

Wakefield District Health & Care Partnership Committee

Tuesday 19 July 2022

14:00-17:00pm via Microsoft Teams

Present

Name	Representing
Dr Ann Carroll	Independent chair, Wakefield District Health & Care Partnership
Richard Hindley	Independent Member, Wakefield District Health & Care Partnership
Stephen Hardy	Independent Member, Citizen Voice & Inclusion, Wakefield District Health & Care Partnership
Jo Webster	West Yorkshire Integrated Care Board Place Lead and Accountable of Officer for Wakefield District Health & Care Partnership
Mel Brown	Director for System Reform and Integration & Deputy Place Lead, Wakefield District Health & Care Partnership
Len Richards	Chief Executive, Mid Yorkshire Hospitals NHS Trust
Sean Rayner	Executive Director - Southwest Yorkshire Partnership Trust, Chair of the Mental Health Alliance
Gary Jevon	Chief Executive, Healthwatch Wakefield
Jenny Lingrell	Service Director, Children's Health & Wellbeing, Wakefield Council
Clare Offer	Public Health Consultant, Healthcare, Intelligence and Research Service – Wakefield Council
Claire Barnsley	Chair of Wakefield LMC
Maddy Sutcliffe	Chief Executive, Nova – representing Third Sector Strategy Group
Sarah Roxby	Service Director, Wakefield District Housing & Chair of the Health, and Housing Alliance
In attendance	
Olivia Morgan	Minute Taker
Karen Parkin	Operational Director of Finance, Wakefield District Health & Care Partnership
Penny Woodhead	Director of Nursing and Quality for Calderdale, Kirklees & Wakefield District Places
Colin Speers	Local GP & Executive System Healthcare Advisor, Wakefield District Health & Care Partnership
Cllr Simon Lightwood	Member of Parliament for Wakefield
James Drury	Director of Partnership Development, Bradford (observer)
Linda Harris	Responsible Officer for Workforce, Wakefield District Health & Care Partnership
Phillip Marshall	Director of Workforce & Organisational Development, Mid Yorkshire & Joint SRO for workforce for Wakefield District Health & Care Partnership
Claire Vodden	Communications Lead for Partnership (observer)
Gemma Gamble	Senior Strategy & Planning Manager, Wakefield District Health & Care Partnership
Rebecca Barwick	Associate Director for Partnerships & System Development, Wakefield District Health & Care Partnership
Jane Hindle	Interim Governance Manager, Wakefield District Health & Care Partnership

Apologies

Name	Organisation
Dr Adam Sheppard	Clinical Chair & GP Member, Wakefield District Health & Care Partnership
Dr Clive Harries	GP Member, Primary Care Network Director Representative
Dr Tim Dean	GP Member, Primary Care Network Director Representative

Name	Organisation
Dr Lyn Hall	GP Member, Primary Care Network Director Representative
Antony Nelson	Managing Director, Conexus Healthcare
Anna Hartley	Director of Public Health – Wakefield Council
Ruth Unwin	Director for Strategy, Wakefield District Health & Care Partnership
Beate Wagner	Corporate Director, Children & Young People – Wakefield Council
Vicky Schofield	Interim Corporate Director, Children & Young People – Wakefield Council
Paula Bee	Chief Executive, Age UK Wakefield District
Cllr Maureen Cummings	Member of Parliament for Wakefield & Adult Social Care Portfolio Holder
Mark Brooks	Chief Executive - Southwest Yorkshire Partnership Trust

No	Item	Action
01/22	<p>Welcome & Introductions</p> <p>Dr Carroll welcomed everyone to the first formal Wakefield District Health and Care Partnership committee meeting and explained we are now a formal committee of the West Yorkshire Integrated Care Board.</p> <p>Introductions took place and Dr Carroll made everyone aware of the meeting etiquette. A short video was shared setting out the purpose and the priorities of the West Yorkshire Integrated Care Board.</p>	
02/22	<p>Apologies & Declarations of Interest</p> <p>Apologies were noted and accepted, and no declarations of interests were raised from any member present.</p>	
03/22	<p>Questions from Members of the Public</p> <p>No formal questions were received from the Public.</p>	
04/22	<p>Chair's Opening Remarks</p> <p>Dr Carroll noted that whilst the meeting was the first formal and public meeting of the committee, it represents a continuation of the work that has been ongoing in Wakefield for a number of years and provides an opportunity to accelerate closer working between health, social care, voluntary services and the third sector in order to provide high quality and reactive services to the residents of Wakefield.</p> <p>Wakefield is unique in recognising the importance of establishing shared posts across organisations, for example, Jo Webster, the Accountable Officer and representative for the West Yorkshire Integrated Care Board and also the Director for our Adult Social Care Services in Wakefield and Executive Director of Community Services for Mid Yorkshire Hospitals which means there is great opportunity to integrate services and break down organisational barriers.</p> <p>Members are working closely with colleagues across West Yorkshire to embed the new arrangements in order to ensure that the system delivers the priorities and vision for the future.</p>	
05/22	<p>People Story</p> <p>Rebecca Barwick shared a video of a patient story, put together by the staff and residents at Millfields Care Home sharing their experiences during the Covid pandemic and how staff continue to support residents.</p> <p>Mel Brown thanked all care home staff and managers across the Wakefield District for their continued hard work in supporting residents.</p>	

06/22	<p>Report of the Place Leader</p> <p>Mel Brown presented the report on behalf of Jo Webster and highlighted the following key matters:</p> <p>NHS West Yorkshire Integrated Care Board (ICB)</p> <p>NHS West Yorkshire Integrated Care Board became a new statutory organisation from Friday 01 July 2022. The new Integrated Care Board is created under the new legislation set out in the Health and Care Act 2022, which focuses on improving outcomes for people by addressing health inequalities, and effective use of budgets across the area. Mel Brown informed the committee of plans for Rob Webster (Chief Executive) and Cathy Elliott (Chair) to attend future meetings of the committee.</p> <p>Wakefield Place</p> <p>At the recent Wakefield Health and Wellbeing Board development, chaired by Cllr Maureen Cummings it was agreed that the Wakefield District Health and Care Partnership would oversee the priorities of the Health and Wellbeing Strategy.</p> <p>Connecting Care Hubs</p> <p>Adult Community Services and place partners are meeting today, 19 July, to look at the next steps of the development of the connecting care hubs with a view to refresh the model and agree how to re-integrate our services to provide better aligned Neighbourhood Teams. The aim is to build on current models and develop new models of integration to improve system working.</p> <p>Adult Social Care Strategy</p> <p>Mel Brown also informed the committee that colleagues from Adult Social Care have been developing a Wakefield Adult Social Care Strategy, which this has been published this week. It is a three-year strategy with four key priority areas. These include – People and Communities, Thriving Workforce, Quality and Effectiveness and Joined Up Support, these priority areas will align with the people plan for Wakefield District.</p>	
07/22	<p>Urgent Decisions</p> <p>Mel Brown reported that South Moor Surgery, made an application for a one-day closure on 11 July 2022 due to levels of sickness amongst staff. The practice had taken steps to inform patients including additional information on the website and messages via social media advising how to access services. Mel Brown stated that in future these matters would feed into the Integrated Assurance Committee however, this information was shared today for timeliness and transparency.</p> <p>Richard Hindley queried if these pressures have been seen more widely across primary care, Mel Brown noted that general practice colleagues are under pressure due to Covid absences. This is managed via a daily sitrep which ensures that primary care services are supported. South West Yorkshire Partnership Foundation Trust and Mid Yorkshire Foundation Trust are also experiencing pressures on workforce and are in a challenging position currently due to Covid absences however everyone is working hard to manage pressures.</p> <p>Len Richards thanked Mel for recognising other providers as and advised members that currently there are 147 patients in hospital with Covid and this is creating a burden on the organisation along with the staff absences as a result of Covid. The hospital is also seeing an increased number of admissions due to the heatwave.</p> <p>The Wakefield District Health and Care Partnership Committee RESOLVED to:</p> <ul style="list-style-type: none"> • Note the use of Urgent Powers in line with the previously approved process. 	
08/22	<p>Report from the Chair of the Provider Collaborative</p> <p>Colin Speers presented and update from the Wakefield Provider Collaborative highlighting the on-</p>	



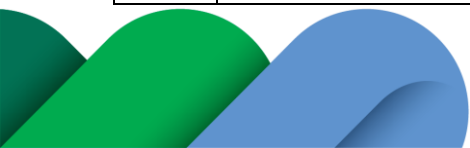
	<p>going developments within the Wakefield Provider Collaborative and to provide an overview of the July meeting.</p> <p>The Collaborative helps to bring together providers of services across the district through a number of alliances. Each of the alliances are focused on an area of delivery of care/services and the groups are all trying to address how we provide seamless care, transformation, mutual accountability and support. Everyone is committed to this way of collaborative working.</p> <p>The meetings have been taking place since March and whilst the new ways of working are still being developed there is recognition of the need to focus on a consistent approach to equality and health population and digital enablers. Moving forward this may require additional working groups to be established.</p> <p>Richard Hindley welcomed the update noting the positive development amongst partners and queried how Wakefield Place connects to other places in the WY ICB. Colin noted that many individuals have dual roles and represent Wakefield Place on a number of WY ICB forums and meetings. All colleagues have been open to ideas of what others are doing and are very willing to share.</p> <p>Jo Webster noted that within Wakefield there is a willingness to learn from our partners both locally and internationally with the recent work around the Canterbury Model given as a key example along with most of the programmes happening across West Yorkshire which are built on the concept of a network approach.</p> <p>The Wakefield District Health and Care Partnership Committee RESOLVED to:</p> <ul style="list-style-type: none"> • Note the Provider Collaborative Chair’s report. 	
09/22	<p>Governance Update</p> <p>Jane Hindle presented the report which built on the regular updates around emerging governance arrangement that had been presented throughout the year.</p> <p>At its initial meeting of the ICB held on 1st July the Board had approved had the core governance documents including the Constitution, the Scheme of Reservation and Delegation and the terms of reference for the partnership committee (WDHCP) all of which had been subject to wide engagement and discussion and had been received by the Committee at previous meetings.</p> <p>Jane informed the committee that the Terms of Reference for this committee, (WDHCP) the Provider Collaborative and the Integrated Assurance Committee along with the partnership agreement were approved by the West Yorkshire Integrated Care Board on 01 July 2022.</p> <p>The People committee for WDHCP, formally the Patient Involvement and Community Panel met in late June 2021 to review their terms of reference. Members were keen to ensure that the voice of those with “lived experience” is heard and therefore further discussions would take place to finalise the membership and any amendments would be presented to a future meeting of the Committee.</p> <p>Jane Hindle stated that embedding the new governance arrangements would be an iterative process and would be kept under review through a number of established mechanisms including shared learning with colleagues across West Yorkshire.</p> <p>Stephen Hardy queried the use of ‘seamed’ care on point 1.3 of the Provider Collaborative Terms of Reference, Colin Speers informed members that this was intentional in order to recognise there are gaps and to ensure gaps are strongly reinforced in Care. A minor error was identified on page 11 of the partnership agreement, in relation to the spelling of Richard Hindley’s name.</p> <p>Action / To amend the partnership agreement prior to reflect the correct spelling / J Hindle / Sept 2022.</p> <p>Mel Brown reminded members of the requirement to for partners to sign up to the final version of the partnership agreement in order to complete the document.</p>	



	<p>Action/G Gamble to circulate the final document for partners to sign/Sept 2022.</p> <p>The Wakefield District Health and Care Partnership Committee RESOLVED to:</p> <ol style="list-style-type: none"> 1. Note the Constitution and Governance Handbook of the West Yorkshire Integrated Care Board 2. Note the Partnership Agreement, which has been approved by the ICB, and commit to all member organisations of the Partnership signing the agreement. 3. Note the Terms of Reference of the WDHCP Committee 4. Approve the Terms of Reference for the Provider Collaborative 5. Approve the Terms of Reference of the Integrated Assurance Committee 6. Approve the Terms of Reference of the People Panel <p>Jane Hindle presented the conflicts of interest register to the committee for information noting that whilst the new arrangements emphasise working in partnership this does not remove the requirement to manage conflicts whether potential or actual in conducting the business of the Committee.</p> <p>The initial register of interest included in the meeting papers also demonstrates a commitment to transparency in line with the principles of public office and emphasised the need for members to maintain an up-to-date declaration and also to declare any interests in relation to agenda items.</p> <p>Stephen Hardy commented on inaccuracies in relation to his declaration noting that some of the organisations he had previously been involved with no longer exist.</p> <p>Jo Webster thanked the team for their hard work, in producing the governance documents whilst recognising that there was further work required to finesse the register of interests. The importance of good governance in supporting decision making and enabling public accountability was emphasised and the ongoing review of the new governance arrangements would ensure that these principles were maintained.</p> <p>The Wakefield District Health and Care Partnership Committee RESOLVED to:</p> <ol style="list-style-type: none"> a) Take assurance that there is a process in place to ensure transparency around decision making and potential conflicts b) Note the initial Conflicts of Interest Register for the Partnership Committee 	
10/22	<p>WDHCP Development</p> <p>Rebecca Barwick presented the final version of the Wakefield District Health and Care Partnership 1-year operating plan for 2022-23, for decision, action and discussion. It has been agreed to work on a longer-term transformation plan over the coming year and therefore further detail will continue to be added to the plan.</p> <p>Rebecca explained the next steps and the development journey, which includes a five-year transformation strategy which will be published by April 2023. Rebecca proposed to use the WDHCP development session which is taking place on 18 August, to work through this and what further work is required longer term. A set of aims for the session will be developed which includes describing how ambitious we want to be and will ensure that future plans have a clear line of sight through to the four priorities of the Health and Wellbeing Strategy and how this will be delivered.</p> <p>In summary, Rebecca stated what has been shared today, is the one-year business plan describing key areas of focus for the remainder of 2022.</p> <p>Jo Webster thanked Rebecca for the summary as it captured all the work that needs to be done going forward in order to develop the future plan.</p>	



	<p>Sean Rayner queried if the Provider Collaborative would monitor performance against metrics assigned to the Mental Health Alliance. It was agreed that it would be monitored via the Provider Collaborative on a quarterly basis with further oversight provided by the Committee through monitoring of the delivery of the operational plan.</p> <p>ACTION/ To include a quarterly report to the Provider Collaborative in relation to the mental health priorities within the cycle of business. G Gamble / Sept 2022.</p> <p>Len Richards noted that it would be helpful to focus on joining data and systems together in order to understand both the impact on individual organisations and at a system level and highlighted the real opportunity around the people plan to work together to attract people and move them through the system to build their careers. It was noted that this work was underway.</p> <p>Gary Jevon reiterated the need to ensure that the patient and citizen voice was pivotal in both the planning and monitoring of the plan.</p> <p>The Wakefield District Health and Care Partnership Committee RESOLVED to:</p> <ul style="list-style-type: none"> • Approve the 1-year operating plan for 2022-23 	
11/22	<p>Core20Plus Framework</p> <p>Rebecca Barwick delivered a presentation in relation to the Core20Plus 5, the new NHS England / improvement framework for tackling health inequalities.</p> <p>The framework describes the expected approach of addressing health inequalities in the most deprived neighbourhoods, the most vulnerable and marginalised groups, and the five clinical areas of focus expected to be impacted on through focusing on their wider determinants of health. This includes maternity, severe mental illness, chronic respiratory disease, early cancer diagnosis, and hypertension case-finding. £1,040,000 per year recurrent funding is available for Wakefield District. The investment is not expected to deliver the entire framework and although it is an NHS initiative, it is expected to be delivered in partnership across the system.</p> <p>The 3 different elements of Core20Plus 5 were discussed, the principles of investment, additional criteria and proposed approaches and it was suggested that it would be beneficial to establish an oversight group It was agreed that the final proposal will be brought to the September Committee meeting</p> <p>Action/ R Barwick to provide the final proposal and oversight arrangements/Sept 2022.</p> <p>A discussion took place regarding both the complexity of this piece of work and the opportunity to address outstanding issues for the population of Wakefield. Sean Rayner stated that the Health and Wellbeing Board had previously considered the local area coordination proposal was discussed in the context of the other community development activities in the district and therefore it would be helpful to ensure both proposals are linked and working together.</p> <p>Richard Hindley queried how the local priority inclusion groups had been selected. It was noted that the intelligence gathered by the roving vaccination team and lessons learned through the Covid response had informed the initial prioritisation however further detail would be provided in the final proposal.</p> <p>Len Richards confirmed his support of the approach noting was very supportive of the approach and noted as a service we struggle to get on top of these issues and feels it requires senior leadership and an oversight committee for it to work, we need to create groups to ensure services are tailored to the needs of these particular populations.</p> <p>Maddy Sutcliffe noted the inclusion of the voluntary sector in this piece of work demonstrates positive progress and requested that sector is also included in further planning and the oversight groups. In addition, there would be value in have including contributions from VSE colleagues within the roving team in order to provide a more holistic approach.</p> <p>Action/R Barwick & M Sutcliffe to discuss how to ensure the VSE sector can become more involved in the development of the work/ Sept 2022</p>	



	<p>Jo Webster informed the committee that this programme is very important and it is about building sustainable communities which is a priority of the Health and Wellbeing Board. Jo kindly put herself forward to champion this and be the Senior Responsible Officer. It was noted a lot of work needs to take place around what groups need to join together and suggested it would be beneficial having someone else involved from the Voluntary Sector to lead on this too.</p> <p>The Wakefield District Health and Care Partnership Committee RESOLVED to:</p> <ul style="list-style-type: none"> • Note the proposed approach to Core 20 PLUS 5 in Wakefield District. • Approve the recommendation to establish a local oversight group and discuss the appropriate reporting lines. • Note the outline proposal for investment and approve the recommendation that this is brought for final sign off in September 2022. 	
12/22	<p>Reports from Provider Alliances</p> <p>Sean Rayner provided a summary update report on the Wakefield Mental Health Alliance for information. Sean introduced his colleagues to present further information on the Alliance, we welcomed Amanda Miller, Emma Hankinson, Emma Clough and Darren Dooler to the meeting.</p> <p>Emma Hankinson explained that The Wakefield Mental Health Alliance is leading on the transformation of the district's community mental health services. This 3-year transformation programme is delivering holistic, person-centred mental health care at neighbourhood level. The main scope is the care of adults and older adults with severe mental illness (SMI) and/or complex needs, along with the needs of young people transitioning to adult services. The aim is to deliver a 'no wrong door' approach that focuses on integrated working by enhancing the existing multi-agency Connecting Care team offer. This has included developing new roles, such as mental health community pharmacists, advanced clinical practitioners, and community builders (who are the interface between the VCSE and community offer) and increasing the number of Connecting Care practitioners (previously known as the Mental Health Navigators) from three to nine. However, Amanda noted it has been a struggle to recruit to the Connecting Care practitioners' roles. Emma informed members that all practitioners facilitate onward referrals and assessments, and the result is a smoother, more streamlined care pathway.</p> <p>The next steps include the development of a service offer for people who have experienced complex trauma and research into the needs of people with disordered eating and eating disorders to inform future pathways.</p> <p>Emma Clough shared a brief case study around the pathway and how it works in practice. This demonstrated positive improvements which the team would continue to build on.</p> <p>Amanda Miller provided an update on other developments this included Additional Role Reimbursement Scheme mental health practitioners in Primary Care, enhanced recovery college offer, introduction of a new Discovery College for under 18's developed in partnership with Wakefield Young People and Young Lives Consortium, eating disorder scoping underway, led by Insight Eating, voluntary and Community Sector mental health grant funds and the thinking differently development fund, all of the above are in progress.</p> <p>Penny Woodhead stated it would be a great idea to measure impacts and experiences of people using the services, Emma Hankinson advised that outcome and experience measures will be put in place over the next few months.</p> <p>Mel Brown asked if any support/help is required in order to overcome the challenges of recruiting to the connecting care practitioner positions, Amanda welcomed the support and would reflect on how this could be utilised. This could mean the development of new roles.</p> <p>Wakefield S.M.a.S.H</p> <p>Daren Dooler attended and provided perspective of a service user, who said that the work is "somewhat of a dream becoming reality", that is "creating a trusted process between people and services - which is what we all need".</p>	



	<p>Darren stated that a better future is possible, 'a mental health condition is not the end, it is often the start of something'. Darren stated more often than not, people who struggle with their mental health are often passed from one service to another in which sadly leads to feeling unwanted, burdensome and feeling disbelieved with worries and concerns and the work which is ongoing is going to support a better process for all. The pathway will help to create trust in the process, and this is what is needed between service users and organisations to make it easier for everyone.</p> <p>Jo Webster thanked the team for attending and informing everyone of the fantastic work, which is taking place, Jo noted it is important that we expand this work into the Core20Plus 5 model and is a great example of how we connect initiatives together.</p> <p>The Wakefield District Health and Care Partnership Committee RESOLVED to:</p> <ul style="list-style-type: none"> • Receive the summary update report on the Wakefield Mental Health Alliance work programme for the calendar year to date, and key issues for the next few months – for information. • Update on the work of the transformation of Community Mental Health Services in Wakefield: <p>The Wakefield District Health and Care Partnership Committee RESOLVED to:</p> <ul style="list-style-type: none"> • Note the update on Community Mental Health Transformation 	
13/22	<p>Issues to alert, advise or assure the ICB Board on</p> <p>Nothing to advise, alert or assure the ICB Board on.</p>	
14/22	<p>Items escalated from other Boards</p> <p>No items to escalated.</p>	
15/22.	<p>Items for escalation to other Boards</p> <p>No items for escalation.</p>	
16/22	<p>Receipt of minutes from the sub-committee</p> <p>None.</p>	
17/22	<p>Any other business</p> <p>No members of the group had any other business to raise/discuss. Dr Ann Carroll closed the meeting and thanked everyone for joining.</p>	
18/22	<p>Date and time of next meeting: Thursday 22 September 2022 at 14:00pm.</p> <p>Dr Carroll noted that hopefully this meeting will be able to take place face to face going forwards after the meeting in September.</p>	

Proud to be part of West Yorkshire Health and Care Partnership

