

**Strategic Commissioning Group
Notes and Actions
Thursday 3 April 2014, 1:30-3:30pm
Boardroom, Stadium**

Present	<p>Delyth Curtis Chair, Assistant Chief Executive/Director - Adult Services, Blackpool Council Sue Harrison, Assistant Chief Executive/Director – Children’s Services, Blackpool Council Andy Roach, Director of Integration and Transformation, Blackpool CCG Gary Raphael, Chief Finance Officer, Blackpool CCG Helen Lammond-Smith, Head of Commissioning, Blackpool CCG Judith Mills, Public Health Specialist, Blackpool Council Steve Thompson, Assistant Chief Executive – Treasurer Services, Blackpool Council Liz Petch, Public Health Specialist, Blackpool Council 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 Karen Nolan, Business Intelligence Officer, Blackpool Council Traci Lloyd-Moore, Health and Wellbeing Project Officer, Blackpool Council Annie Coppel, Implementation Consultant, NICE</p>
Apologies	<p>Dr Amanda Doyle, Chief Clinical Officer, Blackpool CCG David Bonson, Chief Operating Officer, Blackpool CCG Dr Arif Rajpura, Director of Public Health, Blackpool Council Jane Higgs, Director of Operations and Delivery NHS England (Lancashire) Jane Cass, Head of Public Health, NHS England (Lancashire) Lynn Donkin, Public Health Specialist, Blackpool Council</p>

1.	<p>Apologies Apologies were noted.</p>
2.	<p>Welcome and Introductions. Delyth welcomed everyone to the meeting.</p>
3.	<p>Notes and actions from previous meeting. Notes from the previous meeting were agreed.</p>
4.	<p>Looked After Children (LAC) Action Plan. Sue provided an update on the plan on behalf of Dominic Tumelty, Head of Children’s Social Care (who was unable to attend the meeting). Sue informed the group that whilst</p>

figures were still of concern they were moving in the right direction and had stabilised. 10-12 children were coming into care on a monthly basis but the numbers of children in care had reduced from 499 at the time of the thematic debate held at Board last year to 443 and in the longer term they are working towards a ballpark figure of 390. Sue emphasised that the need to maintain relationships with families whilst keeping children safe, as key the aim of the plan was to safely reduce the numbers of looked after children and gave details of the different interventions in place.:


- The Edge of Care Team has been established which provides 24-7 emergency packages for families in need.
- Continued push of the (Getting it Right) Early Help strategy and for better working relationships and more dialogue with partner agencies to understand what they are doing to support the getting it right agenda and the interventions they are putting in place as referrals continue to increase. There is an expectation for agencies to do more and a need for more vigilance around monitoring.
- As drug and alcohol misuse are key factors, Children's Social Care are working with commissioners in Adult Services to renegotiate contracts and new MASH arrangements have been proposed. Psychological support is now in place and closer working with the Complex Care Panel.
- A financial plan has been produced which maps out at an individual level the costs of core care packages. Sue explained that whilst packages can be revised dependent on the circumstances of the child, the costs for those children that remain in care would not reduce due to the high level/intensity of need.
- There was a need for more 'internal' foster carers; Sue explained that external foster carers are those sought by an agency not employed by Blackpool council.

Gary asked if LAC receives additional funding from central Government. Sue replied that no additional funds were received and LAC was solely funded through the council's core budget.

Judith queried whether there had been any increase in the numbers of adoptions in light of the recent campaign. Sue reported that numbers had increased, with more children adopted to date this year then compared with the whole of last year. Sue added that a central government scorecard was now in place.

In moving the LAC Action plan forward, Sue explained that LAC would continue to be monitored via the Children's Improvement Board and more work would be done with partner agencies around the Getting it Right agenda.

Action – Steve Thompson to share financial plan with Gary Raphael

	<p>Action – Sue to prepare a paper on progress of the action plan for Health and Wellbeing Board. Traci to liaise with Sue on timing</p>
<p>5.</p>	<p>NICE Update</p> <p>Annie Coppel gave a short presentation on the role and work of NICE in working with and providing support to local authorities, CCGs, Social Care, Health and Wellbeing Boards and Healthwatch. Annie informed the group about the development of NICE quality care standards to support improvement across the NHS, social care and public health and outlined how local authorities and NHS colleagues could be kept up to date and influence this work going forward. Annie encouraged the group to register with NICE as this would provide the opportunity to be involved in the future development of NICE guidance and quality standards.</p> <p>Judith added that NICE guidance is referenced in the JSNA and used to inform service specifications. The group agreed that as a further step NICE should be used in JHWS action plans. The group thanked Annie for her informative presentation, stating that they would be keen to be more involved in the work of NICE.</p> <p></p> <p>Q:\Health Wellbeing Board\Health and We</p> <p>Action: individual members to contact Annie outside of the meeting to discuss how NICE can support their areas of work/service areas</p>
<p>6.</p>	<p>JHWS Performance Framework and action planning</p> <p>Karen was introduced as the new Business Intelligence Officer, replacing Stewart Barker and would be responsible for updating the dashboard going forward. Traci talked through the amendments to the document since the last quarter, explaining that Framework was comprised of a number of components including the basket of high level indicators, operational plans and feedback gleaned from stakeholders to provide a balance of qualitative and quantitative data. Sections had been added to include roles and responsibilities and contact information. Traci added that as public accountability was key the document would be publicly available on the Boards website.</p> <p>Gary commented that as public and partner expectations would need to be managed an additional section should be added under context which identified long, medium and short terms objectives The group agreed with this suggestion.</p> <p>Karen tabled the exception report that would be taken forward to April Board.</p> <p>The group asked that the dashboard be presented at April Board and that the relevant indicators leads be made aware that they would need to attend the meeting to answer</p>

	<p>any performance related questions.</p> <p>Traci talked through two versions of the action plan reporting template and asked the group for their view on which should be used. The detailed template would be completed for action plans on initial review and the simpler template used thereafter to summarise key highlights for the quarter and which would be presented at Board.</p> <p>Action: Traci to include short, medium and long term objectives and contact information in the document.</p> <p>Action; Traci and Karen to meet outside of the meeting to finalise the performance report for Board and contact indicator leads</p>
7.	<p>Better Care Fund Update</p> <p>Dr Mark Johnston tabled the final submission Part 1 covering the narrative and Part 2 Finances and outlined changes to the plan since the first draft which included the care design model and risks. He added that the plan that would be submitted by close of business today.</p> <p>Part 2 Finances. Mark added that this new version contained more information on outcome metrics including reablement and avoidable emergency admissions which were more realistic and achievable. Wendy queried the metrics and how the figures had been calculated, Mark to send the guidance to Wendy for reference.</p> <p>Gary stated that he would need to clarify his recent budget report with the finance scheme as there appeared to be a slight shortfall.</p> <p>The group principally agreed the plan but noted that a final check of figures was needed before final sign off by Del and Andy.</p> <p>Andy explained that a short update on the submission would be provided at April Board with a comprehensive update provided in June.</p> <p>Wendy requested that the CCG 5 Year Strategic Plan and Out of Hospital Strategy be added to Board's forward plan</p>
8.	<p>Health and Wellbeing board April and June agenda</p> <p>Traci outlined the key items for April Board to include ratification of the Sexual Health Action Plan, Fairness Commission and Quality Surveillance updates and Cancer thematic debate. The June agenda to include Social Isolation debate, Pharmaceutical needs assessment and updates on the Care Bill, SEN Reforms and LD Health Assessment.</p>
9.	<p>Minutes of the Fylde Coast Strategic End of Life Group</p>

	The minutes were noted.
10.	<p>Agenda Items for Next Meeting</p> <p>Traci informed the group that this would include a review of the Terms of Reference, updates on Mental Health, Healthy Weight and Sexual Health Action Plans and an item on Joint Commissioning led by Sue Harrison</p>
11.	AOB
12.	<p>DATES OF FUTURE MEETINGS</p> <p>All meetings will run 1:30-3:30pm in the Anteroom unless otherwise indicated as follows:</p> <ul style="list-style-type: none"> • Weds 14 May • Weds 18 Jun • Weds 6 Aug • Thurs 25 Sept (Boardroom)