

Draft Minutes

ONE Stockport Health and Care Board – Public Meeting

Date: 20 December 2023
Time: 15:00 – 16:20 pm
Venue: Upper Ground Floor Conference Room, Stopford House

Present	Apologies
<p>Present:</p> <p>Cllr Mark Hunter, Leader of Stockport Metropolitan Borough Council (Stockport MBC), Chair</p> <p>Jilla Burgess-Allen, Director of Public Health, Stockport MBC</p> <p>Michael Cullen, Deputy Chief Executive and Locality Finance Lead, Stockport MBC</p> <p>Sarah Dillon, Director of Adult Social Care, Stockport MBC</p> <p>Karen James, Chief Executive, Stockport NHS Foundation Trust</p> <p>Philippa Johnson, Deputy Place Based Lead, NHS Greater Manchester (Stockport)</p> <p>Eve Mannerings, Chief Executive, Stockport Local Medical Committee</p> <p>Helen McHale, Chief Executive, Stockport Homes</p> <p>Clare Parker, Executive Director of Quality, Nursing and Healthcare Professionals, and Deputy Chief Executive, Pennine Care NHS Foundation Trust</p> <p>Caroline Simpson, Place Lead, NHS Greater Manchester (Stockport) and Chief Executive, Stockport MBC</p> <p>Chief Superintendent John Webster, District Commander Stockport, GMP</p> <p>Dr Simon Woodworth, Associate Medical Director, NHS Greater Manchester (Stockport)</p>	<p>Apologies:</p> <p>Anthony Hassall, Chief Executive, Pennine Care NHS Foundation Trust</p> <p>John Graham, Director of Finance / Deputy Chief Executive, Stockport NHS Foundation Trust</p> <p>Maria Kildunne, Chief Officer, Healthwatch</p> <p>Jo McGrath, Chief Officer, Sector 3</p> <p>Chris McLoughlin, Executive Director, People and Integration, Stockport MBC</p> <p>Dr Viren Mehta, GP Partner (Cheadle Medical Practice), GP Chief Officer, Viaduct Care CIC</p> <p>Mandy Philbin, Chief Nurse and Executive Nurse of Quality and Learning Disabilities, NHS Greater Manchester</p> <p>Kathryn Rees, Directory of Strategy, Stockport MBC</p> <p>Heidi Shaw, Director, Family Help and Integration, Stockport Family – Education, Health and Care, Stockport MBC</p>
<p>In attendance</p>	
<p>Jill Adams, Head of Governance, NHS Greater Manchester (Stockport)</p> <p>Ben Aspinall, Associate Director, Delivery and Transformation, NHS Greater Manchester (Stockport) for item 9</p> <p>Geraldine Gerrard, Head of Business Support (Commissioning & Contracts), Stockport MBC</p>	

<p>Alison Newton, Senior PA & Business Administrator, NHS Greater Manchester (Stockport) (Minutes) Jane Pilkington, Director of Population Health, NHS Greater Manchester, for item 11 Public x 2</p>		
1.	Welcome & Apologies	Action
	<p>The Chair welcomed members to the ONE Stockport Health and Care Board. Apologies were noted as listed above.</p> <p>Members introduced themselves.</p>	
2.	Notification of items of Any Other Business	
	There were no other items of business declared.	
3.	Declarations of Interest	
	The Chair asked members of the Board to declare any interests held that would impact on the business conducted. There were no declarations of interest.	
4.	Minutes from previous meeting	
	<p>The minutes of the meeting of the ONE Stockport Health and Care Board held on 22 November 2023 were received and agreed as an accurate record.</p> <p>RESOLVED: The minutes of the ONE Stockport Health and Care Board meeting held on 22 November 2023 be APPROVED as a correct record.</p>	
5.	Actions and Matters Arising	
	<p>There were no open actions to consider.</p> <p>RESOLVED: The Board NOTED that there were no open actions from previous meetings.</p>	
6.	Place Based Lead and Deputy Place Based Lead Update	
	<p>The Chair invited P Johnson to provide an update from the Locality.</p> <p><u>Deputy Place Based Lead Update</u> - P Johnson drew attention to a number of key highlights, pertinent to the locality, including:</p> <ul style="list-style-type: none"> • A period of industrial action by Junior doctors had started, to continue until 7am on 23 December 2023. Plans had been put in place to mitigate the impact for patients with cover in place. Additional primary care cover had been put in place via Mastercall (out of hours provider). • A further period of industrial action was planned from 7am on 3 January 2024 to 7am on 9 January 2024. 	

	<ul style="list-style-type: none"> • Communications had been sent out to advise the public to call / email 111 or to visit their local pharmacy for non-urgent issues. • Each locality faced a reduction in Urgent and Emergency Care (UEC) funding. This had been discussed as system partners and the impact of this reduction in funding was now being managed and monitored through system programmes reporting to the Executive Group. • The Greater Manchester (GM) system had implemented a robust process to oversee and manage mental health out of area placements and clients clinically ready for discharge. This involved a three-tiered process to ensure grip and control: <ul style="list-style-type: none"> ○ Tier 1: Bed management level – Pennine Care NHS Foundation Trust. ○ Tier 2: Locality management team utilised to unblock or escalate any issues. ○ Tier 3: GM escalation level to address any issues. <p>It was noted that the number of out of area placements had reduced to six with six Stockport registered clients, Clinically Ready for Discharge (CRD).</p> <p><u>RESOLVED:</u> The update from the Deputy Place Based Lead was NOTED.</p>	
<p>7.</p>	<p>Finance Report</p>	
	<p>M Cullen was invited to present a Finance update for the Locality for Month 8 (as of 30 November 2023) and an update on the efficiency programme, planning for 2024/25 and contracts.</p> <p><u>Finance Report – Month 8</u> NHS Greater Manchester (Stockport) was reporting a year-to-date (YTD) adverse variance of £3.396m and a forecast outturn adverse variance of £3.784m.</p> <p>The pressures remained on increasing demand for Continuing Healthcare (CHC), mental health placements and prescribing costs. It was pointed out that robust controls were in place for managing mental health placements through a locality Individual Care Panel (ICP) that meet on a monthly basis. Since the previous meeting, a number of clinical vacancies within the CHC team had been recruited to, to support the CHC reviews being undertaken in a timely manner.</p> <p>The locality was on track to achieve its efficiency target with £2.655m delivered to date against a target of £3.582m but there remained a risk to delivery of the target due to prescribing schemes not currently meeting the efficiency target.</p> <p>Work had commenced on developing a NHS GM financial plan for 2024/25 – this would need to incorporate NHS planning guidance, expected to be published on 22 December 2023.</p> <p>It was highlighted that a work programme was being developed to require locality commissioning managers to undertake a formal service review for any contracts that were due to expire, using the NHS GM commissioning for</p>	

	<p>outcomes framework.</p> <p>A service review had taken place for Stockport GP Federation (Viaduct Care) with efficiencies totalling £0.350m identified. A new Viaduct Care contract for 2024/25 had been submitted via the GM System for Thorough Assessment of Resources (STAR) process. Members were asked to support the proposal to enter into a contract with Viaduct Care for 2024/25 subject to approval from the STAR process.</p> <p>Members were asked to note that the Provider Selection Regime (PSR) Regulations 2023 would come into effect from 1 January 2024 and any intentions to award contracts would be subject to the new PSR regulations.</p> <p>E Mannerings highlighted that the revised Viaduct Contract included a reduction in funding for primary care; Members noted the comment.</p> <p>RESOLVED: ONE Stockport Health and Care Board:</p> <ul style="list-style-type: none"> i. NOTED the financial position including identified financial risks. ii. NOTED the efficiency programme update. iii. ENDORSED approval to enter into a contract with Viaduct Care for 2024/25 through the GM System for Thorough Assessment of Resources process. iv. NOTED that the Provider Selection Regime (PSR) Regulations 2023 would come into effect from 1 January 2024. 	
8.	One Stockport: One Future Update	
	<p>C Simpson outlined the work that had taken place on the One Stockport: One Future work, arising from the One Stockport Borough Plan.</p> <p>The vision focused on the `5 Big Things' that would make Stockport the best place to live centred around good jobs and homes, the best health and care, thriving neighbourhoods, clean, green transport and the best place to grow up. It would require collaboration across the system, the business community and voluntary services.</p> <p>Members were referred to a video, shared on screen outlining the vision. Feedback would be sought from members and the public to help shape the vision with plans in place for 3, 5 and 10 years.</p> <p>The Chair thanked C Simpson and encouraged working collaboratively with partners and stakeholders in developing the vision for Stockport prior to its launch in March 2024.</p> <p>RESOLVED: ONE Stockport Health and Care Board NOTED the presentation on One Stockport: One Future.</p>	
9.	One Health and Care Plan	
	<p>P Johnson presented the refresh of the One Health and Care Plan following extensive engagement. It was noted that this was the final draft prior to it</p>	

	<p>being signed off at this Board and then at Health and Wellbeing Board in January 2024.</p> <p>B Aspinall provided an overview of the work that had taken place and thanked Paddy McGee (Head of Strategy and Planning, NHS Greater Manchester) who had led on this work but was unable to attend the meeting.</p> <p>The revised Plan brought together existing strategies within the locality and following engagement, two new priorities had been added: Primary Care Access and Elective Care and Cancer Services. It was noted that a recovery plan was in place and robust delivery plans for each priority.</p> <p>The Appendices provided a schedule of deliverables. It was noted that the Plan had been reviewed within the quality and safeguarding teams and that a final review would take place with Senior Responsible Officers (SROs) following the publishing of national planning guidance due to be released on 22 December 2023. A public facing document would be published for an easy read.</p> <p>H McHale sought clarification as to whether detailed plans were in place for each theme or were yet to be produced. B Aspinall explained that the Plan had been through various committees and boards and the detailed plans would need to be worked through.</p> <p>Members approved the refreshed Plan as presented.</p> <p>The Chair clarified that the final plan would be signed off by Health and Wellbeing Board on 17 January 2024.</p> <p>RESOLVED:</p> <p>(i) ONE Stockport Health and Care Board APPROVED the One Health and Care Plan for final sign-off at Health and Wellbeing Board on 17 January 2024.</p> <p>(ii) ONE Stockport Health and Care Board APPROVED the final timeline and next steps.</p> <p>A member of the public left the meeting.</p>	
<p>10.</p>	<p>Performance, Improvement and Assurance report</p>	
	<p>B Aspinall presented the Performance, Improvement and Assurance report and advised that this was a working document and was based on headline data for a number of indicators relating to people registered with a Stockport GP. The Senior Responsible Officers (SRO's) would be listed in future reports. The intention was for there to be a GM standard version of the report providing data for the locality and comparisons across all localities; this report was an interim measure to ensure Locality Board had visibility of performance of health and care for the Stockport population.</p> <p>Headline figures contained within the report included:</p> <ul style="list-style-type: none"> • Cancer performance remained challenged: weekly cancer patient list meetings for each tumour group took place. • Autism: discussions continued with GM colleagues to receive regular 	

updates on performance. Stockport was continuing to show a month on month increase in the number of young people supported through Children and Adolescent Mental Health Services (CAMHS).

- Mitigations (actions to reduce the level of risk) had been put in place for the risks highlighted.

A brief discussion took place on the report. K James pointed out that Stockport NHS FT often cared for patients from other localities that could impact on its performance and questioned how assurance could be gained as a system. B Aspinall explained that this would be considered within the updates provided by SRO's.

The Chair acknowledged that due to its location, Stockport NHS FT admitted quite a number of patients from out of area and pointed out that this should be reflected in future reports.

It was noted that this was a working document and as such, commentary could be added to future reports to reflect the reality. The purpose of the report was to ensure that the Board and public were sighted on current indicators impacting on residents within the borough and this document provided a starting point to initiate further discussions.

H McHale highlighted the importance of identifying and following up actions for any red rated areas contained within the report to provide assurance to the Board.

C Parker suggested triangulating the data with other providers to obtain a fuller picture for some of the indicators. For example, Pennine Care could provide data that was submitted to its own Board that would explain some of the measures. Some Stockport patients would need to access services in Tameside for the psychiatric intensive care unit (PICU) for example as the facility did not exist in Stockport.

B Aspinall advised that further work would take place on developing the report and the risk register.

G Gerrard advised on the process for risk management for the system. A risk log was held and managed in the locality. Any risk scored 12 or above would be brought to Board and any that scored 15 or above would be escalated to GM for specific intervention. A Group met on a monthly basis to review the report to check and challenge with delivery leads.

C Simpson thanked the team for producing the report and reflected on the discussions that had taken place noting the purpose of the report and the importance of highlighting areas for the Board where collective effort could make a difference to Stockport residents.

RESOLVED:

ONE Stockport Health and Care Board NOTED the Performance, Improvement and Assurance report and the assurances associated with the risks raised.

11.	Greater Manchester Fairer Health for All Framework and the One Stockport view	
	<p>J Burgess-Allen provided the background to the report, in response to the 10-year review from the original Marmot Review: <i>Fair Society, Healthy Lives</i> in 2010.</p> <p>The GM Fairer Health for All Framework reflected the ambitions to reduce health inequalities and build back fairer from the Covid-19 pandemic for future generations. The framework called for health equity to be considered for all policies and resource allocation.</p> <p>Members noted the disparity in health outcomes from different wards in the borough and the need to align the work with the One Stockport Health and Care Plan. It was highlighted that various programmes of work were in place to support health inequalities in Stockport.</p> <p>J Pilkington outlined the NHS GM approach and the Framework developed in response to the Marmot report over the last 15 months, alongside the Joint Forward Plan. It was highlighted that 1.1m of the GM population lived in the most deprived areas (40% of the population). The Framework set out the methods of addressing the health inequalities and reducing variation in health outcomes and experiences supported by the Health and Care Intelligence Hub and Fairer Health for All Academy.</p> <p>The Health and Care Intelligence Hub aimed to bring data together from public and Voluntary, Community, Faith and Social Enterprises (VCSFE) partners using intelligence tools to facilitate Population Health Management. The aim of the Fairer Health for All Academy was to build the skills and values required to shift models of care.</p> <p>Lots of work was taking place to achieve fairer health and it had been included in the One Health and Care Plan.</p> <p>C Parker asked whether people with lived experience had been involved in co-producing the Framework and encouraged easy-read language to encourage the public to engage with the work. J Pilkington advised that the Framework had been co-produced with the voluntary sector alongside people with lived experience and explained that this was not a public facing document but for stakeholders.</p> <p>A further discussion took place on the challenges in diverting funding to new priorities to support this work and that should resources be diverted, an evaluation on the impact on residents would need to take place.</p> <p><u>RESOLVED:</u> ONE Stockport Health and Care Board NOTED the Greater Manchester Fairer Health for All Framework and the One Stockport view.</p>	
12.	Estates Strategy: St Thomas' Integrated Health and Social Care Centre	
	<p>S Dillon provided an update on the progress on the development of the Integrated Health and Social Care Centre at St Thomas Gardens. The purpose of the new build, expected to be completed in two years, was to</p>	

	<p>provide a Centre with integrated support to help people regain their independence following discharge from hospital. The Centre would consist of 82 beds across three floors and would be a joint venture between Stockport NHS FT and Stockport MBC. A Joint Venture Agreement and Heads of Terms was being developed, via a legal process. In response to a comment, it was noted that Pennine Care would be involved in the Operational Model along with other partners, including primary care. E Mannerings pointed out that primary care included optometry, pharmacy and dentistry as well as general practice.</p> <p>J Pilkington left the meeting.</p> <p>The Chair praised the work that had taken place in developing the model and stated that this would be an important facility for the borough.</p> <p>Members supported the progress to date and the next steps.</p> <p><u>RESOLVED:</u> ONE Stockport Health and Care Board NOTED the update on St Thomas' Integrated Health and Social Care Centre and the next steps and actions.</p>	
13.	Flash Report – Stockport Provider Partnership	
	<p>The Report was noted for information.</p> <p><u>RESOLVED:</u> ONE Stockport Health and Care Board NOTED the Flash Report from Stockport Provider Partnership.</p>	
14.	Flash Report – Stockport Quality Improvement Collaborative	
	<p>S Woodworth advised that the main discussion topics at the recent meeting were focused on the Learning Disability Mortality Review (LeDeR) Framework and the new Patient Safety Incident Response Framework (PSIRF), due to be implemented from 1 April 2024.</p> <p><u>RESOLVED:</u> ONE Stockport Health and Care Board NOTED the update from the Stockport Quality Improvement Collaborative meeting.</p>	
15.	Questions from the public	
	There were no questions from the public to discuss.	
16.	Any Other Business	
	There were no additional items of business to discuss. The Chair thanked members for their contributions and closed the meeting.	

Date & Time of Next Meeting: Wednesday 24 January 2024, 15:30 – 17:15 pm
Upper Ground Floor Conference Room, Stopford House