

Meeting: Locality Board			
Meeting Date	03 April 2023	Action	Approve
Item No.	3	Confidential	No
Title	Minutes of the Locality Board meeting held on 6 th February 2023		
Presented By	Cllr O'Brien, Chair of the Locality Board		
Author	Lindsay Johnson, Committee Secretary		
Clinical Lead			

Executive Summary
The minutes of the Locality Board meeting held on 6 th February 2023 are presented as an accurate reflection of the previous meeting, reflecting the discussion, decision and actions agreed.
Recommendations
It is recommended that the Locality Board:- <ul style="list-style-type: none"> • Approve the minutes of the previous meeting held on 6th February 2023 as an accurate record; • Review the action captured.

OUTCOME REQUIRED (Please Indicate)	Approval <input checked="" type="checkbox"/>	Assurance <input type="checkbox"/>	Discussion <input type="checkbox"/>	Information <input type="checkbox"/>
APPROVAL ONLY; (please indicate) whether this is required from the pooled (S75) budget or non-pooled budget	Pooled Budget <input type="checkbox"/>	Non-Pooled Budget <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>	

Links to Strategic Objectives	
SO1 - To support the Borough through a robust emergency response to the Covid-19 pandemic.	<input checked="" type="checkbox"/>
SO2 - To deliver our role in the Bury 2030 local industrial strategy priorities and recovery.	<input checked="" type="checkbox"/>
SO3 - To deliver improved outcomes through a programme of transformation to establish the capabilities required to deliver the 2030 vision.	<input checked="" type="checkbox"/>
SO4 - To secure financial sustainability through the delivery of the agreed budget strategy.	<input checked="" type="checkbox"/>
Does this report seek to address any of the risks included on the NHS GM Assurance Framework?	<input checked="" type="checkbox"/>



Implications						
Are there any quality, safeguarding or patient experience implications?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Has any engagement (clinical, stakeholder or public/patient) been undertaken in relation to this report?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Have any departments/organisations who will be affected been consulted ?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Are there any conflicts of interest arising from the proposal or decision being requested?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Are there any financial Implications?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Is an Equality, Privacy or Quality Impact Assessment required?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
If yes, has an Equality, Privacy or Quality Impact Assessment been completed?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
If yes, please give details below:						
If no, please detail below the reason for not completing an Equality, Privacy or Quality Impact Assessment:						
Are there any associated risks including Conflicts of Interest?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Are the risks on the NHS GM risk register?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>

Governance and Reporting		
Meeting	Date	Outcome
N/A		



Minutes

Date: Locality Board, 6th February 2023

Time: 4.00 pm

Venue: Microsoft Teams

Title	Minutes of the Locality Board		
Author	Lindsay Johnson		
Version	1a		
Target Audience	Locality Board		
Date Created	February 2023		
Date of Issue			
To be Agreed	April 2023		
Document Status (Draft/Final)	Draft		
Description	Locality Board Minutes		
Document History:			
Date	Version	Author	Notes
14/2/2023	1	Lindsay Johnson	Draft Minutes completed.
24/2/2023	1	Lindsay Johnson	Submitted to Will Blandamer to review
28/2/2023	1a	Will Blandamer	Minor changes incorporated.
28/2/2023	1a	Lindsay Johnson	Emailed to all the Locality Board members for their review.
Approved:			
Signature:			
		 Add name of Committee/Chair

Locality Board

MINUTES OF MEETING

Locality Board

6th February 2023

4.00 pm until 6.00 pm

Chair – Dr Cathy Fines

ATTENDANCE

Members

Dr Cathy Fines, Senior Clinical Leader in the Borough (**Chair**)
 Cllr Eamonn O'Brien, Leader of Bury Council
 Cllr Tamoor Tariq, Executive Member of the Council for Adult Care and Health
 Cllr Lucy Smith, Executive Member of the Council for Children and Young People (part meeting)
 Mr Chris O'Gorman, Chair of the Integrated Delivery Collaborative Board
 Mr Warren Heppolette, Chief Officer for Strategy and Innovation (GM ICS representative)
 Dr Vicki Howarth, Medical Director (NCA)
 Dr Kiran Patel, Medical Director of the Integrated Delivery Collaborative Board
 Mr Geoff Little, Place Based Lead
 Mr Simon O'Hare, Deputy Locality Finance Lead (**Deputising for Ms Sam Evans**)
 Ms Sophie Hargreaves, Director of Strategy, MFT
 Ms Heather Caudle, Group Chief Nursing Officer, NCA
 Ms Joanna Fawcus, Director of Operations, NCA
 Mr Donan Kelly, Pennine Care Foundation Trust

Others in attendance

Ms Helen Tomlinson, CO Bury VCFA
 Ms Ruth Passman, Chair, Healthwatch
 Mr Will Blandamer, Deputy Place Based Lead, Executive Director of Health and Care
 Ms Catherine Wilkinson, Director of Finance, NCA
 Ms Lindsey Darley

Mr Adrian Crook, Director of Adult Social Services and Community Commissioning
 Ms Jeannette Richards, Director of Children's Services
 Mr Jon Hobday, Director of Public Health

Cllr Russell Bernstein, Conservative Group Leader
 Cllr Mike Smith, Leader, Radcliffe First

Ms Jacqui Dennis, Head of Legal Services
 Mrs Lindsay Johnson, Committee Secretary (minutes)

Clare Postlethwaite, Associate Director of Finance (GM Estates) and Governance for agenda item 5
 David Latham, Commissioning Programme Manager – for agenda item 7
 Barney Schofield and Anand Iyer - for agenda item 8
 Mark Beesley and Zoe Alderson – for agenda item 10

MEETING NARRATIVE & OUTCOMES

1	Welcome, Apologies And Quoracy
1.1	The Chair welcomed all to the meeting.
1.2	Apologies were received from Catherine Jackson, Kath Wynne-Jones and Sam Evans.
1.3	The meeting was declared quorate and commenced.
2	Declarations Of Interest
2.1	The GM ICS (Bury) and Bury Council have responsibilities in relation to declarations of interest as part of their respective governance arrangements.
2.2	For other partners, we understand also that conflicts of interest are recorded locally within their respective (employing) NHS and other organisations as part of their own governance arrangements and processes.
2.3	The GM ICS (Bury) has a requirement to keep, maintain and make publicly available a register of declarations of interest under Section 140 of the national Health Service Act 2006 (as inserted by section 25 of the Health and Social Care Act 2012).
2.4	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.
2.5	As described in the Locality Board Terms of Reference (under Conflicts of Interest Section), the members of the Locality Board must refrain from actions that are likely to create any actual or perceived conflicts of interests. Taking this into consideration, a Register of Interests is included within the meeting papers which details the Declaration of Interests for the Locality Board Members.
2.6	In terms of agreed protocol, the Locality Board should ensure that they declare any relevant interests as part of the Declaration of Interest standing item on meeting agendas or as soon as a potential conflict becomes apparent or as part of meeting discussions. 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.
2.7	Declarations of interest from last meeting held on 5th December 2022 With this being the first Locality Board meeting attendance, Ms Hargreaves – declared the following interest; Indirect - Manchester & Trafford LCO – Spouse Employed.
2.8	Ms Fawcus was also attending her first Locality Board meeting and as such advised that she had no declarations of interest to record. These were recorded on the register and COI forms have been completed and returned accordingly.
2.9	Declarations of interest from today's meeting 6th February 2023
2.10	No declarations to note.

ID	Type	The Locality Board	Owner
D/02/01	Decision	Received the declaration of interest register and noted that there were no other declarations to make that were not already included.	

3	Minutes Of The Last Meeting And Action Log		
3.1	The minutes from the Locality Board meeting held on 5th December 2022 were considered and agreed as a true and accurate reflection of the previous meeting.		

ID	Type	The Locality Board	Owner
D/02/02	Decision	Agreed the minutes from the meeting held on 5 th December 2022 as a true and accurate reflection of the meeting.	

4	Place Based Lead Update		
4.1	Mr Little presented the item to the Locality Board.		
4.2	He gave tribute to staff from all sectors for their work on behalf of Bury patients and residents over the Christmas period commenting that the period had seen unprecedented pressures on all services as a consequence of enormous demand, workforce availability and the strike action. Mr Little referred to the demand faced by GPs also along with the pressures being experienced surrounding workforce. Mr Little gave an update on data relating to GPs face to face appointments for December confirming that for Bury this was 66% compared to 60% nationally.		
4.3	Reference was made in regard to the GM Cancer Network Visit to Bury which had taken place on 1 st February 2023. The Bury contribution was co-ordinated by Cancer Clinical Lead Dr Liane Harris and programme lead Damian Ashton, and very many Bury partners were connected to the work including NCA locally and group wide, PCN cancer leads, Public Health and the VCFA. Work surrounding the implementation of the eDerma scheme was commended. It was noted that the outcome of the report was anticipated.		
4.4	The Locality Board was informed of the visit by Michelle Dyson (Director General, Adult Social Care) Michelle Dyson which had taken place on 31 st January 2023 at Heathlands in Prestwich. This visit presented the opportunity to discuss the intermediate care provision, the connection to integrated neighbourhood teams, the deployment of winter pressure and monies including Discharge to assess along with the wider opportunities Bury has as part of the national front runner scheme on discharge arrangements.		
4.5	With respect to the financial position, Mr Little outlined the significant pressure and challenges being experienced by all partners include NHS GM. Mr Little advised that he had met with Mark Fisher and Sam Simpson to review the likely end of year position of NHS GM (Bury) locally and as a consequence was working with ICB colleagues GM wide on behalf of GM place based leads.		
4.6	The Locality Board noted that on the 11 th January, the DfE visited Bury to conduct a further review on the progress of the Children's Services Improvement Plan. Mr Little shared that this was a positive visit and that the letter of formal feedback from the visit was received on 2/2/23 and had also been shared to the Locality Board members on the 6/2/2023.		
4.7	Mr Little concluded by saying he was pleased to share that Lynne had been appointed as Chief Executive of the Council, and by virtue of that position and with the full endorsement of NHS GM, also Place Based Lead for NHS GM (Bury).		
4.8	It was recognised that this was Mr Little's last Locality Board meeting and as such thanks were given to Mr Little on behalf of the Locality Board for all his efforts and work over the many years.		

4.9	Cllr O'Brien expressed that Bury was one of the best in terms of integration and ways of working and that it was down to Mr Little for his personal work and drive in getting Bury to this point.		
4.10	The Chair also thanked Mr Little and said he would be greatly missed. In terms of the future, she welcomed the support and of working with Ms Ridsdale.		
ID	Type	The Locality Board	Owner
D/02/03	Decision	Received the update.	

5	Locality Board Formalisation
5.1	The paper was introduced by Mr Blandamer. He explained that at the Locality Board meeting in December 2022 it was recognised that the partnership should take steps to formalise the operation of the Locality Board and in response to the requirement of NHS Greater Manchester to secure the formality of devolved decision making and management of the Section 75 agreement between two partners to the Locality Board – the Council and NHS Greater Manchester.
5.2	The suite of papers submitted to the Locality Board meeting demonstrated a statement of confidence which had been built upon to continue to deliver the work and further develop the partnership relationships that had been in place in shadow form since October 2021. It recognised also the ongoing commitment in Bury surrounding; prevention, earlier intervention, health inequalities and neighbourhood working which would be expected to further evolve as the Locality Board continued to achieve its ambition. The information as presented at the meeting, unified the need for the Locality Board's strong partnership working across organisational boundaries serving as the apex of the Bury Integrated Care Partnership.
5.3	Mr Blandamer confirmed to the Locality Board that the papers presented today included the following; <ul style="list-style-type: none"> • A Locality Plan • A Terms of Reference for the operation of the Locality Board • A partnership agreement for the members of the Locality Board • An initially revised section 75 agreement for the council and NHS Greater Manchester
5.4	In regard to the Locality Plan, it had been noted that partners in Bury had jointly agreed a refreshed Locality Plan for health and care reform in January 2022 and that they had been operating revised partnership arrangements for health and care in Bury throughout 2022. The Locality Plan shared at the meeting had been refreshed to reflect the work of the Bury Integrated Care Partnership and the establishment of the Greater Manchester Integrated Care System. The Locality Plan however maintained a clear set of (as previously agreed) objectives and priorities in relation to the local agreement.
5.5	The Terms of Reference (ToR) presented outlined the operation of the Locality Board. The ToR had been expanded from the previously agreed ToR that had been in place for the Shadow Board. The ToR included a number of additional elements that reflected key inclusions that all Greater Manchester localities were required to incorporate (from the nationally defined 'boiler plate' ToR and local government constitutional requirements). It was important to note also that the formalised ToR did not fundamentally change either the responsibilities of the Locality Board or the requirements of its members (as previously set out and agreed whilst working in shadow form).
5.6	A Partnership Agreement had been included which acted an integral document that underpinned the local commitment to strong neighbourhood and partnership working. It articulated how the partnership working across the locality was governed by the Locality Board and related

	governance structures in order to help strengthen and embed the strong working arrangements across the Borough.
5.7	In relation to the S75, the Locality Board, agreed to work under a hybrid arrangement meaning that the Locality Board was a Joint Committee of the Local Authority for the s75 and pooled budget decisions and a Committee of the ICB in order to receive and act on ICB delegations along with the making of decisions collectively on aligned and non-pooled budgets. It was confirmed that work had been carried out with Bury Council colleagues around the S75 and the financial schedule provided within the report supported this work.
5.8	<p>It was advised also that the revised section 75 agreement did not change any of the Local Authority inclusions and instead amended the health elements to reflect current funds delegated to the locality which were as follows:-</p> <ul style="list-style-type: none"> • Continuing Health Care • Mental Health • Prescribing (primary care) • Better Care Fund
5.9	The Locality Board was also informed that the section 75 Agreement itself was a lengthy and legally binding document and as such a summary covering report had been included to allow the Locality Board members to more easily review the proposed changes to current section 75 arrangements. The principles outlined in the report demonstrated the changes to the working section 75 full document and in particular included amended finance schedules. In respect of future work, it was suggested that a further review and refresh of the S75 document be undertaken within the next 3-6 months, however the Locality Board noted that it was not anticipated that the review would impact on the GM ICB approval and that it would continue to support the development of the S75 key document for the locality to continue to work fully as a partnership.
5.10	<p>Finance Schedule – relating to 2022/23 budgetary limits</p> <p>It was explained that it was important to share to the Locality Board that as a condition of the ICB formally constituting the Locality Board, there was a requirement for localities to formally approve the 2022/23 budgetary limits and related finance schedule. Work to confirm formal approval of those budgetary limits continued with no material issues reported as this stage.</p>
5.11	It was proposed therefore, that final amendments to reach agreement on the schedule be delegated to the Executive Director of Finance, recognising that the agreement reflected the current year budgetary working arrangements and as such this was a request for approval from the Locality Board which was agreed.
5.12	<p>Mr Blandamer outlined to the Locality Board that they were therefore asked to confirm approval of the following key documents and that those documents would then form part of the GM ICB approvals process. He explained that approval would enable Locality Boards to formally adopt decision making powers from 1st April 2023 onwards.</p> <p>The documents for approval were;</p> <ul style="list-style-type: none"> • Locality Board terms of reference. • Bury Integrated Care Partnership Agreement. • Section 75 agreement – principles included within covering report. • 2022/23 Budgetary Limits – delegated to the Executive Director of Finance
5.13	Mr Blandamer gave thanks to Ms Hargreaves from MFT, Mr Kelly and Mr Hassall from PCFT, Mr Sharp from the NCA for their support so far and Ms Wilkinson from the NCA for her wording in

	regard to the Partnership Agreement. He confirmed that the comments provided had been taken on board.
5.14	Mr Blandamer also gave thanks to Ms Postlethwaite, Mr O'Hare and Mrs Johnson for their work involved in the preparation of the documentation.
5.15	The agenda item was opened up for comments.
5.16	Dr Patel said he would welcome a review of the Partnership Agreement to include a section surrounding the work of primary care and the role of the GP Leadership Collaborative.
5.17	He also said he wished for clarity around the roles of the Senior Clinical Leader in the Borough and Medical Director of the IDCB/Chair of Clinical Senate specifically being a GP in order to represent the GP perspective as well as the constituency.
5.18	<i>Post meeting note; the above suggestions have been incorporated and it has been written into the ToR that each of the two roles (as described above) are presumed to be a GP and the relevant representative will represent the GP perspective as well as the constituency and that in the event of those roles not being a GP, the ToR will be reviewed accordingly. A dedicated section on Primary Care was also incorporated into the Partnership Agreement and the GP Federation had been made a partner to the agreement.</i>
5.19	Mr Kelly commented on the pooled and aligned budget, making reference to what had been described in the covering report. It was acknowledged there were opportunities of investment agreements for particular priorities and it would be important to understand double running in an interim period and the need for exit strategies.
5.20	Ms Wilkinson commented on the process and task involved in achieving this set of documents deemed suitable for a number of different statutory arrangements. She said it was essential to recognise as we enter into this new world, the scope around integration which was now in place. Ms Wilkinson also acknowledged the involvement of the partners in shaping the wording in the documents as submitted.
5.21	Mr Heppolette commented from a GM perspective that although it was limited at this stage to receive delegations associated with allocations from GM ICB, the ambition for Locality Boards to realise their wider remit remained. He acknowledged the proposed workshop planned for March commenting that it was important to have that wider discussion and development in order reflect and translate into outcomes for Bury.
5.22	Mr Little supported the documentation as outlined and said he agreed with the comments raised about the continued trajectory of travel in order to collectively make decisions and scale up change.
5.23	Ms Postlethwaite recognised the comments made too around the overall ambition and future aspiration. She said it was expected that a review would take place to develop the comments made over the next few months and that appropriate wording had been included in the covering reports which demonstrated the aspiration and longer term aim.
5.24	The Locality Board, subject to inclusion around Primary Care approved the suite of papers, (as delegated to the Bury PBL until formally established) and therefore recommended 'the suite of documentation' for approval to NHS GM ICB for review and approval to establish the Locality Board as a sub-committee of the ICB and the S75 Committee as a Joint Committee of both the ICB and Bury MBC for relevant business.

ID	Type	The Locality Board	Owner
D/02/04	Decision	Recognised the requirement to commit to the 2022/23 finance schedules as part of the GM ICB approvals process and agreed that this final decision to approve be delegated to the Executive Director of Finance.	
D/02/05	Decision	Noted the ongoing commitment of partners to work across neighbourhoods in order to continue to deliver the locality plan.	
D/02/06	Decision	Noted the principles included within the Section 75 report and agreed that they would form the basis of detailed updates to the full section 75 working document along with the financial schedules.	
D/02/07	Decision	Noted the commitment to further strengthen the Section 75 legal documentation and agreed a further iteration of the document be proposed within the next 3-6 months.	
D/02/08	Decision	Noted the contents of the updated locality plan that underpinned all the work taking place across the borough.	
D/02/09	Decision	Approved the revised ToR – subject to the clarification around the role of the GP representing GP perspective as well as the wider constituency.	
D/02/10	Decision	Approved the Partnership Agreement – subject to the inclusion of a Primary Care section and the role of the GP Leadership Collaborative.	
D/02/11	Decision	Approved the suite of papers, (as delegated to the Bury PBL until formally established) and therefore recommended them for approval to NHS GM ICB for review and approval to establish the Locality Board as a sub-committee of the ICB and the S75 Committee as a Joint Committee of both the ICB and Bury MBC for relevant business.	

6	IDC Overview Report
6.1	Mr O’Gorman presented the report on behalf of Ms Wynne-Jones.
6.2	The update provided was a comprehensive report which covered the following; <ul style="list-style-type: none"> • IDC Task and Finish Group and the role of the IDC • Programme Leadership and Capacity • System Governance and decision making • SRO Leadership
6.3	Mr O’Gorman outlined that the SRO Leadership was being reviewed following some internal changes and departures.
6.4	There were also a number of appendices included that accompanied the report, these appendices outlined the following information:- <ul style="list-style-type: none"> • Scope of the IDC Development Group • Proposed SRO Membership • Existing SRO and clinical director role descriptions • Draft Programme Plan
6.5	The IDC Programme/Project Highlight Report was also included which detailed a synopsis on each programme.

6.6	The Locality Board was asked to note the 3 key strands of work for the development plan of the IDC and the proposals for the SRO leadership arrangements. They were also asked to consider the progress, plans, risks and mitigations highlighted for each of the programmes of work. Common risks across programmes related to the availability of finance, workforce and increasing wait times.		
6.7	The Locality Board also noted that from April 2023 the report would be accompanied by a system risk register and performance scorecard.		
6.8	Mr O’Gorman also made reference and thanks to Ms Darley for her last Locality Board meeting as Ms Darley was taking up the role of Programme Lead for the national discharge programme initiative cross the 4 localities of the NCA, including Bury. The Locality Board also gave thanks to Ms Darley for the impact that she has had across the system.		
ID	Type	The Locality Board	Owner
D/02/12	Decision	Received the update report, noted the 3 key strands of work for the development plan and the proposals for the SRO leadership arrangements.	
D/02/13	Decision	Considered that from April 2023 the report would also be accompanied by a system risk register and performance scorecard.	

7	Deep Dive Report – Urgent Care		
7.1	Mr Latham was present at the meeting and provided a deep dive urgent care update.		
7.2	The Locality Board was advised that it would inform them of the current NHS Planning Priorities for urgent care for 2023-24 as well as a review of current urgent care performance through a comparative look at local performance against GM Partners.		
7.3	The update also described that improved performance in part is due to the range of GM Winter and SORT schemes established across Bury. These schemes were highlighted with an initial review of how the Bury systems coped over the Christmas Bank Holiday period.		
7.4	The Board was also reminded of some of the other ongoing priority work streams in the urgent care programme.		
7.5	<p>A number of slides were presented with the following key points highlighted;</p> <ul style="list-style-type: none"> • NHS Planning Guidance 2023-24 which detailed the 2023-24 three national key tasks • Urgent Care NHS National Objectives and Urgent Care NHS National Key Actions • System Performance which detailed the A&E attendance levels and A&E performance figures • Length of stay and no criteria to reside (NCTR) was mentioned with Mr Latham commenting that whilst the NCTR figures remain high at Fairfield General Hospital this needed to be offset by an understanding of the length of stay position • 12 hour wait figures were commented on with the Locality Board being informed that Year to date FGH was the best performing adult acute trust site for 12 hour performance • Ambulance performance had improved following intensive work between North West Ambulance Service, Fairfield General Hospital and the wider system on whole system flow the situation improved greatly. 		
7.6	In regard to the SORT update, the Locality Board received a summary slide which detailed the investment received across a number of schemes (including green schemes, primary care schemes, virtual wards, VCSE schemes). They were informed that through some of the		

	investment additional capacity had been received at Fairfield General Hospital, increased input in acute visiting services, respiratory hub, virtual ward and hospital at home.
7.7	In regard to initial feedback from winter and over the Christmas period, the general feeling was that the Bury system did perform well and Fairfield General Hospital was one of the sites to not declare OPEL 4. System pressure was felt particularly in Primary Care, GP practices and GP Out of Hours however system plans over the period were felt to have worked well. On call arrangements remained in place and daily calls took place with on call managers across the system.
7.8	Mr Latham had also in his set of slides, provided some information around learning which had been taken from a session on 18 th January 2023.
7.9	Thanks were provided for comprehensive set of information and the agenda item was opened up for comments.
7.10	It was commented that although system support had been in place over the winter and Christmas period which was welcomed, the patient experience was still not where it should be and although the positives were taken, it was felt it was important to not lose sight of poor patient experience and to recognise that the 4 hour performance at 59.49% is a lower target set nationally and that the aim should always be higher.
7.11	Ms Caudle talked about some of the language used in particular referring the No Criteria to Reside. She highlighted that testing was underway in helping to change the mindset as part of a cultural change and for example using Days Kept Away From Home (DKAFH) as an alternative to no criteria to reside. The Locality Board welcomed this proposal and said this was about a critical change in thinking something in which they would like to adopt in Bury.
7.12	The Chair closed the agenda item commenting that she had felt the Bronze meetings were working well demonstrating good leadership across the Bury locality.
D/02/14	Decision Noted the content and local system performance as provided in the presentation slides.

8	NCA Community Diagnostic Centre: Bury Spoke Site Development Plans – Update
8.1	Barney Schofield, Director of Planning and Delivery from the NCA was present along with Anand Iyer, Portfolio Manager – Service Transformation (Cancer RDC and CDC Programmes).
8.2	The Locality Board were informed that the NCA had developed a CDC Hub in Oldham that launched in December 2022, and a second hub will go live in the summer of 2023 in Salford. The Oldham Hub serves patients from the Northeast Sector, including Bury, and Bury patients will also be able to access the Salford Hub where this is more convenient.
8.3	The Locality Board were informed that there was an intention that the Hub and Spoke model of CDCs across the NCA localities would ensure all localities have access to routine diagnostic tests (e.g., blood pressure, spirometry etc.) via spoke sites, and non-routine or more complex diagnostics via purpose-built CDC Hubs (e.g., MRI scans, blood gases, endoscopy).
8.4	The NCA and Bury system partners established a Task Group in November 2022. The aim of the group was to co-produce plans to develop two spoke sites in Bury, as satellite sites from the NCA CDC Hubs, to serve the populations of Bury and provide access to routine low-level diagnostics close to home. The spokes will sit alongside a range of other diagnostics already available to Bury residents in primary, community and secondary care.

8.5	The current proposition that has been supported by Clinical and Professional Senate and the Integrated Delivery Collaborative Board (IDCB) is to apply for funding for 2 spokes in Bury - Radcliffe with a cardiorespiratory focus and Prestwich a Frailty focus. Spoke provision in both these locations would support the strategic approach outlined in the Bury 'Let's Do It' strategy.
8.6	The Local Authority Public Health team has completed analysis that supports the proposal to locate the spokes in Radcliffe and Prestwich to address the populations health needs, to support work to tackle inequalities, and maximise the available resources, now and into the future.
8.7	NCA is leading the completion of the business case to secure capital and revenue funding to establish the spokes in Bury and is aiming for submission of the business case, subject to Bury system support and NCA finance sign off, by the end of February 2023.
8.8	It should be noted that at this stage of the funding application process the requirement is for high level activity assumptions in the initial business case, with opportunity to refine the activity plans each year. However, to ensure that delivery of diagnostics at a locality level is cost effective and minimise any risk of creating future financial pressures when the national funding comes to an end in 2024, the locality will need to ensure the projections are sufficiently robust.
8.9	The Locality Board noted that once the Business Case is approved it should secure capital investment and once submitted it was confident that rapid response would be received from NHSE with approval to support the Business Case.
8.10	The Locality Board therefore received the update and presentation that accompanied this executive summary, outlining the current proposal for the spokes had been shared with Clinical and Professional Senate and IDCB.
8.11	The Locality Board supported the direction of travel outlined in the presentation and the required next steps for NCA to secure the funding from NHSE to mobilise the spokes in 23/24.

ID	Type	The Locality Board	Owner
D/02/15	Decision	Received the update and noted the work undertaken to date to co-produce the plans with system partners for the Bury CDC spokes	
D/02/16	Decision	Supported the direction of travel outlined in the presentation, to include the spoke locations and range of modalities to be delivered in the first year.	
D/02/17	Decision	Acknowledged the opportunity to expand the hub and spoke model beyond the two proposed sites through future funding bids with NCA to further increase diagnostic provision in Bury.	
D/02/18	Decision	Supported the NCA submitting the business case, subject to IDCB support and NCA governance sign off, by end February 2023.	

9	Investing in local infrastructure to enable the growth and development of the VCSE sector in Bury.
9.1	Ms Tomlinson introduced the paper outlining that it provided the Locality Board with a rationale, options and a number of recommendations for a system-wide approach to investment in VCSE local infrastructure. The paper described the aim of creating the right conditions for the VCSE sector to mature, flourish and be recognised as an equal partner within the integrated systems in Bury.
9.2	Ms Tomlinson gave an acknowledgement to Bury Council who had committed to initial investment in 2019 for the establishment of a new VCSE sector infrastructure body for the borough – which became Bury VCFA.
9.3	Ms Tomlinson referred to section 2.2 in her report which gave more detail around the VCSE Local Infrastructure in Bury. She advised that the presence of local infrastructure in Bury had been inconsistent over the past 20 years as investment had come and gone. This had contributed to a VCSE sector which was relatively immature in its growth and development compared to areas such as Salford, Bolton, Oldham and Manchester where there was a strong local infrastructure body, in some cases established over 30+ years.
9.4	<p>The Locality Board were informed that Bury VCFA strategic priorities were underpinned by a set of four key functions (which align to national membership body NAVCA -National Association of Voluntary and Community Action).</p> <ul style="list-style-type: none"> • Leadership and advocacy • Partnerships and collaborations • Capacity building • Volunteering
9.5	There were a series of recommendations for consideration by the Locality Board which supported the ambitions as well as identifying new ways to scale up good models for implementation in Bury.
9.6	Ms Tomlinson did comment that recommendation 5.6 was important which asked for commitment from Locality Board in terms of representation at the GM Accord Forum on 15 th March in Tameside to share the work already started in Bury to embed the VCSE sector as a key partner in the Let's Do It Strategy as well as understanding what more we could do following learning from other GM areas.
9.7	The agenda item was opened up for discussion.
9.8	The Chair said that section 2.1 in the report was extremely powerful which detailed that there were over 26,000 volunteers in Bury donating over 131,000 hours per week of time, equating to £65m (based on the Real Living Wage). This included those that hold governance positions such as management committee members, trustees and directors. The workforce of the VCSE sector in Bury is estimated to be 4019 employees (2452 full-time equivalent).
9.9	Ms Ridsdale commented that Bury Council fund the VCFA and currently work was underway in reviewing continuation of some contribution going forward. Ms Ridsdale said it was essential for the Locality Board and wider partners to be mindful and consider making a contribution on the basis of that the work the VCFA deliver is central to locality plan objectives. It was expressed that there was a need to support to continuation on that as without it the objectives as detailed in the Locality Plan would not be achieved.

9.10	Cllr Tariq said the report detailed vital information and commented on the value of the VCFA work that was being carried out across the system. He said that it was important to recognise the journey the voluntary sector has been on in Bury too, however more could be done. Cllr Tariq suggested that the detail as outlined in the paper should be built upon in order to continue to link into the strategies as well as reducing of inequalities.		
9.11	Ms Wilkinson advised that SFG have a set of financial principles that they are signed up to as well as an ambition of a commitment to the VCFA in order for it to grow and develop. It was advised that there was an element of a spend to save initiative along with better value for money however there was a need to find a way of delivering on this ask collectively. Ms Wilkinson therefore suggested that the SFG review the recommendations as described in the paper however wider system support was required in terms of investment/commitment.		
9.12	The Locality Board agreed therefore that SFG should pick up an action around discussions for the financial ask and suggested that Ms Tomlinson also continue the discussions with the multi agency partners.		
9.13	It was also outlined that a mapping and scoping exercise take place creating those spaces where discussions can take place with commissioners in terms of what is being delivered in order to understand the scope and scale and what could be further developed and how we enable that to progress.		
ID	Type	The Locality Board	Owner
D/02/19	Decision	Received the paper and considered the recommendations.	
A/02/01	Action	Agreed for SFG to pick up the actions around the financial ask in regard to contribution to the VCFA as outlined in the report.	SFG

10	Primary Care Strategy		
10.1	Mr Beesley was present, along with Ms Alderson and a number of slides were shared to the Locality Board in regard to the Primary Care Strategy.		
10.2	<p>The slides covered the following:-</p> <ul style="list-style-type: none"> • Vision – along with 5 Goals to help realise the vision • Goal 1 - Develop and promote a new model of general practice • Goal 2 - A resilient workforce and an attractive place to work • Goal 3 - Increase capacity within general practice and meet appropriate demand • Goal 4 - Strengthen the relationship between provider partners across the Bury system • Goal 5 - Improve outcomes for patients by reducing inequity and variation in access and quality of care • Support that is required to deliver the goals which included associated risks • Next Steps 		
10.3	The Locality Board was informed that since the disestablishment of Clinical Commissioning Groups (CCGs) the Primary Care Team and the GP Federation have, where possible been working closely to align programmes of work, with a view to having a single coordinated work programme determined by a Primary Care (General Practice) Strategy.		
10.4	The purpose was to provide the Locality Board with an update around developing strategy along with sharing the programme and delivery plan. The slides shared presented a vast amount of information.		

10.5	Mr Crook acknowledged the work that had been carried out commenting on the massive move forward. The work of the Primary Care Team and colleagues was highly noted with the Locality Board recognising the need to understand the lived experience of patients along with ensuring their voice when further developing the strategy.
10.6	Cllr Tariq spoke about the scrutiny that Primary Care had been under which had faced a lot of criticism, following misinformed information quoted, along with the pressures that had been experienced and continue to be experienced. He said that it was felt that Bury was moving forward as a system in a positive way in rebutting incorrect information. In terms of the future, Cllr Tariq commented that work should continue around the behavioural changes and support should be given around the pressures in order to Bury to continue to lead the way.
10.7	Other comments received were that the Strategy was a great piece of work that highlighted the discussions around breaking down barriers and of the continued creation of a seamless package of care. Further comments were also welcomed from system partners in order to incorporate that wider view.
10.8	The Chair gave thanks for the paper and confirmed that the action plan would be brought to a future meeting.

ID	Type	The Locality Board	Owner
D/02/20	Decision	Received the update in regard to the local strategy and delivery plan.	
D/02/21	Decision	Provided feedback as detailed above.	
D/02/22	Decision	Noted the work taking place at a GM level.	
D/02/23	Decision	Considered the risks as presented.	

11	Strategic Finance Group Update		
11.1	It was highlighted to the Locality Board that the Strategic Finance Group had supported the CDC work along with the work surrounding virtual wards and approved a series of monies. Work continued in planning for 23/24.		
ID	Type	The Locality Board	Owner
D/02/24	Decision	Noted the verbal update provided.	

12	Strategic Workforce Group Update		
12.1	Ms Darley was present at the meeting and gave an update on this item.		
12.2	She informed the Locality Board that there were two papers submitted to the meeting which were detailed as follows;		
12.3	Paper A – IDC Workforce Team update The presentation outlines; <ul style="list-style-type: none"> • The current IDC system Workforce team • The key priorities of the revised GM Culture and People Strategy • Existing alignment of work undertaken by the Bury IDC Workforce Team to scope current activities and strategies locally, against the GM strategy • Outline of next steps towards completion of a Bury health and car system wide workforce strategy 		
12.4	Paper B – System Wide Workforce Retention and Wellbeing The paper seeks to;		

12.5	<ul style="list-style-type: none"> • share the key themes from the system wellbeing workshops that have informed the development of the proposed actions/activities • outline how key partners/stakeholders and specialists can shape the system work in its developmental stages. • enable the Board to appraise the proposed actions/activities and support work on to collaborate on as a system/organisational aligned priority basis. <p>Ms Darley also confirmed that the SRO for Workforce would be Kat Sowden.</p>
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ID	Type	The Locality Board	Owner
D/02/25	Decision	Noted the paper submitted as Paper A and of the work to date.	
D/02/26	Decision	Noted the content of paper B in regard to the report to the Health Overview and Scrutiny Committee for information.	

13	System Assurance Committee – update report		
13.1	Mr Blandamer presented the report on behalf of Ms Jackson. The report provided the Locality Board with a summary of the Bury Integrated Care Partnership System Assurance Committee from the January 2023 meeting.		
13.2	The Locality Board was asked to note the contents of the report and to raise any issues for the System Assurance Committee to address.		

ID	Type	The Locality Board	Owner
D/02/27	Decision	Noted the report as provided.	

14	Population Health and Wellbeing Update		
14.1	The report was introduced by Mr Hobday which provided an update on the work of the Health and Wellbeing Board and Population Health Delivery Partnership.		
14.2	Mr Hobday encouraged members to read the Annual Report.		

ID	Type	The Locality Board	Owner
D/02/28	Decision	Noted the update provided.	

15	Performance Framework		
15.1	Mr Blandamer introduced the report highlighting that the paper submitted was a trial of a new reporting for Locality Board during 2023 following feedback at the end of last year.		
15.2	The report detailed that a review of products that were provided across the refreshed Health and Care Governance in the locality identified where reporting could be either streamlined, aligned with GM reporting or described gaps for new products to be produced.		
15.3	With regard to the report, it was detailed that it would provide a high level activity and demand summary of the key work areas along with a placeholder and opportunity to escalate issues from both the IDC Board and the Children’s Strategic Partnership Board.		
15.4	The report was submitted to the Locality Board to demonstrate to them the different ways of how to manage/share performance data, however Mr Blandamer confirmed that further was required to fully capture this.		

15.5	The Chair requested that consideration was taken around the presenting of primary care data commenting that there were large numbers of those accessing primary care however Bury did not appear to be as well as could be in presenting and sharing it.		
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ID	Type	The Locality Board	Owner
D/02/29	Decision	Acknowledged the current performance across the system.	
D/02/30	Decision	Provided feedback on the new style of reporting – in particular around primary care	
D/02/31	Decision	Agreed to this new style and reporting going forward.	

16	Clinical and Professional Senate		
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16.1	The Locality Board noted that there had not been a January Clinical and Professional Senate meeting and as such a written update would be provided after the next meeting.		
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ID	Type	The Locality Board	Owner
D/02/32	Decision	Noted that a written report would be provided after the next Clinical and Professional Senate meeting.	

17	Any other Business		
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17.1	<p>Mr Blandamer touched on the development workshop planned for 6th March 2023. He highlighted some key points;</p> <ul style="list-style-type: none"> • Opportunity to have development space • Opportunity to understand good examples of work in the Place • Opportunity to understand the scale, money, workforce and what the future holds. • Review the scale of reform and response, through neighbourhood model, focus on prevention and intervention. • Review what does the future ambition tell us. • Look at the wicked issues in order to challenge and address. • Have some space to explore some of those things further in the context of the Locality Plan looking at what we know is working well and what is required to develop further. 		
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ID	Type	The Locality Board	Owner
D/02/33	Decision	Noted the item shared under AOB.	

Locality Board Action Log

Status Rating




- In Progress



- Completed

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Title	Action	Lead	Status	Due Date	Update
A/02/01	Agreed for SFG to pick up the actions around the financial ask in regard to contribution to the VCFA as outlined in the report.	SE			This has been included on the Strategic Finance Group agenda for the meeting on 30 th March 2023