

Health and Wellbeing Board

Annual Report 2015/16

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1. Introduction

Welcome to the second Annual Report of Warrington's Health and Wellbeing Board (HWB), which covers the period 2015/16. This year's report shows the progress being made by partners in the Borough to deliver joined-up services for our community.

In 2015/16 we reported on the steps being taken by the Board to promote and develop integrated health and social care service within the Borough. This year's report highlights some of the services which are being delivered jointly. The report also shows how the pace of transformation is speeding up to enable a much wider range of services to be delivered in a much more co-ordinated way. This includes everything from back-office functions like IT to integrated pathways of care, and integrated approaches to out of hospital care.

The pressures on public services caused by austerity and an ageing population mean that innovative solutions need to be found to maximise scarce public resources. One goal of the Board is to move towards an integrated budget for health and social care which would enable better control of total spend and would promote less expensive, more effective usage of resources. The old saying that prevention is better than cure is particularly relevant in the way that healthcare services are developing.

We have also overseen the development of the Warrington Health Plus Initiative which will see primary care delivered closer to home and the realignment of other support services to fit this pattern of local delivery.

A key achievement of the Board in 2016 was the refresh of the Health and Wellbeing Strategy, which set out how the Council, NHS and other partners will promote healthy lifestyles so that people remain healthy and independent well into old age and how together we will tackle ill-health and social need when it does occur. We want everybody to reach their maximum potential for a long and healthy life, by starting well, living well and ageing well.

We are now beginning to get to grips with the implications of the NHS Five Year Forward View, which is likely to bring further changes to the way that health care services are delivered across the country, including here in Warrington.

On behalf of the Board, I hope that you enjoy reading about our work.

Steven Broomhead

Chairman of the Health and Wellbeing Board and
Chief Executive of Warrington Borough Council



Professor Steven Broomhead
Chairman of the Board

2. Who We Are and What We Do

The Health and Wellbeing Board is a formal Committee of Warrington Borough Council established under the Health and Social Care Act 2012. It brings together the leaders of key partner bodies principally from health and social care, but also includes representatives of other public, private and voluntary sector services who have a role to play in improving the health and wellbeing of local residents.

Membership of the Board

The Board was established with effect from 1 April 2013. It has a small core statutory membership as set out in the legislation, but additional members have been appointed either by the Council or by the Board itself to include key partners. The following organisations/sectors are represented on the Board:-

- Warrington Borough Council (WBC);
- NHS Warrington Clinical Commissioning Group (WCCG);
- Joint WBC/WCCG Appointment - Integrated Commissioning;
- HealthWatch Warrington;
- Third Sector Network Hub;
- 5 Boroughs Partnership NHS Foundation Trust;
- Bridgewater Community Healthcare NHS Foundation Trust;
- Warrington and Halton Hospitals NHS Foundation Trust;
- NHS England - Merseyside, Cheshire, Warrington and Wirral Area Team;
- Independent Chair of Children's Safeguarding Board;
- Voluntary care sector;
- Private care sector;
- Criminal Justice system;
- Housing;
- Education;
- Fire and Rescue; and
- Warrington Health Plus.

Our Aims

To deliver improved wellbeing, morbidity, mortality and equality outcomes for the population of Warrington;

To promote integration and partnership working between the NHS, social care, public health and other local services; and

To improve local democratic accountability across the health and social care system

Powers and Duties

The principal role of the Board is to encourage those who arrange for the provision of health and social care services in its area to work closely together and in an integrated manner.

The Board can provide advice, assistance or other support to encourage the making of formal agreements under section 75 of the NHS Act 2006, which includes three sets of powers:-

- Lead commissioning by one partner;
- Integrated provision; and
- Pooled budgets.

It must also carry out the Council's responsibilities in respect of approving the following key strategic documents:-

- Joint Strategic Needs Assessment (JSNA); and
- Joint Health and Wellbeing Strategy (HWS).

It may give the Council its opinion on whether the authority is discharging its duty to have regard to the JSNA and HWS when exercising relevant health and wellbeing functions. This includes its functions relating to children with special educational needs and disabilities.

The Clinical Commissioning Group must involve the HWB in preparing or revising a Commissioning Plan and must consult the Board on whether the draft takes proper account of the HWS published by it. The Health and Wellbeing Board must give the CCG its opinion on that matter and may also give an opinion to NHS England.

The Board must approve the Local Pharmaceutical Needs Assessment (PNA) and is a statutory consultee in respect of any routine applications notified to it by NHS England, from chemists to join Pharmaceutical lists or from chemists on the lists to relocate to different premises or open new premises.

Under guidance issued by NHS England and the Local Government Association in 2013 and subsequent Department of Health and Department for Communities and Local Government Guidance, the Board has a role in the development of annual plans for use of the Better Care Fund (BCF) (formerly the Integration Transformation Fund). This is a continuing national initiative to drive the transformation of local services to ensure that people receive better and more integrated care and support.

3. Summary of Key Achievements

Warrington Health and Wellbeing Board has either achieved directly, or influenced its partners to deliver the following key successes:-

- ✓ Submission of a letter from the Chairman to Simon Stevens, Chief Executive, NHSE, about democratic engagement and accountability in the development of Sustainability and Transformation Plans (STPs);
- ✓ Participation in a National Peer Review of the work of the Board of which Warrington were the first in the country to take part;
- ✓ Participation in two joint reviews on the Better Care Fund undertaken by Merseyside Internal Audit and WBC Internal Audit;
- ✓ Participation in the first and only national peer review of the Better Care Fund;
- ✓ Use of a diagnostic self- assessment toolkit from the Advancing Quality Alliance (AQuA) to help the Board develop its future integrated policies/plans;
- ✓ Direct attendances down by 5.5% (1,126 patients) and direct admissions down by 28.6% (755) from 2014/15 to 2015/16. (Ranked 5 out of 23);
- ✓ 5% reduction in readmissions of 65+ after 30 days and 13% reduction after 90 days from April 2015. (Ranked 1 and 2 out of 23);
- ✓ 150 less delayed transfers of care per 100,000 population since March 2015. (Ranked 1 out of 23);
- ✓ 45 less permanent admissions per month into residential and nursing care since March 2015. (Ranked 8 out of 23).
- ✓ Undertook partnership readiness self-audit in relation to collaboration for transformation.
- ✓ Enabling joint working across some services, with people sharing priorities and pressures, new models of delivery developed, decisions being made quicker and new solutions created, particularly for out of hospital care.
- ✓ Consistent delivery of GP services across Warrington – known as, ‘the Warrington Brand’;
- ✓ Development of the Warrington Care Record Programme, which will standardise health care records.
- ✓ Launch of the ‘Together We Can...’ brand for the overall Transformation Programme on 26 February 2016 at the Orford Hub.

4. Review of 2015/16

Promoting Integration

A key responsibility of the Board to encourage those who arrange for the provision of health and social care services in its area to work closely together and in an integrated manner.

Health and Social Care Transformation Updates

In 2015/16 the Board considered numerous update reports as to the progress of the Health and Social Care Transformation Programme and those programmes and projects which underpinned its delivery. These achieved developments across:-

- Starting Well
- Living & Working Well and
- Ageing Well.
- Chapters of the Health and Wellbeing Strategy
- development of a draft Transformation Vision and Strategy
- Refreshed Governance
- Programme activities against the various Thematic Workstreams.

The 'Starting Well' theme had started scoping activity in two further areas: Integrated Youth Health Offer and Additional Needs/Long Term Conditions.

Activity within 'Living Well' theme had predominantly focussed on change within Hospital A&E and now needed to also look more at out of hospital deflection services and the new model of care for Urgent Care to identify and maximise transformation opportunities.

Early in 2016 the Board considered a summary of the NHS Forward View: Planning Guidance and its consequential urgent requirements for

increased pace and for two documents to be swiftly developed:

- A five year Sustainability & Transformation Plan (STP) to drive the Five Year Forward View
- Received a presentation on the Communications and Engagement Strategy for the Programme and its brand 'Together We Can...' A launch took place on the afternoon of 26 February 2016 at the Orford Hub.

Outcome:

The Board has kept a close watch on the development and progress of the large scale programme to deliver transformation across the health and social care landscape

Board have fully endorsed engagement with the public, empowering the population with a 'digestible' public consultation plan 'Together We Can...'

Better Care Fund

In 2014/15 we reported on the delivery of the Better Care Fund (BCF), which was an enabling mechanism to better integrate health and social care, universally accepted as part of the Government's vision for responsive, caring services and part of the solution to the pressures on social care. More streamlined services would create a single point of delivery for citizens, deliver better outcomes for individuals, as well as potentially generating financial efficiencies.

The BCF took the form of a local, single pooled budget and required NHS Warrington and Warrington Borough Council to identify existing monies to be used to develop and deliver integrated systems of care. The value of the pooled budget for 2015/16 was £27.8M

The reports for each period highlighted upcoming milestones; interdependencies and risks, including where any high level outcome measures were assessed as 'red'.

It was further noted that the governance arrangements to oversee the Better Care Fund would be modified to take into account the recommendations of a National Peer Review and the two joint reviews on the Better Care Fund undertaken by Merseyside Internal Audit and WBC Internal Audit.

Outcome:

The Board has kept an overview of the delivery of Better Care Fund targets and has realised key performance improvements in the system.

Monitoring led to a report being requested from the Assistant Director Integrated Commissioning, with appropriate input from providers and commissioners, on the barriers to 7 day services, to enable the Board to understand the whole picture.

The Board has also overseen the Better Care Fund submission for 2016/17.

Integrated Commissioning

The Board considered an initial report proposing a commitment by the Board to move towards the pooling of commissioning resources across the health and care system, overseen by one commissioning body. That body would be politically accountable and able to move resources around the system by making clinically sound investments and disinvestments.

The Board accepted the rationale for pooling health and care budgets and approved further work to look at how this might be achieved.

A follow up report was considered at the time of construction of the BCF Plan for 2016/17. The report noted that moving to a single, ring fenced budget for health and social care, with a single commissioner for local services had been a feature of Government thinking for some time.

Most areas had adopted this approach with many areas including Sunderland, Greater Manchester, NW London putting the whole budget for health and social care into a pooled arrangement.

At the moment, what was commissioned was divided across three sets of commissioners – CCGs, NHSE and local authorities. Moreover, this was further subdivided into narrowly focused organisational and service line budgets. This fragmentation of commissioning made it difficult for commissioners to commission integrated care.

The impact of this fragmentation was:

- Duplication;
- Gaps;
- Siloed working;
- Lack of coordination; and
- Delays

Pooling budgets between commissioners was the most practical way to overcome that fragmentation to jointly commission as a whole system. In Warrington, there was approximately £360 million in commissioning budgets which could be pooled. Currently, this funded 18 acute hospitals, 3 community health trusts, 37 voluntary sector agencies and over 200 care agencies.

A pooled budget might enable community/primary care interventions at less than a quarter of the cost to the system. Advantages included:

- Encouraging innovative and user-focused service design.
- Reducing the number of separate funding streams that citizens had to access -
- Reducing the number of systems that citizens had to navigate
- Providing a crucial opportunity for the integrated decision-making necessary to meet the outcomes;
- Strengthening partnership working;
- Challenging partner agencies to deploy resources more effectively to achieve shared outcomes; and
- Assisting the planning process

Pooling would also provide the opportunity to make efficiencies in:

- The forecasting of need;
- Reduction of transactional costs and cutting down on procedural duplication;
- Greater flexibility to shift funding into preventative and early intervention services;
- the introduction of single contracts from a pooled budget thereby reducing overheads; and
- generating economies of scale.

Since the inception of the Better Care Fund there had already been significant improvements against to key performance targets.

The Board –

- endorsed the proposals to expand the Better Care Fund with the suggested plan to include £38.3m of pooled funds in 2016/17, subject to further discussion with the various budget holders
- endorsed the narrative plan's alignment with the 'Together We...' document.

Outcome:

The Board has overseen the construction of the BCF Plan for 2016/17 and has signalled its commitment to the grater pooling of funds where relevant to the integration agenda

Integration in Practice

The Board also maintains oversight of those services that are either starting to move towards formal integration, or are currently delivering services in a highly integrated manner, or are already delivering services via a fully integrated structure.

Warrington Health Plus

In 2014/15 we reported on the rolling out of Warrington Health Plus, which would see the delivery of primary care services delivered much closer to home through 8 area-based clusters. The overall project had been supported by the Prime Minister's Challenge Fund.

This year the Board considered a presentation as to progress on the implementation of the Warrington Health Plus project. The clusters had been operating since the beginning of May 2015. All clusters were working well and were actively engaged in local projects.

One key area of focus was the rolling out of extended access. It was envisaged that the Bath Street NHS Health and Wellbeing Centre would remain open until 8pm on 7 days per week. It was also proposed to add capacity for some 10,000 additional GP appointments per year across the system.

Other work included:-

- Improving work life balance in order to recruit and retain additional GPs; and
- Establishing a multi-disciplinary team to work with care homes and improve outcomes.

Outcome:

The Board has satisfied itself that the innovative new model for delivery of primary care closer to home was taking shape.

Developing Collaborative Clusters by aligning Key Services to Primary Clusters

The Board considered two reports on the development of Collaborative Clusters by aligning other key local services to the NHS Primary Clusters established by Warrington Health Plus (above).

The first report set out a proposed strategy for next steps through collaborative engagement and consultation with the workforce of the provider organisations and primary care to implement the model.

The report detailed progress on:

- Challenges and Opportunities;
- National Updates

Outcome:

The Board has encouraged work to align a wider range of services to the primary care clusters developed under the Warrington Health Plus model.

Innovation Hub at Bath Street

The Board considered a presentation on the development of a new Innovation Hub at the Bath Street Health and Wellbeing Centre.

There were several streams to the strategy for the development of the Hub, which focussed on the evaluation of IT based solutions for the delivery of healthcare. A key challenge was to ensure that everyone, including staff and the public, understood what was needed.

A space had been acquired at the Bath Street and named the Innovation Hub. The aim was to simulate a patient's home and a health venue and to test how IT might improve the pathways within the system. The project also

included working closely with IT partners such as BT. The project went live in July 2015.

Outcome:

The Board undertook a site visit to the Innovation Hub on 2 July 2015 and witnessed first-hand how IT could increase flexibility of service delivery and improve the patient experience for some groups.

Cheshire Transformation Challenge Award / Complex Dependencies Programme

In 2014/15 we reported on the performance of the Complex Families Programme, which looked at how the Council and its partners dealt with those families who had multiple needs.

This year the Board heard about work to build upon that foundation, following the award of some £5m in December 2014 from Department of Communities of Local Government (DCLG) Transformation Challenge Award. The Vision of the programme was to establish a ground-breaking multi-agency approach to tackling issues of complex dependency for a wider cohort of children, families and vulnerable adults across Warrington, Cheshire West and Chester, Halton and Cheshire East.

The Programme was looking to support around 10,000 people, with the cohort drawn from:-

- Adults and children involved in crime or anti-social behaviour;
- Children who had problems at school;
- Children who needed help;
- Adults out of work or at risk of financial exclusion;
- Individuals and families affected by domestic violence and abuse;
- People with drug and alcohol problems;
- Individuals with a range of (non-age related) health problems; and
- Young people affected by homelessness/rough sleeping.

A follow up report later in the year highlighted progress. In particular, the Board heard that

the pan-Cheshire programme team was developing five key areas:-

- An integrated 'front door';
- Locality case management;
- Joint commissioning;
- Benefits realisation and
- Workforce development.

Outcome:

The Board has endorsed a key programme which aims to improve outcomes for children, families and vulnerable adults and reduce the cost to agencies and services by supporting the development of an early help offer to clients to avoid them reaching crisis and by providing crisis management for those who have.

Spotlight on Out of Hospital Care

The Board received a presentation on the work being undertaken to transform out of hospital services.

The programme involved 5 partners: 2 GPs, Warrington and Halton Hospitals NHS Foundation Trust, Bridgewater Community Healthcare NHS Foundation Trust and Warrington Borough Council. Intermediate Care included Brampton Lodge (a 45 bed unit), the Intermediate Care Assessment Team (ICAT) of around 60 people and the Hospital Discharge Team.

The project was being funded by around £6.2M Better Care Fund monies and was due to be reviewed in January 2016, alongside Halton colleagues. Issues included:-

- Average length of stay;
- Low bed base (45 in Warrington, compared to 41 in Halton and 66 in St Helens);
- Management lines which were unclear;
- Access was not yet 7 days per week, but had the potential to be stepped up;
- Criteria need to be restructured (particularly around re-ablement); and

- Hospital discharges direct to residential homes was too high and more sub-acute care provision was required.

Outcome:

The Board has been proactive in its response to calls at both national and local level to remove so called 'bed blocking'

The Warrington Care Record

In 2014/15 the Board received several reports on a Local Select Committee Inquiry about improving Patient and Social Care User Data Sharing. The Committee had made recommendations in relation to

- Privacy and Consent;
- Communications and Relationships with Patients/Service Users;
- Culture, Confidence and Willingness;
- Information Governance;
- IT Systems, Interoperability and Security;
- Communications and Engagement; and
- Change and Benefits.

This year the Board heard about progress on the implementation of Phase 2 of the project, following the adoption of the report and recommendations of the Inquiry.

Phase 2 had now commenced and a teleconference had already been held. The Terms of reference were being developed and would identify barriers to data sharing and how to overcome them. Phase 3 of the project would involve the implementation of the necessary changes. Data sharing would underpin many of the transformational changes proposed across the health and social care landscape. Accordingly, the project would be aligned with the IT stream of the overall Transformation Programme.

Outcome:

The Board has approved the programme for the delivery of data sharing across the health

and social care sector which will support integrated service delivery.

The Board subsequently endorsed the approach taken to develop the Warrington Care Record and endorsed the Outline Business Case.

The Board also acknowledged a funded procurement stage was underway agreed to identify funding of £10k to develop the Full Business Case.

Update on SEND Services

In 2014/15 we reported on the development of integrated services for Special Educational Needs and Disabilities (SEND).

This year, the Board received an update report which confirmed that Warrington had made excellent progress in the transformation of services for SEND. The integrated service had been established, a Head of Service appointed and a governance process was in place.

The Board considered the future joint funding arrangement of integrated services. Building costs, some posts and the support of the Local Offer were currently grant funded until March 2017. However, planning needed to begin now on how those services will be funded after 2017.

Outcome:

The Board has overseen the introduction of this key integrated service, which has benefited vulnerable young people and adults and is supporting the SEND Partnership Board in its efforts to secure the funding arrangements for its future delivery.

Development and Delivery of Health and Wellbeing Strategy

A core activity of the Board is to develop a Health and Wellbeing Strategy and to oversee the delivery of those aims through the various partner organisations and subordinate Strategies.

Re-shaping the Joint Strategic Needs Assessment

The Board considered a report on a proposal to re-shape the Joint Strategic Needs Assessment (JSNA) to a more streamlined core document, with deep dive supporting documents.

The Board was informed that the JSNA consisted of approximately of 50 topic-specific chapters and a number of summary reports. The topic specific chapters provided a comprehensive and detailed assessment of need and service provision and were used by commissioning managers and service leads as the evidence base on which to develop, reconfigure or target services.

Outcome:

The Board has fulfilled its statutory role of approving the JSNA, while taking account of limited resources.

Health and Wellbeing Strategy 2015-18 - Delivery Plans and Quarterly Performance Reports

In 2014/15 we reported that a refresh of the Warrington Strategy for Wellbeing 2012-15 was underway and that the draft Joint Health and Wellbeing Strategy (HWS) 2015-18 would be available soon.

This year the Board approved the new draft Strategy at its Joint Meeting with LSP on 26 May 2015. The Board later received an update which confirmed that a letter had been sent to all stakeholders thanking them for their contributions to the Strategy. The Strategy

was subsequently formally adopted and the actions tracked.

A detailed progress and performance report was provided to the Board at Quarter 2.

The Quarter 2 report provided exception reporting on those performance indicators that were demonstrating negative trends. These included:

- Starting Well - Children in Care achieving 5 A*-C GCSEs or equivalent (including English and Maths)
- Living Well - healthy weight, smoking prevalence, alcohol related conditions, participation in exercise, mental health, take up of health checks, early cancer diagnosis, and emergency admissions to hospital and suicide rates.
- Ageing Well - Delayed Transfers of Care
- A Strong and Resilient Warrington - Affordable Homes; Congestion levels on Road Network

Outcome:

The Board has carried out its statutory role in approving an updated HWS and continues to monitor its delivery and to ensure any remedial action is carried out where necessary.

Great Sankey Leisure Centre – Neighbourhood Hub Development

The Board received a presentation on behalf of Livewire, in relation to the development of Great Sankey Leisure Centre as a neighbourhood hub. The proposals would comprise a £14M rebuild of the facilities at Great Sankey Leisure Centre. The new centre

would comprise a dementia friendly building, with links to services from Warrington Health Plus, Warrington Hospital and Sport England, including.

- Health and wellbeing facilities;
- Leisure facilities, including pools, a sports hall, and changing facilities;
- Business Inspire Zone; and
- Learning Zone including a library

The Board viewed Livewire's fly-through video of the project, which included an overview of the project

Outcome:

The Board has endorsed the work of its partners at Livewire to invest in the development of a multi-functional neighbourhood hub which will support the wellbeing of local residents.

NHS England Accountability Report to Warrington

The Board considered a quarterly accountability report from NHS England, Cheshire and Merseyside Area Team.

The report outlined national and regional context, together with specific updates on priorities which the Area Teams were responsible for delivering and how those priorities were progressing. Information was provided on the following:-

- Organisational Alignment and Capacity Programme;
- Development of Co-commissioning Arrangements with local CCGs;
- Prime Minister's Challenge Fund;
- New Care Models – Vanguard sites; and
- GP Infrastructure Bids.
- Primary Care;
- Public Health; and
- Specialised Commissioning.

Outcome:

The Board has proactively monitored the work of a key NHS commissioning agency in the delivery of its priorities across Warrington.

Framework for Closing the Gap in Social Inequalities and Child Poverty

The Board considered a report on a new Framework for Closing the Gap in Social Inequalities and Child Poverty, which sought to support the delivery of the Health and Wellbeing Strategy over the next 3 years.

The Framework had been the culmination of a number of months of work. It was not a new concept and similar elements had featured in the Sustainable Community Strategy and first Wellbeing Strategy. The Strategy was based on the fact that some of Warrington's neighbourhoods faced high levels of deprivation ranking within the top 10% most deprived in the country

The Closing the Gap Priority Action Group of Warrington Partnership was looking at a broader remit, not just based on geography. It had, therefore, reflected on what was working well, the challenges ahead, such as the implications of the Welfare Reform cuts, and opportunities such as a strong local economy and the route for families to access this potential source of income. The Framework would not cover all the specific activities possible, but would identify key areas to tackle.

Outcome:

The Board has reflected upon how its work can impact positively on efforts to close the gap in social inequalities and child poverty.

Emotional Health and Wellbeing Transformation Plan 2015-2020

The Board considered a number of reports on the Emotional Health and Wellbeing Transformation Plan.

Nationally, children and young people's mental health had been identified as a priority for greater investment. The Children and Young People's Mental Health Taskforce report 'Future in Mind' highlighted key areas for improvement to meet the needs of children and young people and their families:

- Promoting resilience, prevention and early intervention;
- Improving access to effective support – a system without tiers;
- Care for the most vulnerable;
- Accountability and transparency; and
- Developing the workforce.

Improving the emotional health and wellbeing outcomes for children and young people was a shared priority for Warrington Clinical Commissioning Group and Warrington Borough Council. Integrated commissioning of services so far had led to:

- A greater focus on earlier intervention;
- More training and support for schools;
- More coordinated support for vulnerable groups; and
- Agreeing a way forward to improve perinatal mental health.

There was still much to do to ensure that the local offer delivered the vision in 'Future in Mind'.

Outcome:

The Board endorsed the work being undertaken to provide support for children and young people's emotional health and wellbeing.

Local Account 2014-15

The Board considered the annual update on local authority services for children, young people and adults in need of care and support, which was a statutory reporting requirement looking at the state of care provided locally.

Outcome:

Members of the Board agreed to continue to work with and support Warrington Borough Council in improving local authority services for local children, young people and adults in need of care and support.

Sustainability and Transformation Plans

The Board considered a report on the development of Sustainability and Transformation Plans. In December 2015, the NHS Shared Planning Guidance 2016/17 – 2020/21 outlined a new approach to help ensure that health and care services were built around the needs of local populations. To do this, every health and care system in England would have to produce a multi-year Sustainability and Transformation Plan (STP), showing how local services would evolve and become sustainable over the next five years – ultimately delivering the NHS Five Year Forward View vision of better health, better patient care and improved NHS efficiency.

Some concerns were expressed about the pace of development of the plans and a lack of engagement with the public

Outcome:

The Board noted the architecture and activity in relation to the Sustainability and Transformation Plans and endorsed a letter which had been sent by the Chairman of the Board to Simon Stevens Chief Executive NHS England, asking for greater democratic engagement and accountability in the development of those plans.

Warrington Mental Health Strategy 2015-2018

The Board considered a presentation on the Warrington Mental Health Strategy 2015-2018. The Strategy described the 3 year plan for Warrington, to deliver transformation across mental health services. In particular, the Strategy focussed on three key areas:

- Prevention and early intervention;

- Responsive services; and
- Recovery.

Outcome:

The Board gave its support to the Strategy and its Action Plan.

Warrington Dementia Strategy 2016-2019

The Board considered a report detailing the Dementia Strategy 2016-2019. The strategy described the three year plan for Warrington to deliver transformation across services that provided support to people with dementia, and their carers. The strategy was underpinned by the Living Well with Dementia in Warrington, 2014 document and the National Dementia Strategy.

Outcome:

The Board gave its support to the Strategy and its Action Plan.

Alcohol Harm Reduction Strategy 2016-19

The Board considered a report on the draft Alcohol Harm Reduction Strategy 2016-19. The draft Strategy was approved.

Outcome:

The Strategy would ensure a coordinated partnership response to the alcohol related harm and misuse that placed a huge burden on individuals, communities and public services across Warrington. The Board also agreed to forward the report to the Council's Licensing Committee for consideration.

Oversight of Key Strategies and Reports

The Board maintains oversight of a large number of detailed strategies, work programmes and partnership activity, that support the core aims of the Health and Wellbeing Strategy. The Board also has oversight of inspection reports provided by a number of regulatory bodies and formal statutory annual reports.

Public Health - Annual Report 2015

The Board considered the Public Health Annual Report 2015. The report was a statutory requirement, although there was significant flexibility around the content.

Last year's report had focused on adults and this had led to a commitment to report on public health in the context of children and young people in the current year. The following topics were covered:-

- Smoking;
- Alcohol;
- Substance misuse;
- Obesity;
- Sexual health and contraception;
- Feeling and being safe;
- Emotional wellbeing;
- Actions being taken;
- Experiences of young people using local services; and
- Key messages;

The report also included general information on the Health of Warrington and Public Health Two Years On, following transfer of the function to the Council.

Outcome:

The Board has received assurance from the Public Health Service about their successful transition from the NHS to a local authority function and about their role in ensuring that children and young people have the best start to leading healthy lives.

Reduction of Public Health Grant

The Board considered a report on a Government announcement of an in-year cut to the Public Health Grant.

A ring-fenced budget had been provided with the transfer of Public Health to local authorities in April 2013. That budget was reported to be under threat although the full extent was not known until the announcement of the Emergency Budget statement on 8 July 2015.

The Public Health Service commissioned services, carried out health promotion, gathered knowledge and intelligence and protected the health of the population. Individual services provided included:-

- Health visiting;
- Family practitioners, including teenage mothers;
- Sexual health; and
- Substance misuse and alcohol treatment.

It also commissioned services for wider health issues, such as:-

- Citizen's Advice Bureau (CAB) support for GPs;
- Funding for Warrington Home improvement Agency; and
- Homelessness - outreach and YMCA health improvement programme.

The Board was advised that there might be a 7.4% cut in the Public Health Grant, which would equate to some £800k for Warrington.

Outcome:

The Board received early warning of some likely funding pressures which enabled it to

plan how it might deal with a shortfall of funding in Public Health Services.

Warrington Clinical Commissioning Group - Annual Report 2014/15

The Board considered the Annual Report 2014/15 from NHS Warrington Clinical Commissioning Group (CCG). The report covered the following areas:-

- Introduction to the CCG;
- Member Practices Introduction;
- Strategic report;
- Members report;
- Remuneration Report;
- Statement of Accountable Officer Responsibility;
- Annual Governance Statement;
- Register of Interests;
- NHS Warrington CCG Accounts 2014/15; and
- External Audit Findings Report.

The provision of an Annual Report was a statutory requirement. The report summarised the CCG's activities each year and needed to comply with the National Audit Committee requirements. Key information was contained within the Strategic Report section of the document.

Outcome:

The Board has received assurance through the Annual Report that the CCG has delivered its proposed outcomes. The accounts showed that £249M had been invested in Warrington, with only £4.3M of that total spent on overheads and the CCG operating with less than 40 staff.

Ofsted Recommendations – Children's Services and Safeguarding

The Board considered a report on the outcome of the May 2015 Ofsted Inspection into local authority Children's Services and the review of the Warrington Safeguarding Children's Board (WSCB). The Board were provided with a copy

of the full Ofsted report, together with a spreadsheet which gave comparative information about other local authorities' inspection outcomes.

The report was in distinct sections focusing on the local authority safeguarding role and the work of the Safeguarding Children's Board. The overall judgement was that Warrington Children's Services required improvement. The report would also be the subject of rigorous scrutiny by the Children's Safeguarding Board, Overview and Scrutiny and Senior Management Team.

Outcome:

The Board was satisfied that work was underway to develop an improvement plan for both the local authority and WSCB and the Board has maintained oversight of the areas that required improvement.

Warrington Safeguarding Children's Board Annual Report 2014/15 and Mid-Year Update

The Board considered the Warrington Safeguarding Children's Board (WSCB) Annual Report 2014/15 and a follow up report in the second half of the year.

The Annual Report stated that the Board had undertaken a wide range of work during the year, including significant activity to increase protection for children and young people in Warrington at risk of harm from neglect and sexual exploitation. The report detailed a realistic analysis of progress made over the last year to keep children safe and of the challenges that still remained, including the causes of these challenges, action taken to address them and WSCB's future focus of work.

Although Ofsted's overall judgement in 2015 was that the WSCB 'required improvement', its report had highlighted a number of strengths in the work undertaken by WSCB, including that the Board operated within a mature culture of respectful challenge, was well connected to

other statutory bodies, in part due to a set of clear and effective protocols, and that training was a particular strength. In addition, Ofsted had said that no children or young people had been found to be unsafe and not being supported during the course of this inspection. The Board was delivering an improvement plan that addressed actions required in the Ofsted report.

Some key outcomes in 2014/15 included:-

- increased protection for children and young people at risk of child sexual exploitation (CSE) or who were going missing from home or care;
- working with WSCB Youth (Reference) Group to ensure that children and young people could actively participate in the work of the Board and that the voice of the child could be heard;
- commissioning a piece of work to consider the issues raised in the report Real Voices: Child Sexual Exploitation in Greater Manchester;
- supporting stronger public engagement in local child safety issues and an improved public understanding of the WSCB's child protection work; and
- listening directly to practitioners' views.

WSCB's priorities for the next two years were as follows:-

- Protecting children from neglect;
- Protecting children from domestic abuse;
- Promoting the safety and wellbeing of the most vulnerable, including protecting children at risk of sexual exploitation, missing from home, trafficked and at risk from social media; and
- Improving the quality and consistency of safeguarding practice.

An update report was subsequently considered which covered the period September 2015 – March 2016, which showed that progress was on track.

Outcome:

The Board has received assurance that the WSCB is carrying out its role effectively and has taken on board the recommendations for improvement highlighted by Ofsted.

Warrington Safeguarding Adults Board Annual Report 2014/15 and Mid-Year Update

The Board considered the Warrington Safeguarding Adults Board (WSAB) Annual Report 2014/15 and a follow up report in the second half of the year.

The Board was informed that Shirley Williams had been appointed as Chair of the WSAB in April 2015, following the departure of her predecessor Audrey Williamson. Ms Williams confirmed that she was pleased with the experience of adult safeguarding in Warrington. The recent Local Government Association (LGA) peer review had provided positive feedback on the work of the WSAB. 2014/15 was the first year of the Board as a statutory body with associated statutory responsibilities.

Some of the most notable accomplishments identified in the report were as follows:-

- The LGA Peer Review had found that the WSAB was making a real difference in keeping people safe and had confirmed that partners worked well together;
- Positive perceptions of safety – 89% of the people surveyed had reported that services helped to make them feel safe and secure;
- Greater compliance with CQC standards with 80% of care home providers and 89% of domiciliary providers now meeting the required standards and improving the quality of care, which exceeded the national averages;
- Learning from case reviews including the development of a multi-agency self-neglect policy with guidance for professionals on how to spot and respond to concerns more effectively; and
- Significant progress made by Warrington and Halton Hospital Trust on reducing the

amount of avoidable pressure ulcers to 39%.

As part of the current year's report, the WSAB had identified that resources were a key challenge in meeting the safeguarding agenda for all partners.

The Annual Report identified four key priorities for the WSAB, as follows:-

- listening and responding to what adults told the Board about their experiences of abuse and neglect, and the services and support they received;
- developing a preventative approach to support, safeguard and protect adults at risk of abuse and neglect;
- making sure that there was a good range of multi-agency safeguarding training for all professionals who came into contact with adults at risk; and
- developing WSAB's scrutiny of partnership arrangements for adult safeguarding so that it could be confident that all was being done to prevent abuse from occurring and that interventions were proportionate and in the best interests of the adult.

An update report was subsequently considered in the second half of the year which showed that progress was on track and noted some changes in personnel and Board Members.

Outcome:

The Board has received assurance that the WSAB has carried out its new statutory role effectively and has identified key priorities for the future, which are being implemented.

Healthwatch Warrington Annual Report 2014/15

The Board considered the Healthwatch Warrington Annual Report 2014/15. Healthwatch was a statutory body which provided a voice for patients and their families in respect of health and social care services

provided locally. The report included information on the following:-

- Mission and values;
- Strategic priorities 2014/15;
- Engagement with people who use health and social care services;
- Providing information and signposting for people who use health and social care services;
- Influencing decision makers with evidence from local people;
- Impact stories;
- Plans for 2015/16;
- Governance and decision-making;
- Financial information; and
- Contact Information.

It was noted that the Healthwatch brand was well known in Warrington and had been re-energised, but that there was a continual need to get the message out about its work.

Outcome:

The Board noted the on-going work and successes of Healthwatch Warrington regarding service users and its priorities for 2015/16.

Warrington Domestic Abuse Services

The Board considered a report on a proposed solution to the long term funding of Domestic Abuse Services. The report included information on the following:-

- Underlying Issues;
- Reasons for funding the Domestic Abuse Service (including cost to lives and cost to the public purse);
- Saving lives - the impact of Domestic Abuse Services;
- Funding Issues (including 2015/16 funding shortfall and funding issues from 2016).

The Board heard that the Warrington Domestic Abuse Partnership (WDAP) had insufficient funds to meet its full commitments for 2015/16

and was unable to re-commission services from 2016/17 without a commitment from partners to make a financial contribution. This commitment would ensure the provision of key services to the most vulnerable on a multi-agency basis and in an integrated way for at least the next 2 years.

Outcome:

The Board encouraged partners to consider the requests for additional funding contributions set out in the report, which ultimately resulted in the Warrington Domestic Abuse Partnership commitments being met.

Inspection of SEND Services

The Board considered a report on the future arrangements for Special Educational Needs and Disability (SEND) Inspections and an update on the new joint inspection process.

The report detailed local accountability with the majority of statutory duties in relation to SEND resting at a local area level.

The Board endorsed the following action -

- The SEND Partnership Board maintaining inspection readiness as a key agenda item;
- The regular updating of partners on progress of service and its 'visibility';
- Establishing a strong data set so that progress on outcomes could be measured;
- Clearly documenting how the local offer was used and continually monitoring uptake;
- Ensuring that parents were involved at all levels and that strong co-production was in place;
- Ensuring that the views of young people influenced service development; and
- Inviting other local authorities to undertake a peer review at the beginning of 2016.

Outcome:

The Board has received assurance that the SEND Service is ready for any inspection under the new joint inspection process.

Utilisation Management

The Board considered a detailed report and presentation from Utilisation Management based at the Salford Royal NHS Foundation Trust, on understanding patient flow, demand and capacity across Warrington and Halton. The report was central to enabling health and social care partners to plan for future service provision.

Outcome:

The Board was able to use this report to understand the bigger picture about patient flows, to identify blockages in the system and to take necessary action to address those issues.

Warrington and Halton Hospitals NHS Foundation Trust CQC Inspection / Monitor Report

The Board considered a report following the publication of the Care Quality Commission (CQC) Inspection Report on 10 July 2015 and the Enforcement Undertakings issued by Monitor dated 12 August 2015 about Warrington and Halton Hospitals NHS Foundation Trust.

The CQC Inspection Report had presented the findings of a comprehensive announced inspection that took place between 27 and 29 January 2015 and a follow up unannounced inspection on 11 February 2015. The Trust had been assessed against the CQC's fundamental standards of Safe, Effective, Caring, Responsive and Well-Led.

Overall the report painted a positive picture of the Trust. The report told the story of the compassionate care delivered by the Trust and the commitment of the staff who worked there. Staff had been open and honest during the inspection and the report, therefore, also reflected the pressures seen, which were similar issues to those faced by many hospitals of that size. However, no issues had been identified that needed immediate remedy. The

overall rating given by CQC was 'Requires Improvement', although it could be said that this was a harsh outcome given that the issues identified were relatively minor.

In respect of the Enforcement Undertakings agreement with Monitor, there were some links to the above issues. Monitor focused on finance and governance, whereas CQC was patient focused. The Trust anticipated a Budget deficit of £15M in 2015/16. The position was deteriorating and the deficit had been increasing for the last two years. The underlying issue was that the cost of delivering the service was greater than the budget allocation. In addition, the Government had approved £10M of efficiency savings for the current year. The savings were increasingly hard to achieve given that 70% of costs were staffing related.

Outcome:

The Board was pleased that CQC had rated all of the Hospital Trust's services as both caring and effective without exception and the report had highlighted the compassion and dedication of the staff providing care.

The Board noted the difficult financial position faced by the Trust, which led to it requesting a briefing on the issue of delayed hospital discharges ('bed blocking'), which was a significant factor burden on the Trust's budget. That briefing is highlighted below.

Delayed Discharges

The Board received a presentation on the context surrounding delayed discharges from hospital to social care support services, and plans for improvement.

The presentation covered the following points –

- What was measured;
- Statistical analysis – national, regional and by month;
- Point prevalence – Weekly snapshot;

- Point prevalence – Warrington and Halton Hospitals NHS Trust Delays;
- Point prevalence – Bridgewater NHS Trust Delays (Warrington);
- Point prevalence – Warrington Local Authority Delays;
- Areas of Focus – Internal Issues Which Need Continued Attention;
- Areas of Focus – External Issues which need continued partner agency collaboration and support; and
- The Future – Integrated Out of Hospital Care

Board Members discussed a range of issues including 'bed blocking'; use of and reliance upon agency staff; and out of hospital care.

Outcome:

The Board has encouraged partners to work together to ensure that improved patient flows and integrated out of hospital care.

CQC Quality Report of 5 Boroughs Partnership NHS Foundation Trust

The Board considered a presentation on the January 2016 Care Quality Commission (CQC) quality report of acute provision delivered by 5 Boroughs Partnership. The presentation detailed the CQC approach and the Trust's overall rating of 'Requires Improvement' and those specific areas for improvement.

Overall the CQC report was very positive report and the recent the Quality Summit had endorsed that view and provided some useful feedback.

Outcome:

The Board was pleased to note that CQC had highlighted that quality services were provided by 5 Boroughs Partnership and that an action plan was in place to address the small number of areas for improvement identified.

CQC Reports into Local Nursing Homes

The Board received details of CQC inspection reports relating to:-

- Thelwall Grange Nursing Home
- Birch Court Nursing and Residential Home
- Brampton Lodge

Outcome:

The Board noted the performance of nursing homes within the Borough.

Wider Information and Context

The Board maintains oversight of national policies, regional initiatives and local responses on a range of issues which support the wider aims of the Health and Wellbeing Strategy.

Welfare Reform and Work Bill 2015

The Board considered a report on the proposed next phase of the welfare reforms.

The Board was reminded that following the general election the new Government had published the Welfare Reform and Work Bill 2015, setting out a series of proposed reforms to welfare benefits. The overall aim of the Welfare Reform and Work Bill 2015 was to reduce the national welfare budget and further encourage those who were able to work back into employment.

The Bill dealt with the second major set of reforms to welfare benefits in recent years. The first phase had included the introduction of Universal Credit, which was still being rolled out, a cap on the overall amount any one household could claim in welfare, changes to housing benefit and the introduction of Personal Independence Payments (PIPs), amongst other changes.

The next phase was expected to impact on a large number of people, as it also incorporated limits on tax credits, which could be claimed by households in work as well as those not; limits on claims for families with 3 or more children; payment freezes or limits in uplift to many out of work benefits; and limits on entitlements for young people.

The main changes were as follows:-

- a reduction in the benefit cap for non-working households to £20,000 (£13,400 for single people);
- a freeze of most working-age benefits and tax credits at 2015-16 rates for four years, including tax credits and local housing allowances;

- a reduction in benefit rates for claimants of Employment and Support Allowance (ESA) in the Work Related Activity Group (WRAG) to the same level as Job Seekers Allowance (JSA) rates for new claims from April 2017;
- from April 2016, introduction of a new compulsory living wage of £7.20 an hour for the over 25s, with a target of reaching more than £9 an hour by 2020; and
- a 1% reduction in social housing rent, which would hit local social housing provider's income quite significantly, with potential knock on impact on local housing investment and service provision.

The Council had reconvened the Welfare Reform Action Partnership, to begin once again to make a more in-depth assessment of the potential impact, identify where possible which households and communities would be most affected, and plan activities to lessen negative impact.

Outcome:

The Board noted the potential impacts of the next phase of the Welfare Reforms and asked partners to consider and the potential impact on their own service users and organisation.

The Board also endorsed the reconvening of the Welfare Reform Action Partnership, and invited partners to commit practical support as required to assist in delivering its action plan, once developed.

Preparation for Winter Pressures

The Board considered an update from Warrington CCG on Warrington's preparations for winter pressures across the system. The Department of Health had challenged the NHS to be ready for peak demand over the winter

period in 2015/16, in response to poor performance nationally in the winter of 2015 with missed targets for A&E waiting times, delayed discharges and 'Black Alerts', where local health economy was unable to deliver comprehensive emergency care.

The update covered a range of points including winter planning; resilience funded schemes; new innovations this year; utilisation of the fines applied to the acute trust for underperformance against A&E, mixed sex accommodation, and ambulance handover.

The Board received assurance that health services in Warrington were prepared for the increased demand usually seen throughout the winter months.

National Policy Briefings

CCG Quality Premium – Selection of Indicators

The Board considered a report which provided an oversight of the national Quality Premium for 2015/16, which was in place to reward CCGs for improvements in the quality of services that they commissioned and for associated improvements in health outcomes and reducing inequalities.

Options for Integrated Commissioning

The Board considered a briefing which summarised two key national reports that considered potential future models for the integration of health and social care, as follows:-

- Viewpoint: Reconsidering accountability in an age of integrated care (Nuffield Trust, July 2015)
- Options for Integrated Commissioning: Beyond Barker (King's Fund, June 2015)

Sugar Reduction – the Evidence for Action (Public Health England)

The Board received a policy update in relation to the case for the reduction of sugar in diets.

The Public Health England's report 'Sugar Reduction: the Evidence for Action' set out a range of tough policies that need to be taken to reduce the consumption of sugary foods and drinks that were fuelling the obesity crisis

Whilst a number of the recommendations required national solutions, work was already underway in Warrington under the umbrella of the Healthy Weight Strategy; which had been ongoing since 2014 and was due to be reviewed in 2018. The Healthy Weight Action plan, focused on three main elements:-

- Prevention and Young People;
- Obesogenic Environment; and
- Healthy Weight Services.

The Board recommended that a 'campaign' be developed to promote the topic, which might involve Livewire, schools, public health communications, and waiting room screen communications.

Measuring the Performance of Health Systems (The King's Fund)

The Board received a policy update on a review, in June 2015, of how the performance of local health systems could be assessed. The review had been undertaken by The King's Fund and had been commissioned by the Department of Health.

Their review looked at how to measure the performance of health services within Clinical Commissioning Group (CCG) areas, including how well those services worked with social care and public health services.

The King's Fund had recommended a radical simplification and alignment of existing NHS performance frameworks.

Health, Public Health and Social Care Round-up - Policy updates from the LGIU

The Board were signposted to the LGIU's monthly health, public health and social care round-ups, which summarised new policy,

research and publications that were relevant to elected members, officers and partners interested in health and social care. The policy updates were intended to be a digestible read and provided links to the source documentation of major reports for further consideration. The briefings usually included information under the following categories:

- major developments
- health and social care reform and finance
- public health
- health and social care quality and practice.

Delivering the Forward View: NHS planning guidance 2016/17 – 2020/21

The Board received a policy update on the NHS Five Year Forward View, which set out a vision for the future of the NHS. The document also introduced the concept of Sustainability and Transformation Plans, which are explained elsewhere in this Annual Report.

The NHS Five Year Forward View had been developed nationally by all of the partner organisations that delivered and oversaw health and care services including:

- NHS England
- NHS Improvement (Monitor and the NHS Trust Development Authority)
- Health Education England (HEE)
- The National Institute for Health and Care Excellence (NICE)
- Public Health England (PHE)
- Care Quality Commission (CQC)

The Board also considered 'Delivering the Forward View: NHS Planning Guidance 2016/17 – 2020/21, which included information on selecting a geographical transformation footprint;

The Board had expressed a preference for Warrington's Sustainable Transformation Plan footprint to be the Liverpool City Region as part of the Mid Mersey conurbation. However, the final footprints were to be larger areas, with

Warrington falling within the Cheshire and Merseyside footprint.

Marmot Indicators 2015 by Local Authority Area

The Board received a policy update on the Marmot Indicators 2015, which provided a snapshot of the health of the population of England by local authority area, and of the factors that influence good health such as childhood development.

New Inspection Framework For Children's Services

The Board received a report on changes to the inspection framework for Children's Services by OFSTED. Joint Targeted Area Inspections (JTAI) of arrangements and services for children in need of help and protection in local authority areas in England, were due to start in February 2016. Each JTAI would include a 'deep dive' theme (the first of which, between February and August 2016, would be child sexual exploitation and children missing from home, care or education.

In addition to the JTAs, there would be a number of Ofsted Targeted Local Authority Inspections, which would also include a 'deep dive' theme

Outcome:

The Board has kept abreast of key national policy and the rapidly changing health and social care environment through its access to regular briefings and policy updates.

Governance

The Board keeps under review its own Terms of Reference, to ensure that its functions and powers are up to date, its procedures are comprehensive and efficient and its structures are fit for purpose. The Board's culture of openness ensures that its members are able to take robust strategic decisions which benefit the whole health and social care system.

Health and Wellbeing Board Annual Report 2014/15

The Board approved its Annual Report for 2014/15 and Retrospective, which was the Board's first public facing round up of its work. The report described the nature of the Board and its role and highlighted some key achievements. The report also considered the early work of the Board and provided some detailed information on its successes in 2014/15 and its future priorities.

Updates from Reference Groups

The Board regularly received minutes and reports from its various reference groups as follows:-

- Warrington Partnership Board;
- Integrated Commissioning Governance Board (ICGB);
- Health and Social Care Summit
- Provider Board.
- Transformation Change Board

Related reports included:-

- Revised Terms of Reference of the ICGB; and
- A summary of the progress of the Provider Board, which noted that emerging programmes were developing well, with workshops due to be provided and a Vision and Strategic document due to be launched.

Issues of Strategic Importance

The Board has now included 'Issues of Strategic Importance' as a standing agenda item. The intention is to provide an opportunity

for all Board Members to briefly report on any matters, of which they were aware, that would be significant in terms of their impact on the work of the Board.

Health and Wellbeing Peer Challenge

The Board considered a report detailing a proposal to undertake a Local Government Association (LGA) Health and Wellbeing Board Peer Challenge. The report summarised the methodology of the Peer Challenge process, and outlined the key resource requirements.

The Board noted that this presented an opportunity for Warrington Health and Wellbeing Board (HWB) to take part in a free Peer Challenge review and agreed to participate in the process.

It was envisaged that the Peer Challenge would take place later in 2016.

Joint Meeting with Warrington Partnership (LSP)

The Board held a joint meeting with the Warrington Partnership, (Warrington's Local Strategic Partnership) on 26 May 2015.

The meeting ratified the new Health and Wellbeing Strategy which is reported elsewhere in this document. The joint meeting also looked at:-

- Performance on outgoing HWS; and
- the 'Warrington Pound' (the total amount of public money spent in Warrington)

AQuA Workshop

Board Members participated in a session on 24 March 2016 during which it used a self-assessment framework developed by Advancing Quality Alliance (AQuA) to review the operation of the Better Care Fund (BCF). Small workshops were facilitated to identify strengths and weaknesses and to identify opportunities for improvement in the way that the Board oversaw implementation of the BCF. The assessment included the following categories:-

- Leadership;
- Governance;
- Culture;
- Service User/Carer Engagement;
- Finance;
- Information and IT;
- Workforce; and
- Service and Care Model Design.

The views expressed were debated further when the Board came together, with the conclusion emerging that pooled budgets and a single integrated commissioning model would be the best way forward. It was acknowledged that this conclusion had been reached on previous occasions but that there remained some challenges, both organisational and cultural, which needed to be resolved before the Board could fully realise this aspiration.

The Board therefore identified a number of actions for further discussion at the next Health and Social Care Summit meeting, including:

- prioritising finance and contracting arrangements;
- exploring whether IT could be re-prioritised as it was a key enabler;
- giving further consideration to the possibility of an Integrated Commissioning Organisation; and
- developing shared communications, including the opportunity for system leaders to contribute.

Outcome:

The Board has ensured that its own structure and procedures are fit for purpose in order for it to successfully lead the transformation of health and social care.

5. Summary and Looking Ahead

2015/16 has seen the Board meet its statutory roles of promoting integration, overseeing integrated services in practice, leading on the development and implementation of the Health and Wellbeing Strategy and having oversight of relevant local and regional strategies and of key national policy developments. The Board has also reviewed its own governance to ensure it is able to respond to the challenges ahead.

In 2016/17, the Board will continue to monitor progress on its two key programmed areas of Health and Social Care Transformation and Integrated Commissioning. The question of moving to fully integrated commissioning of services has not yet been resolved, but that there remains broad support for the current direction of travel towards full integration. It is anticipated that this topic will be high on the agenda for 2016/17 and the work programme already includes an item about the Greater Manchester Area Devolution Deal to learn from their experience and to set the scene for further discussions on integrated commissioning. Seamless health, social care and other services are becoming a reality.

The Board will also maintain oversight of the operation of the Better Care Fund in the coming year and will again determine the level of pooled funding under this heading for future years. An additional report under the Better Care Fund had already been programmed for 2016/17 to discuss the development of 7 days per week services.

A key area for the Board in 2016/17 will be to keep a close watch on the development of regional Sustainability and Transformation Plans and to be an active participant in their development. Understanding the implications of the plans for local services and monitoring their impact will be a significant task. The Board is aware of the careful balance between the clinical and economic arguments for increased delivery of specialist services at centres of excellence and the expectation of the public to receive healthcare based locally and the need to ensure the viability of smaller hospitals for those services which are best delivered locally. There could, potentially, be implications for a number of local NHS Provider Trust arising from the transformation agenda which will need to be carefully thought through.

A key piece of work in 2016/17 will be to commence the refresh of the existing Pharmaceutical Needs Assessment (PNA) so as to have in place a new assessment for 2018 onwards. The PNA was the document against which NHS England assessed applications from chemists to join the Pharmaceutical List or from those chemists on the list to open new premises or relocate.

The Board has also asked for specific reports in 2016/17 the following

- Heathwatch Warrington – feedback from ‘enter and view’ activity; and
- Use of agency staff at Warrington and Halton Hospital.

Finally, there remains some uncertainty nationally around the ‘Brexit’ Referendum decision for the UK to leave the European Union. It is not fully understood how that decision might impact on national funding decisions for the NHS and health and

social care sector generally. In addition, it is unclear yet as to whether any support will be introduced to replace monies currently available to Local Enterprise Partnerships from the European Regional Development Fund, which help to provide regeneration and employment projects that have a positive effect on the wider determinants of health. Finally there may be implications on the workforce of provider organisations in the health and social market, particularly the potential loss of access to migrant workers who currently fill some jobs within the sector. The potential opportunities afforded by Brexit are not yet immediately apparent. The Board will need to maintain an overview of any pressures and opportunities as they arise.

**For more information about this document,
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