

AGENDA FOR

HEALTH AND WELLBEING BOARD

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To: All Members of Health and Wellbeing Board

Members : Pat Jones-Greenhalgh (Vice-Chair),
Dave Bevitt, Mark Carriline, Stuart North, Lesley Jones,
Councillor R Walker, Councillor S Briggs, Councillor
T Holt (Chair) Councillor R Shori, Jon Aspinall, Dr Kiran
Patel, Jo Marshall and Barbara Barlow

Dear Member/Colleague

Health and Wellbeing Board

You are invited to attend a meeting of the Health and Wellbeing Board which will be held as follows:-

Date:	Tuesday, 14 June 2016
Place:	Meeting Rooms A&B, Bury Town Hall, Knowsley Street Bury BL9 0SW
Time:	2.00 pm
Briefing Facilities:	If Opposition Members and Co-opted Members require briefing on any particular item on the Agenda, the appropriate Director/Senior Officer originating the related report should be contacted.
Notes:	

AGENDA

1 APOLOGIES FOR ABSENCE

2 DECLARATIONS OF INTEREST

Members of the Health and Wellbeing Board are asked to consider whether they have an interest in any of the matters on the Agenda, and if so, to formally declare that interest.

3 MINUTES OF PREVIOUS MEETING *(Pages 1 - 8)*

Minutes of the last meeting held on 14th April 2016 are attached.

4 MATTERS ARISING *(Pages 9 - 20)*

Forward plan is attached.
Action Log is attached.

5 PUBLIC QUESTION TIME

Questions are invited from members of the public present at the meeting on any matters for which the Board is responsible.

Approximately 30 minutes will be set aside for Public Question Time, if required.

6 JOINT STRATEGIC NEEDS ASSESSMENT *(Pages 21 - 24)*

Jon Hobday, Public Health Consultant will provide members of the Board with an update in respect of the Joint Strategic Needs Assessment.
Report attached.

7 ADULTS SAFEGUARDING AND GOVERNANCE

The Chair of Bury Adult's Safeguarding Board will report at the meeting.

8 NEIGHBOURHOOD WORKING

Pat Jones-Greenhalgh, Executive Director Communities and Wellbeing and Karen Young, Head of Inclusion will report at the meeting.

9 GREATER MANCHESTER DEVOLUTION UPDATE

Stuart North, Chief Operating Officer, Bury CCG will provide a verbal update.

10 COMMUNICATION AND MARKETING UPDATE

The Health and Wellbeing Board Policy Lead will provide a verbal update.

11 CITY OF MANCHESTER SINGLE HOSPITAL SITE UPDATE *(Pages 25 -*

26)

Stuart North, Chief Operating Officer, Bury CCG will provide members of the Board with a verbal update. Briefing note attached.

12 LOCALITY PLAN UPDATE *(Pages 27 - 38)*

Brett Nelson, Interim Programme Director will report at the meeting. Report and presentation attached.

13 URGENT BUSINESS

Any other business which by reason of special circumstances the Chair agrees may be considered as a matter of urgency.

14 SUB GROUP MINUTES FOR INFORMATION *(Pages 39 - 64)*

The following minutes are attached for information:

Children's Trust Board Minutes

Health and Social Care Integration Board Minutes

HSPB Minutes

Carbon Reduction Board Minutes

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Minutes of: HEALTH AND WELLBEING BOARD

Date of Meeting: 14th April 2016

Present: Cabinet Member Health and Wellbeing Councillor Andrea Simpson (Chair); Barbara Barlow representing Healthwatch; Dave Bevitt, Representing B3SDA; Councillor Roy Walker, Opposition Member, Health and Wellbeing; Dr K. Patel, Chair Bury CCG; Councillor Paddy Heneghan, Cabinet Member for Children, Young People and Culture; Lesley Jones, Director of Public Health; Jon Aspinall, Greater Manchester Fire and Rescue Service; Mark Carriline, Executive Director Children, Young People and Culture.

Also in attendance:

Helen Lambert, Military Veteran Service Co-ordinator, Pennine Care NHS Foundation Trust
Dr Barratt, Clinical Psychologist, Pennine Care NHS Foundation Trust
Estelle Worthington, Regional Activism Co-ordinator, Asylum Activism Project
Dr. Bailey, Asylum Activism Project
Jon Hobday, Public Health Consultant
Helen Smith, Public Health and Social Care Intelligence Manager
Karen Young, Strategic Lead, Inclusion
Chloe McCann – Assistant Improvement Advisor, Corporate Policy Team
Julie Gallagher– Democratic Services.

Apologies:

Pat Jones Greenhalgh, Executive Director Communities and Wellbeing
Jo Marshall, Chief Inspector, Bury Division
Stuart North, Chief Operating Officer Bury CCG
Councillor Rishi Shori, Deputy Leader, Cabinet Member, Finance and Housing.
Heather Crozier – Health and Wellbeing Board Policy Lead.

Public attendance: 5 members of the public were in attendance

HWB.876 DECLARATIONS OF INTEREST

Councillor Simpson declared a personal interest in respect of all items under consideration as an employee and Non Clinical Lead for Quality for Salford Clinical Commissioning Group.

HWB.877 MINUTES

The minutes of the meetings held on 17th March 2016 were submitted.

Delegated decision:

That approval be given to the minutes of the meetings held on 17th March 2016.

HWB.878 MATTERS ARISING

That the Devolution Manchester letter to the media be noted.

HWB.879 PUBLIC QUESTION TIME

There were no questions from those present at the meeting.

HWB.880 MILITARY VETERANS – PENNINE CARE

Helen Lambert and Dr Barratt, Pennine Care NHS Foundation Trust attended the meeting to provide members of the Board with an update in respect of the support provided by the Military Veterans' Mental Health service.

The Military Veterans Service (MVS) delivers a specialist psychological therapies service, working in partnership with other NHS mental health services and other statutory services.

The MVS has a wealth of data about North West veterans who have sought help for emotional wellbeing/mental health problems and the team have developed a high level of expertise in treating this client group. There are some groups who are particularly at risk; notably, early service leavers. The vast majority who require support are ex-army infantry discharged at the rank of private.

The North West supplies approximately 25% of the Army Infantry and high proportion of Army reservists. The MVS Co-ordinator reported that at present the available data about the number, location and needs of veterans is limited, the needs of their families, and the families of serving personnel is even more scant.

Dr Barratt reported that veterans may only present when at crisis point has been reached and this presentation may be to non health services such as police, housing, benefits/employment services or social services.

Members discussed the difficulty in identifying military veterans. Data in respect of veterans is collected in a variety of ways including, from those in receipt of a war pension or an armed forces payment. The MVS co-ordinator reported that some CCGs have been proactively recording patients that are military veterans.

The Military Veteran Co-ordinator reported that the service has been able to fund an employment mentor to work with military veterans on a case by case basis. The service is designed that so that the Clinicians only have a small caseload.

Dave Bevitt, Third Sector Representative reported that the Citizens Advice Bureau can provide debt advice and support to Military Veterans.

Members of the Board discussed how best to share data held by the various partner agencies to identify and best support the Boroughs' Military Veterans.

Delegated decision:

1. Use information which is available on armed forces community mental health to inform the Joint Strategic Needs Assessment review.
2. Consider ways in which the Armed Forces Covenant Group working with the Health and Wellbeing Board can further support improvements to pathways and services in Bury.
3. Jon Aspinall, GMFRS will liaise with Karen Young Strategic Lead, Inclusion in respect of data sharing.

HWB.881 ISSUES AFFECTING THE HEALTH OF REFUGEES AND PEOPLE SEEKING ASYLUM

The Health and Wellbeing Board considered a verbal presentation from Estelle Worthington, Regional Activism Co-ordinator, Dr. Bailey, Asylum Activism Project. The presentation contained the following information:

Health needs of asylum seekers and refugees are high; common complaints

- Physical health needs including – diabetes, hypertension, dental disorders that are consequences of injury and torture.
- Mental health needs: Depression, anxiety and post-traumatic stress. Exacerbated by lack of control over their circumstances
- Maternal health needs: asylum seeking women are three times more likely to die in childbirth than the general population. Frequent moves disrupt maternity care. Low support rates lead to lower birth weight and higher infant mortality rates.
- Poverty and homelessness: No permission to work in the UK, receive £5.28 a day to cover all essential living needs. Many asylum seekers report missing meals and being unable to afford warm winter coats and shoes.
- Accommodation and financial support is withdrawn following a refusal. Many asylum seekers are destitute in the UK for years.
- Sexual health issues: Asylum seekers may suffer the consequences of sexual violence, torture and rape; be pregnant as a result of rape; suffer the consequences of female genital mutilation (FGM); and be HIV positive. May have been trafficked or turn to prostitution when destitute.
- Drug and alcohol abuse. Self-medication to cope with depression is common.

Members discussed the issues raised within the presentation. Members expressed concern with regards to the proposal to introduce charges for refused asylum seekers to access some types of health care. The CCG representative reported that if primary health care is not provided that the burden could be greater and costs to the health service could increase.

Members discussed the recommendations contained within the report.

Delegated decision:

1. To write to the Department of Health, urging them not to implement proposed charging regime. To also raise the issue with local MPs.
2. To undertake to explore the potential impact of these proposals on health services in Bury, and the associated individual and public health risks.
3. To include measures to improve healthcare for asylum seekers and refugees in the Joint Health and Wellbeing Strategy and Joint Strategic Needs Assessment.
4. To raise awareness of these proposals via the Greater Manchester Combined Authority and GM Health and Social Care Devolution strategy, and to advocate for investment in specialist primary care services in Greater Manchester for people seeking asylum.
5. To call on Serco, the Home Office and Urgent Care 24 to provide more information about the health needs of asylum seekers dispersed to Bury.
6. To invest in an education programme to help new arrivals understand how to access and navigate the NHS.

Recommendations for CCG and Local Primary Care Practices

7. To implement the 'best practice' guidance outlined in section 5 of this briefing.
8. To implement NHS England's new patient registration guidance.
9. To work with Hospital Trusts, the Home Office and Serco to implement the new 'Health needs and pregnancy dispersal guidance.'

HWB.882 BETTER CARE FUND

Councillor Simpson provided Members of the Board with an update in respect of the Better Care Fund.

The BCF submission is consistent with both Bury's Locality Plan and NHS Bury's CCG Operating plan. The detail of the plan remains consistent with the previous year at a thematic level although some schemes have been decommissioned.

The proposed BCF pool for 2016/17 is £13.6 million, funded as follows: Better Care Core Fund, NHS Bury CCG £12, 188 million and Better Care Capital element Bury MBC £1, 423 million.

Delegated decision:

To endorse the approach and ratify the proposed Better Care Fund submission for 2016/17.

To delegate responsibility to the Chair for sign off should any further amendments or changes be made as part of the final Quality Assurance process.

HWB.883 LOCALITY PLAN

Delegated decision:

That consideration of the Locality Plan be deferred to the next meeting of the Health and Wellbeing Board due to be held on the 14th June 2016.

HWB. 884 JOINT STRATEGIC NEEDS ASSESSMENT (JSNA)

Jon Hobday and Helen Smith representatives from the public Health team attended the meeting to provide members of the Board with a verbal presentation in respect of the recently updated JSNA. A covering report had been circulated to members and contained the following information:

Based on the consultation and feedback the JSNA has now been developed into a

- Web based resource
- Point for exchange of data, information, reports
- Series of standard chapters and documents
- Resource closely linked to Bury assets / Directory

The JSNA has been developed in such a way that it will be a continually evolving resource. It will be regularly updated and added to by key partners. This will be done through an iterative process dependent on the needs and requirements of Team Bury partners. The key purpose of the JSNA is to support work plans and future commissioning needs and to capture community engagement.

In response to a member's question, the Public Health Consultant reported that a department or a commissioner can request that specific research/analysis be undertaken to provide evidence/support a particular piece of work.

The Public Health Consultant reported that all partners hold data and if that data is shared it will improve the effectiveness of the JSNA.

Delegated decision:

1. That the Board agrees to endorse the ongoing development of the Joint Strategic Needs Assessment
2. That the Board agrees to endorse a formal launch of the Joint Strategic Needs Assessment.

HWB. 885 NEIGHBOURHOOD WORKING

Karen Young Strategic Lead, Inclusion, attended the meeting to update members of the Board on the proposals in relation to Neighbourhood Working. The Strategic Lead reported that neighbourhood working will help to develop a clear, shared understanding of local issues, the assets available in each neighbourhood and support available to local individuals, families and groups to build resilience.

Neighbourhood working will aim to develop an infrastructure in each township that promotes engagement, co-production and ownership and that allows issues to be tackled more effectively at local level. Neighbourhood working will ensure that local communities are better informed, more resilient and less dependent on public services.

The Strategic Lead reported that two trailblazer sites, Radcliffe and Bury East have been identified.

The Strategic lead reported that by the end of 2016.17 there will be;

- the development of new ways of working at township level in Radcliffe and Bury East;
- an increase in preventative work;
- 10% reduction in public service demand;
- 20% reduction in service costs to the public purse in Radcliffe and Bury East.
- Arrangements in place across agencies to share resources including pooled budgets
- Lessons learned from Radcliffe and Bury East are published and influence the roll out of neighbourhood working
- Commitment from partner agencies to develop a hub and spoke model
- Identified opportunities for funding
- Outcome based accountability approach

Members of the Board discussed the proposals. Members of the Board expressed concerns about the flexibility of the approach taken in delivering neighbourhood working. Dave Bevitt, Third Sector Representative expressed concern that his organisation had not been involved in the development of the proposals. In response to his concerns, the Strategic Lead, Inclusion reported that the proposals are still being developed and there will be a number of opportunities for the third sector and partner agencies to be involved.

Delegated decision:

That the Policy Lead, Health and Wellbeing Board will provide Members of the Board with a list of the Groups represented and confirm whether members of the Public will be invited to attend the Neighbourhood Working workshops.

HWB. 886 DEVOLUTION MANCHESTER UPDATE

Dr. Patel, Chair Bury CCG reported that Devolution Manchester ceased being in shadow form from the first of April 2016. All ten local authorities within Greater Manchester have submitted their Locality Plans.

Discussions are ongoing in respect of the Transformation Fund.

Delegated Decision:

The update be noted.

HWB.887 LIFESTYLE CHANGE PROGRAMME

The Chair Bury CCG attended the meeting to provide members of the Board with an update in respect of the proposed changes to the life style scheme.

The aim of the scheme, is to encourage patients who smoke or are above their healthy weight to make a positive lifestyle change before a non-urgent planned surgery, to help them become as fit for possible for their operation (and beyond). There is good evidence that stopping smoking or reaching a healthier weight before surgery reduces complications such as infections, breathing problems and it can also reduce length of stay in hospital.

For appropriate patients, their GP will recommend that they consider delaying their planned non-urgent operation to allow them time to make a

lifestyle change and to get them as fit as possible in advance of their operation. Support would be provided by the Council's 'Bury Lifestyle Service'.

The CCG will provide GP Practices with the communications resources needed to support and promote this conversation with patients, there is already a limited number of conditions when clinic risk is determined by doctor.

In response to a Board member's question, the CCG Chair reported that they are working with partners from public health to embed a culture of professionals systematically offering lifestyle change advice and assistance to members of the public.

The Chair of the CCG reported that if patients make the lifestyle changes there will be financial benefits to the whole of the Health economy.

Delegated Decision:

The update be noted.

HWB.888 ALTERNATIVE PROVIDER SERVICE

NHS Bury Clinical Commissioning Group (CCG) and NHS England are jointly responsible for local contracting arrangements for GP Practices in the borough. In March 2017, two Alternative Provider Medical Services (APMS) GP contracts are due to end; these relate to the contracts for Rock Healthcare in Bury and The RLC Surgery in Radcliffe.

All registered heads of household for these two GP Practices received a letter at the start of February 2016 to inform them that the contracts were due to come to an end and that as part of a review of the needs of the local population there was a need for us to understand, and for patients to help shape, what should be provided in the future. The period of engagement closed on 29th February 2016. Over 300 patient responses were received to the survey. We are reviewing all available feedback and options prior to making a decision at our joint Primary Care committee which meets in public.

The contracts aren't due to come to an end until the March 2017 and therefore, no immediate changes will take place, and patients have been reassured that their Practice will remain open and there will be no immediate changes to the services they currently access.

Based on the work the CCG have done to date, there is still a requirement for a GP practice in both of these areas. However, the way that patients access GP services in the evening and at the weekend may change.

Delegated Decision:

The update be noted.

HWB. 889 URGENT BUSINESS

There was no urgent business reported.

HWB.890 SUB GROUP MINUTES (FOR INFORMATION)

Copies of minutes from the following Sub-Groups were submitted for information:

Housing Strategy Programme Board – 16th December 2015

Carbon Reduction / Carbon Change Board – 25 November 2015

Bury Integrated Health and Social Care Board – 16 February 2016

Children's Trust Board -5 November 2015


Bury Safeguarding Adults Board – 13th October 2015

Councillor Andrea Simpson
Chair

(Note: The meeting started at 6:00pm and ended at 8.10pm)

Board Date	Member Development Session	Interactive discussion/ focus	Agenda Items	
14 th June 16 14:00 – 16:00	<u>Draft Agenda</u> <u>Looking ahead to 2016/17</u> <ul style="list-style-type: none"> Development of the member work plan Health and Wellbeing Board Membership Housekeeping Upcoming events – how can we support each other? Including Team Bury Calendar of events, (Heather Crozier) Public Health Calendar of events Any other partner's calendar of events. Communication and Engagement 	<u>Draft Agenda</u> <ul style="list-style-type: none"> Formalise Chair and Vice Chair Formalise membership Formalise Member Workplan Communication and Engagement Demonstration of the Health and Wellbeing Board Website 	Discussion	<ul style="list-style-type: none"> JSNA – Lesley Jones Verbal Update and covering report (Priority 2) Adult Safeguarding and Governance- David Hanley (Priority 4) Neighbourhood Working – Verbal Update Pat Jones-Greenhalgh (Priority 2) Locality Plan - Julie Gonda/ Brett Nelson Presentation and covering report (Priority 2)
			Standard Items	<ul style="list-style-type: none"> Devolution update Formalise Communication and Marketing
			Decision	
			TBC	
			Information	<u>Mins of Health & Wellbeing Board Sub Groups</u> <ul style="list-style-type: none"> Children's Safeguarding Board Minutes - (Priority 1) Children's Trust Board Minutes (Priority 1) Bury Integrated Health and Social Care Board Minutes (Priority 2, 3 & 4) Adults Safeguarding Board Minutes (Priority 4) Carbon Reduction Board Minutes (Priority 5) Housing Strategy Programme Board Minutes (Priority 5)

Priority 1	Member Development Session	Interactive discussion/ focus	Agenda Items	
21 st July 2016 18:00 – 20:00	<ul style="list-style-type: none"> Jon Aspinall – Presentation on GM Fire and Rescue Service <i>Neighbourhood Working</i> - What does it mean in practice? <i>Locality Plan</i> - Understanding the plan and the schemes 	<ul style="list-style-type: none"> Presentation and report on the bi-Annual Health & Wellbeing Strategy - Mark Carriline (Priority 1) 	Discussion	<ul style="list-style-type: none"> Child Death Overview Panel Report - Mark Carriline (Priority 1) Tobacco Control Annual Report - Lesley Jones (Priority 2) Director of Public Health Annual Report - Lesley Jones (Priority 2) Quarterly NHS England Commissioning Report - Rob Bellingham (Priority 2)
			Standard Items	<ul style="list-style-type: none"> Devolution update Communication and Marketing
			Decision	<ul style="list-style-type: none"> Health & Wellbeing Board Annual Report 2015/16 (Heather Crozier/ Julie Gallagher) Public Health Annual Report
			TBC	<ul style="list-style-type: none"> Employment Summit update - Tracy Flynn (Priority 3)
			Information	Mins of Health & Wellbeing Board Sub Groups <ul style="list-style-type: none"> Children's Safeguarding Board Minutes - (Priority 1) Children's Trust Board Minutes (Priority 1) Bury Integrated Health and Social Care Board Minutes (Priority 2, 3 & 4) Adults Safeguarding Board Minutes (Priority 4) Carbon Reduction Board Minutes (Priority 5) Housing Strategy Programme Board Minutes (Priority 5)

Priority 2	Member Development Session	Interactive discussion/ focus	Agenda Items	
22 nd Sept 2016 14:00 – 16:00	<u>Draft Agenda</u> <ul style="list-style-type: none"> Mental health Focus – CAMHS Understanding the services provided and by whom 	<u>Draft Agenda</u> <ul style="list-style-type: none"> Presentation and report on the bi-Annual Health & Wellbeing Strategy - Lesley Jones (Priority 2) 	Discussion	<ul style="list-style-type: none"> JSNA update (Priority 2)
			Standard Items	<ul style="list-style-type: none"> Devolution update Communication and Marketing
			Decision	
			TBC	<ul style="list-style-type: none"> New Winterbourne View report reflects on progress made and challenges ahead (Priority 3) 
			Information	Mins of Health & Wellbeing Board Sub Groups <ul style="list-style-type: none"> Children's Safeguarding Board Minutes - (Priority 1) Children's Trust Board Minutes (Priority 1) Bury Integrated Health and Social Care Board Minutes (Priority 2, 3 & 4) Adults Safeguarding Board Minutes (Priority 4) Carbon Reduction Board Minutes (Priority 5) Housing Strategy Programme Board Minutes (Priority 5)

Priority 3	Member Development Session	Interactive discussion/ focus	Agenda Items	
15 th December 2017 18:00	<ul style="list-style-type: none"> Dementia and Prime Ministers Challenge Fund Understanding the plans and schemes 	<u>Draft Agenda</u> <ul style="list-style-type: none"> Presentation and report on the bi-Annual Health & Wellbeing Strategy - Pat Jones-Greenhalgh (Priority 3) 	Discussion	<ul style="list-style-type: none"> Greater Manchester Working Well Expansion - Tracey Flynn (Priority 3) Carers in Employment – Presentation- Laura Maguire (Priority 3)
			Standard Items	<ul style="list-style-type: none"> Devolution update Communication and Marketing
			Decision	
			TBC	<ul style="list-style-type: none"> Priority 3/4 BCF Sign off process for Quarterly reporting June-March 2015 (Pat/Stuart) Annual Safeguarding Adults report (priority 4) Presentation of Bury Safeguarding Children Board Annual Report (2015-16) (priority 1) Independent Chair of BSCB (Sharon Beattie)
			Information	Mins of Health & Wellbeing Board Sub Groups <ul style="list-style-type: none"> Children's Safeguarding Board Minutes - (Priority 1) Children's Trust Board Minutes (Priority 1) Bury Integrated Health and Social Care Board Minutes (Priority 2, 3 & 4) Adults Safeguarding Board Minutes (Priority 4) Carbon Reduction Board Minutes (Priority 5) Housing Strategy Programme Board Minutes (Priority 5)

Priority 4	Member Development Session	Interactive discussion/ focus	Agenda Items	
02 nd February 2017 14:00	<ul style="list-style-type: none"> <i>Devolution</i> - Discussion around all aspects surrounding Devolution 	<u>Draft Agenda</u> <ul style="list-style-type: none"> Presentation and report on the bi-Annual Health & Wellbeing Strategy - Pat Jones-Greenhalgh (Priority 4) 	Discussion	•
			Decision	
			TBC	
			Information	Mins of Health & Wellbeing Board Sub Groups <ul style="list-style-type: none"> Children's Safeguarding Board Minutes - (Priority 1) Children's Trust Board Minutes (Priority 1) Bury Integrated Health and Social Care Board Minutes (Priority 2, 3 & 4) Adults Safeguarding Board Minutes (Priority 4) Carbon Reduction Board Minutes (Priority 5) Housing Strategy Programme Board Minutes (Priority 5)

Priority 5	Member Development Session	Interactive discussion/ focus	Agenda Items	
09 th March 2017 18:00 – 20:00	<u>Draft Agenda</u> <ul style="list-style-type: none"> • <i>One Commissioning Entity</i> -What does this mean for us? 	<u>Draft Agenda</u> <ul style="list-style-type: none"> • Presentation and report on the bi-Annual Health & Wellbeing Strategy - Sharon Hanbury – (Priority 5 – Ensure suitable and quality homes) • Presentation and report on the bi-Annual Health & Wellbeing Strategy Neil Long and Lorraine Chamberlin (Priority 5 –Create a clean and sustainable environment) 	Discussion	<ul style="list-style-type: none"> • Fuel Poverty presentation - Sharon Hanbury/Kate Fitzsimons (Priority 5)
			Decision	
			TBC	
			Information	Mins of Health & Wellbeing Board Sub Groups <ul style="list-style-type: none"> • (Children's Safeguarding Board Minutes - (Priority 1) • Children's Trust Board Minutes (Priority 1) • Bury Integrated Health and Social Care Board Minutes (Priority 2, 3 & 4) • Adults Safeguarding Board Minutes (Priority 4) • Carbon Reduction Board Minutes (Priority 5) • Housing Strategy Programme Board Minutes (Priority 5)

April 2017	<ul style="list-style-type: none">Local Care Order <p>Discussions around aspects of the Local Care Order</p>	<ul style="list-style-type: none"><u>Draft Agenda</u>	Discussion	
			Decision	
			TBC	
			TBC	

Items TBC

NHS England Quarterly Commissioning Report – Rob Bellingham

PNA – Pharmaceutical Needs Assessment

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HEALTH AND WELLBEING BOARD ACTION LOG
January 2016 Onwards

Recommendation	Date Agreed	Responsible Officer	Action taken	Date reported back to the HWB
WORKING WELL				
That the Strategic Planning and Economic Development Officer will provide the Health and Wellbeing Board with an evaluation report in respect of the success of the Working Well initiative. The report will include; the number of client assisted and the type of work undertaken as part of the working well programme.	28.1.2016	Strategic Planning and Economic Development Officer	Strategic Planning and Economic Development Officer invited to attend a future meeting of the HWB	
PHARMACEUTICAL SERVICES				
The Head of Primary Care, Operations, NHS England would forward to democratic services an update in respect of the new pharmacy provision in Besses ward; details of the non-recurrent investment in Bury in respect of dental access and NHS England's plan for Healthy Living pharmacies.	28.1.2016	Head of Primary Care, Operations, NHS England	The Head of Primary Care, Operations, NHS England provided information requested. This was circulated to Board Members Electronically	March 2016
MILITARY VETERANS				
Use information which is available on armed forces community mental health to inform the Joint Strategic Needs Assessment review. Consider ways in which the Armed Forces Covenant Group working with the Health and Wellbeing Board can further support	14.4.2016	Director of Public Health		

<p>improvements to pathways and services in Bury.</p> <p>Jon Aspinall, GMFRS will liaise with Karen Young Strategic Lead, Inclusion in respect of data sharing.</p>		<p>Jon Aspinall GMFRS and Karen Young Strategic Lead Inclusion</p>		
HEALTH NEEDS OF ASYLUM SEEKERS AND REFUGEES				
<p>To write to the Department of Health, urging them not to implement proposed charging regime. To also raise the issue with local MPs.</p> <p>To undertake to explore the potential impact of these proposals on health services in Bury, and the associated individual and public health risks.</p> <p>To include measures to improve healthcare for asylum seekers and refugees in the Joint Health and Wellbeing Strategy and Joint Strategic Needs Assessment.</p> <p>To raise awareness of these proposals via the Greater Manchester Combined Authority and GM Health and Social Care Devolution strategy, and to advocate for investment in specialist primary care services in Greater Manchester for people seeking asylum.</p> <p>To call on Serco, the Home Office and Urgent</p>	14.4.20 16	<p>Democratic Services</p> <p>Director of PH</p> <p>Director of PH</p> <p>Leader of the Council</p>	Letter sent to DofH	May 2016



<p>Care 24 to provide more information about the health needs of asylum seekers dispersed to Bury.</p> <p>To invest in an education programme to help new arrivals understand how to access and navigate the NHS.</p> <p>Recommendations for CCG and Local Primary Care Practices:</p> <p>To implement the 'best practice' guidance outlined in section 5 of this briefing.</p> <p>To implement NHS England's new patient registration guidance.</p> <p>To work with Hospital Trusts, the Home Office and Serco to implement the new 'Health needs and pregnancy dispersal guidance.'</p>		<p>Bury CCG</p> <p>Bury CCG</p>		
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Bury Health and Wellbeing Board

Title of the Report	Joint Strategic Needs Assessment update
Date	26/05/16
Contact Officer	Jon Hobday – Consultant in Public Health
HWB Lead in this area	Lesley Jones – Director of Public Health

1. Executive Summary

Is this report for?	Information x	Discussion <input type="checkbox"/>	Decision <input type="checkbox"/>
Why is this report being brought to the Board?	This report is to provide an update to board members on the progress in relation to the JSNA work programme		
Please detail which, if any, of the Joint Health and Wellbeing Strategy priorities the report relates to. (See attached Strategy)  Living_well_in_Bury_Making_it_happen_to	ALL		
Please detail which, if any, of the Joint Strategic Needs Assessment priorities the report relates to. (See attached JSNA)  Bury JSNA - Final for HWBB 3.pdf	N/A		
Key Actions for the Health and Wellbeing Board to address – what action is needed from the Board and its members? Please state recommendations for action.	Note the progress Endorse the ongoing process Endorse the launch event		
What requirement is there for internal or external communication around this area?	None at this point a communication strategy is being developed		
Assurance and tracking process – Has the report been considered at any other committee meeting of the Council/meeting of the CCG Board/other stakeholders....please	No this report is specific to the Health & Wellbeing Board		

provide details.	
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2. Introduction / Background

Joint Strategic Needs Assessments (JSNAs) are assessments of the current and future health and social care needs of the local community. – these are needs that could be met by the local authority, CCGs, or the NHS Commissioning Board.

An update of the progress of the JSNA was provided to the Board at the March meeting and since then there has been several developments. Following the last Health and Wellbeing Board the JSNA operational group has now linked in with the veteran health service and the Regional Asylum Activism Project. It has now been agreed that key data on military veterans, refugee and asylum seekers will be provided to the operational group for inclusion within the JSNA.

In addition, a range of supporting documents have now been produced including a detailed JSNA user guide. The supporting documents aim to assist first time users of the JSNA to ensure they are able to access and get the most from the website. The documents are also to support organisations to identify if the data they collect is relevant and appropriate to be added to the JSNA. Then if so guide them through the process of adding data.

3. key issues for the Board to Consider

The next step in the JSNA development is to hold an official launch. This would act to highlight to the public and wider partners what the JSNA is, what it is used for and how it will benefit Bury residents. It was agreed at the last meeting that

the Board is happy for this to go ahead. This is currently at the planning stage with further key dates and time scales to follow.

4. Recommendations for action

Note the contents of the report

Endorse the ongoing development

5. Financial and legal implications (if any)

If necessary please see advice from the Council Monitoring Officer Jayne Hammond (J.M.Hammond@bury.gov.uk) or Section 151 Officer Steve Kenyon (S.Kenyon@bury.gov.uk).

N/A

6. Equality/Diversity Implications

N/A

CONTACT DETAILS:

Contact Officer: Jon Hobday
Telephone number: 0161 253 6879
E-mail address: j.hobday@nhs.net
Date: 26/05/16

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Stakeholder/Staff briefing: Tuesday 31 May 2016**Manchester Single Hospital Service Review – Stage 2****(FINAL)**

Dear Colleague,

In January 2016, the Manchester Health and Wellbeing Board (HWBB) commissioned the City of Manchester Single Hospital Service Review to look at the benefits that might be achieved from closer working and alignment between hospital services and how these could most effectively be delivered. Hospital services in Manchester are facing many challenges around staffing, workload pressures and financial viability. More importantly, standards of care are not consistent across the city. Hospital and commissioning organisations in Manchester all recognise that this situation should not be allowed to continue.

The work on the Single Hospital Service forms one of the three pillars of the Manchester Locality Plan. The other two are the development of a Local Care Organisation and a single commissioning function within the City.

The review has looked at services run by University Hospital of South Manchester NHS Foundation Trust (UHSM), North Manchester General Hospital (run by The Pennine Acute Hospitals NHS Trust – PAHT) and Central Manchester University Hospitals NHS Foundation Trust (CMFT), and has been carried out independently by Sir Jonathan Michael.

On 27 April 2016, Sir Jonathan published his [Stage 1 Report](#). This part of the review involved extensive engagement with key stakeholders, including many senior clinicians, and looked at whether closer collaborative working can help to address the problems that Manchester is facing. By considering a number of 'exemplar' services, the first part of the review concluded that a Single Hospital Service would deliver benefits in areas such as quality of care, patient experience and access, workforce recruitment/retention and research/innovation. It also identified a range of 'enablers' that would need to be in place to successfully deliver these benefits, including the need to have clarity of leadership, joint IT systems and common HR processes.

Sir Jonathan Michael's Stage 2 Report will be discussed and presented to members of the HWBB on Wednesday 8 June 2016. The report, which will be publicly available on Manchester City Council's website from 2.00pm on Tuesday 31 May 2016, sets out a list of recommendations for considering the appropriate organisational and governance arrangements that would need to be in place to successfully deliver a Single Hospital Service. http://www.manchester.gov.uk/meetings/meeting/2641/health_and_wellbeing_board

Seven organisational models have been considered, ranging from a partnership agreement through to the creation of a new hospital trust for the city. Each has been appraised to determine the extent to which they might allow the benefits and enablers of a Single Hospital Service to be realised. This work has been done by Sir Jonathan and the resulting report represents his independent view. The Stage 2 Report outlines Sir Jonathan's conclusion that the creation of a new organisation, which would take responsibility for the full range of services currently provided by CMFT, UHSM and NMGH, provides the best opportunity to deliver the benefits of a Single Hospital Service.

The key recommendation of the Stage 2 Report is that the Trust Boards should enter into a discussion, over the next few weeks, to consider how the creation of a single organisation, to run hospital services in Manchester, would best be achieved.

Sir Jonathan has recognised the complexity of the recommendation he has made and he has asked the Boards to consider a range of areas within their conversations. These include a detailed assessment to evaluate the impact that the realignment of NMGH might have on the sustainability of remaining services provided by both PAHT and the proposed new City-wide Hospital Trust. In addition, he has highlighted the need to ensure that any changes in the City are co-ordinated with work across Greater Manchester.

Each Trust has submitted its formal comments on the Stage 2 Report and these are included in the documents that are being published. The Trusts have all recognised the potential to achieve significant benefits through the development of a single hospital service, and have accepted Sir Jonathan's recommendations. Subject to the proceedings of the Health and Wellbeing Board meeting on 8 June 2016, the three Trusts will start a collaborative process to consider the practicalities of implementing Sir Jonathan's proposals, and this will include engagement with staff and key partners. Sir Jonathan has recommended that the Trusts feedback the outcomes of these discussions and more detailed plans to the Manchester Health and Wellbeing Board within six weeks.

Bury Health and Wellbeing Board

Title of the Report	Locality Plan Update
Date	14 June 2016
Contact Officer	Brett Nelson, Interim Programme Director (Devolution Bury) – 07811 006469
HWB Lead in this area	Executive Director – Communities & Wellbeing

1. Executive Summary

Is this report for?	Information ✓	Discussion <input type="checkbox"/>	Decision <input type="checkbox"/>
Why is this report being brought to the Board?	This report is to update the Board on the progress of developing & implementing the Bury response to health & social care devolution in Greater Manchester		
Please detail which, if any, of the Joint Health and Wellbeing Strategy priorities the report relates to. (See attached Strategy)	<p>The Locality Plan has a positive impact on all five Priorities of the Joint Health & Wellbeing Strategy:</p> <ol style="list-style-type: none"> 1. Starting Well 2. Living Well 3. Living Well with a Long Term Condition or as a carer 4. Ageing Well 5. Healthy Places 		
Please detail which, if any, of the Joint Strategic Needs Assessment priorities the report relates to. (See attached JSNA)	<p>Bury's Locality Plan seeks to address many of the intractable issues faced by people within the borough and so contributes to a large number of the priorities listed within the JSNA.</p> <p>The Locality Plan also seeks to address some of the gaps in intelligence that we currently have on our citizen's, which should have a beneficial impact on the production of future intelligence assessments, including the JSNA</p>		
Key Actions for the Health and Wellbeing Board to address – what action is needed from the Board and its members? Please state recommendations for action.	1. Note the contents of the report		
What requirement is there for internal or external communication around this	None – a communications & engagement plan is being drawn up for		

area?	the Bury Locality Plan, plus there is a significant 'citizen communication' strand to the work contained within the Plan
Assurance and tracking process – Has the report been considered at any other committee meeting of the Council/meeting of the CCG Board/other stakeholders....please provide details.	Regular reports on progress will be taken to the Health & Social Care Partnership Board which is responsible for the delivery of the Plan

1. Introduction / Background

Since the last update on Bury's response to the Greater Manchester health & social care devolution agenda (Locality Plan), a number of activities have been undertaken:

- October 2015 – Submission of Bury's draft Locality Plan as part of the development of GM's overall response to the devolution opportunity
- November 2015 – Submission of a 'finalised Locality Plan' detailing what actions Bury will take, as part of an overall GM-wide programme, to ensure financial & clinical sustainability by 2021
- December 2015 to March 2016 – Bury developed a draft 'Locality Plan Implementation Programme' which detailed the actions we would take in order to deliver that required financial & clinical sustainability
- April 2016 – Readiness assessment of Localities undertaken by the GM Support Team
- May 2016 – Bury Wider Leadership Group & Locality Plan development workshops

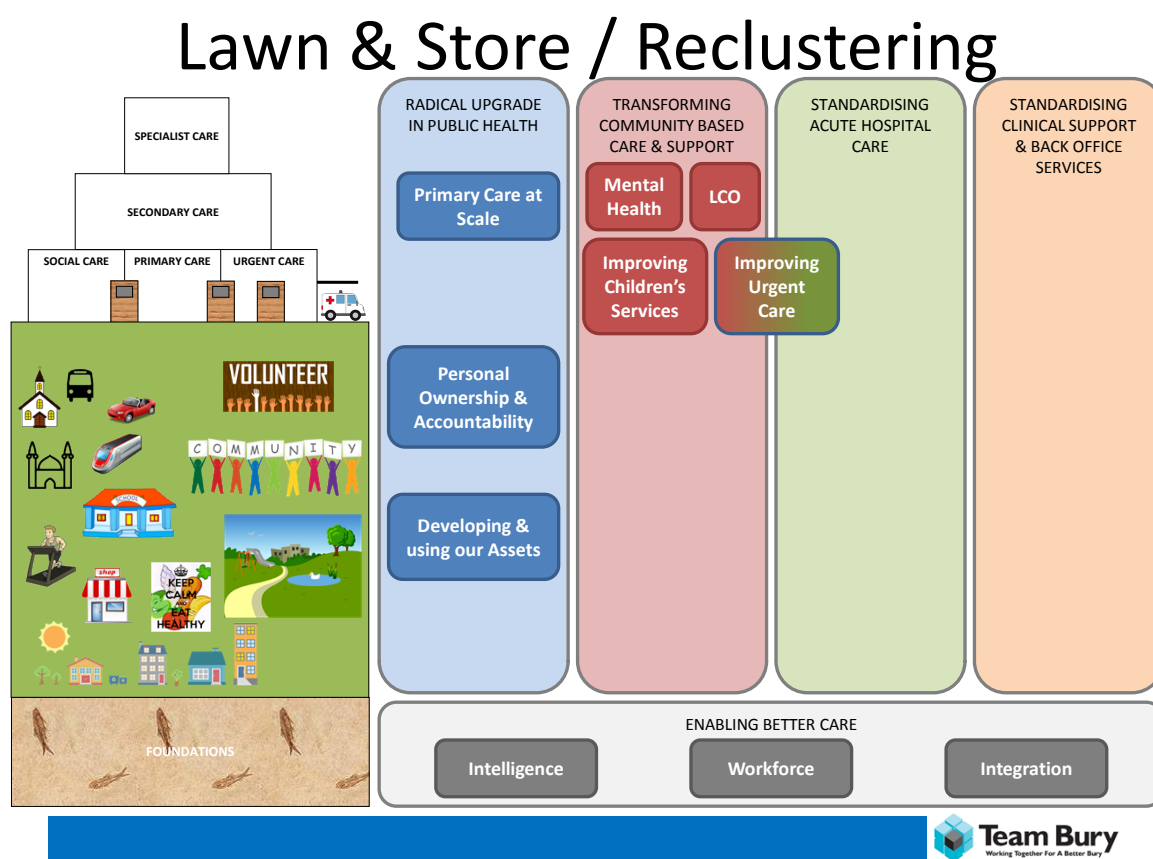
The workshops have proved valuable in: helping to realign the work of the Locality Plan to the emerging 'lawn & store' concept; in clustering the actions into a series of programmes aligned to the GM Priority areas; and developing a communications & engagement plan to support the Locality Plan and the work contained within it.

We are proposing an portfolio of work made up of ten linked and interdependent programmes, focusing on:

1. Implementing Primary Care at scale
2. Improving mental health services
3. Improving services for children & young people

4. Improving urgent care services
5. Developing a Locality Care Organisation
6. Supporting people to take personal ownership & accountability for their own health & wellbeing
7. Developing & using our community assets
8. Improving & increasing the intelligence we have on our citizens
9. Developing our workforce
10. Integration of health & social care commissioning

Visually, the schemes can be shown to be aligned to the GM health & social care devolution priorities, together with Bury's 'Lawn & Store' concept, as follows:



The next steps currently outlined around development of the Bury Locality Plan are:

- Hold a second development workshop for Locality plan scheme leads, plus wider partners, on 20th June 2016
- Rework the high level activity & finance figures to take account of recent budget settlements & submissions of operating plans. This will help to

identify any remaining gap and to see if we have the correct balance within the programmes / schemes to deliver financial & clinical sustainability

- Develop 'bottom up' modelling of scheme impacts on outcomes & activity figures, reviewing this in light of the top down modelling figures
- Allocate the agreed programmes to leads and for leads to develop the detailed implementation programmes
- Commence reporting of the progress against delivery of the Locality Plan schemes
- Rewrite / update Bury's Locality Plan to recognise changes in finance & activity figures, development of plans & programmes of activity and to link it to the 'lawn & store' concept

2. key issues for the Board to Consider

None – report is for information / update.

3. Recommendations for action

Note the contents of the report.

4. Financial and legal implications (if any)

If necessary please seek advice from the Council Monitoring Officer Jayne Hammond (J.M.Hammond@bury.gov.uk) or Section 151 Officer Steve Kenyon (S.Kenyon@bury.gov.uk).

As part of the development of the Locality Plan, a five year activity & finance forecast has been produced which looks to move the Bury Health & Social Care economy into a financially balanced and sustainable position by 2021.

This takes the latest assumptions around the finances available and plots this against the proposed changes in the services will be delivered within Bury.

Work is currently ongoing to update the original analysis done in October 2015 and to understand the size of any remaining gap. This will inform further service developments.

5. Equality/Diversity Implications. Please attach the completed Equality and Analysis Form if required.

A draft equalities assessment has been completed which has identified:

- Data concerning diversity and equalities is not as comprehensive as it could be and needs to be improved – this will support development of the inequalities analysis contained within the JSNA. Service specifications and contracts should be updated to request better monitoring data or service uptake and patient experience by protected groups.
- There are mainly positive impacts of the Locality Plan on each of the protected characteristics; the exception being people with caring responsibilities - It is possible that taking an asset based approach and changing the relationship between the general public and health & wellbeing services may require people to take on more of an informal caring role.
- Each scheme within the Locality Plan will be expected to undertake an Equality Impact Assessment as part of their development / implementation.

CONTACT DETAILS:

Contact Officer: Brett Nelson – Interim Programme Director (Devolution Bury)

Telephone number: 07811 006469

E-mail address: brett.nelson@bury.gov.uk

Date: 14 June 2016

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Locality Plan Update

Julie Gonda

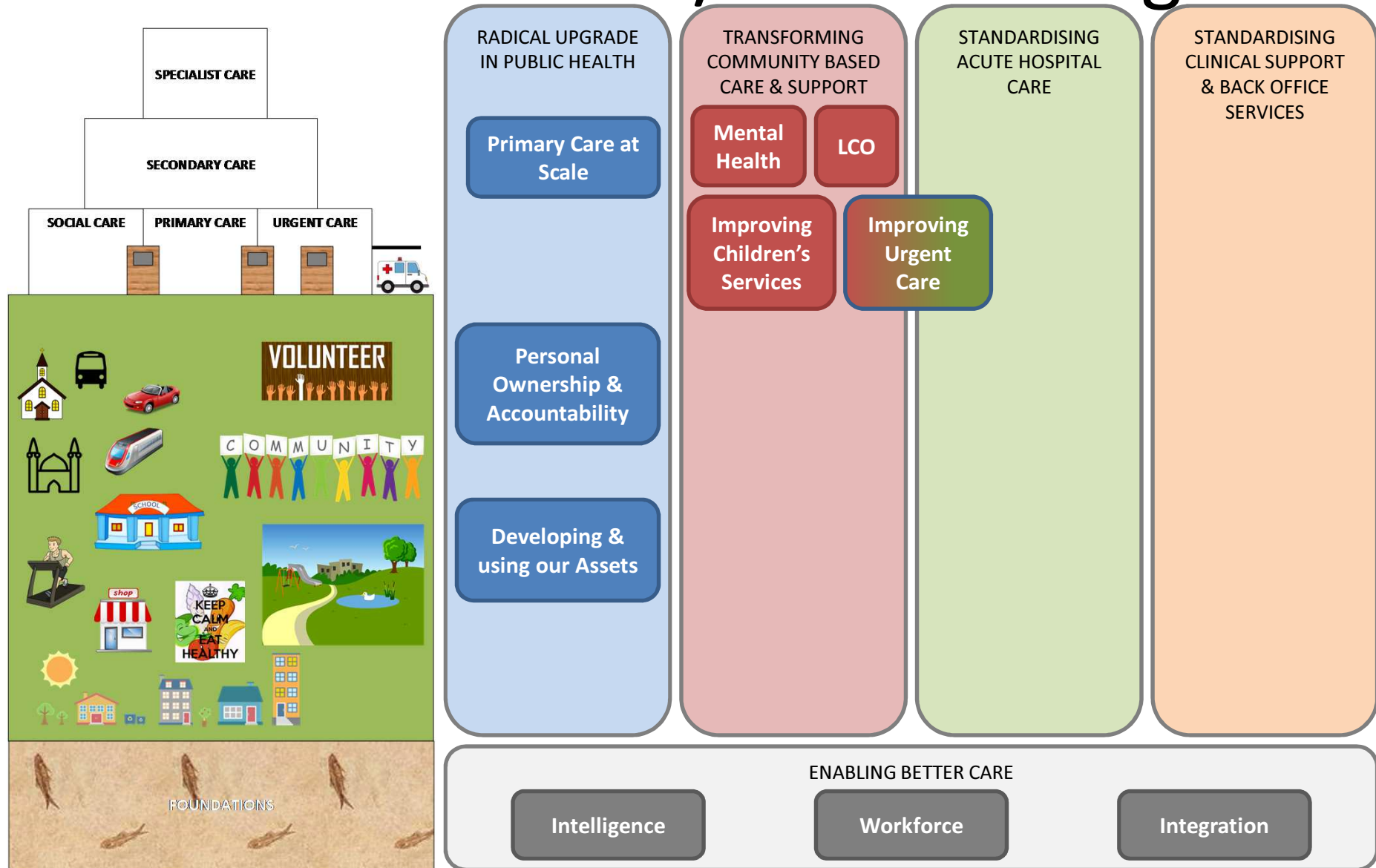
To Date

- Oct 15 -Initial submission of Locality Plan
- Nov 15 – ‘Finalised’ Locality Plans
- Dec 15 to Mar 16 – Develop Transformation Programme
- Apr 16 – Readiness Assessment of Localities
- May 16 – Locality Plan Development Workshop

Workshop Outputs

- Comms & Engagement Plan
- Reclustered schemes into programmes aligned to GM
- Linked Locality Plan to 'Lawn & Store' concept

Lawn & Store / Reclustering



Next Steps...

- Workshop #2 – 20th June 2016
- Rework high level finance & activity figures
- Develop scheme level contributions to targets (incl review of gap)
- Allocate programmes to leads
- Schemes commence reporting on progress
- Rewrite / update Locality Plan

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Bury Children's Trust

Minutes of the Trust Board meeting held on 5 November 2015

Attendance:

Mark Carriline	Executive Director Children, Young People & Culture (Chair)
Cllr Eammon O'Brien	Deputy Cabinet Member Children & Families
Maxine Lomax	Head of Safeguarding (C&A), Bury CCG
Jackie Gower	Assistant Director Social Care, Council CYP & Culture
CI Joanne Marshall	GM Police, Bury Division (Criminal Justice & Partnerships)
Yvonne Tunstall	Divisional Nurse Director, Paediatrics, Neo-natal & Gynaecology, Pennine Acute Hospital Trust
Jon Hobday	Public Health, Council Communities & Wellbeing on behalf of Lesley Jones
Vicky Maloney	Chief Officer Early Break, representing CYP Forum
Ann Noi	Council Communities & Wellbeing, on behalf of T Minshull
Tom Gledhill	Headteacher, Bury Secondary PRU, representing BASH
Gaynor Holdson	Pennine Care Foundation Trust, representing Sara Barnes
Sarah Bullock	Deputy Director Commissioning, Bury CCG
Maria Worthington	Business Manager Neighbourhoods, Six Town Housing
Kate Allam	Operational Manager IYSS & Connexions
Lindsay Dennis	Children's Trust Development Officer, Council CYP & Culture

1. Introductions and Apologies (M Carriline)

MC welcomed everyone to the meeting, including new Trust Board member Tom Gledhill who replaces Mick Fitzgerald as the BASH representative. Apologies were received from Helen Chadwick, Charlie Deane, Stuart Richardson and Tom Maddox/Ann Gent and representatives for Board members attended as noted in the Attendance list above.

2. May Minutes, Actions and Matters Arising

July Minutes were approved.

In addition to information provided in the Summary of Actions or included as agenda items, the following points were raised

2.1 Actions: Item 4: Commissioning Principles LD noted that she has not been sent any examples of good commissioning practice by Board Members. The Principles are now on the website and LD said that will meet with VM to discuss examples good practice that can be appendices to the Principles.

Action: LD/VM

2.2 Actions: Item 5: Commissioning Principles With regard to the feedback from LJ that embedding Compact into practice is being taken forward through the Community Engagement Group, MC said he was pleased to hear this was being taken forward and asked what action is being taken around this. There was some discussion about the need to refresh the Compact to reflect new commissioning

arrangements and inclusion of Bury Clinical Commissioning Group. MC stated that Compact and of the risks to the future of B3SDA needs to be discussed at Bury Wider Leadership Group. VM noted that the risks to B3SDA post March 2016 will have ramifications for the future of Compact and wider implications for 3rd sector, eg, training. MC stated that he is very concerned that the loss of an infrastructure organization will make it much more difficult to work with the 3rd sector and asked that partners make a collective effort through the Community Engagement Group and Bury Wider Leadership Group to ensure this doesn't happen.

Action: All

3. **Items from young people/Youth Participation Officer (K Allam)**

3.1 **Circles Report – actions for Trust Board** KA stated that many of the actions in the Circles report are ones for schools, rather than the Trust Board. Work will be undertaken to strengthen engagement with schools councils so that have strong links with Youth Cabinet and Circles and are able to take forward issues with their own schools. KA drew particular attention to:

Key finding 2 Skills for life: A strong theme about young people feeling that they leave school unprepared for independence was particularly noticeable this year. EO noted that in his group young people talked about their concerns as they saw older siblings and parents struggling. MW advised that next year she is setting up programme for 13-16 year olds and is happy to work with partners on this (NB: STH funding is for STH tenants).

Action: KA and MW to discuss

Key finding 3 and 6: Young people again highlighted the need for a 'key' adult/qualified counsellor in school who they can talk to.

Action: To feed into Local Transformation Planning (via CT Ops)

Key finding 4 Substance Misuse: Findings need to feed into Drug & Alcohol action plan

Action: VM and AN to discuss

Key finding 5 Awareness of Services: It was noted that IYSS produced a booklet of services for young people, and the proposals for the Single Point of Access (Local Transformation Plan) will assist with this.

Key finding 7 Homophobia and Racism: There was increased concern about this at this year's Circles. This information needs to be passed to Lesley Davidson re her work with schools.

Action: KA to flag up to L Davidson

Key finding 10 Safe Spaces: It was notable that the young people at Circles did not talk about Youth Clubs as they had not come across them, but that what they were describing as a gap was the equivalent of a youth club. MW stated that she is also finding an increased demand, and that young people want places to go in their own community.

LD advised that at CYP Forum Rachael Bamber of NSCPG (New Springs Community Project Group) had circulated a leaflet about a Youth Club for 12-17 year olds that will be opening soon and they are seeking volunteers. LD has passed info to KA. MC has a meeting with BASH on 10 November where he can bring attention to the report. He said he will send to heads and ask them to take to School Councils and discuss with them what should happen in schools.

Action: MC

VM suggested that it could also be sent to schools' facebook accounts.

3.2 Update from Youth Cabinet KA advised that Youth Cabinet is being reviewed with regard to function and how it engages with young people. This will strengthen links with UK Youth Parliament and with School Councils. In response to a question from JG about Youth Cabinet campaigning role, KA advised that there are a number of national and regional campaigns which Youth Cabinet are involved in via UK Youth Parliament and Youthforia. They also want to campaign about local issues, eg they wrote to 2 local shops that were restricting the number of young people who could come into their premises, this led to change in one of the shops.

3.3 LILAC assessment KA updated that the draft report from the LILAC assessment has now been received (*LILAC Leading Improvement for Looked After Children* looks at how the voice of looked after children and young people is sought and acted upon). The results were very positive with Bury meeting all 7 standards. KA will circulate final report when it is received.

Action: KA

4. Children & Young People's Plan

(Agenda order changed so that Sarah Bullock could attend another meeting).

4.1 Priority 2 Emotional Health & Wellbeing (S Bullock)

Local Transformation Plan Summary provided

SB advised that outcome of 1st draft of the Local Transformation Plan is due imminently. SB is expecting that the response will be 'assured with conditions', meaning some amendments will be required and then funding provided from January. The main points include the development of the SPA (Single Point of Access) – currently looking for a suitable community venue; workforce development – eg building on lunchtime learning; enhanced workforce, eg Counselling; working with Pennine Care re eating disorders and an increase in Prevention and Early Help - commissioning from 3rd sector. Also improving IT, information sharing and consistent assessments so that young people only have to tell their story once.

With regard to the Board's role, SB suggested that the EHWP task & finish group and CT Operations Group be used to develop and monitor the Plan, reporting into the Trust Board.

Action: SB/MC/LD to confirm governance arrangements

4.2 Progress Report and Review (L Dennis)

Half year progress report provided

LD outlined the main progress over the last few months includes development of Action Plans against the CYPP using the framework of the Early Help Strategy – ie, Information & Advice, Strengthening Families & Communities and Services working

together. Work that has taken place against the action plan includes the new programme of lunchtime learning, the promotion of Early Help examples in the newsletter and start of work to re-brand the EH Team, review of the Participation Strategy and training at CYPP Network Event and lunchtime learning. A significant area of work has been that with the Clinical Commissioning Group to develop and launch the Local Transformation Plan. The CT Ops Group are also involved in the development of the young people's action plan for the Joint Alcohol & Substance Strategy and the Board have developed the Commissioning Principles.

LD also ran through the areas for development which include for the Board embedding the Commissioning Principles and making sense of influencing and implementing regional, national and local strategy that impacts on outcomes for children and young people.

LD noted that the review of the last 6 months has highlighted that there have been significant developments which impact on the CYPP. The CT Ops Group have started to review the Priority Objectives and LD asked the Board to give approval to them completing this and moving ahead with action planning over the next few months. This was agreed.

Action: CT Ops Group to move ahead with review of CYPP priorities

4.3 Participation Strategy (K Allam)

Papers provided

KA explained that she and LD met to review progress against the Implementation Plan. At the April Participation sub group meeting it was agreed that What's Changed forms would be used to monitor progress and share good practice; but unfortunately only 1 had been received from sub group members and the Board was asked for support in increasing the use of these in their organisations. It was suggested that a future network event could focus on Participation, and that the What's Changed tool could be sent out for circulation across the Children's Trust.

Action: KA/LD/All

KA highlighted (against Action 2) that she and Adele Crowshaw are developing guidance re the how to involve young people in commissioning. Currently requests for young people's views on strategic developments are often inappropriate, eg insufficient time allowed and too much, too complicated information about topics of little interest to most young people. It was suggested that the guidance include the requirement that if young people are to be consulted that be at the start of a process of writing a spec', not once it has been written; also a suggestion to check whether there is guidance in other areas that could be helpful (eg Bolton).

With regard to Total Respect training it was agreed to promote this to all partners.

Action: JG

4.4 Priority 1: Early Help

Relaunch of Early Help Team and CAF JG advised that discussions are ongoing re the rebranding and renaming of the Early Help Team and that a relaunch event is being planned for February 2016.

CYP & Culture Early Help MC advised that over the past few weeks he has held 2 workshops in CYP & Culture to ensure that there is a joined up approach to Early Help within the dept. From this a proposal is being developed to support and strengthen the early help work that is currently going on in schools.

4.5 Priority 3: Alcohol & Substance Misuse

Paper provided

VM circulated the lunchtime learning fact sheet about Novel Psychoactive Substances for information. She explained that work is being taken forward to have an Early Warning System in Bury in line with other areas so that intelligence about NPS's can be shared and addressed using powers in new legislation coming into force in 2016. There will be an event on 10 December to raise awareness and launch the new early warning system.

Action: AN/LD to circulate info about NPS event

5. Network

LD advised that there had been over 150 people at the EHWP network event on 4 November which launched the Local Transformation Plan. Most members of the Board had also been there. The event had been a great success with a lot of information and services to build on in the work to meet the LTP. LD advised that a high quality recording of young people's voices had been put together by a young person/volunteer with Streetwise. Her work was so good that LD had discussed with MC whether she could be employed on a casual basis at future future network events if similar IT support is needed and MC has agreed. This was welcomed by the Board.

The next newsletter in January 2016 will focus on EHWP and aims to raise awareness about services who took part at the event, and also about many additional services who attended on the day.

LD reported that there has been a fall-off in attendance of the lunchtime service briefings, so these will now be held on an ad hoc basis when needed rather than every 4 months, and will be replaced by the monthly 1hr lunchtime learning slots which focus on how to provide early help around a range of important issues. The next lunchtime learning is on 18 November on E-safety and the impact of social media. A 1 page briefing on the subject will also be produced and will be on the Children's Trust website.

LD agreed to send attendance lists to partners so that they could assess attendance from their agencies.

Action: LD/All

6. Greater Manchester Devolution

Paper tabled

MC gave a detailed update on the proposal to fundamentally review the way that services for children are delivered across Greater Manchester as part of the Devomanc arrangements. This works is being supported by KPMG and is being led by the GM Directors Group, and build on outline proposals made as part of GMCA Comprehensive Spending Review submission.

The proposals include the recommendation that each area of GM will focus and specialize in one area of work and be commissioned by the other Authorities to deliver across GM, with each area undertaking Early Help work for itself. There are concerns about whether it is possible to implement such a fundamental change and whether it would benefit services. Association of Directors of Children's Services are working together to address this and there a number of workstreams of which MC is leading on the education & workskills stream.

It was noted that for some time now Authorities have been working together where it makes sense to share resources and build on good practice and this is leading to stronger services for children and young people.

MC advised that there are a number

The Board raised concerns, especially about proposals to bring services together across GM and the risk that as Bury services are generally high performing and low cost it is important that they mustn't be detrimentally affected.

Action: MC will keep Board updated

7. **Children's Trust Operational Group**

Most of the issues from CT Ops Group had been discussed within the Board meeting. However, it was noted that there had been discussion about ways to get useful information to the public around a range of issues affecting children and young people. It had been agreed that Peter Elton's slot in the Bury Times had been good practice in highlighting important public health information and VM had offered to speak to JH about the possibility of setting this up again.

Action: VM/JH

8. **Open Forum**

8.1 **CCG/SLA Single Commissioner for Health & Social Care** ML drew attention to the recent press release on this (paper circulated) and noted that the plan is not to have a single commissioner across all health and social care services, but focusing on those services where pooling budgets and planning/commissioning jointly will lead to better value services and better quality services.

8.2 **B3SDA – retirement of Derek Burke** See item 2.2. MC noted that DB has delayed his proposed retirement until March 2016 aligned to annual funding and reiterated his concerns re the future of B3SDA.

8.3 **Adolescents Conference** MC reminded partners that they have been invited to take part in the 'That difficult age' conference on 13 November, run by Research in Practice.

8.4 **H&WB Priority 1 Bi-annual progress report** The draft half-year progress report to H&WB Board against H&WB Strategy Priority 1 (for which C Trust reports to H&WB Board) was circulated for information.

9. **Any other business**

JH advised that the project managers for the Early Years new delivery model and for the Healthy School work are now in post.

10. **Items for next meeting**

JM will provide an update on Be Safe Be Cool to the next meeting (including evaluation). LD requested that this also come to the CT Ops Group.

Action: JM/LD

11. **Close of meeting**

The next meeting will be 3pm on 10 March 2016, in the ground floor conference room, 3 Knowsley Place.

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BURY INTEGRATED HEALTH & SOCIAL CARE PARTNERSHIP BOARD

21st April 2016
9am – 11am
Room A, Bury Town Hall

Present:	Pat Jones-Greenhalgh – Chair (PJG), Lesley Jones (LJo), Fiona Moore (FM), Howard Hughes (HH), Keith Walker (KWa), Karen Whitehead (KWh), John Wilkes (JW), Claire Wilson (CW)
In attendance:	Brett Nelson (BN)
Minutes:	Gill Cohen (GC)
Apologies:	Julie Gonda, Jayne Hammond, Linda Jackson, Margaret O'Dwyer, Mike Owen, Vicky Ridings.

Item	Agenda Item	Discussion	Action Agreed By Whom	By When
1	Welcome & Apologies	The Chair welcomed everyone to the meeting and apologies, as above were noted.		
2	Minutes and Matters Arising from previous meeting	The minutes of the meeting held on the 17 th March 2016 were approved as an accurate record.		

	17.0316	<p>Matters Arising:</p> <p>4.1. PJG advised that there is a joint meeting with the CCG and Local Authority looking at LCO's and One Commissioning entity. PJG to update at the next meeting. ACTION 1: Agenda item for 19th May 2016 meeting.</p> <p>4.2. FM advised that she had not anything in writing re Healthier Radcliffe. She is waiting for formal instructions around what is happening next and asked the group for a formal email so she has something tangible in writing. ACTION 2: CW to liaise with David Latham and will send formal correspondence to FM.</p> <p>5.1. There will be an overall GM review of the Locality Plans and the findings will be at the next meeting. ACTION 3: Agenda item for 19th May 2016 meeting.</p> <p>5.3. PJG is meeting with Heather Crozier regarding the 3 priorities from the Health & Wellbeing Strategy and will feed back any actions for the Partnership Board at the next meeting. ACTION 4: Agenda item for 19th May 2016 meeting.</p>	<p>PJG</p> <p>CW</p> <p>JG</p> <p>PJG</p>	<p>19.05.16</p> <p>19.05.16</p> <p>19.05.16</p> <p>19.05.16</p>
3	Action Log	Actions from the 17 th March meeting are all complete.		
4	ITEMS FOR DECISION			
4.1	Locality Plan Update: <ul style="list-style-type: none"> Self Assessment 	The GM Devolution Team have undertaken an assessment process to understand the current state of the implementations plans in localities, across GM. The Locality Plans are a critical element of the strategic delivery of the		

	<p>‘taking charge’ strategy and so Locality Plans must be robust, deliverable and innovative enough to deliver the transformation that will close the financial gap while improving outcomes.</p> <p>As part of the process, Localities were invited to submit a self –assessment by Wednesday 6th April. The outcome of the assessment process will be a dashboard. The proposed process for the GM team assessment was:</p> <ol style="list-style-type: none"> 1. A team of two will conduct the review by the 5th April. 2. A GM panel will consider each team assessment and agreed the locality dashboard. 3. A team and a representative from the GM panel will discuss the GM assessment against the locality self-assessment with a locality lead, prior to any dashboard being presented. <p>The Locality Plan Implementation Programme (LPIP) is approximately 60% complete, with 18 schemes yet to submit any information. Some of the schemes are also early on in the project lifecycle and will need further development and update when this information is available.</p> <p>A discussion took place around ‘parking’ some of the 42 schemes, or alternatively cluster some of them together. Priorities need to be considered; what are they? There is a workshop on the 18th May to look at the priorities, leads and capacity.</p> <p>ACTION 5: Feedback from the Locality Plan workshop (18/5/16)</p> <p>Of the 18 missing schemes, 9 of them are CCG led. CW advised that Sarah Bullock was leading on the majority of the schemes, however Sarah is leaving and alternative avenues need to be looked at to manage the process in a timely manner.</p>		
<ul style="list-style-type: none"> • Implementation Plan 		JG	19.05.16

		<p>ACTION 6: CW and HH will take this matter back to the CCG and discuss with Margaret O'Dwyer.</p> <p>ACTION 7: BN to circulate the gaps.</p> <p>Brett stated that partners were receiving copies of documents to comment on etc., and FM highlighted that the Federation had not received any of these documents.</p> <p>ACTION 8: BN agreed to sort this matter out for FM.</p>	<p>CW & HH</p> <p>BN</p> <p>BN</p>	<p>19.05.16</p> <p>ASAP</p> <p>ASAP</p>
4.2	BCF Draft Plan - Signoff	<p>BN advised that the BCF should be approved with no conditions; nothing major has changed between draft 2 and draft 3. The deadline has been extended by a week, now the 3rd May 2016.</p> <p>HH suggested that monthly reports should come back to this Board around the financial spend.</p> <p>ACTION 9: CW will discuss with JG. BN will liaise with David Goldstone and Helen Smith around the dashboard for all the metrics. The CCG will bring a joint report on a monthly basis.</p> <p>CW reminded the Board of the Section 75 legal agreement set up to share the risk between the two organisation. On reflection, the Section 75 is not as clear as it needs to be around the risk share agreement and therefore it would be helpful to retrospectively produce a Section 75, stating we will share gains and losses 50/50.</p> <p>ACTION 10: The Board agreed for the Section 75 Risk Share Agreement to come back to this Board for signoff.</p>	CW & BN	19.05.16

		<p>Further discussions took place around DTOC; it was agreed that we need reports on what is happening and to challenge papers at this group. Look at aspirations and delivery; what schemes have had the most impact on DTOC. Consider the 12 schemes and look at the action plan for the metrics and schemes.</p> <p>ACTION 11: BN to speak to PJG, JG and LJo to discuss previous work that seems to have slipped.</p> <p>The Board agreed it would be helpful to have the System Resilience Group (SRG) meeting notes at these meetings.</p> <p>ACTION 12: KW will bring SRG notes for information.</p>	<p>BN</p> <p>ASAP</p>	
4.3	BCF Plan for 16/17 Pharmacist in General Practice	<p>HH shared a paper from the Clinical Cabinet meeting on the 3rd February 2016, together with the subsequent meeting notes regarding Pharmacists in General Practice.</p> <p>The CCG Clinical Cabinet has approved the scheme and it is proposed that the required part-funding (the internal funding for year one) comes from the Better Care Fund. The part-funding for years 2 & 3 may also be appropriately delivered from the BCF but that would depend upon the pharmacists' workload.</p> <p>The funding will be used to recruit and employ 11 Clinical Pharmacists to support all practices across Bury, with the aim to:</p> <ul style="list-style-type: none"> • Improve patient safety • Ensure appropriate and efficient use of the prescribing budget, reducing spend where possible and managing overall spend as a minimum • Reducing NEL activity where medicines optimisation can prevent it, i.e. respiratory admissions • Freeing up GP time for other primary care activities. 	<p>KWa</p> <p>19.05.16</p>	

		The Board formally agreed to support the proposal.		
4.4	Staying well Recommendations Update	This will be discussed at the next meeting.		
5	ITEMS FOR DISCUSSION			
5.1	Neighbourhood Working Draft Memorandum of Agreement	<p>The draft Memorandum of Agreement was shared with the Board members for information and comments. We are now in a position to formalise the position taken.</p> <p>All Providers have worked on the Memorandum of Understanding and have endorsed the principals of it. A discussion was held around the lack of Pennine Acute involvement; although they are not a provider of out of hospital provision in Bury, they are in other areas and they need to be sited in this MOU going forward..</p> <p>ACTION 13: Provider group to get the engagement process going with Pennine Acute.</p> <p>No representation from Pennine Acute was at the meeting, however this will be addressed going forward.</p> <p>A discussion took place around the involvement of the Acute Trust and a suggestion was made to liaise with the new leadership going forward. The CCG agreed to bring this up at their Executive meetings.</p> <p>LJo added to bear in mind the voluntary sector too; need to involve them in early conversations.</p>	Providers	ASAP

	Provider Alliance	<p>PJG suggested to keep the landscape small; focus on what needs to be done when other agencies need to be involved.</p> <p>ACTION 14: KWa/FM to come back with some tangible suggestions on some 'quick wins' and what difference they will make. Keep as an agenda item for the next meeting.</p>	KW	19.05.16
6	ITEMS FOR INFORMATION ONLY			
6.1	SRO Meeting Notes	No notes for this meeting.		
6.2	AOB	<p>ACTION 15: PJG to send around the Draft GM Joint Commissioning Strategy. This will be discussed at the next meeting.</p> <p>The Board agreed with FM that papers for this meeting need to be distributed earlier.</p> <p>ACTION 16: It was agreed by all Board members to have the papers available <u>4 working days prior to the meeting.</u></p> <p>LJo advised about a 2 year project around collaborative commissioning between the CCG and the Local Authority. Looking at 0-19 year olds, however may consider an all age service in the future. LJo will bring back any relevant information at an appropriate time.</p> <p>Action 17: To update the P Board on the new service, prior to the business case & governance structure going to JCG & P Board for signoff.</p>	<p>PJG</p> <p>ALL</p> <p>LJo</p>	<p>19.05.16</p> <p>19.05.16</p>
6.3	Date & Time of Next	19 th May 2016 9am – 11am	Room 0.1, Ground Floor, Knowsley Place	

	Meeting			
6.4	Agenda Items for Next Meeting 19.05.16	<ul style="list-style-type: none"> ➤ Governance Structure around Neighbourhood Working (LJa) ➤ Section 75 – Risk Share Agreement Signoff (CW) ➤ One Commissioning Body Draft Document, Feedback from GM Working Group (PJG) ➤ Neighbourhood Working – Draft Memorandum of Agreement (LJa) ➤ Better Care Fund Internal Audit Report (CW) ➤ Better Care Fund Monthly Report – Financial Spend (CW/JG) ➤ BCF Action plan by metrics/scheme and Dashboard (JG/BN) ➤ Staying well Recommendations Update (LJa/LJo) ➤ Urgent Care & Delays Discharge ➤ Feedback from Locality Plan Workshop, 18th May (JG) ➤ GM review of the Locality Plans findings (JG) ➤ GM Joint Commissioning Strategy – Draft (PJG) ➤ Feedback Partnership Board Priorities 2, 3 & 4 within the H&WB Strategy (PJG) ➤ Feedback from GM meetings (PJG) ➤ SRO meeting notes (JG) ➤ System Resilience Group (SRG) meeting notes (KW) 		

CARBON REDUCTION/CLIMATE CHANGE BOARD THURSDAY 25 FEBRUARY 2016

ACTION NOTES

PRESENT: Pat Jones-Greenhalgh, Neil Long, Dominic Pooler, Chris Horth, Martin Stott, Paul Cooke, Sharon Hanbury, Alex Holland

APOLOGIES: Lorraine Chamberlin, Paul Webb, Lesley Jones, Clinton Judge

Item No	Discussion	Action Agreed	By Whom
1	<p>Notes of Last Meeting – 25th November 2015</p> <p><u>Sustainability Criteria for New Build</u> Sharon still has to pull together a Task and Finish Group; however, she has identified the people who need to be involved.</p> <p><u>Office Recycling</u> A briefing note was attached at the foot of the minutes and Neil advised the meeting that Talat was progressing well with the project. Alex asked to be kept informed around this piece of work in terms of 3KP and what the suggestions would be.</p> <p><u>Low Carbon Hub Environment Liaison Group Meeting</u> Neil to follow up this action point. Alex informed the meeting that things were now going at a pace and that the Wider Leadership Team will be approving a Governance structure. There is a strong emphasis on Devolution and trying to bring in blue light services by One Public Estate.</p> <p><u>LED Street Lighting</u> Neil advised that all parks and countryside areas are now a part of the LED Street Lighting Scheme. Currently looking at lighting outside schools and around Six Town Housing localities. Paul advised that where schemes are being developed within Children's Services they will try and build LED street lighting</p>	<p>Sharon to progress and update</p> <p>Neil to advise Alex</p> <p>Neil to progress</p>	

Item No	Discussion	Action Agreed	By Whom
	<p>into the work, however it is an expensive process and would be prohibitive. Chris said that we now need to be looking at our own proprieties especially around lighting and electrical circuits. Pat asked who could pilot a business case. After discussion, Alex agreed to develop a business case and feedback to the next meeting.</p> <p>The notes were agreed as a correct record.</p>	Alex to develop a group and bring back to the next meeting	
2	<p>CRC Risk Register</p> <p>Chris advised that an error had been made in the forecast charges and the Council was due a refund of £6750.00.</p> <p>The Council had successfully completed external audit and the CRC Working Group will resume in March 2016.</p>		
3	<p>Low Carbon Hub Environment Liaison Group Meeting</p> <p>No update was provided as there had not been any recent meetings. The Council had submitted comments on the implementation plan and Chris advised that whilst it touched on air quality, it did not seem fully integrated. Nothing has been heard since submitting our comments.</p>		
4	<p>District Heat Network/RE:FIT Retrofit Scheme</p> <p>There is a proposal to combine two of our main projects, namely:</p> <ul style="list-style-type: none"> REFIT project to retrofit energy efficiency measures to 5 of our buildings <p>Bury Town Hall Bury Adult Learning Centres Bury Library and Museum</p>		

Item No	Discussion	Action Agreed	By Whom
	<p>Castle Leisure Centre Whittaker Street Offices</p> <ul style="list-style-type: none"> Heat Network Feasibility Study – we have received £44k from DECC to carry out a feasibility study for a heat network in Bury Town Centre, looking at supplying initially Knowsley Place, Bury Town Hall, Bury Adult Learning Centre, the Library and Museum and Castle Leisure Centre. <p>The two projects have strong links in relation to the buildings involved. Successful co-ordination and delivery of these two schemes could see considerable benefits delivered to Bury Council, both through the capital works and access to delivery resource/support.</p> <p>To progress the REFIT project it would be beneficial to access a resource to help with the procurement and technical input. This work could cost circa £30k and without this assistance it could be very difficult to take this scheme to delivery. If we combine the energy efficiency works with the Heat Network project we could access ELENA funding, to fund 90% of the cost of the procurement, commercial and technical input needed to deliver the energy efficiency scheme. The danger could be that the Heat Network Feasibility suggests that the heat network is not feasible. If this happens then the refit scheme will have been delayed 3 months and we would have to find the resource for the procurement and technical assistance we need to deliver the scheme – circa £30k. If we combine the two projects and The Heat Network Feasibility will be completed in July 2016, this shows the network is a good idea and we can then commission energy audits of the building and commission consultants to develop a detailed strategic business case for EE and heat network and then look at options for procurement in July to December 2016.</p> <p>Work has been carried out on the tender document for the last six months aiming to allow companies to tender for the maximum cost of measures to be put in place. The invitation to tender document is almost complete. The</p>		

Item No	Discussion	Action Agreed	By Whom
	<p>Council will get proposals for savings and measures and will then appoint. If we go ahead it will cost £1m through invest to save. If we pull out we will have to pay the costs to the company who carried out the details work, which is a low risk. Chris confirmed that the Council had political sign off on the project via an Operational Decision. Alex to appoint someone to project manage the process.</p> <p>ARAB is looking into the technical and financial feasibility. They had met with GMCA who think it will be best to bring the two projects together. However, there are risks involved in this.</p>	Alex to progress	
5	<p>Nissan Electric Car Workplace Scheme</p> <p>Health and wellbeing Strategy has an objective to reduce emissions from transport and an indicator that looks at the usage of local charging points. In connection with this, a colleague from Salford sent some information on Nissan's Workplace Scheme which offers an all electric Nissan Leaf at discounted rates to employees and their families. In Salford the scheme has been very successful resulted in 13 employees purchasing Leafs. A meeting was held with Luke Hebden from Westway Nissan and Matt Downs from Nissan UK a couple of weeks ago. They both drive Nissan Leafs and were able to tell us about the car and the experience of operating an all electric vehicle. The range is around 90-100 miles on a full charge which is probably enough for most journeys for most people. A full charge at home overnight would cost about £2.50 so the cost of running the car is 2.5 pence per mile. The car has a sat nav which advises of your range and the position of all local charging stations. Most motorway services now have rapid chargers which allow you to charge in 20-30 minutes. These provide free electricity. The deal that Westway are offering is a Personal Contract Purchase which involves an initial deposit of £199 and then 36 monthly payments of £199 followed by an optional final payment of £10,500. Most people won't pay that final payment but may take up a further PCP for a new Leaf. This deal is even better than the deal they offered Salford so hopefully we will get a good take up. Looked at the car and it is a good size</p>		

Item No	Discussion	Action Agreed	By Whom
	<p>family saloon. In Bury we have 7 charging points that can charge two cars each. Currently the electricity is free and parking is free at the stations. As an extra incentive would be to offer free parking for all 100% electric vehicle in Bury so that cars that do not need charging and are not tempted to occupy the charging bays in order to get free electric. People at the meeting were in favour of this deal and Pat asked if this item could go to a future SLT meeting. Paul advised that there were alternative options through the Pennine Acute Car Lease Scheme. Paul also advised that the Council need to consider making arrangements for charging points on Council sites. Sharon advised that there is no risk to the Council in encouraging this and there is no reason why staff should not have more than one option to consider. Chris to take the matter forward with Corporate HR.</p>	Chris to progress	
6	<p>Update of Health and Wellbeing Strategy Priority 5 – Healthy Places</p> <p><u>Draft Adaptation Framework</u></p> <p>Our Health and Wellbeing Strategy has an objective to engage the public and third sector partners to gather information and share best practice regarding mitigating and adapting to climate change. This is an area of activity we have neglected due to limited staff resource. Recent events have raised the importance of this area of work. We are the only GM council to have this in our health and wellbeing strategy and therefore we were approached by Climate UK and the Environment Agency to help them to develop a matrix to measure how prepared we to address the impacts of climate change on health. Climate UK have worked with the EA to develop a matrix which looks at the government actions in the national Adaptation Programme and boils this down to local actions on a GM level and the at a local level. The matrix measures and combines Government, GM and local council action to give a percentage level of preparedness. Looks like a good tool to identify where we are and what actions we need to develop. We have just been consulted on the matrix and felt that it needed to add some more on the role of development control and strategic planning. Chris is linking with Matt Ellis for the EA to add these actions with</p>		

Item No	Discussion	Action Agreed	By Whom
	<p>appropriate mechanism for measuring success.</p> <p><u>GM Clean Air Zone Feasibility Study</u> Air Quality Management Area - In GM we work together on local air quality issues and recently we have carried out an updated assessment of our air quality using computer modelling software. The modelling software will show the areas that are not likely to meet Government and EU targets. The areas not predicted to meet targets will be declared our new Air Quality Management Areas. The modelling is suggesting that there are areas of our region that are not likely to meet targets for nitrogen dioxide. The modelling software we use is very accurate however there is always some degree of uncertainty re the results. When we define our Air Quality Management area we have in the past built in a level of precaution. The target that we won't meet is for Nitrogen dioxides annual mean of 40 ug/m3. In the past we have declared the AQMA at all areas which are predicted to be 35ug/m3 or above. This allows for any inaccuracies of the model and takes a precautionary approach. This time there was a debate regarding whether we should set the AQMA boundary nearer to the actual objective i.e. at 37ug/m3. Manchester's Mayor and Howard Bernstein felt we should stick with the 35ug/m3 level and therefore this is what we are proposing and will be taken to Wider Leadership Team.</p> <p><u>Clean Air Zone</u> TfGM have been awarded £100,000 from Defra to carry out a Clean Air Zone feasibility study for Greater Manchester. First phase of the study will look at 3 geographical areas:</p> <ul style="list-style-type: none"> • Inner Ring road • Outer Ring road – M60 • AQMA <p>Study will look at the possible health benefits of each approach. The zone is likely to target taxis, coaches, buses and lorries and encourage the use of</p>		

Item No	Discussion	Action Agreed	By Whom
	<p>cleaner vehicles and therefore improve air quality across Greater Manchester. TfGM are doing the modelling of the scenarios and a consultant will be employed to write the report. Five cities in England are being enforced to implement such a zone by 2020 - Leeds, Birmingham, Nottingham, Derby and Southampton.</p> <p>A new document will be published by PHE on 23 February 2016 called "Every Breath We Take". This document will highlight the link between air pollution and risk to health and may generate interest and enquiries to Local Authorities. Recently been asked for possible MSc projects for Salford University Students – it was suggested that students could look into this link for Bury and assess the likely impact of a scheme to send warnings to those with respiratory problems regarding poor air quality.</p> <p>Sharon reported that housing is now a part of the new priority 5 of the Health and Wellbeing Strategy. Lots of work is currently being undertaken. It was agreed that reports come to this meeting first before going to the Health and Wellbeing meeting. There was a question about getting a report to this meeting before the next Health and Wellbeing Board meeting. Sharon is also looking ways of making the document more interesting and will feed back at the next meeting.</p>	<p>Sharon to look into</p> <p>Sharon to action</p>	
7	<p>Other Business</p> <p><u>Bury Times Article</u> This item needs to be linked up with Cllr Shori around wind farms. Chris to provide a briefing and then it can be noted.</p>	<p>Chris to action</p>	
	<p>Date and Time of Next Meeting:</p> <p>Wednesday 6th April 2016 at 10.30am in Meeting Room A, Town Hall</p>		

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DEPARTMENT FOR COMMUNITIES & WELLBEING



MINUTES OF HOUSING STRATEGY PROGRAMME BOARD HELD ON WEDNESDAY 26th January 2016

Present: Steve Kenyon – Interim Director of Resources and Regulation (Chair) **SK**
 Emma Joos – Administrative Support Officer, Corporate Policy, Department of Communities and Wellbeing (Minutes) **EJ**
 Marcus Connor – Corporate Policy Manager, Department of Communities and Wellbeing **MCC**
 Sharon McCambridge – Chief Executive of Six Town Housing **SMC**
 John Merrick – Director of Neighbourhoods, Six Town Housing **JM**
 Emma Richman – Director of Assets, Six Town Housing **ER**
 Tracey Hunt – Financial Services Business Manager, Six Town Housing **TH**
 Harry Downie – Assistant Director of Business Re-Design & Development, Department of Communities and Wellbeing **HD**

ACTION

1.0	Apologies:	
1.1	Pat Jones Greenhalgh – Executive Director of Communities and Wellbeing PJG	
1.2	Sharon Hanbury – Head of Urban Renewal, Department of Communities and Wellbeing SH	
1.3	Karen Young – Head of Inclusion, Department of Communities and Wellbeing KY	
1.4	Cllr Rishi Shori – Deputy Leader of the Council, Cabinet Member for Finance & Housing RS	
2.0	Minutes of 16th December 2015 Meeting:	
2.1	The minutes of the meeting, held on Wednesday 16 th December 2015 were approved as a correct record.	
3.0	Matters Arising:	
3.1	Item 4.2 A report will be brought back to HSPB in May 2016 covering the findings of the impact assessment of Universal Credit.	JM
3.2	Item 5.2.1.2 No further update on the new extra care scheme, however, a report is to be brought back to a later HSPB meeting on progress.	ER
4.0	Items for Decision:	
4.1	a) <u>New Items</u>	
4.1.1	i) <i>Garage Site</i> – ER	
4.1.1.1	A discussion took place around the redevelopment of a garage site by	

ACTION

<p>4.1.1.2</p> <p>4.2</p> <p>4.2.1</p> <p>4.2.1.1</p> <p>4.2.1.2</p> <p>4.2.1.3</p>	<p>Six Town Housing. The proposal will result in the provision of eight new homes for affordable rent.</p> <p>SK to liaise with TH to finalise details of the proposal and will get back to MCC to provide further updates to HSPB.</p> <p>b) <u>Existing Items</u></p> <p>i) <i>STH Performance Targets - ER</i></p> <p>As part of the annual business planning process Six Town Housing shares their proposed performance indicator targets for the coming year with HOB and HSPB, they are then approved by STH Board.</p> <p>MCC confirmed that HOB had seen and approved these and he had had separate discussions to finalise the information presented to HSPB.</p> <p>HSPB agreed the proposed targets for 2016/17.</p>	<p>SK</p>
<p>5.0</p>	<p>Information Briefs:</p>	
<p>5.1</p> <p>5.1.1</p> <p>5.1.1.1</p> <p>5.1.2</p> <p>5.1.2.1</p>	<p>a) <u>Existing Items</u></p> <p>i) <i>HOB Action Plan to HSPB- MCC</i></p> <p>MCC provided HSPB with a summary of items discussed at the last HOB.</p> <p>ii) <i>G & T Site - ER</i></p> <p>ER presented a report highlighting planned works on the site.</p>	
<p>6.0</p>	<p>Date of Next Meeting Wednesday 24th February 2016, 1.00pm – 2.30pm Lancashire Fusiliers Room, 1st Floor, Town Hall</p> <p>However, it was noted that the date of this meeting may result in it being cancelled or rearranged. EJ to provide HSPB with updates nearer the time.</p>	