

HEALTH AND WELLBEING BOARD

26 JANUARY 2016

Title:	Systems Resilience Group Update		
Report of the Systems Resilience Group			
Open Report	For Information		
Wards Affected: ALL	Key Decision: NO		
Report Author: Andrew Hagger, Health and Social Care Integration Manager, LBBD	Contact Details: Tel: 020 8227 5071 E-mail: Andrew.Hagger@lbbd.gov.uk		
Sponsor: Conor Burke, Accountable Officer, Barking and Dagenham Clinical Commissioning Group			
Summary: This purpose of this report is to update the Health and Wellbeing Board on the work of the Systems Resilience Group. This report provides an update on the Systems Resilience Group meeting held on 8 December 2015.			
Recommendation(s) The Health and Wellbeing Board is recommended to consider the updates and their impact on Barking and Dagenham and provide comments or feedback to Conor Burke, Accountable Officer, to be passed on to the Systems Resilience Group.			
Reason(s): There was an identified need to bring together senior leaders in health and social care to drive improvement in urgent care at a pace across the system.			

1 Mandatory Implications

1.1 Joint Strategic Needs Assessment

The priorities of the group is consistent with the Joint Strategic Needs Assessment.

1.2 Health and Wellbeing Strategy

The priorities of the group is consistent with the Health and Wellbeing Strategy.

1.3 Integration

The priorities of the group is consistent with the integration agenda.

1.4 Financial Implications

The Systems Resilience Group will make recommendations for the use of the A&E threshold and winter pressures monies.

1.5 Legal Implications

There are no legal implications arising directly from the Systems Resilience Group.

1.6 Risk Management

Urgent and emergency care risks are already reported in the risk register and group assurance framework.

2 Non-mandatory Implications

2.1 Customer Impact

There are no equalities implications arising from this report.

2.2 Contractual Issues

The Terms of Reference have been written to ensure that the work of the group does not impact on the integrity of the formal contracted arrangements in place for urgent care services.

2.3 Staffing issues

Any staffing implications arising will be taken back through the statutory organisations own processes for decision.

3 List of Appendices

System Resilience Group Briefings:

Appendix A: 8 December 2015