

<b>Meeting: Strategic Commissioning Board (Public)</b>			
<b>Meeting Date</b>	03 August 2020	<b>Action</b>	Approve
<b>Item No</b>	3	<b>Confidential / Freedom of Information Status</b>	No
<b>Title</b>	Minutes of Last meeting and Action Log		
<b>Presented By</b>	Cllr E O'Brien, Co-chair of the SCB and Bury Council Leader / Dr J Schryer, Co-Chair of the SCB and CCG Chair, NHS Bury CCG		
<b>Author</b>	Emma Kennett, Head of Corporate Affairs and Governance		
<b>Clinical Lead</b>	-		
<b>Council Lead</b>	-		

<b>Executive Summary</b>
<p><b>Introduction and background</b></p> <p>The attached minutes reflect the discussion from the Strategic Commissioning Board held on 8 June 2020.</p>
<p><b>Recommendations</b></p> <p>It is recommended that the Strategic Commissioning Board:</p> <ul style="list-style-type: none"> <li>Approve the Minutes of the Meeting held on 8 June 2020 as an accurate record; and</li> <li>Note progress in respect to agreed actions captured on the Action Log.</li> </ul>

<b>Links to Strategic Objectives/Corporate Plan</b>	Choose an item.
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>	

<b>Implications</b>						
Are there any quality, safeguarding or patient experience implications?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Has any engagement (clinical, stakeholder or public/patient) been undertaken in relation to this report?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Have any departments/organisations who will be affected been consulted?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>

Implications						
Are there any conflicts of interest arising from the proposal or decision being requested?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Are there any financial implications?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Are there any legal implications?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Are there any health and safety issues?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
How do proposals align with Health & Wellbeing Strategy?	N/A					
How do proposals align with Locality Plan?	N/A					
How do proposals align with the Commissioning Strategy?	N/A					
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?	N/A					
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?	N/A					
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						

Governance and Reporting		
Meeting	Date	Outcome

<b>Title</b>	<b>Minutes of the Strategic Commissioning Board Virtual Meeting on 8 June 2020</b>		
<b>Author</b>	Emma Kennett, Head of Corporate Affairs and Governance		
<b>Version</b>	0.1		
<b>Target Audience</b>	Strategic Commissioning Board Members / Members of the Public		
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<b>Document History:</b>			
<b>Date</b>	<b>Version</b>	<b>Author</b>	<b>Notes</b>
	0.1	Emma Kennett	
<b>Approved:</b>			
<b>Signature:</b>		<p>.....</p> <p style="text-align: right;"><b>Dr J Schryer</b></p>	

# Strategic Commissioning Board Virtual Meeting

<b>MINUTES OF MEETING</b>
Strategic Commissioning Board Virtual Meeting 8 June 2020 16.30 – 18.00 <b>Chair – Cllr E O'Brien</b>

<b>Voting Members</b>	
Cllr Eamonn O'Brien	Leader, Finance & Growth, Bury Council (Chair)
Dr Jeff Schryer	NHS Bury CCG Chair
Cllr Jane Black	Cabinet Member Corporate Affairs & HR, Bury Council
Mrs Fiona Boyd	Registered Lay Nurse of the Governing Body, NHS Bury CCG
Mr Peter Bury	Lay Member Quality & Performance, NHS Bury CCG
Dr Daniel Cooke	Clinical Director, NHS Bury CCG
Cllr Clare Cummins	Housing Services, Bury Council
Dr Cathy Fines	Clinical Director, NHS Bury CCG
Mr Howard Hughes	Clinical Director, NHS Bury CCG
Cllr David Jones	Communities & Emergency Planning, Bury Council
Mr Geoff Little	Chief Executive, Bury Council / Accountable Officer, NHS Bury CCG
Mr David McCann	Lay Member Patient & Public Involvement, NHS Bury CCG (for part)
Cllr Alan Quinn	Environment & Climate Change, Bury Council
Cllr Tahir Rafiq	Corporate Affairs & HR, Bury Council
Cllr Andrea Simpson	First Deputy Leader, Health & Wellbeing, Bury Council
Cllr Lucy Smith	Transport & Infrastructure, Bury Council
Cllr Tamoor Tariq	Deputy Leader, Children, Young People & Skills, Bury Council
Mr Mike Woodhead	Joint Chief Finance Officer, NHS Bury CCG and Bury Council
<b>Others in attendance</b>	
Ms Karen Dolton	Executive Director of Children and Young People, Bury Council
Mrs Lisa Featherstone	Deputy Director, Bury CCG and Bury Council
Mrs Julie Gonda	Interim Executive Director – Communities & Wellbeing, Bury Council
Mrs Catherine Jackson	Director of Nursing and Quality Improvement, NHS Bury CCG
Ms Lesley Jones	Director of Public Health, Bury Council
Cllr Nick Jones	Council Opposition Member, Bury Council (for part)
Ms Nicky O'Connor	Interim Director of Transformation, Bury Council
Ms Margaret O'Dwyer	Deputy Chief Officer/Director of Commissioning, NHS Bury CCG
Ms Nicky Parker	Programme Manager, Urgent Care Review, Bury Council
Ms Lynne Ridsdale	Deputy Chief Executive, Bury Council
Ms Janet Witkowski	Head of Legal Services, Bury Council
Ms Marie Rosenthal	Governance, Bury Council
Mrs Emma Kennett	Head of Corporate Affairs Governance, NHS Bury CCG / Business Support (minutes)
<b>Public Members</b>	
Mr Joseph Timan	Bury Times
Ms Barbara Barlow	Chair, Healthwatch

## MEETING NARRATIVE & OUTCOMES

1 Welcome, Apologies And Quoracy			
1.1	The Chair welcomed those present to the meeting and noted apologies had been received from: -		
	<ul style="list-style-type: none"> <li>• Mr Chris Wild, Lay Member, NHS Bury CCG;</li> <li>• Ms Donna Ball, Executive Director of Operations, Bury Council;</li> <li>• Cllr Michael Powell, Council Opposition Member, Bury Council.</li> </ul>		
1.2	It was reported that this was the first SCB meeting for Cllrs Rafiq, Cummins and Smith following the recent changes made to the Council's Cabinet in May 2020. It was noted that a report in relation to the proposed changes to SCB Membership and voting arrangements was included at Agenda Item 5 for today's meeting. It was highlighted that should the proposed changes be supported, these would not come into effect until the next formal SCB meeting in August 2020 as the report would need to be submitted via the respective governance arrangements at both the CCG and Council in the first instance. It was noted that a should a vote be required at today's SCB meeting, the votes from the Council side would remain with the existing SCB Members (Cllrs O, Brien, Black, Jones, Quinn, Simpson and Tariq) with Cllr Cummins nominated from the new members in attendance.		
1.3	The Chair advised that the quoracy had been satisfied.		
ID	Type	The Strategic Commissioning Board:	Owner
D/06/01	Decision	Noted the information.	

2 Declarations Of Interest	
2.1	The Chair reported that the CCG and Council both have statutory responsibilities in relation to the declarations of interest as part of their respective governance arrangements.
2.2	It was reported that the CCG had a statutory requirement to keep, maintain and make publicly available a register of declarations of interest under Section 14O of the National Health Service Act 2006 (as inserted by Section 25 of the Health and Social Care Act 2012). The Local Authority has statutory responsibilities detailed as part of Sections 29 to 31 of the Localism Act 2011 and the Relevant Authorities (Disclosable Pecuniary Interests) Regulations 2012.
2.3	The Chair reminded the CCG and Council members of their obligation to declare any interest they may have on any issues arising from agenda items which might conflict with the business of the Strategic Commissioning Board.
2.4	Declarations made by members of the Strategic Commissioning Board are listed in the CCG's Register of Interests which is presented under this agenda and is also available from the CCG's Corporate Office or via the CCG website. <ul style="list-style-type: none"> <li>• <b>Declarations of interest from today's meeting</b></li> </ul>
2.5	There were no declarations raised.

	<ul style="list-style-type: none"> <li>• <b>Declarations of Interest from the previous meeting</b></li> </ul>		
2.6	There were no declarations of interest from the previous meeting raised.		
ID	Type	The Strategic Commissioning Board:	Owner
D/06/02	Decision	Noted the published register of interests.	

<b>3 Minutes of the last Meetings and Action Log</b>			
	<ul style="list-style-type: none"> <li>• <b>Minutes</b></li> </ul>		
3.1	The minutes of the Strategic Commissioning Board meeting held on 4 May 2020 were agreed as an accurate record.		
	<ul style="list-style-type: none"> <li>• <b>Action Log</b></li> </ul>		
3.2	There was one open action on the Action Log (A/12/08) which related to the Director of Commissioning & Business Delivery bringing a report back to the Governing Body once business as usual is resumed in relation to the Plastic Free Plan from a health perspective. This would remain open on the Action Log for the time being. It was noted that all other actions had been completed.		
ID	Type	The Strategic Commissioning Board:	Owner
D/06/03	Decision	Approved the minutes of the meeting held on the 4 May 2020.	

<b>4 Public Questions</b>			
4.1	It was reported that there had been a number of questions raised in relation to the Urgent Care Review report included at Agenda Item Number 8. The main themes arising from the questions related to public transport and car parking which would be discussed further as part of the Urgent Care item.		
4.2	It was noted that all individuals who had submitted questions would receive a written response following the meeting.		
ID	Type	The Strategic Commissioning Board:	Owner
D/06/04	Decision	Noted the questions raised.	
A/06/01	Action	Written responses to be sent to all individuals who have submitted questions to the SCB.	Mrs Kennett

<b>5. Changes to SCB Membership / Voting Arrangements</b>			
5.1	The Chair submitted a report in relation to the proposed changes to the SCB membership and voting arrangements.		
5.2	It was highlighted that the paper set out the revised membership and voting arrangements for the Strategic Commissioning Board following the recent changes to the Council Cabinet to enable the Board to continue to operate efficiently and effectively in discharging the duties delegated to it from the Council Cabinet and CCG Governing Body.		
5.3	It was reported that the Strategic Commissioning Board had been established as a Joint		

	<p>Committee, under the NHS Bodies and Local Authorities Partnership Arrangements Regulations 2000 (as amended) to support the delivery of health and care integration in Bury. Whilst developing the governance arrangements, including voting arrangements, a number of discussions were undertaken with the Cabinet, Council, Governing Body, CCG membership and NHS England. The arrangements were approved by all parties consulted and an overarching governance paper was submitted to the Strategic Commissioning Board in October 2019, including the final Terms of Reference which set out the voting arrangements in respect of the SCB. This reflected no more than 7 voting members and 2 non-voting members from the CCG and 7 voting members from the Council Cabinet plus two (2) opposition party representatives in attendance.</p>
5.4	<p>It was reported that following the Annual Council Meeting in May 2020, and subsequent changes to the Council's Cabinet there was an increased number of Cabinet members, from the previous 7 to 9. This change had impacted on the voting arrangements of the SCB, and whilst it was envisaged that all decisions would be made by consensus, appropriate provisions must be in place in the eventuality that a vote is required.</p>
5.5	<p>It was proposed that the Cabinet member votes on the SCB increases to match the number of Cabinet members. Additionally, and to ensure an appropriate balance, the CCG would also need to allocate 9 votes to its Governing Body members. In doing so, it would exclude the long-standing vacant clinical director post, and would include all posts required on a Governing Body by statute and recommended guidance, in addition to the three existing Clinical Directors.</p>
5.6	<p>In relation to quoracy, it was proposed that both the Cabinet and CCG voting members be increased to 4 representatives from the previous 3. In line with the Partnership Agreement and pooled budget arrangement, there should be equal votes on both sides in order for the decision to be compliant. The requirement for one joint Executive Officer also to be present to achieve quoracy would remain.</p>

ID	Type	The Strategic Commissioning Board:	Owner
D/06/05	Decision	Supported the revised membership, voting and quoracy arrangements for the Strategic Commissioning Board as set out in the paper and revised Terms of Reference;	
D/06/06	Decision	Recommended the draft Terms of Reference to the respective governance arrangements for formal approval.	

<b>6.</b>	
6.1	<ul style="list-style-type: none"> <li>• <b>Update on Covid-19 Response / Recovery</b></li> </ul> <p>The Chief Executive, Bury Council / Accountable Officer, NHS Bury CCG provided an update on the latest Covid-19 position in Bury. The Director of Public Health also shared some slides to support the agenda item. It was reported that: -</p> <ul style="list-style-type: none"> <li>• There had been 782 cases of Covid-19 as at the 8<sup>th</sup> June 2020.</li> <li>• It was likely that the R rate was just below 1 which was a feel from the data however it was difficult to calculate the R rate at a Bury level and there was a need to create an early warning system to support this area.</li> <li>• The number of Covid-19 cases had now plateaued meaning that the Covid-19 case rate was 4.1 per 1000 for people living in the borough.</li> </ul>

- When considered as a rate per 100,000 population, Bury had the 2<sup>nd</sup> highest rate across Greater Manchester with this being 411.3 cases per 100,000 at 6<sup>th</sup> June. This places Bury 13<sup>th</sup> highest out of 150 LAs. Oldham has the highest GM rate (467.7 per 100,000) and is placed 6<sup>th</sup> highest across England.
- In terms of the lifting of the Lockdown, it was essential that everybody maintained social distancing and obeyed the rules.
- The Community Hubs that had been established to support the Covid-19 response would be built upon for future ways of working as part of the Bury 2030 Strategy.
- In relation to the National Track and Trace System, the national approach to contact tracing included two main elements namely the national Test and Trace service that was launched on 28<sup>th</sup> May 2020 and the NHSX app, which had been tested in the Isle of Wight but an exact date for full roll out is not yet confirmed. It was noted that the whole system was not expected to be fully operational until September/October 2020.
- Plans were being developed to support GPs to start to bring back more of the routine appointments such as the vaccination programme.
- In relation to the shielded population, the guidance changed on the 1<sup>st</sup> June 2020 to recommend that the shielded cohort should go outside for exercise. Further 'offloading' guidance has been received and people are getting letters and texts to inform them they are no longer classified as clinically vulnerable. Decision point is expected on the 15<sup>th</sup> June 2020 as to whether to lift all shielding guidance for the clinically vulnerable at the current suggested end point of the 30<sup>th</sup> June 2020.
- The Covid-19 Outbreak Plan for Bury was outlined which included a single point of contact (SPOC) for Covid-19 issues, close integration with local and national testing pathways, a core infection control team and Sector Specific arrangements.
- In terms of future Lockdowns, there was little clarity yet on what this meant from both a national and local point of view and what the trigger would be or how this could be implemented.

6.2 The following comments/observations were made from Strategic Commissioning Board members: -

- The need to ensure that people within the borough get the appropriate support they need going forward from both a mental and physical health perspective.
- There was a need to closely monitor the R rate in order to control the virus at a local level hence accurate and reliable data would have a key role to play in this regard.
- There were concerns about the national roll out of the Track and Trace programme in light of reports that all contacts were not receiving the required communication. There had been a lack of clarity from central government within this area which had also been the case as part of other Covid-19 developments such as the reopening of school and shops.
- There were still people within the borough who were not fully abiding by social distancing rules with groups of individuals still gathering at locations such as Heaton Park.
- **Health & Care Recovery Planning**

6.3 Mr Hughes presented a report in relation to the Health and Care Recovery Planning. It was reported that: -



- The response phase to Covid-19 had seen unprecedented changes in the Bury health and care system.
- As the initial peak of the pandemic had been overcome, attention now focussed on the approach to recovery.
- The Bury Health and Care System recovery plan would be aligned to GM's three phases namely Release of lockdown, Living with Covid and Building Back Better.
- The Health and Care System Recovery Task Group had been established system wide to support the recovery programme. They will lead and drive implementation through a structured approach.
- The group had agreed key principles to provide a framework for the work:
  - Whole system approach.
  - Fundamental shift in how Bury delivers Health and Care.
  - Positive Behaviours
- The emerging priority programmes of work would focus around the following key themes namely Removing Organisational Boundaries and Improved Neighbourhoods.
- Work had commenced to establish system SROs and programme teams and the development of programme charters to clearly define the work plan including expected outcomes, risks and interdependencies.
- In terms of the proposed next steps, the group would focus on the following: -
  - Completion and agreement of programme charters and plans;
  - Support SRO's to develop SMART KPIs and outcome measures;
  - Agreement of governance and reporting framework;
  - Development of visual system map highlighting planned work;
  - Ensure system submission of capacity planning return before 22<sup>nd</sup> June;
  - Working through programme interdependencies.

6.4 The following comments/observations were made from Strategic Commissioning Board members: -

- The good work within this area was commended and there was a need to maintain momentum to ensure that the benefits realised as part of the Covid-19 response are embedded as part of future working practices.

ID	Type	The Strategic Commissioning Board:	Owner
D/06/07	Decision	Noted the report and supported the proposed next steps.	

## 7. Physical Activity Strategy Update

- 7.1 The Director of Public Health provided a presentation to update on the latest Physical Activity Strategy developments. It was reported that: -
- Pre Covid-19 more than one in four adults were classed as inactive, doing less than 30 minutes of Physical Activity (PA) per week.
  - A similar percentage of young people were not meeting Chief Medical Officer Guidelines for PA.
  - Sport England research had shown that almost two thirds of adults considered exercise to be more important than ever during the Covid-19 crisis.
  - National data suggested during Covid-19 the type of exercise carried out has also changed - outdoor activities such as cycling, walking and jogging increased

over April.

- TfGM data shows that walking and cycling use for essential exercise has seen an increase of 120% and 45% respectively.
- Nationally the data was still showing inequalities in PA levels during Covid-19 with the 16-34 year olds more likely to have done more activity in the past week when compared to those over 55.
- People in higher socio-economic groups were more likely to have done more activity in the past week than those in lower socio-economic groups.
- People in urban areas were more likely to have done less activity in the past week than people in rural areas.
- There was currently limited data on the local impact of Covid-19 on PA levels.
- A survey had been developed and is currently out on 'One Community' to better understand the impact and changes to physical activity behaviour of local people.
- The Bury Physical activity strategy developed in late 2019 focused on 4 key areas in terms of creating an active society (media, narrative, hubs, schools), an active environment (infrastructure, engagement, communications, promotion), active people (creative provision, online, workplace support) and active systems (utilising data, understand levels of PA in communities).
- A workshop to develop local action plans for each area was timetabled for March 2020 but had to be cancelled due to Covid-19.
- Significant amounts of work already happening to promote walking, cycling, running and other outdoor provision.
- Adaption of current leisure services to support the community to be active e.g. the use of virtual classes (including a new virtual timetable), utilising social media and online and telephone consultations.

The following comments/observations were made from Strategic Commissioning Board members: -

7.2

- There appeared to be more people cycling and walking since the Covid-19 Lockdown began however the 'Daily Mile' programme within schools had been lost as a result of schools closing. It was suggested that the 'Daily Mile' programme be built back into schools upon reopening.
- Positive behaviours such as healthy eating can be learnt from others.
- There was a need to improve the supporting infrastructures to support people with physical activity, for example, bicycle schemes etc.
- The need to engage with teenagers in relation to fitness/safe sporting activities to discourage anti-social behaviour.
- There was a piece of work being undertaken to capture any 'hidden gems' in terms of outdoor spaces that have been uncovered during Lockdown.

ID	Type	The Strategic Commissioning Board:	Owner
D/06/08	Decision	Noted the presentation	

8.	Urgent Care Review
8.1	The Chief Executive and the CCG Chair presented a report in relation to the Urgent Care Review.
8.2	It was highlighted that the report set out the outcome of the urgent care public consultation exercise, the Quality Impact Assessment, the Equality Impact Assessment and an update since the outbreak of Covid-19.

8.3	It was highlighted that the proposals set out in the public consultation exercise received overall support from the people that responded. Concerns about parking at Fairfield General Hospital and access to the site by public transport and car had been noted and some mitigating actions were proposed. There were no adverse impacts shown in the quality or equality impact assessments that have been completed and it was recommended that the proposals were implemented.
8.4	It was noted that some of the proposals have been partially implemented due to the impact of the Covid-19 pandemic and the report sets out the desired next steps including implementation of a programme of work by the Local Care Organisation.
8.5	<p>It was reported that the objectives of the Urgent Care Review were to:</p> <ul style="list-style-type: none"> <li>• Redesign to simplify access points to improve patient experience.</li> <li>• Improve performance of 4 hour waits to support Pennine Acute in gaining their full share of the Provider Sustainability Fund.</li> <li>• Mitigate growth and reduce the percentage of the budget spent on Urgent Care.</li> <li>• Deliver a minimum of £2.6m savings from Urgent Care Services “in scope”.</li> <li>• Work towards achievement of the GM UEC Improvement and Transformation Plan.</li> </ul>
8.6	<p>It was noted that the following services were in scope for the Urgent Care Review in Bury:</p> <ul style="list-style-type: none"> <li>• Urgent Care Treatment Centre.</li> <li>• Emergency Department at Fairfield General Hospital.</li> <li>• Walk in Centres at Moorgate and Prestwich.</li> <li>• GP Out of Hours Service (BARDOC).</li> <li>• GP Extended Access.</li> <li>• GP Extended Working Hours.</li> <li>• Green Car Service.</li> <li>• Same Day Emergency Care.</li> <li>• GM Urgent and Emergency Care Improvement and Transformation Delivery Plan including the roll out of GM Clinical Assessment Service.</li> </ul>
8.7	<p>It was reported that there were five proposals for an urgent care operating model including: -</p> <ul style="list-style-type: none"> <li>• Option One proposed no change to the current model;</li> <li>• Option Two proposed redesigning urgent care at Fairfield General Hospital without building a new purpose built urgent care facility and embarking on a patient education/information campaign;</li> <li>• Option Three built on Option Two and proposed an additional simplification of in and out of hours primary care access through community triage across the locality;</li> <li>• Option Four built on Option Three and proposed the additional use of technology to support the new delivery model with access to appointments or advice;</li> <li>• Option Five built on Option Four and proposed building a new purpose built urgent care facility in addition, including moving the walk in centre from Moorgate.</li> </ul>
8.8	It was highlighted that additionally, people were asked if they supported : -

- the implementation of online access to GP appointments to sit alongside current appointments;
- the development of an enhanced Urgent Treatment Centre at Fairfield General Hospital, located in front of the Accident and Emergency Department;
- the development of a community triage service to help people get an appointment in the most appropriate service.

8.9

It was reported that throughout the four week consultation process the CCG and Bury Council, working as Bury One Commissioning Organisation, had aimed to capture views from local people, Bury health care professionals and other local interested parties on proposals to improve urgent care services in Bury, before a formal decision was made at an extraordinary meeting of the Strategic Commissioning Board on 23<sup>rd</sup> March 2020. That meeting was postponed until 8<sup>th</sup> June due to the outbreak of Covid-19. The purpose of the consultation exercise was:

- To inform local people, stakeholders and health care professionals about proposals to improve urgent care services in Bury.
- To capture the views and feedback from all identified stakeholders including local people, health care professionals, local third sector organisations and groups.
- To identify any concerns about the proposals.
- To answer any questions about the proposals.

8.10

In terms of the proposal, the options set out in 4.2 of the report were put forward for people to share their views on. A proposed future model for urgent care in Bury was described as follows:

- The redesign of urgent care at Fairfield General Hospital including building a mandated new and enhanced Urgent Treatment Centre open 24/7 to sit physically in front of the Accident and Emergency Department. This would mean relocating Bury Walk-in Centre (currently open 7am – 3pm), to be part of an integrated and enhanced service to preserve a walk in option. The Urgent Treatment Centre would also include access to mental health services, GP out of hours services and the treatment of less serious cases that are currently seen in A&E. The service would be run by a team of nurses, GPs, mental health and other health and care professionals who can manage wound care, and there would be access to tests like bloods and X-rays, which are currently not available at Bury Walk-in Centre.
- Simplifying access to primary care (GP) during the day and out of hours through a technology led community triage process so that people can access the most appropriate service, in the best place at the right time, whilst using new technology to make it easier to get an appointment or advice, whichever is the most appropriate.
- Offering patients the opportunity to speak to a local Bury health care professional by phone if they have rung 999, NHS 111, or if the North West Ambulance Service triage determined they don't need to go to hospital.
- Providing clear public information so that people know what their choices are and where is best to go to meet their needs.

8.11

It was reported that Option Five within the report was the preferred option being proposed to the Strategic Commissioning Board which built on Option Four and proposed building a new purpose built urgent care facility in addition, including moving the walk in centre from Moorgate.

8.12	<p>The following comments/observations were made from Strategic Commissioning Board members: -</p> <ul style="list-style-type: none"> <li>• A question as to who would be leading the Transport Group to ensure that the parking and other transport issues were being appropriately addressed. It was noted that Mr S Taylor, Chief Officer from the Bury and Rochdale Care organisation would be leading the review to look at parking onsite at Fairfield General Hospital and how the Outpatient Department would operate in terms of parking being allocated on more of an equitable basis.</li> <li>• There was a concern raised in relation to the number of people who had engaged with the Consultation however it was felt that sufficient engagement had taken place from an organisational perspective and there was an element of personal choice in terms of some individuals not wanting to take part in the consultation exercise.</li> <li>• A question was raised in relation to the future of the Prestwich Walk in Centre. It was noted that the Prestwich facility was currently suspended as it housed the Covid-19 management service. It was highlighted that the service was constantly under review with there being a small but significant number of people with Covid-19 who go through the service. The other really important role of the Covid-19 management service was for people with Covid-19 who develop comorbidities which keeps practices safe. There were no commitments being made in relation to the Prestwich Walk in Centre at this time.</li> <li>• There had been previous opposition when proposals had come forward in relation to Urgent Care and there was a need to be clear to the public about the improved service offer these changes would bring.</li> </ul>
8.13	<p>The Healthwatch Chair commented that Healthwatch was looking to undertake a survey in relation to Covid-19 and offer any support to services as required. The CCG Chair commented that the CCG and Council would be happy to help Healthwatch in any way that it could with this piece of work.</p>
8.14	<p>The CCG Chair highlighted that in terms of next steps, should the Strategic Commissioning Board approve the proposals in relation to the Urgent Care Redesign, there would need to be a detailed piece of work in relation to producing a timetable for implementation.</p>
8.15	<p>The Chair commended Ms Parker for all her hard work in undertaking the review of Urgent Care.</p>

ID	Type	The Strategic Commissioning Board:	Owner
D/06/09	Decision	Noted the outcome of the Urgent Care Public Consultation and broad support for the proposals from the respondents.	
D/06/10	Decision	Noted the preferred option for progression is option 5.	
D/06/11	Decision	Noted that there are no detrimental impacts in terms of quality or equality.	
D/06/12	Decision	Acknowledged the impact of Covid-19 has had on the implementation plan.	
D/06/13	Decision	Agreed to the next steps set out in the report.	

<b>9. Radcliffe Strategic Regeneration Framework (SRF)</b>			
9.1	The Chair submitted a report in relation to the Radcliffe Strategic Regeneration Framework.		
9.2	It was reported that the Council had commissioned Deloitte to undertake a Strategic Regeneration Framework (SRF) for Radcliffe in February 2020. After an extensive period of engagement with key stakeholders, a draft of the Framework SRF had now been produced.		
9.3	The report was being submitted to the Council's Cabinet on the 10 <sup>th</sup> June 2020 in order to approve the draft SRF for a six-week period of consultation before being brought back to Cabinet in September 2020 for formal approval. Cabinet was also asked to approve the authorisation of any necessary minor amendments to the SRF prior to consultation as well as the authorisation of any necessary spend on consultation to be delegated to the Director of Economic Regeneration & Capital Growth in consultation with the Leader (as portfolio holder for Finance and Growth). If approved, the SRF would become a material planning consideration in the determination of planning applications and help to shape the regeneration of Radcliffe.		
9.4	It was highlighted that the SRF recommended some short, medium and longer-term interventions and that it is the longer-term intention of the Council to create a Council Investment Fund. This would help to deliver the large scale regeneration proposals.		
9.5	<p>The following comments/observations were made from Strategic Commissioning Board members: -</p> <ul style="list-style-type: none"> <li>• It was noted that Radcliffe was well placed in terms of transport links to Manchester and there was a need to build on these strengths as part of the regeneration.</li> <li>• There was a need to realise benefits of the schemes for a Bio-Psycho-social perspective.</li> </ul>		
ID	Type	The Strategic Commissioning Board:	Owner
D/06/14	Decision	Noted the report which would be submitted to the Council Cabinet on the 10 <sup>th</sup> June 2020.	

<b>10. Emerging Financial Arrangements</b>			
10.1	The Joint Chief Financial Officer provided an update on the emerging financial arrangements and likely implications on the CCG's Budget for 2020/21. A further discussion would need to take place at the Strategic Commissioning Board once national guidance had been issued within this area.		
10.2	The Chair commented that future developments would also need to take into account strategic objectives and not be purely financial driven.		
ID	Type	The Strategic Commissioning Board:	Owner
D/06/15	Decision	Noted the update	
A/06/02	Action	A more detailed financial discussion to take place at the Strategic Commissioning Board Development / Briefing Session on the 6 <sup>th</sup> July 2020.	Mr Woodhead

<b>11. Summary of Routine Strategic Commissioning Board Business</b>			
11.1	Members received copies of a report that provided a written narrative of those items that would ordinarily have been presented to the Strategic Commissioning Board should the current business continuity/emergency planning arrangements in response to Covid-19 not have been in place.		
ID	Type	The Strategic Commissioning Board:	Owner
D/06/16	Decision	Noted the report.	

<b>12 Any Other Business and Closing Matters</b>			
12.1	The Chair summarised the main discussion points from today's meeting and thanked members for their contributions.		
12.2	The Cllr for Communities & Emergency Planning, Bury Council thanked the CCG Chair for his support during his time as Co-Chair of the SCB whilst Leader of the Council and wished the new Leader well as new co-Chair.		
ID	Type	The Strategic Commissioning Board:	Owner
D/06/17	Decision	Noted the information.	

<b>Next Meetings in Public</b>	<b>Strategic Commissioning Board Meeting:</b> <ul style="list-style-type: none"> <li>Monday, 6 July, 2020, 4.30 p.m. – Briefing / Development Session (Closed – not in public)</li> <li>Monday, 3 August 2020, 4.30 p.m. – Formal Meeting in Public</li> </ul>
<b>Enquiries</b>	Emma Kennett, Head of Corporate Affairs and Governance <a href="mailto:emma.kennett@nhs.net">emma.kennett@nhs.net</a>

## Strategic Commissioning Board Action Log – June 2020

### Status Rating



- In Progress



- Completed



- Not Yet Due



- Overdue

A/12/08	It was agreed that the Director of Commissioning & Business Delivery would pick up with Cllr Quinn outside of the meeting in relation to the specific health requirements and discuss this further via the Governing Body as appropriate.	Ms O'Dwyer		March 2020	The Director of Commissioning & Business Delivery had met with Cllr Quinn and this matter would be picked up via the Governing Body once Business as Usual is resumed.
A/06/01	Written responses to be sent to all individuals who have submitted questions to the SCB.	Mrs Kennett		June 2020	All letters were signed off by the CCG Chair and sent to individuals.
A/06/02	A more detailed financial discussion to take place at the Strategic Commissioning Board Development / Briefing Session on the 6 <sup>th</sup> July 2020.	Mr Woodhead		6 July 2020	