

**Strategic Commissioning Group
Notes and Actions
6th August, 1:30-3:30pm
Pitchview Room, Stadium**

Present	<p>Delyth Curtis, Director Adult Services, Blackpool Council (Chair)</p> <p>Dr Amanda Doyle (OBE), Chief Clinical Officer, Blackpool CCG</p> <p>David Bonson, Chief Operating Officer, Blackpool CCG</p> <p>Dr Mark Johnston, Associate Director Acute Commissioning and Service Redesign Blackpool CCG</p> <p>Jane Higgs, Director of Operations and Delivery NHS England (Lancashire)</p> <p>Steve Thompson, Director of Resources, Blackpool Council</p> <p>Helen Lammond-Smith, Head of Commissioning, Blackpool CCG</p> <p>Andy Roach, Director of Integration and Transformation, Blackpool CCG</p> <p>Judith Mills, Public Health Specialist, Blackpool Council</p> <p>Wendy Swift, Director of Strategy/Deputy Chief Executive, Blackpool Teaching Hospitals NHS Foundation Trust</p>
Also present	<p>Scott Butterfield, Corporate Development Manager, Blackpool Council</p> <p>Clare Cosgrove, Blackpool CCG</p> <p>Traci Lloyd-Moore, Health and Wellbeing Project Officer, Blackpool Council</p>
Apologies	<p>Dr Arif Rajpura, Director of Public Health, Blackpool Council</p> <p>Liz Petch, Public Health Specialist, Blackpool Council</p> <p>Lynn Donkin, Public Health Specialist, Blackpool Council</p> <p>Gary Raphael, Chief Finance Officer, Blackpool CCG</p> <p>Jane Cass, Head of Public Health, NHS England (Lancashire)</p>

1.	<p>Apologies</p> <p>Apologies were noted.</p>
2.	<p>Welcome and Introductions.</p> <p>Del welcomed everyone to the meeting.</p> <p>In a change to the agenda, Del announced that in light of the recently published revised guidance on the Better Care Fund, Sarah Lambert’s update on Better Start would be presented at the September meeting and focus today would be given to the implications of the guidance on Blackpool’s BCF plan which would be taken under item 4.</p>

3.

Notes and actions from previous meeting.

Notes from the previous meeting were agreed.

Actions from previous meeting:

Police representation on the Better Care Fund Programme Board

Helen Lammond-Smith reported that she had met with Stuart Noble who had expressed an interest in linking into the subgroups of the Out of Hospital Strategy Steering Group and Better Care Fund workstreams; specifically around ICT/Shared Information, social isolation and neighbourhoods. Stuart could deploy the appropriate police reps to engage with these groups. Andy Roach agreed to take this forward. Helen to forward email correspondence to Andy.

HWB Project Officer Post

On the agenda.

Blackpool CCG 5 Year Strategic Plan

Dr Mark Johnston confirmed the plan had been submitted and the headlines presented at July Health and Wellbeing Board.

HIV pilot

Dr Amanda Doyle reported that HIV would become a CCG commissioned service from April 2015. Judith Mills added that the HIV champion had now left the post but had helped to improve take up. Judith was now working with the Acute to develop a new model and confirmed that in terms of costs Fylde and Wyre CCG would be involved in discussions.

Fylde Coast End of End of Life Strategic Group

Traci confirmed that she would liaise with Jeannie Harrop about presenting a full update on changes to End of Life Care pathway to the Health and Wellbeing Board.

Improvement Plan

Traci confirmed that she had made some initial amendments to the plan and that it was on the agenda for a view from the group.

JSNA (VCS) Event report

Traci confirmed that Richard Emmess had been invited to present the report at September Health and Wellbeing Board.

Terms of Reference

On the agenda.

September Health and Wellbeing Board

On the agenda.

4.

Better Care Fund Update.

Dr Mark Johnston outlined the key elements of the revised BCF guidance with the main thrust of change relating to the exposed risk to the Acute Trust which needed to be addressed in the plan. There was now one single measure linked to performance and only two questions in the updated plan remained the same the others were new or had been revised. Mark added that fundamentally the new guidance would not change Blackpool's plan, explaining that himself, Jayne Bentley and Traci Lloyd-Moore had started to cross reference the current plan with the revised guidance to identify the gaps and that much of the detail should be available in other plans such as the CCG Strategic Plan. He outlined key tasks as 1. that the first full draft would be ready within 10 days and presented to the BCF programme Board and by this stage we should be clear where the gaps are and how they can be filled and 2. that the sections of the plan that would not be ready included Annex 1 and 2 which required the Acute response and a detailed business case.

Del stated that we would need to present the key points to the Health and Wellbeing Board on 3 September with clarity around outcomes and risks and what we needed to do to achieve them.

Mark replied that the final version of the plan wouldn't be ready in time but that the key points can be presented to the Board and would also be presented to the CCG Governing Body on 2 September.

Amanda added that whilst we needed to address measures, the feedback from NHSE on the existing plan showed that we are in a good position. Del agreed but advised that we need to understand the financial risks for the Council and this work was not yet complete.

Jane Higgs outlined 4 key points in relation to Blackpool's plan, we need to:

1. Confirm deliverability
2. Link to strategic plan questions (checkpoint 3)
3. Link to Fylde and Wyre and the Acute Trust as risk will need to be managed
4. Report back to health and wellbeing board to confirm the plan hasn't changed but that the risk has shifted. Adding that the basics are the same but there is more focus on local government and emphasis on shared management of risks across the system

Del queried whether council would receive Section 256 monies in the next financial year. Mark replied that this had been queried and he was awaiting confirmation from NHSE whether this will form part of the £4.1 million coming to the CCG as part of the pooled budget. Del summarised the process going forward as follows:

- Produce a headline report for the health and wellbeing board for 3 September
- The BCF programme board to hold fortnightly meetings linked to the new checkpoints (which were scheduled)
- Del to arrange a briefing with the Leader to seek delegated authority to sign off the plan

	<p>Jane added that by Checkpoint 2 on 27 August, the expectation would be that local areas would have better assurance around deliverability, with sign up from acute providers.</p> <p>Clare Cosgrove then provided an outline of the financial element of BCF explaining that the 3.8bn had been split into £1bn designated to performance and £2.8bn non performance. The 1bn had been split into two areas NHS Commissioned Out of Hospital Strategy and Reduction in non-elective admissions. Clare added that what is paid into BCF is proportional so if we do more there is no extra money. She added that the BCF pooled budget would be paid in quarterly instalments based on performance. Noting that the risk is paying for something that has not yet been confirmed.</p> <p>Clare concluded that if we do everything in the plan we get all the funding if we don't it will be proportional, if we go above the level in any quarter we won't get anything as it's cumulative. Clare had based the figures on existing data from Gary Raphael.</p> <p>Jane remarked that ambulatory care pathways needed to be expanded to support BCF; the group agreed but stressed that we needed to ensure the money was in the system.</p> <p>Del queried how much work was needed to complete the financial element of the submission. Clare explained that she needed to determine the number of cases being taken out, and as the template is formula driven she would need to re-check the figures.</p> <p>Action:</p> <ul style="list-style-type: none"> ○ Mark to produce a presentation for September Health and Wellbeing Board ○ Del to organise a briefing with the Leader to update him on BCF and seek delegated authority ○ Mark, Jayne and Traci to continue to update the plan and present this at the next meeting of the BCF programme board
<p>5.</p>	<p>Subgroup mapping</p> <p>Helen Lammond-Smith tabled a chart that she had developed following a subgroup mapping meeting on 4 August. The chart outlined existing groups which currently have a relationship with the Health and Wellbeing Board and feed into the priority areas and those which have less connectivity with the Board's agenda. The group queried how the Children's Trust linked in, in relation to Better Start and the Health and Wellbeing Board and noted that for groups with less connection such as B:Safe it was key to encourage them to develop a dialogue.</p> <p>Scott Butterfield commented that more clarification was needed with regard to the remit of Children's Trust and he was currently working with them to review and revise arrangements. David Bonson added that the Strategic Commissioning Group required clarity about their agenda.</p> <p>Del queried whether we could work in a smarter way with some groups continuing as they are but some merging; with chairs feeding into a partnership board that would in</p>

	<p>turn report into the Board.</p> <p>The group agreed that as a starting point the draft partnership report written by Traci and the chart from Helen should be merged and updated and brought back to the group in September to progress discussions, so that options/recommendations on a future substructure can be taken forward with the Health and Wellbeing Board.</p> <p>Action: Helen to forward the subgroup chart to Traci who will update the partnership report for discussion in September with a view to final recommendations being presented to the Board in October.</p>
<p>6.</p>	<p>SCG Terms of Reference</p> <p>Traci outlined changes to the TOR, notably within the scope and relationships sections; which included the new programmes/groups that SCG now has a connection with as follows: the Better Care Fund and BCF Programme Board; the three Big Lottery Fulfilling Lives programmes, Quality Surveillance Group and the Fylde Coast Strategic End of Life Group. Del asked that a line regarding quoracy be added. The group agreed with the amended TOR in principle.</p> <p>Action: Traci to include quorum in the TOR and circulate for final approval</p>
<p>7.</p>	<p>Health and Wellbeing Board Project officer post</p> <p>Scott talked through the proposal setting out the options for a replacement health and wellbeing project officer in light of Traci's take up of a new post in Adult Services. Scott explained that there was a need for continuation of support but given current resource pressures, there was less available to support a full time equivalent post. Furthermore as the initial strategic development of the Board was now complete, the proposal was to create a part-time two year post at scale H1 with buy-in from member organisations in terms of time or in kind support. Scott added that any additional Board development would need to be budgeted for by the Board, but there was commitment from the Corporate Development Team to provide strategic support where appropriate. He added that if funds could be found the post could be worked up to a full time post to take on additional work for the Corporate Development Team but this was an ongoing discussion within his service.</p> <p>The group agreed that the Board would still require a support officer and agreed to the principles set out in the proposal with Public Health, Adult Services and the CCG each contributing £3697 towards the post. Del stated that this would need to be ratified by the Health and Wellbeing Board.</p> <p>Action: Scott to prepare a report for the Health and Wellbeing Board for formal approval</p>

<p>8.</p>	<p>Extensivist model update</p> <p>Andy Roach reported that Mark O’Donnell was leading on this work and confirmed that the clinical blueprint was complete and an executive summary produced. Development would continue through the Implementation Group which included members of the Clinical Design Team. The Final draft of the Out of Hospital Strategy would be ready on 27 August and followed by clinical and public engagement. Andy added that a report would be brought to the Health and Wellbeing Board in due course</p> <p>Action: Andy to prepare a presentation with the exec summary for October Health and Wellbeing Board</p>
<p>9.</p>	<p>JHWS Performance Update Qtr1 2014-15</p> <p>Traci presented the dashboard summary on behalf of Karen Nolan noting the indicators which had improved or declined in performance and highlighting those for which data was not available due to time lag.</p> <p>The group raised some concern about some of the data being significantly out of date and queried why this was the case. Judith Mills explained that some of the data for example child dental health was conducted in five year phases over different age groups hence the data 2008-9 was the most up to date data available.</p> <p>The group advised that if this is the case an alternative indicator needed to be found. David added that commentary would be required for those indicators where data was available. Del tasked Traci with producing a template and sending this to indicator leads for completing so that the exception report could be populated.</p> <p>Action: Traci to produce and circulate a template to indicator leads requesting technical summaries for the indicators that have been updated</p>
<p>10.</p>	<p>Draft Improvement Plan</p> <p>Traci briefly presented the plan and asked if this could be included on the next agenda so that it could be worked up for discussion at the next development session which she was proposing take place in early December.</p> <p>The group agreed to include the plan on the next agenda. Del queried whether the Board had formally agreed the four revised priorities identified at May’s development session as this would enable them to move forward with the plan. Traci explained that these had been included in a report on the outcome of the development session presented at July Board, adding that the plan had been agreed in principle. However Traci stated that she would prepare a follow up report seeking formal approval from the Board against the four priorities.</p> <p>Action: Traci to prepare a follow up report for September Board seeking formal agreement of the</p>

	four revised priorities
11.	<p>Health and Wellbeing Board – September Agenda</p> <p>Traci confirmed the key items as – Disabled Children’s Charter, JHWS Performance, Better Care Fund, PNA Consultation, Healthwatch annual report and a report on the JSNA Event with the Third Sector.</p>
12.	<p>Agenda Items for SCG next meeting</p> <p>Traci confirmed the key items as - Better Start Update, Quality Surveillance Group Update, Draft Tobacco Strategy, Welfare Reforms, Improvement Plan, Partnership/Subgroup report, Social Isolation update</p>
13.	<p>AOB</p> <p>Traci presented 3 further items for consideration:</p> <p>Local Vision</p> <p>Traci informed the group that at her last briefing with the Leader she had informed him about a programme called Local Vision which had been promoted at the LGA Action Learning Set in June. The Leader had tasked Traci with obtaining further information so that a collective view could be taken as to whether to take part. Traci explained that Local Vision formed part of the LGA Systems Leadership programme which provided support through an ‘enabler’ to work with a local area to tackle the main health or social care issues affecting their locality. This would involve the submission of an application describing the issue(s), supported by evidence of sign up from local partners including the Health and Wellbeing Board and a contribution of £10,000. Subject to the application being successful, the LGA would match this with an additional £27,000 worth of resource/support to include the ‘enablers’ time. Traci noted that the deadline for applications was 8th August so the timing was very tight, but if there was interest there may be some flexibility around the submission date.</p> <p>The group consensus was that given the current agenda, taking up this type of opportunity would be beneficial at a later stage and an application could not be submitted at this time. Traci said that she would inform the LGA that they would not apply in this round and would ask for future dates.</p> <p>Board meeting arrangements</p> <p>Traci informed the group that she would be working with Lennox Beattie to develop the Boards meeting schedule for next year. The group advised that they would be keen for the Board to return to monthly meetings given the ongoing substantial agenda which should include more opportunities for development sessions. Traci agreed to raise this with Lennox. She also proposed running the next development session in early December once the improvement plan was finalised.</p> <p>The group agreed with this in principle but advised that this should be discussed at the next Board meeting.</p>

	<p>Traci added that she had had a discussion with the Leader regarding the hosting of future Board meetings and he was supportive of each member organisation hosting one of the Board’s public meeting to ensure ownership of the agenda across the ‘partnership’. Traci stated that she had raised this initially with Mark Towers and Lennox Beattie in Democratic Services who welcomed the proposal but required further clarity about how the arrangement would work in practice and stressed that the key issue would be to ensure the core business of the Board was not lost.</p> <p>The group agreed with the principle but emphasised that the agenda needed to be set by them with input from the hosting organisation.</p> <p>Stakeholder Event</p> <p>Traci reported that at their July meeting, the Board had agreed to hold a second stakeholder event to celebrate the achievements outlined in the annual report and to look to future work.</p> <p>The group agreed with the principle but advised that the event should give more focus to new developments and future areas of work and that the programme should be developed at a future meeting.</p> <p>Actions:</p> <ul style="list-style-type: none"> ○ Traci to contact the LGA to confirm that a bid would not be submitted to Local Vision bid at this time and to ask for future dates ○ Traci to produce a report confirming the Board meeting schedule for 2015 including development session and hosting arrangements ○ Traci to identify potential dates for the next stakeholder event and draft an initial paper outlining the purpose and focus of the event
<p>14.</p>	<p>DATES OF FUTURE MEETINGS</p> <p>All meetings will run 1:30-3:30pm as follows :</p> <ul style="list-style-type: none"> ● Thurs 25 Sept (Boardroom) ● Thurs 6 Nov 14 (Anteroom) ● Thurs 11 Dec 14 (Anteroom) ● Thurs 29 Jan 15 (Boardroom) ● Thurs 26 Feb 15(Boardroom)