

Draft Minutes

ONE Stockport Health and Care Board – Public Meeting

Date: 28 August 2024
Time: 13:30 – 14:25 pm
Venue: Upper Ground Floor Conference Room, Stopford House

Present	Apologies
<p>Present:</p> <p>Cllr Mark Hunter, Leader of Stockport Metropolitan Borough Council (MBC) (Chair) Jemma Billing, Associate Director of Quality, CHC and Safeguarding, NHS Greater Manchester (Stockport) Jilla Burgess-Allen, Director of Public Health, Stockport MBC Sarah Dillon, Director of Adult Social Care, Stockport MBC Karen James, Chief Executive, Stockport NHS Foundation Trust Philippa Johnson, Deputy Place Based Lead, NHS Greater Manchester (Stockport) Chris McLoughlin, Executive Director, People and Integration, Director of Children’s Services, Adult Social Services, Stockport MBC Kathryn Rees, Directory of Strategy, Stockport MBC Matt Walsh, South Network Director of Quality, Nursing & AHPs, Pennine Care NHS Foundation Trust, for T McDougall Chief Superintendent John Webster, District Commander Stockport, GMP Dr Simon Woodworth, Associate Medical Director, NHS Greater Manchester (Stockport)</p>	<p>Apologies:</p> <p>Paul Buckley, Director of Strategy and Partnership, Stockport NHS Foundation Trust Michael Cullen, Chief Executive and Place Based Lead, Stockport MBC John Graham, Deputy Chief Executive, Director of Finance, Stockport NHS Foundation Trust Anthony Hassall, Chief Executive, Pennine Care NHS Foundation Trust Maria Kildunne, Chief Officer, Healthwatch Stockport Tim McDougall, Executive Director of Quality, Nursing and Healthcare Professionals, Pennine Care NHS Foundation Trust Jo McGrath, Chief Officer, Sector 3 Helen McHale, Chief Executive, Stockport Homes Dr Viren Mehta, GP Partner, Cheadle Medical Practice, GP Chief Officer Viaduct Care, Chair, Stockport GP & Primary Care Board, Vice-Chair, GM GP Board Mandy Philbin, Interim Deputy Chief Executive and Chief Nursing Officer, NHS Greater Manchester Heidi Shaw, Director, Family Help and Integration, Stockport Family – Education, Health and Care, Stockport MBC</p>
<p>In attendance</p>	
<p>Ben Aspinall, Associate Director, Delivery and Transformation, NHS Greater Manchester (Stockport), for item 12 Karen Moran, Senior Locality Manager, NHS Greater Manchester (Stockport), for item 11 Alison Newton, Senior PA & Business Administrator, NHS Greater Manchester (Stockport) (Minutes)</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>The Chair welcomed B Aspinall, J Billing, K Moran and M Walsh to the meeting.</p> <p>Members introduced themselves.</p>	
2.	Notification of items of Any Other Business	
	There were no other items of business to discuss.	
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 26 June 2024 were received and agreed as an accurate record.</p> <p>To note: the meeting scheduled for 26 July 2024 was cancelled.</p> <p>RESOLVED: The minutes of the ONE Stockport Health and Care Board meeting held on 26 June 2024 be APPROVED as a correct record.</p>	
5.	Actions and Matters Arising	
	<p>LB10: Update to be provided on the progress of Stockport NHS Foundation Trust Haematology patients being able to access a 24/7 helpline for support/advice.</p> <p>K James advised that Manchester University Foundation Trust (MFT) and The Christie Hospital currently provide a 24/7 helpline for support advice but for capacity reasons this could not be extended to include Stockport Foundation Trust. To mitigate the issue, out of hours access would be provided to Stockport Haematology patients via the Digital Hub. It was expected that access to the Hub would go live in September 2024. Action closed. Remove from the log.</p> <p>RESOLVED: The Board NOTED the update provided on action LB10.</p>	
6.	Deputy Place Based Lead Update	
	<u>Deputy Place Based Lead Update</u> – P Johnson drew attention to the key highlights for the system, including:	

	<ul style="list-style-type: none"> • Greater Manchester remained challenged on finance, performance and quality issues. A system improvement plan was in place focused on four pillars: <ul style="list-style-type: none"> ○ Leadership and Governance. ○ Performance and Assurance. ○ Financial Sustainability. ○ Quality. • Greater Manchester Integrated Care Board (ICB) was working on a 3 – 5 year sustainability plan. It was recognised that difficult decisions may need to be made on the future provision of services. • Engagement with Stockport residents is being planned through the Community Services Partnership, Healthwatch and the ICB team. • Urgent and Emergency Care (UEC) remained challenged in Stockport. Stockport NHS Foundation Trust (SFT) was in Tier 1 and this means we receive support from the national UEC teams including ECIST (Emergency Care Improvement Support Team) and GiRFT (Getting it Right First Time). The national teams had visited SFT on 10 July 2024 and there had been a number of follow-up discussions to plan how the support offer would be utilised, including a focus on an Out of Hospital Care Model in the Community. It was noted that SFT’s A&E performance had improved during August 2024 but also that August as usual was a quieter month for A&E. • The LGA (Local Government Association) Peer Review of Adult Social Care would be considered at September 2024 Board. • The Right Care, Right Person (RCRP), the Greater Manchester Police programme of work to ensure appropriate agency response to demand would go live on 30 September 2024. • The period of collective action by GP colleagues had commenced on 1 August 2024. An update on the impact for the system was under review and would be considered at a later meeting as the action becomes clearer. • Lots of positive, collaborative work was taking place across Stockport, notably in the Neighbourhood and Prevention programme of work, GM Moving, housing and health, and the GM WorkWell programme aimed at those people unable to work due to health reasons - this programme of work was due to go live in October 2024. <p><u>RESOLVED:</u> The update from the Deputy Place Based Lead was NOTED.</p>	
7.	<p>Greater Manchester Executive Update</p>	
	<p>P Johnson referred to the paper circulated for information (CEO Report NHS Greater Manchester Integrated Care Board), providing an update from NHS Greater Manchester Executive in the absence of M Philbin and drew attention to:</p> <ul style="list-style-type: none"> • The scrutiny and accountability placed on Urgent Care in GM. It was highlighted that UEC had previously been part of the Place Based Assurance meetings but due to the scope of work required, the format of the oversight meetings would change to a joint meeting between the 	

	<p>locality and the provider.</p> <p>RESOLVED: The update from Greater Manchester Executive was NOTED.</p>	
8.	Finance Report	
	<p><u>Finance Report – 31 July 2024 (Month 4):</u></p> <p>P Johnson provided an update on the current financial position of NHS Greater Manchester (GM) (Stockport) as of 31 July 2024:</p> <ul style="list-style-type: none"> • NHS Greater Manchester (Stockport) was reporting an adverse variance of £2.120m and a forecast outturn adverse variance of £6.756m, assuming full achievement of the Cost Improvement Plan (CIP) and mental health placements (s117) which remained at risk due to: <ul style="list-style-type: none"> ○ Increasing cost and demand for continuing healthcare (CHC), mental health placements (s117) and prescribing. ○ Increasing demand for neurodiversity assessments and ADHD treatment costs. <p>P Johnson explained that some mitigations had been put in place with regards to the CHC challenges. The capacity of the CHC workforce remained a challenge due to vacancies and training new staff but NHS GM had approved the request to recruit to all vacancies. Work was taking place with Council colleagues and an external provider to review the CHC backlog. There remained financial challenges for mental health budgets due to the s117 (section 117) costs increasing and the number of people eligible for support increasing. The importance of obtaining the right package of care for each mental health placement was highlighted.</p> <p>Colleagues were reminded that there remained a £1.530m risk associated with the delivery of the CIP target.</p> <p>The Chair acknowledged the financial challenges and the need to continually monitor the risk for the system.</p> <p>RESOLVED: ONE Stockport Health and Care Board: -</p> <ol style="list-style-type: none"> i. NOTED the financial position including identified financial risks. ii. Noted the cost improvement programme update. 	
09.	Children & Young People Plan 2024-27	
	<p>The Chair invited C McLoughlin to provide an overview of the Children & Young People Plan 2024-27.</p> <p>C McLoughlin pointed out that this was a refresh of the Plan whereby a number of colleagues and the voice of Children & Young People (C&YP) had been asked to contribute with regards to the priorities for the next three years.</p> <p>C&YP had commented that they would like to see opportunities where they live</p>	

	<p>and grow up in Stockport. The vision was for Stockport `to be the best place to live happy and healthy lives. We want to create a place where anything is possible, a place that everyone right across the Borough can be proud of' – One Stockport: One Future.</p> <p>Colleagues had challenged the plan for not being ambitious enough.</p> <p>The Plan had been through a number of forums including Board as part of the governance process including C&YP Scrutiny, Care Leavers Forum and GMCA (Greater Manchester Combined Authority) and had involved lots of integrated working.</p> <p>In response to a question, as this was a working document, further comments / feedback would be considered as and when appropriate.</p> <p><u>RESOLVED:</u> ONE Stockport Health and Care Board SUPPORTED the refreshed Children and Young People Plan for 2024-27 and APPROVED it for further engagement including Children and Family Scrutiny Committee.</p>	
10.	Neighbourhood & Prevention – Focus One Neighbourhood Approach	
	<p>K Rees was invited to present an overview of the progress of the Neighbourhood and Prevention programme of work, focusing on a One Neighbourhood approach.</p> <p>K Rees pointed out that there had been significant progress across the programme with a number of key elements recently launched or due to be launched. The workstreams included:</p> <ul style="list-style-type: none"> • One Stockport Local Offer. • Workforce and Culture. • Data, Intelligence and Reporting. • Citizen Access and Prevention – the One Stockport Local Directory had gone live including a redesign of the Council website to ensure there was one place for residents to access information and advice about services and communities. The site was developing but it was aimed at making it easier for residents to find information. • Communication and Engagement. • Shared Digital Infrastructure. <p>In time, online dashboard profiles would be added to the website for each Neighbourhood in Stockport. It was noted that the profiles were being developed to provide access to an interactive dashboard but were due to be shared with Elected members in September 2024.</p> <p>There would be a roll out of the Neighbourhood coordination model, supporting the One Neighbourhood approach and One Stockport Local programme.</p> <p>The regular Neighbourhood Network meetings would be launched in October and November 2024.</p>	

	<p><u>RESOLVED:</u> ONE Stockport Health and Care Board NOTED the update on One Neighbourhood Approach within the Neighbourhood and Prevention programme of work.</p>	
11.	<p>Stockport Elective Care Recovery Update</p> <p>K Moran referred to the paper circulated and pointed out that the data collated was from a specific point of time in July 2024. The report stated that three Stockport registered patients had waited 78-weeks for treatment – there were now no Stockport patients waiting 78-weeks for treatment across GM.</p> <p>Stockport NHS Foundation Trust (SFT) was on track to meet the 65-week standard in September 2024.</p> <p>The Chair referred to the number of patients waiting between 65 and 77-weeks and highlighted that a third of these patients were from out of area, reflecting on the location of Stepping Hill Hospital being on the border for East Cheshire and North Derbyshire.</p> <p>C McLoughlin referred to the redesign and Clinical Pathway Reform to support the improvement of patient waiting times for treatment and questioned whether a further explanation was required for the public to understand the discussions taking place in the background such as providing Advice and Guidance where one clinician seeks advice from another clinician.</p> <p>K Moran explained that this ongoing transformational work was a pilot focusing on 500 referrals. The clinical validation pilot went live at the end of July and the findings from the pilot at SFT would feed in to the GM improvement plan. There would be communications to referring clinicians on the outcome of the pilot and then to the public.</p> <p>P Johnson highlighted the need to understand the position of people waiting for treatment against the data provided and the actions taken to support them whilst they waited, noting that providers were working hard to improve the waiting time position.</p> <p>P Johnson noted the possible link to the work taking place within each locality as part of a WorkWell programme to support people with health issues back into work or to continue working, for example if they were on a waiting list. The Neighbourhood & Prevention programme was highlighted as a possible way of ensuring residents were supported locally whilst waiting.</p> <p><u>RESOLVED:</u> ONE Stockport Health and Care Board NOTED the update on Stockport Elective Care Recovery.</p>	
12.	<p>Urgent and Emergency Care Update August 2024: Capacity and Discharge Funds Allocation</p> <p>B Aspinall provided an overview of Stockport’s Urgent and Emergency Care (UEC) Performance Improvement Plan and Waterfall chart.</p> <p>Members were asked to consider the proposal to approve the capacity and</p>	

	<p>discharge funding proposals for 2024/25, noting that the paper had previously been considered and recommended for approval by the Executive Group and note Stockport's Performance Improvement Plan for UEC and reducing bed days for mental health placements.</p> <p>The paper included an overview of the Stockport system by NHS England on 10 July 2024, as alluded to earlier in the meeting.</p> <p>It was noted that the Stockport system was required to report to NHS England on a monthly basis, providing a highlight report for the locality.</p> <p>B Aspinall drew attention to a number of high impact interventions to support the 4-hour A&E care standard. Stockport had a duty to meet the standards by the end of March 2025. It was noted that if the high impact interventions were not having the required impact they would be reviewed.</p> <p>The funding allocated to the schemes was aimed at adopting a whole system approach and to ensure support for out of hospital care, noting that primary care was critical to this work, as was mental health.</p> <p>B Aspinall advised that a number of schemes had been reviewed and adjusted from the previous year as they did not produce the expected outcomes. Members were asked to note the need to reduce the reliance on spot purchase beds and ensure patients received care closer to home and in their local community.</p> <p>A discussion took place on the paper. K James supported the proposal for the capacity and discharge funding for 2024/2025 but with the caveat that if any schemes were not having the desired impact, they would be reviewed.</p> <p>B Aspinall reiterated that the schemes outlined for high impact intervention to support capacity and discharges were agreed as a partnership and highlight reports were submitted on a monthly basis to GM as well as being considered at a monthly Urgent and Emergency Care Delivery Board and a Safe and Timely monthly meeting.</p> <p>Members supported the proposal for capacity and discharge funding for 2024/25.</p> <p><u>RESOLVED:</u> ONE Stockport Health and Care Board: -</p> <ul style="list-style-type: none"> i. RECOMMENDED the proposal for capacity and discharge funding for 2024/25 to be Ratified by Stockport Health and Wellbeing Board. ii. NOTED the Stockport Urgent and Emergency Care Performance Improvement Plan, the Stockport Mental Health Performance Improvement Plan to reduce bed days for Clinically Ready for Discharge people in Adult acute and Rehabilitation Mental Health beds and the recommendations from the National team visit. 	
13.	Greater Manchester Moving / Stockport Moving Together	

J Burgess-Allen referred to the paper, previously considered at a NHS GM Executive Committee meeting and pointed out that whilst this was a GM paper, there were implications for Stockport within the refreshed Memorandum of Understanding (MoU) with a possibility of additional funding.

The MoU included new strategies, bringing together the GM Moving in Action Strategy and the forthcoming national Sport Strategy (Sport England).

GM had been invited by Sport England to submit an investment plan to add to the place based work taking place and would be notified of its allocation for its 10 localities in November 2024.

Stockport had previously incorporated the funding into its implementation plan for ONE Stockport Active Communities Strategy: [Stockport Moving Together - Stockport Council](#)) following an active research approach. This involved a more targeted approach in areas of the Borough. It had been recognised that it was not enough to direct people to take up sport and leisure but work with local communities to understand the barriers for people becoming more active.

An example of the targeted approach was provided - Brinnington Park Leisure Centre had created a social movement whereby residents were encouraged to visit the Centre through word of mouth from the people they know and listening to ideas of different approaches. Usage of the Centre had doubled. Residents were encouraged to go to the social gym, participate in a coffee morning and a walk around the Centre for example to build their confidence in visiting the Centre and participating in walks.

In response to a question as to whether GPs could prescribe exercise, S Woodworth explained that GPs cannot prescribe exercise but could encourage patients to join the Physical Activity Referral in Stockport (PARiS) scheme, delivered by Life Leisure or patients can self-refer to get a reduced gym membership if it was one of the nominated gyms.

In response to a further question regarding linking with the neighbourhood team and social prescribers, S Woodworth commented that the neighbourhood team could support a patient with their application to the PARiS scheme.

J Burgess-Allen commented that one of the pilot projects in Brinnington included a wellbeing prescription to support the residents in overcoming some of the barriers to access primary care – it worked like a prescription pad, pushed through a slot in the door and picked up via the surgery. The pilot had proved successful.

M Walsh advised of a successful scheme in place in some of the wards at Pennine Care, providing access to yoga and boxing – exercise was tailored to each individual.

S Dillon referred to the GM Ageing Well Strategy and encouraged linking the GM Moving to this Strategy.

K James questioned whether the action research approach could be

	<p>extended to work with different communities as different approaches were required. J Burgess-Allen commented that this could be considered as part of the integrated neighbourhood approach but it would require additional investment into Stockport Moving Together to expand to other neighbourhoods and communities across Stockport.</p> <p>Members were encouraged to support the distributed leadership in the areas included in the MoU.</p> <p><u>RESOLVED:</u> ONE Stockport Health and Care Board NOTED the opportunities to further support Stockport Moving Together, and its impact on health and wider social inequalities in Stockport.</p>	
14.	Flash Report – Stockport Provider Partnership	
	<p>The paper had been circulated for information.</p> <p><u>RESOLVED:</u> ONE Stockport Health and Care Board NOTED the Flash Report from Stockport Provider Partnership.</p>	
15.	Flash Report – Stockport Primary Care Commissioning Committee	
	<p>The paper had been circulated for information.</p> <p><u>RESOLVED:</u> ONE Stockport Health and Care Board NOTED the Flash Report from Stockport Primary Care Commissioning Committee.</p>	
16.	Flash Report – Stockport Quality Improvement Collaborative (SQIC) update	
	<p>The paper had been circulated for information.</p> <p><u>RESOLVED:</u> ONE Stockport Health and Care Board NOTED the Flash Report from Stockport Quality Improvement Collaborative</p>	
17.	Questions from the public	
	<p>The ICB had received a question from the Alzheimer’s Society regarding an update on the development of a Dementia Strategy and the opportunity to provide feedback to the Strategy.</p> <p>P Johnson reported that the Dementia Strategy had been refreshed and a working group had collaborated on a draft, including a representative from the Alzheimer’s society.</p> <p>It was further noted that a workshop would be held later in the year, providing an opportunity for wider partners/stakeholders to contribute to the draft Dementia Strategy.</p> <p>The Chair supported the opportunity for wider stakeholders to contribute to</p>	

	the Strategy.	
18.	Any Other Business	
	There were no other items of business. The Chair closed the meeting.	
Date & Time of Next Meeting: Wednesday 25 September 2024, 14:15 – 16:00 pm Upper Ground Floor Conference Room, Stopford House		