

Locality Board

MINUTES OF MEETING

Locality Board

Meeting in Public

5th June 2023

4.00 pm until 6.00 pm

Chair - Dr C Fines

ATTENDANCE

Voting Members

Dr Cathy Fines, Associate Medical Director (Chair)

Cllr Tamoor Tarig, Executive Member of the Council for Health and Wellbeing

Cllr Lucy Smith, Executive Member of the Council for Children and Young People

Mr Warren Heppolette, Chief Officer for Strategy and Innovation (GMIC)

Ms Lynne Ridsdale, Place Based Lead

Dr Vicki Howarth, Medical Director, NCA

Dr Kiran Patel, Medical Director, IDCB

Ms Joanna Fawcus, Director of Operations, NCA

Mr Donan Kelly, Chief Officer, Pennine Care Foundation Trust

Ms Catherine Jackson, Senior Nurse Lead for the Borough

Ms Helen Tomlinson, Chief Officer, Bury VCFA (Voluntary, Community, Faith & Social Enterprise)

Ms Sophie Hargreaves, Chief Officer, MFT

Mr Will Blandamer, Deputy Place Based Lead, Executive Director of Health and Care

Ms Sam Evans, Joint Executive Director for Finance

Non-Voting Members

Ms Jeanette Richards, Director of Children's Services

Mr Jon Hobday, Director of Public Health

Mr Adrian Crook, Director of Adult Social Services and Community Commissioning

Mr David Thorpe, Director of Nursing, Bury Care Org (NCA)

Invited Members

Cllr Russell Bernstein, Conservative Opposition Party

Ms Karen Richardson, Deputy Director of Commissioning, ICB

Ms Catherine Tickle, Commissioning Programme Manager

Mr Mark Beesley, Chief Officer - Bury GP Federation

Ms Philippa Braithwaite, Democratic Services, Bury Council (Minutes)



MEETING NARRATIVE & OUTCOMES

1	Welcome, Apologies And Quoracy
1.1	The Chair welcomed all to the meeting.
1.2	Apologies were received from Jacqui Dennis and Kath Wynne Jones.
1.3	The meeting was declared quorate and commenced.

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2	Declarations Of Interest			
2.1	NHS GM has responsibilities in relation to declarations of interest as part of their governance arrangements (details of which can be found outlined in the NHS Greater Manchester Integrated Care Conflict of Interest Policy version 1.2).			
2.2	NHS GM (Bury Locality) therefore, has a requirement to keep, maintain and make available a register of declarations of interest for all employees and for a number of boards and committees.			
2.3	The Local Authority has statutory responsibilities detailed as part of Sections 29 to 31 of the Localism Act 2011 and the Relevant Authorities (Disclosable Pecuniary Interests) Regulations 2012. For other partners and providers, we understand that conflicts of interest are recorded locally and processed within their respective (employing) NHS and other organisations as part of their own governance and statutory arrangements too.			
	Taking into consideration the above, a register of Interests has been included deta Interests for the Locality Board.	ailing Declaration of		
2.5	In terms of agreed protocol, the Locality Board members should ensure that they declare any relevant interests as part of the Declaration of Interest Standing item on the meeting agenda or as soon as a potential conflict becomes apparent as part of meeting discussions.			
2.7	The specific management action required as a result of a conflict of interest being declared will be determined by the Chair of the Locality Board with an accurate record of the action being taken captured as part of the meeting minutes.			
2.8	There is a need for the Locality Board members to ensure that any changes to their existing conflicts of interest are notified to NHS GM (Bury Locality) Corporate Office within 28 days of a change occurring to ensure that the Declarations of Interest register can be updated.			
2.9	Declarations of interest from last meeting held on 3 rd April 2023 No declarations to note.			
	Declarations of interest from today's meeting 5th June 2023 None to declare other than what was detailed on the Declarations of Interest register submitted within the meeting pack.			
ID	Type The Locality Board	Owner		
D/06/01				

3	Minutes Of The Last Meeting And Action Log		
3.1	The minutes from the Locality Board meeting held on 3 rd April 2023 were considered as a		



Owner

			PARTNERSH	IP
	true and accurate reflection of the meeting.			
3.2	In regard to the outstanding actions, these was confirmed as closed as Board Members had shared the GM Primary Care Blueprint within their networks, and information regarding the PWC report was included in updates later in the agenda.			
ID		Туре	The Locality Board	Owner
D/06/02	<u> </u>	Decision	Accepted the minutes from the previous meeting as a true and accurate reflection of the meeting and agreed the outstanding actions could be closed.	
4	Public (Question		
4.1	There w the mee	ting.	ic questions received and one member of the public was	
ID		Туре	The Locality Board	Owner
D/06/03	}	Decision	Noted that there had been no public questions received and one member of the public was present at the meeting.	
5	Place B	ased Lead	Undate	
5.1	Ms Lynne Ridsdale introduced her item which covered a wide range of updates but could be characterised into two main themes: that of staffing and workforce, and planning and performance. She advised that the ICS consultation had now closed and implementation would now take place, thanking Will Blandamer for his support to the NHS GM (Bury) team during this challenging time. She also congratulated Joanna Fawcus on her appointment as Chief Operating Officer of Bury Care Organisation in the NCA.			
5.2	Ms Ridsdale advised of updates locally and across GM and welcomed Warren Heppolette's later item on the Joint Forward Plan. She reported that GM was now classified as a Tier 1 area for its Urgent Care Performance, based on indicators such as A&E waits and ambulance response times. This also meant we would be offered the highest level of support, advice, and guidance.			
5.4	Locally there was strong performance across our programmes of work and progress was strategy translating to operational proposals. The IDCB was leading on work to identify two or three key priorities for each of the 11 programmes of work, and Ms Ridsdale advised that the challenge remained for the Locality Board to strengthen the narrative around what its priorities are and where its focus could be of the most benefit.			
J.4	Members discussed this challenge, noting the need for a shorter term roadmap aligned within a longer term system financial plan, and agreed quarterly reporting of progress alongside objectives and targets. Members spoke of the importance of workforce and for any priorities to be digestible and understandable at all levels of the system. Members noted the need for long term impact, not just the issues currently being faced, and agreed that the Board needed to retain a line of sight on the breadth of the health and care system in order to understand its interdependencies as well as clarifying its priority areas.			

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6	Chief Officer's Undate Report	
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Type

Decision

6.1 Mr Will Blandamer introduced this item on behalf of Kath Wynne Jones which provided an update on the development programme for the IDC and progress with the delivery of

The Locality Board

Received the update.

D/06/05



programmes across the Borough. 6.2 Mr Blandamer advised that work had continued to mobilise new arrangements for programme leadership with SRO's and Clinical Leadership, and to identify capacity available to support the various programmes of change. At the IDC meeting in May, the Board received four deep dive presentations on the Mental Health Programme, the graduated approach in SEND, Urgent Care, and the Primary Care programme. Mr Blandamer also advised that an engagement event was scheduled for 21 June to support further connectivity and communication and ensure that programmes of change that meet local, GM and national requirements were being delivered in a coordinated way, reflective of national guidance. 6.3 Members noted the updated and congratulated the IDC on the breadth of work and positive outcomes. ID Type The Locality Board Owner Received the update. D/06/06 Decision

7 GM QIPP: Finance, Performance and Outcomes Standards 2023/24

- 7.1 Mr Will Blandamer presented the agenda item regarding the Bury Locality Finance, Performance and Outcomes Standards 2023/24 submission made to NHS Greater Manchester on the 19th May 2023. It was noted that these trajectories will be monitored on a monthly basis as part of the performance report received by the IDC Board, and they would receive in depth scrutiny through the following governance routes:
 - Elective Care Programme Board: Outpatient Referrals;
 - Urgent Care Programme Board: A&E Attendances, Non-Elective Admissions and No Criteria To Reside patients;
 - Mental Health Programme Board: Mental Health Out of Area Placements and Clinically Ready for Discharge patients;
 - Bury Locality Savings Group: QIPP.
- 7.2 Mr Blandamer advised that this was part of the NHS GM response to the PWC analysis, with each of the 10 localities invited to make submissions indicating targets on key metrics. The programme selected for Bury that are intended to contribute to the achievement of the overall targets are those which have seen good practice or a system-way of working and targets were considered achievable.

ID	Туре	The Locality Board	Owner
D/06/07	Decision	Endorsed the submission made and supported the	
		proposed approach to manage delivery.	

8 Elective Care and Cancer Recovery and Reform

8.1 Ms Karen Richardson and Ms Catherine Tickle presented the item, providing an overview of the GM Elective Care Recovery and Reform Programme, which facilitated faster pathways for patients, improved patient experience and reduced the overall size of the elective waiting list, and highlighted some examples of work including respiratory, gynaecology, dermatology and paediatric services.

The Board discussed the presentation, noting the widespread support for the approach and drawing attention to patient voice and experience, and Members discussed the importance of delivery, regardless of where services would traditionally be delivered from. Examples mainly stemmed from joint working with NCA colleagues, and it was noted that similar conversations to facilitate shared understanding were taking place with MFT colleagues. This would ensure confidence that the same standard of care was being delivered across the locality, regardless of provider.

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		The Locality Board	
D/06/08	Decision	Received the update and noted the detailed work that	

8.2



had been undertaken.	

9	Joint Forward Plan
9.1	Mr Warren Heppolette presented the draft Joint Forward Plan. This was the delivery plan for the Integrated Care Partnership Strategy and was based on its six missions; the actions to deliver them; the measures for tracking delivery; and where accountability is held.
9.2	
9.2	 Board Members discussed the Joint Forward Plan, raising the following points: Connecting localities would enable sight of best practice across GM and implementation elsewhere; less about scale and more about right methods for supporting spread of best practice. Metrics for monitoring success to drive activity but challenge as to whether they were the right metrics to support the delivery of services in a different way. Also noted that metrics were not necessarily meaningful to those they represented. These metrics would be further developed to enable interdependencies between them and to highlight when producing unwelcome outcomes in the system. Noted the lack of a shared view across the system, and how this affects the balance of resources. Consistent metrics and delivery through every Locality Board – aim for this to drive system performance and course correction across GM but able to provide meaningful outcomes for localities and specific populations.
	 Financial operation on a system level hampered by continuation of individual contracts; those in place to provide ability to address issues on a neighbourhood level - don't want to remove agency from individual teams but still want to be able to move resources around to address need.
9.3	 Further clarity over Core 20 PLUS; focus on health inequalities and driving understanding of which populations are facing barriers to treatment. Noted that support needed not just for those with vocal demand but also populations that are less able to advocate as successfully.
J.5	The Chair advised that these discussions would continue, and reminded the Board that the draft plan was open for consultation until30th June. It was agreed Will Blandamer would submit a response to the Forward Plan based on the discussion in the meeting to date.
ID	Type The Locality Board Owner
D/06/09	
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10	System Finance Group Update
10.1	Ms Sam Evans advised that this update provided the National and GM context, and locality focus would be given at the next meeting. This update set out the position both pre- and post-Covid and covered the changes to the funding regime during that time. It was noted that 22/23 outturn produced a balanced budget, but this left no flexibility for 23/24.
10.2	
10.3	After multiple deficit positions submitted to NHS England which were not accepted, a further submission was made with a deficit of £45m, which was to be supported to deliver a break even position through retention of surge funding £19m and NHS England support £26m. This was deemed to be acceptable by NHS England but no guarantees were given on the retention of the £19m and £26m. Within this position there was an assumed savings delivery of £400m and a system risk of £115m, which has since increased to £130m due to a shortfall on inflation funding to be received and other risk mitigations.
	Ms Evans advised that the delivery of this plan will be incredibly challenging, both in



terms of financial delivery and concerns with regard to	performance against other
metrics, and to this end the CFO of NHS England plans	s to visit NHS GM organisations in
June to understand these plans in greater detail and re	eceive greater assurance on
delivery.	

ID	Туре	The Locality Board	Owner
D/06/10	Decision	Considered the information within this paper, the level of savings required for NHS GM to deliver a break even position in 2023/24 and the risks to delivery and noted that a Bury locality position will be brought to the next meeting, encompassing NHS partners and the council.	

11	System Assuranc	e Committee update				
11.1	Ms Catherine Jackson provided at update form the most recent Partnership System Assurance Committee meeting, which had reported an increased performance for Learning Disability Annual Health Checks and options for future resilience utilising Additional Roles Reimbursement Scheme (ARRS) resources being pursued with Bury Primary Care Networks. Ms Jackson also advised of three awards to Persona, Gorsey Clough Nursing Home, and to Bury Council. With regards to the Greater Manchester Quality Strategy, it was noted this was still going through governance routes. Members discussed health checks, noting that Quality and Outcomes Framework (QOF)					
	waiting lists were back on target, while data on checks for over 40s was being verified and work to deliver checks outside primary care was in development.					
ID	Туре	The Locality Board	Owner			
D/06/11 Decision Received the update.						

12	Strategic Workforce				
12.1	Mr Will Blandamer presented the update on ongoing workforce initiatives including system wide organisation development and producing the Bury workforce strategy, and thanked Kat Sowden, Managing Director at Persona Care and Support, for taking forward the SRO role for workforce.				
ID	ID Type The Locality Board Owner				
D/06/12	D/06/12 Decision Received the update.				

13	Population Health & Wellbeing				
13.1	Mr Jon Hobday presented the update on the work of the Health & Wellbeing Board (HWBB) and Population Health Delivery Partnership. He advised that at their last meeting, the HWBB had discussed the Anti-Poverty Strategy update, Age Well Agenda, Screening Programmes update, Public Sector Reform - Improving Adult Lives, Serious Violence Duty, and Joint Strategic Needs Assessment (JSNA).				
13.2	In response to a query, Mr Hobday advised that figures on newborn hearing screenings were being looked into.				
ID Type		Туре	The Locality Board	Owner	
D/06/13	D/06/13 Decision		Noted the update.		

14	Performance Framework
14.1	Mr Will Blandamer presented the performance update, which provided a high level summary
	as well as the detailed analysis underneath. It was noted that the Joint Forward Plan
	would change the nature of this reporting in future meetings.



ID	Type	The Locality Board	Owner
D/06/14	Decision	Noted the update.	

15	PCCC Chair's Highlight Report					
15.1		•	esented the Primary Care Commissioning Committee hig decisions made.	hlight report,		
ID	Type The Locality Board Owner			Owner		
D/06/15 Decision Noted the update.						

D/ 00/ 13)	Decision	Noted the apaate.			
16	Clinical	& Profess	ional Senate			
16.1	Dr Kiran Patel gave a verbal update on the work of the Clinal and Professional Senate, including discussions regarding:					
	p	ractitioners	•			
		low the cha taff;	allenging financial position could and should be translate	d to frontline		
	 Gender diversity and accessing existing expertise to improve outcomes for gender diverse patients; 					
16.2	Clinical leadership and the impact of locality.					
It was noted that the difficulties around ADHD were being considered by the IDC and the ICB Board. This was a serious risk for us and for patients, and this had therefore been escalated.						
ID		Туре	The Locality Board	Owner		
D/06/16	5	Decision	Received the update.			

17	GP Leadership Collaborative - NHS GM Primary Care Blueprint					
17.1	Mr Mark Beesley presented the NHS GM Primary Care Blueprint which set out nine key areas setting out a vision for a Greater Manchester Primary Care system. It was noted that feedback was requested by the end of June, and Mr Beesley offered to collate this for the Locality Board.					
17.2	It was agreed that this come back to a future meeting for further, detailed discussion.					
ID	Type The Locality Board Owner					
A/06/01 Action Agreed that this item come back to a future meeting Mark Bern for further discussion.				Mark Beesley		

18	Any Other Business					
18.1	There was no other business to report. The Chair advised that a workshop style meeting would be arranged to discuss system pressures and priorities in more detail, and she formally closed the meeting in public at 18.03.					
ID	ID Type		The Locality Board	Owner		
D/06/17 Decision		Decision	Noted that there was no other business to report and the meeting in public was closed at 18.03			
A/06/02 A		Action	Agreed that a workshop style meeting be arranged to discuss system pressures and priorities in more detail.	Will Blandamer		



Locality Board Action Log

Status Rating

In Progress

- Completed

Title	Action	Lead	Statu s	Due Date	Update
A/06/01	Bring the NHS GM Primary Care Blueprint back to a future meeting for further discussion.	Mark Beesle y			
A/06/02	A workshop style meeting be arranged to discuss system pressures and priorities in more detail.	Will Blanda mer			