

HEALTH AND WELLBEING BOARD

Monday, 23 January 2017

Present:

Councillor Phil Davies (Chair)

Ms N Allen	Head of Medical, NHS England
Mr D Allison	CEO Wirral University Hospital Trust
Mr A Crawshaw	Director of Operations & Delivery, NHS England
Mr P Davies,	Chair, Healthwatch
Mr J Develing	Accountable Officer, Wirral CCG
Ms S Edwards,	Service Director- Wirral NHS Community Trust
Councillor P Gilchrist	Wirral Council
Councillor Jeff Green	Wirral Council
Mr M Greatrex	Deputy CEO Wirral NHS Trust (dep for K Howell)
Ms F Johnstone	Director of Policy, Performance and Public Health
Councillor C Jones	Wirral Council
Mr G Hodgkinson	Director for Health & Care
Dr S Wells	Chair Wirral CCG

53 **DECLARATIONS OF INTEREST**

Members were asked if they had any pecuniary or non-pecuniary interests in connection with any application on the agenda and, if so, to declare them and state the nature of the interest.

Councillor Phil Gilchrist declared a non-pecuniary interest by virtue of being the Appointed Governor: Cheshire and Wirral NHS Partnership Trust.

Councillor Jeff Green by declared a non-pecuniary interest during the discussion by virtue of being a Board Member of Magenta Living (formerly Wirral Partnership Homes).

Councillor Chris Jones declared a personal interest by virtue of her employment with the Cheshire and Wirral Partnership NHS Foundation Trust.

54 **APOLOGIES FOR ABSENCE**

Apologies for absence were received from Chief Superintendent Ian Hassall, Merseyside Police, Julia Hassall, Director of Children's Services, Annette Roberts, Wirral Community Action, Val McGee, Director of Integration and Partnerships, Wirral Community Trust (Deputy for Karen Howell), Gary Oakford, Merseyside Police, Councillor Tony Smith and Julie Webster, Head of Public Health.

Further to Minute 44, Health & Wellbeing Board, 16 November, 2016 the Chair opened the meeting and informed attendees that the NHS Wirral CCG report had been published at 3.00pm immediately prior to the last meeting of the Health and Wellbeing Board and Members had not been in a position to give due consideration of the report. The Special Meeting of the Health and Wellbeing Board had therefore been arranged to consider the report and he noted that a debate had subsequently been held at full Council. Members agreed with the Chairs proposal that Members combine consideration of the agenda items 3, 4 and 5 which would be presented by Jon Develing, Accountable Officer, Wirral CCG.

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Jon Develing introduced the report 'NHS Wirral CCG STP Report' and summarised the highlights that were relevant to Wirral residents in particular. He expressed his appreciation of the levels of anxiety surrounding the STP and the concern about the lack of engagement with elected members. Mr Develing apologised for the way the report had been developed and published. He said it was important, however, to ground the report in the considerable achievements that had been made in Wirral through the Healthy Wirral Plan that had previously endorsed by the Health and Well-being Board.

The Board was informed that the Cheshire and Wirral Local Delivery System Plan (LDS) covered a wide geographical area and built on existing improvement programmes including Healthy Wirral, Caring Together, The West Cheshire Way and Connecting Care. It was clear however that increased demand on health services coupled with an ageing population meant that should no further action be taken there would be an estimated financial gap of circa £314m by 2020. The development of the Local Delivery System Plan across Cheshire & Wirral had provided the opportunity to share best practice and consolidate learning so as to explore rapid adoption of those initiatives that have had the most impact.

Mr Develing highlighted the four key priorities

- 1) Managing care in the most appropriate setting including a significant focus on prevention to help people live healthier lives and thereby reduce demand on health and care services. This would involve building on work

already progressed to develop strategies to improve the management of care in areas including Alcohol related harm, Hypertension, Respiratory and Diabetes

2) Driving out variation in practice through standardising care pathways admission to hospital rates and unwarranted variation in lengths of stay and prescribing rates.

3) Looking how systems can become more efficient with the use of back office functions and in making back office functions more effective. Also by exploring different ways of working and new governance arrangements with a particular emphasis on accountable care.

It was emphasised that the STP was a planning footprint and not a statutory entity. Consequently, with regard to accountability, individual NHS organisations would remain responsible for ensuring their legal duties to involve were met during the design, delivery and implementation process of specific proposals. It was noted that CCGs had a statutory duty to consult on any significant service change.

Mr Develing informed the Board that a full engagement plan was being developed for the next phase of public and stakeholder engagement for the STP, with NHS and local authority representatives involved in shaping an overarching plan for Cheshire & Merseyside. He emphasised that the STP was the sum of its parts and that it must be driven bottom up from local plans so as to truly reflect the needs and diversity of needs of respective populations. It was further noted that whilst there was a direct correlation between that developed locally (Healthy Wirral) and that within the STP, this was not as clear as it could be and any future Cheshire & Merseyside level plans would need to better reflect this relationship and it was important that the work of Healthy Wirral was acknowledged. Copies of the Cheshire & Merseyside Sustainability and Transformation Plan and the Cheshire & Merseyside Sustainability and Transformation Plan Summary were included as agenda items 4 and 5 respectively.

Following the presentation the Chair opened the meeting for comments and questions and indicated that he was highly critical of both the lack of consultation with elected Members and the fact that courtesy had not even been afforded to share this with the Leader of the Council. There had consequently been no opportunity to input to any extent and Members had been expected to react to a document that they had not even had sight of. It was understandable that there were concerns that there was a hidden agenda. Members were not therefore prepared to endorse the Plan until some meaningful engagement had taken place. He concluded that credibility had been seriously damaged by the lack of endorsement by elected Members of the Council and called for more information. He commented that engagement was needed urgently as there was concern that the STP had become a 'toxic brand' and there were fears that it would therefore become difficult to make progress on these Plans.

Councillor Jeff Green questioned whether there was a proposal to downgrade services at Arrowe Park Hospital, whether there were plans to relocate services to Liverpool and whether there were plans to move elective surgery to Clatterbridge Hospital. Mr Develing responded that there no plans to downgrade services at APH, no plans to move any Wirral services to Liverpool and it was correct that some elective surgery could move to Clatterbridge in order to better utilise resources. Councillor Green further commented that whilst it was recognised that the NHS was 'in a bind' as better outcomes was an indication of success. People were living longer and thus demands on procedures cost money and the desire to put the document in place was understood. He cautioned however that it would not be useful if this became a proxy for a political fight with the Government.

Councillor Phil Davies indicated that he welcomed the report as a starting point for discussion and engagement and thanked the partners for their input. Councillor Phil Gilchrist raised concerns whether the Plan was all about rationing and Mr Develing responded that Wirral had an ageing population and demand was exceeding the ability to meet demands. It was not clinically sustainable given the numbers of GPs, Registrars and Nurses coming forward into the service. It was therefore important that options such as a shared service with the Countess of Chester for example in the field of Ophthalmology or the best use of the Clatterbridge site for Orthopaedics be looked at so that services could become clinically sustainable.

David Allison, CEO Wirral University Hospital Trust, commented that it was worth remembering that the Trust was one of the largest employers at 5,500 employees and was in the upper quartile nationally. There was increasing demand on non-elective (not planned) care and in January 2017 compared to December 2016 there was a 45% increase in the number of patients going through resuscitation and a 13% increase in Ambulance attendances. In the week prior to the meeting there had been 102 patients who could be cared for outside hospital and there was never a better time for close integrated care with health and social care. The Trust was looking at a substantial deficit and there would be a significant financial challenge even if savings were enacted. There was therefore no option to do nothing. Wirral had 94,000 patients and the Countess of Chester had 74,000 so there would be no move away from the two strategic sites. Areas that had to be considered would be areas that would avoid the duplication of any services e.g. ENT. Orthopaedics and Ophthalmology and the vision for Clatterbridge would be an integrated campus. Areas that would be looked at would include the back/middle office. In response to a question from Cllr Phil Gilchrist Mr Allison said there were no plans for a larger hospital at APH – it was a 1970's build and it was recognised that in the long term the options of replacing assets would have to be looked. APH was not however a single asset and it would be about replacing parts of it and keeping assets up to date which would be a preferred option than having to consider a complete rebuild in 12-15 years' time.

Members discussed the Plan and contributed to the discussion including comments from Councillor Chris Jones who reflected on the good work around Healthy Wirral and acknowledged the integration involved whilst also commenting that as a Council Wirral was willing to be involved. Dr Sue Wells commented on the finite resources of manpower and finance and stressed that collaboration and integration was most important and agreed that there had never been a time when there had been so much working together between health and social care. Graham Hodgkinson agreed that what was needed was a system that was not 'hospital-centric' and it was vital that Health was looked at in a broader place based agenda that would sit within the Partnership's 20:20 vision that would enable everyone to live healthier lives.

Councillor Phil Davies thanked Jon Develing and all the partners for their contributions.

Resolved – That;

- 1. the Health and Wellbeing Board thanks Mr Jon Develing for his attendance and presenting of the key points of the Sustainability and Transformation Plan (STP).**
- 2. the Health and Wellbeing Board notes the contents of the Cheshire & Merseyside Sustainability & Transformation Plan.**
- 3. the Health and Wellbeing Board asks for further reports with engagement with the public and stakeholders.**
- 4. the Health & Wellbeing Board reaffirms support for the priorities set out in the Healthy Wirral Plan.**

56 CHESHIRE & MERSEYSIDE SUSTAINABILITY AND TRANSFORMATION PLAN

Discussed under agenda item 3, minute no 55 refers.

57 CHESHIRE & MERSEYSIDE SUSTAINABILITY AND TRANSFORMATION PLAN SUMMARY

Discussed under agenda item 3, minute no 55 refers.