivery
Councillor Hewitt	Strategic Housing and Planning
Councillor Galloway	Environmental Regulatory Services
Councillor Morgan	Adult Social Care

Other Members in Attendance

Councillor Walsh
Councillor Mrs. Thomas
Councillor Zaman
Councillor Peel
Councillor Haworth (as deputy for Councillor Adia)
Councillor Hayes
Councillor Hornby
Councillor Sanders
Councillor Brady

Officers

Mr. T. Oakman	Chief Executive
Mr. G. Brough	Director of Place
Ms. R. Tanner	Deputy Director of People
Ms. S. Long	Accountable Officer, Health and Care
Ms. S. Gilman	Consultant in Public Health – Social Inclusion
Mr. T. Glennon	Corporate Financial Services

	Manager
Ms. A. Kelly	Senior Lawyer
Mrs. V. Ridge	Democratic Services Manager

Apologies for absence were submitted on behalf of Councillors
Adia, Cox and P. Wild

Councillor Greenhalgh in the Chair.

65. MINUTES

The minutes of the proceedings of the meeting of the Cabinet held on 10th February, 2020 were submitted and signed as a correct record.

66. BOLTON HEALTH AND CARE INTEGRATION: UPDATE AND NEXT STEPS

A joint report of the Bolton Clinical Commissioning Group, the Chief Executive Bolton Council and the Chief Executive Bolton Foundation Trust was submitted which set out the progress to date across health and care and the next steps required to improve the health and wellbeing of Bolton people, in the context of the Strategic Commissioning Function and Integrated Care Partnership proposals.

Members were reminded that in July, 2018 recognising the significant health challenges Bolton faced and the increased demands on services, Bolton Council, Clinical Commissioning Group (CCG) and the Foundation Trust agreed to change the way services were bought, planned and delivered through the formation of the Strategic Commissioning Function (SCF) which brought CCG and Council commissioning and budgets more closely together and the development of an Integrated Care Partnership (ICP) to join up health and social care provision offering co-ordinated care closer to home. Furthermore, the Bolton Partnership Board was established as a strategic multi-agency group to oversee and inform these developments.

In view of the above, the report provided an update on the strategic direction for health and care and it was stated that the shared vision was to work together to design and deliver a very different approach to health and care to make tangible improvements for all local people and to enable Bolton people to be involved in their own health and wellbeing and supported to stay well for as long as possible. It was explained that the integration of both commissioning and delivery of services was critical to the delivery of this ambition, enabling the best use of limited resources.

With regard to the next phase of integrated health and care in Bolton, members were informed that over the last eighteen months the SCF and ICP had already been working more closely together, joining up the planning and delivery of services and making best use of the Bolton £. It was also stated that the proposals set out in the Integrated Care Partnership and Strategic Commissioning Functions reports outlined how moving to the next phase of their development would offer the leadership capacity and skills required to further progress integration which included joining up services, creating the conditions for the workforce to work differently and innovatively and make the best use of limited resources.

The report advised that overseeing the development of this approach would be the system governance that was already largely in place. Consequently, the Bolton Partnership Board would continue to oversee the strategic design and delivery of health and social care integration including the development of the ICP and SCF and the Joint Commissioning Committee and the Integrated Care Partnership Board would report through this Board. In addition, the Partnership Board was accountable to the Active, Connected and Prosperous (ACP) Board (repurposed Bolton Health and Wellbeing Board). It was explained that the newly formed ACP Board would provide system leadership for health and wellbeing holding all organisations to account and would make intelligence led decisions informed by the emerging Joint Strategic Needs Assessment and the Pharmaceutical Needs Assessment.

Resolved – That the report be noted.

67. BOLTON HEALTH AND CARE INTEGRATION – INTEGRATED CARE PARTNERSHIP DEVELOPMENTS

A joint report of the Deputy Director of People DASS and the Director of Transformation Bolton NHS Foundation Trust was submitted which set out the Integrated Care Partnership progress to date and sought the approval required to progress to the next phase of development and leadership for a provider Alliance agreement.

Members were advised that the report set out proposals for Bolton's Integrated Care Partnership (otherwise known as Local Care Organisations (LCOs) in Greater Manchester) and associated Business Plan and also sought approval to progress developments for a provider Alliance Agreement as the vehicle for delivery.

The Business Plan, which was detailed in Appendix 1 to the report, set out the approach to Bolton's Health and Care providers which embarked on a new way of working to deliver Integrated Care aimed at improving the health and wellbeing of Bolton People. It was also a strategic Business Plan for Bolton's Integrated Care Partnership and linked to the local Partnership plans: Vision 2030 and the Bolton Locality Plan.

Members were informed that the Plan outlined the move to an Alliance of providers which would help to deliver this new model of care, setting out a high-level assessment which included the rationale, vision, proposed leadership and governance required and work programme.

It was also explained that the Integrated Care Partnership (ICP) would bring together primary care, community health, mental health services and adult social care with strong links to the voluntary and community sector, housing and Police. It would also focus on delivering excellent care, close to home and respond to what matters to the person.

The report also proposed an integrated leadership structure to support the delivery of the Alliance Partnership and this would be resourced from within the partnership and be cost neutral over time.

Resolved – (i) That the report be noted.

(ii) That the case for progressing to an Alliance delivery vehicle be supported.

(iii) That the Council's Borough Solicitor and the Deputy Director of People (DASS) be authorised to progress the development and authorisation of the Section 75 Agreement and the Alliance Agreement including the integrated leadership structure for the Alliance.

68. BOLTON HEALTH AND CARE INTEGRATION – STRATEGIC COMMISSIONING FUNCTION

The Accountable Officer, Health and Care submitted a report which set out the Strategic Commissioning Function's progress to date and sought the approval required to progress to the next phase of development through integrated leadership.

Members were advised that in July, 2018 the Council's Cabinet and NHS Bolton Clinical Commissioning Group (CCG) Board formally agreed to the formation of a Strategic Commissioning Function (SCF) and over the last eighteen months significant work had taken place by the CCG and the Council to develop the strategic intent, structures and processes required to move to a strategic commissioning system.

The report provided details of the key milestones which had been achieved so far and also the benefits of an Integrated Commissioning Structure.

In terms of the proposed SCF integrated structure arrangements, it was proposed that this move to greater joint working was enabled by the establishment of a joint post between the CCG and the Council to provide the single integrated leadership arrangements required. It was stated

that this was a common feature of integrated systems across Greater Manchester and was a well tested approach to ensuring joined up commissioning.

The report outlined the role and responsibilities of the new post of Director of Strategic Commissioning which would be a Council and CCG partnership post hosted by the CCG. The accountability of the post back to the organisations would be underpinned by a Section 75 Agreement between both parties.

With regard to the financial implications, the leadership structure would be funded through the reprofiling of an existing post within the commissioning partnership.

Resolved – (i) That the progress made to date be noted.

(ii) That the progression to a single commissioning structure including the establishment of a Director of Strategic Commissioning underpinned by a Section 75 Agreement be approved.