

MEETING: Governing Body

Item Number: 10.1

DATE: 25 November 2014

REPORT TITLE:	Healthier Together Committee in Common – Responses to Consultation from the Wigan Health and Well Being Board
CORPORATE OBJECTIVE ADDRESSED:	<ol style="list-style-type: none"> 1. Supporting our population to stay healthy and live longer in all areas of the Borough; 2. Commissioning high quality services, which reflect the population’s need, delivering good clinical outcomes and patient experience within the resources available; 3. Function as an effective commissioning organisation that puts the patient first; 4. Function as an organisation that consistently delivers its statutory duties.
REPORT AUTHOR:	Dr Tim Dalton and Councillor Keith Cunliffe, Joint Chairs of the Wigan Health and Well Being Board
PRESENTED BY:	Dr Tim Dalton
RECOMMENDATIONS/DECISION REQUIRED:	To be received for information
EXECUTIVE SUMMARY The Governing Body is asked to note the contents of the Wigan Health and Wellbeing Board’s response to the Healthier Together Consultation for information.	
FURTHER ACTION REQUIRED:	None
EQUALITY AND DIVERSITY: Confirmed that any changes to service or procedure introduced as a result of this report do not impact adversely on any of the protected groups covered by the Equality Act 2010.	



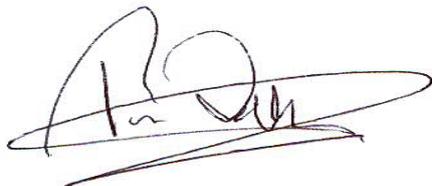
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Your reference:
Please ask for: Will Blandamer
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Date: 26th September 2014

Dear Sir/Madam,

Please find attached a response from the Wigan Health and Well Being Board to the Greater Manchester Healthier Together consultation.

Yours sincerely



Tim Dalton, Joint Chair of the Health and Wellbeing Board



Councillor Keith Cunliffe, Joint Chair of the Health and Wellbeing Board

Wigan Health and Well Being Board

Response to the Healthier Together Consultation

Agreed at the Board Meeting held on 17th September 2014

1. Case for Change

The Wigan Health and Well Being Board (WHWBB) recognises and endorses the case for change outlined in Healthier Together (HT).

- 1) Over the next 5 years the Wigan Borough (and GM) health and social care system will be financially unsustainable in its current form as a consequence of reducing budgets, increasing demand and rising cost.
- 2) There are workforce shortages either apparent or imminent in many services, particularly some clinical specialties (General Practice, A&E) that make current services untenable in the light of rising expectations and requirements of quality and accessibility
- 3) There are variations in clinical quality and outcomes between providers (e.g. primary care) , and at weekends and bank holidays that are unacceptable
- 4) Meeting standards for access to services (for example same day access to GP services across 7 days), and in A&E are challenging and unlikely to be sustainably delivered without significant reform
- 5) Despite best efforts and significant progress in Wigan and elsewhere, health, care and well being services are generally not routinely joined up or integrated around patients, families and carers.

2. Principles and Characteristics of a Future Health and Social Care System in Wigan

The WHWBB have previously endorsed (via the CCG2-5 Year Commissioning Strategy and the Wigan Borough Integrated Care Strategy) that the principles of reform of the new system are as follows:

- 1) That people will be supported to be independent and well and in control of their care
- 2) Health and Social Care Services should be provided at home, in the community or in primary care if possible
- 3) All services should be safe and of high quality and part of an integrated system led by primary care

3. Healthier Together - Primary Care Services

The WHWBB strongly endorse the proposals for reform of primary care services proposed by the Healthier Together consultation.

WHWBB received and endorsed the Wigan Borough CCG Primary Care Strategy 2014-2019 at its meeting in September. The strategy proposes transformational change through the establishment of GP access hubs, new primary care provider organizations, new models of federation between providers, and a strengthened focus on workforce development. The strategy also recognizes the centrality of primary care to robust models of joined up out of hospital care.

As the role of the WHWBB is to hold all commissioners to account for commissioning plans that meet the objectives of the health and well being strategy, it is expected that NHS England are able to describe their role and actions in supporting the ambition of the Wigan primary care strategy.

4. Healthier Together - Integrated Care and Well Being

The WHWBB strongly endorse the proposals for integrated care contained within Healthier Together including the integrated care components of the community based standards

In fact Wigan is recognized as progressing at pace with Integrated Care. Such work has many facets including:

- Development and use of risk stratification
- Integrated Neighbourhood Team development
- Whole system data sharing agreement principles agreed
- Testing and roll out of the “Deal for Care and Health” (formerly ‘The Scholes Programme’) prioritizing an asset approach to individuals and communities
- Agreed Better Care Fund Investment proposals, supporting the existing Joint Commissioning Group work programme
- Mature and further refined joint leadership frameworks including Wigan Leaders group and Wigan Tactical Programme Board
- Models of Integrated Care framed by life course approach (Start Well, Live Well , Age Well)
- The movement of services from a hospital to a community setting

The WHWBB will continue to receive updates and provide leadership on all aspects of the implementation of the Wigan Integrated Care Strategy.

The WHWBB agrees with the proposition in the HT consultation documentation that substantial progress on primary care reform and integrated care is a precondition to the delivery of the reform of hospital services proposed.

The WHWBB has recognized the scale of the financial challenge facing the whole system, and the scale of the investment shift required from in hospital to community based services within both the Wigan Borough CCG Strategy and the Wigan Integrated Care Strategy.

5. Healthier Together - Hospital Services: Points of Agreement

The WHWBB agree on the following principles of reform of hospital services implicit or explicit in Healthier Together.

- a. The Wigan Borough CCG Commissioning Strategy already endorsed proposes a significant shift of activity out of hospital and into local community and primary care services. As a consequence of CCG commissioning intent, and WWL reform, work is progressing on the shift and reform of services, for example
 1. outpatient services,
 2. diagnostics,
 3. minor surgery,
 4. a range of specialisms such as dermatology, physiotherapy, pain services, diabetic management, community stroke, OT, anticoagulant services, Occupational Therapy, Speech and Language Therapy, Podiatry services,
 5. enhanced community paediatric and community childrens nursing services. (reference the Childrens Integrated Care Strategy)
- b. The responsibility of the WHWBB is to assure itself that commissioners have secured hospital services accessed by Wigan residents of best practice standards. Therefore, the WHWBB recognize and endorse the clinically derived quality and safety standards of hospital services in Healthier Together for the three specialties of acute surgery, acute medicine and A&E.
- c. The WHWBB recognize the principles of single services operating across hospital sites as a way for some specialties to meet the standards proposed. Such partnership working across hospitals is the best way of preserving local services in a way that ensures they are delivered according to best practice standards. The WHWBB recognize that WWL already have experience of these arrangements with the trauma service, stroke services, vascular services, and the imminent Christie@Wigan service.
- d. The WHWBB recognizes the complexity of the arguments on hospital services across GM and therefore understands why, for reasons of simplicity, a series of options which are essentially Wigan or Bolton and/or South Manchester or Stockport has been presented. In such a scenario and based on the evidence available the WHWBB would support Wigan as a specialist site.
- e. The WHWBB recognize and welcome that Healthier Together have indicated that the options proposed in the consultation document are not the only options that may be considered by the Committees in Common as it reviews consultation responses and moves to decision and implementation. Healthier Together have indicated that locally derived partnership based solutions between hospitals can be considered by the committees in common subject to assurance on the key criteria of the

programme, including access, standards, and cost. The WHWBB would welcome the opportunity for other models to be considered.

6. Hospital Services - Single Service Models

In accepting the principle of single service models across hospital sites, the WHWBB would make the following observations;

- a. WHWBB note and strongly commend the work of the three hospitals in the NW Sector (WWL, Bolton, and Salford) to work in partnership to deliver the HT clinical standards. In particular the WHWBB:
 1. welcomes the work undertaken on emergency surgery and looks forward to seeing the full implementation plan
 2. endorses the appointment of programme management and clinical leadership to drive the programme
 3. supports the memorandum of understanding .
 4. recognizes the principle that such partnership working must be based on presumption that all partners derive benefit from the arrangement
 5. note the provisional timetable from the NW programme board of business cases for other services such as A&E and Acute Medicine

- b. There is very positive support from the WHWBB for the NW working development. However partners within the HWBB would particularly wish to be assured on the following points;
 - o that the governance framework is amended to ensure any consideration of future configuration of A&E services or acute medicine, is undertaken in the context of not only other hospitals, but in the context of the new models of community based services under development in each of the three areas

 - o That there is a clear timetable for bringing forward proposals for single service models between the three hospitals in way that can provide assurance and confidence to the work of the CCG Committees in Common

- c. The HWBB notes the intent for the 9 relevant organisations in the NW part of Greater Manchester (the Council, CCG and Acute Trust in each of Bolton, Wigan and Salford) in October 2014 to collectively sign a Memorandum of Understanding which confirms the:
 1. Objectives of the partnership and the principles that will underpin it;
 2. Governance arrangements for the partnership; and
 3. Proposed timetable for the development and implementation of the arrangements.

The HWBB will receive the signed MOU for consideration at its November 2014 meeting. The HWBB will also receive subsequent update reports from the partnership demonstrating the effective operation of the partnership and the

necessary pace towards implementation of single service models of in hospital care in pursuit of the sustainable achievement of Healthier Together Standards.

- d. The WHWBB is concerned that the HT consultation pays little attention to the inter-dependency of clinical services within hospital sites, given that it has restricted its scope to A&E, Acute Medicine and Acute Surgery. We would wish to be assured that any proposed model of service delivery, whether an HT option or a locally derived alternative, can adequately sustain all other local services. The WHWBB will note that this need not necessarily require such services to be managed or clinically led from WWL (and vice versa for Bolton and Salford)

7. Selection Criteria in the Healthier Together Consultation

The WHWBB have a number of concerns relating to the criteria in the Healthier Together consultation intended to differentiate between the options presented.

Firstly, the board would wish to have the opportunity to consider a local shared understanding and perspective of the 4 criteria being used to assess the options (Quality and Safety, Affordability, Transition, Travel and Access). In particular the board remains unclear about whether there is a significant difference between each of the 5 gradations of assessment (+, ++, +, 0, -, --) for the 4 criteria that is sufficient to merit the selection of one option or the other on this basis. Further detail on this any analysis is requested.

In particular the board would wish to receive more detail on the travel time analysis and modeling undertaken. Given the geographical position of Wigan we would wish to understand the presumptions being made and the way in which this impacts on the potential solutions proposed. We would wish to understand the assumptions behind the 'double negative' on the "distance and time to access services by public transport" indicator in option 5.2 from the perspective of Wigan residents. Healthwatch are members of the HWBB and it is noted have commissioned their own assessment of the travel times upon which modeling assumptions are based.

The WHWBB would in particular like to understand more clearly whether and how the transport analysis underpinning the Making it Better reform programme and the Major Trauma programme differs from that within HT.

Conclusion

The Wigan Health and Well Being Board accepts the case for change in the Healthier Together Consultation, and fully endorses the direction of travel for scaled and transformational reform of primary care and integrated care. These ambitions are fully reflective of the Wigan Borough Integrated Care Strategy and Wigan Borough CCG Commissioning Strategy.

The Wigan Health and Well Being Board recognises and endorses the quality and safety standards proposed for in-hospital service provision. Furthermore the board endorses the basic proposition of Healthier Together that single service models operating across

hospital sites are the way to sustainably secure the achievement of the in hospital standards and the clinical interdependency of local hospital based services.

The Board strongly welcomes the commitment of Healthier Together Committees in Common to develop and review such models alongside consideration of the 8 options currently the subject of public consultation. In this context the Board strongly welcomes the work being undertaken by Trusts, CCGs, and Councils in the North West of Greater Manchester to develop such single service models for hospital services and look forward to reviewing their role in the sustainable achievement of the Healthier Together criteria (Quality and Safety, Affordability, Transition, Travel and Access).

In the event that Healthier Together only consider the 8 options currently subject to public consultation, the Wigan Health and Well Being Board would strongly endorse the case for WWL to be a specialist hospital.