

Meeting: Strategic Commissioning Board			
Meeting Date	03 August 2020	Action	Information
Item No	11	Confidential / Freedom of Information Status	No
Title	Bury System Board Meeting – 14 May 2020		
Presented By	Dr J Schryer, CCG Chair, NHS CCG Bury		
Author	-		
Clinical Lead	-		
Council Lead	-		

Executive Summary
<p>The paper includes the minutes of :</p> <ul style="list-style-type: none"> <li>Bury System Board Meeting held on 14 May 2020</li> </ul>
Recommendations
<p>It is recommended that the Strategic Commissioning Board:</p> <ul style="list-style-type: none"> <li>receive the Minutes of the Bury System Board Meeting held on 14 May 2020.</li> </ul>

Links to Strategic Objectives/Corporate Plan	Yes
Does this report seek to address any of the risks included on the Governing Body / Council Assurance Framework? If yes, state which risk below:	N/A
<i>Add details here.</i>	

Implications						
Are there any quality, safeguarding or patient experience implications?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	N/A	<input type="checkbox"/>
Has any engagement (clinical, stakeholder or public/patient) been undertaken in relation to this report?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	N/A	<input type="checkbox"/>
Have any departments/organisations who will be affected been consulted ?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	N/A	<input type="checkbox"/>
Are there any conflicts of interest arising from the proposal or decision being requested?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	N/A	<input type="checkbox"/>
Are there any financial implications?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	N/A	<input type="checkbox"/>

Implications						
Are there any legal implications?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	N/A	<input type="checkbox"/>
Are there any health and safety issues?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	N/A	<input type="checkbox"/>
How do proposals align with Health & Wellbeing Strategy?						
How do proposals align with Locality Plan?						
How do proposals align with the Commissioning Strategy?						
Are there any Public, Patient and Service User Implications?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
How do the proposals help to reduce health inequalities?						
Is there any scrutiny interest?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
What are the Information Governance/ Access to Information implications?						
Has an Equality, Privacy or Quality Impact Assessment been completed?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Is an Equality, Privacy or Quality Impact Assessment required?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Are there any associated risks including Conflicts of Interest?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Are the risks on the CCG /Council/ Strategic Commissioning Board's Risk Register?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Additional details	N/A					

Governance and Reporting		
Meeting	Date	Outcome
Bury System Board	14/05/2020	Minutes being submitted for ratification

<b>Title</b>	<b>Minutes of the Bury System Board 14 May 2020</b>		
<b>Author</b>	Jill Stott, LCO Governance Manager		
<b>Version</b>	2.0		
<b>Target Audience</b>	Members of the Bury System Board		
<b>Date Created</b>	May 2020		
<b>Date of Issue</b>			
<b>To be Agreed</b>	June 2020		
<b>Document Status</b> (Draft/Final)	Draft		
<b>Document History:</b>			
<b>Date</b>	<b>Version</b>	<b>Author</b>	<b>Notes</b>
18.05.20	1.0	Jill Stott	Draft Minutes submitted to MO'D for checking
21.05.20	2.0		Amendments made by MO'D
<b>Approved:</b>			
<b>Signature:</b>			.....

## Bury System Board

### MINUTES OF MEETING

14 May 2020, 10 – 11am

Via Teams

**Chair – Dr Jeff Schryer**

#### Members Present:

Dr Jeff Schryer, Chair Bury CCG (Chair) (JS)

Mr Geoff Little OBE, Chief Officer, Bury CCG/Bury Council (GL)

Ms Julie Gonda, Interim Executive Director, Communities and Wellbeing (JG)

Ms Kath Wynne-Jones, Chief Officer, Bury LCO (KWJ)

Mr Howard Hughes, Clinical Director, Bury CCG (HH)

Mr Mike Woodhead, Joint Chief Finance Officer, Bury CCG/Bury Council (MW)

Cllr Andrea Simpson, Chair/Deputy Leader and Cabinet Member for Health and Wellbeing, Bury Council (AS)

Ms Margaret O'Dwyer, Director of Commissioning & Business Delivery/Deputy Chief Officer NHS Bury CCG (MO'D)

Ms Lindsey Darley, Director of Transformation and Delivery, Bury LCO (LD)

Ms Catherine Jackson, Executive Nurse, Bury CCG (CJ)

Mr Chris O'Gorman, Independent Chair, LCO Board (CO'G)

Ms Mui Wan, Associate Director of Finance, Bury LCO (M Wan) for Mr Craig Carter

Mr Keith Walker, Executive Director of Operations, PCFT(KW)

Mr Sajid Hashmi MBE, Chair Bury VCFA (SH)

#### Others in attendance:

Ms Nicky O'Connor, Interim Director of Transformation, Bury Council (NO'C)

Ms Lesley Jones, Director of Public Health, Bury Council (LJ)

Ms Jill Stott, LCO Governance Manager (JMS)

#### Apologies

Apologies for absence were received from:

- Dr Kiran Patel, Medical Director, LCO
- Ms Karen Dolton, Executive Director Children's Services, Bury Council
- Dr Daniel Cooke, Clinical Director, Bury CCG

## MEETING NARRATIVE & OUTCOMES

<b>1.</b>	<b>WELCOME AND APOLOGIES</b>
	JS welcomed those present to the Bury System Board and introductions took place. Apologies were noted as outlined above.
<b>2.</b>	<b>DECLARATIONS OF INTEREST</b>
	Members were asked to declare any interest they may have on any issues arising from agenda items which might conflict with the business of the Bury System Board.  None were declared.

<p><b>3.</b></p>	<p><b>Recovery Plan</b></p> <p>HH presented to the Board on “Bury Health and Care Recovery,” covering the 3 main recovery areas of phasing, principles and priorities.</p> <p><b>Recovery Phasing</b></p> <p>3 elements to this (release of lockdown, living with Covid19, building back better) running concurrently and noting the need to be able to flex plans in case of rising infections.</p> <p><b>Recovery Principles</b></p> <p>HH explained that this was about a one-system plan avoiding organisational protectionism. The shift to care closer to home will be a significant element to the work and positive behaviours will be a guiding principle of recovery work.</p> <p><b>Recovery Priorities</b></p> <p>HH listed the main areas of priority in this work, including urgent, planned and social care. Again, he noted the need to remove organisational barriers as a key component of this work. As part of the neighbourhood integration work, where the intention is to align the community hubs with the integrated neighbourhood teams (INTs), he suggested a coordinated line management model could be utilised.</p> <p>As part of the summary of the key enablers work (Digital, Workforce, Estates) HH highlighted the crucial role of workforce and an emphasis on retaining the resilience and flexibility currently being demonstrated by staff across Bury. He explained that implementation of the plan would be led by the Health and Care Task and Finish Group, which would be made up of leads from across the system, ensuring a Bury system-wide approach.</p> <p>Three main categories of risk were listed in the presentation and HH made particular reference to the risk around reverting to previous behaviours and to organisational over protectionism. He noted the ongoing importance of governance, safeguarding and IG governance, but suggested a different approach to these could be taken in the future, building on the learning gained during this period.</p> <p>Responses to the presentation were invited from the group:</p> <p>MW suggested that the profile of Finance should be strengthened in the list of priorities and formally listed as an enabler.</p> <p>LD noted that the timeline for implementation of the Urgent Care Review may need to be put back, pointing out also that feedback from the public consultation on this had not been seen by the LCO. She also highlighted the risk around reverting to old behaviours of being one for all across the system. JS confirmed that the outcomes of the UC review had not yet been through all governance routes.</p> <p>GL made a number of points in response to the presentation:</p>
------------------	--

- need for a written version of the overarching ambition and objectives for this next stage of work (this will include the requirement to support pressures across the system, care homes, domiciliary care, residential settings, etc.)
- Retention of the shift from acute to community which has taken place needs to be a priority, particularly as this was an integral part of the Bury Locality Plan
- Building on the work during this period, including quick and significant changes in service delivery, the need to focus now on 5 or 6 priorities and to continue to make timely decisions
- A focus on modelling demand with defined metrics is required as part of the shift from acute to community work
- Financial considerations to be a priority area, taking into account any challenges from a Greater Manchester or North West perspective

As part of the community capacity and planning work JG reported that she is a member of the GM Out of Hospital Cell Group, where a narrative around future community planning is being developed.

She also noted the importance of incorporating meaningful engagement with the public on future services, focusing on co-production of any future models of service delivery.

AS suggested that this is a prime time to make longer-term changes to the delivery of services, noting that service users prefer some aspects of current work, e.g. the digital offer. She suggested that the efficiencies gained from the revised model of working in general practices should also be retained and that the new positive ways of working in both primary and acute care should continue.

JS concurred that the digital solution in Primary Care has been a success and that barriers to resisting this way of working, which may have previously been there, have been broken down.

### **LCO Priorities for the next 6 months**

KWJ gave a short presentation on the LCO's priorities noting the importance of the LCO's role in adding value to the system, supporting positive behaviours, though being mindful that the LCO is not a statutory organisation and therefore has different responsibilities to other partners.

She highlighted the need to avoid duplication across the roles of provider integrator (LCO) and system integrator (OCO).

The presentation categorised the priority areas into 3 areas – business as usual, transformation and connectivity – detailing LCO executive leads and LCO Board sponsors for each work stream.

Members of the Board responded to the update:

SH noted the increasing role of the community hubs as being central at a locality level and KWJ agreed that there should be greater connection between the INTs and other

neighbourhood models.

GL explained that the Sustain and Recovery Task and Finish Group, meeting later in the day, would be identifying work stream leads and SROs and that this would be about creating teams of leaders rather than any individual organisation leading specific areas.

He suggested that the INTs should be made fully operational as soon as possible, with a connection between the LCO's work and the public sector work led by Lynne Ridsdale and Nicky O'Connor.

HH noted the need for flexibility around the work streams listed in the presentation and the requirement for LCO work to adapt to any change of direction, e.g. implementation of the UC review or work in the neighbourhoods may evolve and change. KWJ accepted the need for flexibility across the system and for a focus on positive behaviours and that good communication needs to be part of this.

ID	Type	Action/Decision:	Owner
A/02/02	Action	JS/LD to progress through the governance the outputs from the Urgent Care consultation once agreed	JS/LD

4.	Testing and Contact Tracing
	<p>CJ and LJ presented jointly on “Test, Track and Chase”, details of which had previously been shared, along with the supporting documents:</p> <ol style="list-style-type: none"> <li>1. Covid-19 Contact Tracing in Greater Manchester (GMCA briefing note)</li> <li>2. Operational Plan for the Greater Manchester Strategy for Mass Testing (GM and East Cheshire)</li> <li>3. Strategy for Mass Testing in Greater Manchester.</li> </ol> <p>CJ outlined the main themes within the national strategy for testing, detailing the 5 pillars of work within this. She explained the testing criteria for relevant cohorts and gave details of local testing provision. She updated on the latest position regarding antibody testing and the risks around this area.</p> <p>LJ updated the Board on the tracing work, noting that this was now part of a national single leadership model. She explained that the work had already been in place before lockdown began and has now been re-established. The national, GM and Bury system architecture was described as part of the presentation, demonstrating the collaborative work across the 10 GM localities.</p> <p>LJ reported that a first draft of a system map (similar to the one produced by the LCO) is being developed with a first draft to be available later in the day.</p> <p>In response to a question on what capacity Bury would need to support the tracing programme LJ explained that further details were still required on this, but that GM are working on design, workforce and data. She confirmed that Bury's 2 infection control nurse service has been enhanced by an additional 8 staff, with the potential for further support from GM.</p>

<b>5.</b>	<b>Closing Matters</b>
	<p><b>David Jones</b> Following the news that Councillor Jones has decided to step down from his role as leader of the council, JS paid tribute to the work carried out by him both within this Board and wider.</p> <p><b>#TeamBury Video</b> A thank you video has been produced on behalf of the OCO thanking key workers across the system for their work in providing key services during lockdown. As there was not enough time to run the video during the meeting it was agreed the link for this would be shared with members.</p>

<b>Next Meeting</b>	<b>Date: 18 June 2020, 10.30- 12.30, via Teams</b>
<b>Enquiries</b>	e-mail: <a href="mailto:jill.stott@nhs.net">jill.stott@nhs.net</a> Tel: 0161 762 1597