

**Minutes of: HEALTH AND WELLBEING BOARD**

**Date of Meeting:** Monday 21<sup>st</sup> October 2019

**Present:** Councillor David Jones, Leader of the Council, Interim Executive Director Communities and Wellbeing, Julie Gonda; Cabinet Member Health and Wellbeing Andrea Simpson (Chair); Councillor Roy Walker, Opposition Member, Health and Wellbeing; Healthwatch Chair, Barbara Barlow; Director of Public Health, L Jones; representing Northern care alliance, Steve Taylor.

**Also in attendance:** K. Batt, Independent Chair Bury Safeguarding Board.  
Mandy Symes, Head of Adult Safeguarding, Bury Council  
Nicky Parker, Programme Manager, Bury CCG  
Margaret O'Dwyer, Deputy Chief Officer, Bury CCG  
Chris Woodhouse, Executive Officer, Bury Council  
Representing K Dolton, Tony Decrop, Assistant Director, Safeguarding.  
Julie Gallagher – Democratic Services

**Apologies:** Chair, Bury Clinical Commissioning Group, Dr Jeff Schryer);  
Geoff Little, Chief Executive  
D Lythgoe, Pennine Care NHS Foundation Trust  
V Hussain, GMFRS

**Public attendance:** 1 member of the public was in attendance

---

**HWB. DECLARATIONS OF INTEREST**

Councillor Simpson declared a personal interest in all matters under consideration as an employee of the NHS.

**HWB. MINUTES OF PREVIOUS MEETING**

**It was agreed:**

The minutes of the meeting held on the 17<sup>th</sup> July 2019 be approved as a correct record.

**HWB. PUBLIC QUESTION TIME**

There were no questions from members of the public present at the meeting.

*Nb; Further to the published agenda the Chair agreed that the agenda would be re-arranged the Bury System Urgent Care Review and Re-design Brief would be considered first.*

## **HWB. BURY SYSTEM URGENT CARE REVIEW AND RE-DESIGN BRIEF**

Margaret O'Dwyer and Nicky Parker, Bury CCG, attended the meeting to provide members with an update of work being undertaken with regards to the Urgent Care Review. The report proposed a number schemes and service reviews for prioritisation and development in 2020-21 based on work undertaken to date and discussions at the Clinical Cabinet and Professional Congress.

Those present were invited to ask questions and the following issues were raised:

Responding to a Member's question the Deputy Chief Executive reported that the proposals will be discussed at a number of fora, there will be opportunities for Elected Members to inform and develop the re-design brief as it progresses. The Programme Manager reported that the urgent care review timeline will be as follows; during November work will be undertaken to ascertain urgent care best practice looking in particular at schemes in neighbouring authorities. A report including details of the urgent care future model will be considered at the Strategic Commissioning Board in December; public consultation will commence in January 2020 with a view to commence implementation in March 2020.

The Chair reported that the current urgent care system is complicated and difficult for patients to navigate. The proposals must include a clear patient pathway and information and communication on when, where and how to access services.

Steve Taylor, representing the Northern Care Alliance reported that it is imperative that the work to redesign the urgent care system is undertaken in conjunction with the intermediate tier review.

The Deputy Chief Officer, Bury CCG reported that the use of technology is critical to the success of this work.

### **It was agreed:**

The Bury System urgent care review and re-design brief will be a standing agenda item.

## **HWB. ADULT SAFEGUARDING BOARD ANNUAL REPORT**

K. Batt, Independent Chair Bury Safeguarding Board and Mandy Symes, Bury Council, attended the meeting to provide members with an overview of the work undertaken in the last twelve months. The Annual Report circulated to members in advance of the meeting provided information in respect of:

- Safeguarding activity
- Greater collaboration
- Details of meetings and work undertaken during 2018/19

- Plans for 2019/2020
- Data in respect of deprivation of liberty orders.

Two key measures were chosen by the Safeguarding Adults Board in order to monitor progress and development. Firstly, "The number of adults being abused is reducing" and secondly "The number of repeat incidents is reducing". With respect to the first measure the numbers have reduced from 413 in 2017/18 to 227, in 2018/19. Of the 442 adults supported via a safeguarding enquiry in 2018/19, 107 also had a safeguarding enquiry within the previous 12 months prior. Compared to 116 in 2017/18.

Those present were invited to ask questions and the following issues were raised:

Members discussed the failure of the Community Rehabilitation Company and the national Probation Service to attend meetings of the Adults Safeguarding Board. The Head of Adult Safeguarding reported that on an operational level staff are very supportive, it is the regional staff that are invited to the Board and they will cover a number of authorities, they will receive the minutes.

Responding to a Member's question, the Head of Adult Safeguarding reported that the PREVENT/CHANNEL programme will support those at risk of radicalisation across all ages. The Assistant Director reported that targeted awareness raising of the Prevent programme has been undertaken in schools. Following any such activity there is always a spike in referrals.

### **It was agreed:**

K. Batt, Independent Chair Bury Safeguarding Board and Mandy Symes, Head of Adult Safeguarding, Bury Council be thanked for their attendance.

### **HWB. LEARNING FROM THE SERIOUS CASE REVIEW**

K. Batt, Independent Chair Bury Safeguarding Board and Mandy Symes, Bury Council, attended the meeting to inform members of the recently undertaken serious case review. The report provided an overview of the incident leading to the review; sudden unexplained death of a child meeting; serious case review, the views of the family and learning from the review.

The Independent Chair reported that there were eight recommendations in the report, the following were of particular relevance to the HWB are as follows;

- The LSCB (now the BISP) should receive assurance from local partners that work to develop a whole system response (service pathway) to childhood obesity.
- The LSCB should receive assurance that local safeguarding partners develop guidance based on research and practice that incorporates Childhood obesity as a potential safeguarding issue.

Members discussed the tragic circumstances that led to the death of the 13 year old resident of the Borough. The Director of Public Health reported that we must ensure that the lessons are learnt and the recommendations from the serious case review are implemented. A whole system approach is needed to tackling

the stigma of obesity, this is not about “nagging” individuals but promoting healthy body image and addressing the increasing problems of obesity in the Borough

**It was agreed:**

The Board offers condolences to Aiden’s family.

**HWB. BETTER CARE FUND UPDATE REPORT**

Julie Gonda, Interim Executive Director Communities and Wellbeing informed the meeting that the final Better Care Fund 2019-20 Policy Framework and Planning Guidance was published in July 2019. The Interim Executive Director informed the meeting that the BCF 2019/20 is subject to four national conditions:

- Plans must be signed off by the Health and Wellbeing Board (HWB), and by the constituent local authorities (LAs) and CCGs.
- Plans must demonstrate how the area will maintain the level of spending on social care services from the CCG minimum contribution in line with the uplift to the CCG’s minimum contribution.
- A specific proportion of the area’s allocation is invested in NHS commissioned out-of-hospital services, which may include seven day services and adult social care.
- There must be a clear plan on managing transfers of care, including implementation of the High Impact Change Model for Managing Transfers of Care (HICM). As part of this, all HWBs must adopt the centrally-set expectations for reducing or maintaining rates of delayed transfers of care (DToC) during 2019-20 into their BCF plans

As well as four national metrics; Non-elective admissions (Specific acute); Admissions to residential and care homes; Effectiveness of reablement and Delayed transfers of care.

**It was agreed:**

- That the Health and Wellbeing Board notes the content of the report.
- That the Bury Health and Wellbeing Board approves the attached Better Care Fund 2019-20 Planning Template for submission to the national Better Care Fund team for assessment.

**HWB. LOCALITY PLAN REFRESH AND THE BURY STRATEGY**

Chris Woodhouse, Executive Officer provided members with an overview of the locality plan refresh and the bury strategy, the presentation contained the following information:

- Context and approach to delivering the Strategy.
- Details of delivering the locality plan and the target operating model
- GM Draft locality plan framework
- Partnership delivery plans so far.

Members discussed issues in respect of the shared Vision for Bury, how do we deliver this in an integrated way? What has worked well to date across integration, transformation? And what do we need to do differently?

The Chair reported that the development of the strategy must be undertaken with engagement at a neighbourhood level, with good data and intelligence, including neighbourhood profiles informing the process.

Members discussed the Strategy and links with the Locality Plan and agreed that a more coordinated long term vision is required.

**It was agreed:**

1. Members will be kept updated on the progress and development of the Bury Strategy 2030.
2. The refreshed Locality Plan will be presented at the next meeting of the Health and Wellbeing Board.

**HWB.            MINIMUM UNIT PRICE FOR ALCOHOL**

The Director of Public Health provided members with a verbal update in respect of the development of a minimum unit price for alcohol. Prior to the meeting an accompanying report was circulated to members which included details of research project undertaken by Sheffield University. The model produced gives specific details at individual local authority level on the impact that alcohol pricing has on death rates and hospitalisations as well as economic outcomes for consumers, retailers, government tax revenues and NHS healthcare costs.

For Bury Metropolitan Borough Council, the research suggests that a 50p MUP would mean that:

- the NHS would save £259109 per year,
- alcohol related hospital admissions would fall by 120 per year
- 77 deaths would be avoided over the ensuing 20 year period.
- 176 fewer associated crimes would be committed per year

Those present were invited to ask questions and the following issues were raised:

Members wanted to place on record their support for the introduction of national minimum unit pricing for alcohol.

**It was agreed:**

That the Health and Wellbeing Board:

- Notes the harms caused to Bury residents and the Bury economy through alcohol
- Note the estimated positive impact on reducing alcohol harm that could be achieved through the introduction of Minimum Unit Price.
- Write a letter to DHSC and the Home Office

- Support a public awareness and engagement exercise
- Lobby to include minimum unit pricing within Greater Manchester Drug and Alcohol Strategy, currently being developed.

**HWB.            \*\*\* FOR INFORMATION MANCHESTER PHARMACY NEEDS ASSESSMENT**

**Councillor Andrea Simpson– Cabinet Member Health and Wellbeing Chair**

(Note: The meeting started at 6pm and finished at 7.50pm)