

**Strategic Commissioning Group  
Notes and Actions  
18 November 2015, 9.30 – 11.30am  
Conference Room 3 A, Bickerstaffe House**

<b>Present</b>	Delyth Curtis, Director of People (Director of Children's Services), Blackpool Council (Chair) David Bonson, Chief Operating Officer, Blackpool CCG Dr Arif Rajpura, Director of Public Health, Blackpool Council Gary Raphael, Chief Finance Officer, Blackpool CCG Liz Petch, Public Health Specialist, Blackpool Council Helen Lammond-Smith, Head of Commissioning, Blackpool CCG Dr Mark Johnston, Deputy Chief Operating Officer, Blackpool CCG Val Raynor, Head of Commissioning, Blackpool Council Karen Smith, Director of Adult Services, Blackpool Council Steve Thompson, Director of Resources, Blackpool Council Judith Mills, Public Health Specialist, Blackpool Council Annette Algie, Better Start
<b>Also present</b>	Venessa Beckett, Corporate Development and Policy Officer, Blackpool Council Scott Butterfield, Corporate Development and Research Manager, Blackpool Council
<b>Apologies</b>	Merle Davies, Director, Better Start Nikki Evans, Superintendent, Lancashire Constabulary Lynn Donkin, Public Health Specialist, Blackpool Council Judith Mills, Public Health Specialist, Blackpool Council

<b>1.</b>	<b>Welcome, introductions and apologies.</b>  Del welcomed everyone to the meeting, apologies were given and introductions made.
<b>2.</b>	<b>Notes and actions from previous meeting.</b>  Notes from the previous meeting were agreed. The following updates were given:  <b>Item 3: Children and Young People's Emotional Health and Wellbeing Transformation Plan</b>  Del Curtis – the PSRB has met and agreed that the SCG will take some of work that flows out of it, The minutes of the PSRB will come to this group and the Public Sector Transformation Network will be helping to write some of the narrative for Blackpool.  Helen Lammond-Smith – work had progressed regarding the consultant psychiatrist – a position was going to be commissioned so women can be booked in pre and post-natal, this will be funded through transformation plan in accordance with NICE guidance.  Val Raynor – the first draft of the transformation plan has been submitted with no major

	<p>changes to be made, meetings are planned to discuss governance and monitoring and also map out who is doing what; HeadStart will also be mapped against this plan.</p> <p><b>Item 5: Learning Disability Transformation Plan</b></p> <p>Information has been published regarding the payment of dowries, Lancashire want to create a pooled budget, but locally we prefer to develop our own plans as some areas of the work is pan-Lancs and others is not. Some people are now ready to move so we need to move quickly with the arrangements. A pooled budget could be arranged with agreement from the NW specialist commissioning hub.</p> <p><b>Action: Hilary Shaw to lead development of section 75 pooled budget agreement</b></p> <p><b>Item 6: Early Action</b></p> <p><b>Action: Fulfilling Lives item to be brought to December's meeting</b></p> <p><b>Item 7: New models of care</b></p> <p>Developing thinking around MSCP and what an organisational form might look like, some suggestions around registered list sizes and what the commissioner and provider model might look like. Further work will be required when we have some clarity about this; some areas will be easier to join up across the Fylde Coast e.g. IT, estates, but financial systems are linked to the national system.</p> <p>Can the PSRB help to join up some of the thinking around shared services? We need to scope out in greater detail what can be transformed. Where does Healthier Lancashire fit? From an NHS perspective there will be an overarching Lancashire plan with the locality plans sitting underneath but no articulation of Blackpool specifically within that.</p> <p>All of the different levels we work at apply at different times, but we need to make sure it is aligned. From a Combined Authority perspective it is still early days, health and social care would be good at a Lancashire level but systems transformation needs to be implemented.</p>
3.	<p><b>Governance mapping</b></p> <p>Venessa Beckett presented a diagram showing the groups and boards that are connected to the HWB and SCG. The diagram was discussed with a view to rationalising the number of groups. Starting from the SCG what do we want the groups to do and what is the process by which we want assurance?</p> <p>The Council's Corporate Plan has two priorities and sets out the vision for Blackpool; the HWB strategy is the vision for health and social care, what is the vision for the public sector? We are all doing our own bits and not focusing on the overarching vision. We need to prioritise our work programme, and articulate our vision and the different strands.</p> <p>There are a number of plans and strategies in development: a plan for Fylde and Wyre, Healthier Lancashire, Hospital Trust five year strategy, and a piece of work between the Trust and CCG. Vanguard needs to link with this also.</p> <p><b>Action: More groups to be added to the diagram</b></p> <p><b>Action: item to December meeting on the Council Plan to think about how plans fit together.</b></p>

3a.	<p><b>Joint Commissioning of Early Years Healthcare Pathway</b></p> <p>Annette Algie presented the report which proposed a new commissioner post to sit within Better Start with responsibility for commissioning services for 0-5 including maternity services, school nursing, family nurse partnership and health care pathways for 0-5. The purpose would be to align commissioning of the suite of healthcare services to one clinical commissioning lead to better enable a strategic focus on alignment and priorities to achieve the best outcomes for families, and provide the best value for money.</p> <p>The discussion raised a number of points including that an additional commissioner post within Better Start would further fragment commissioning and it was felt that this would not add value, but instead would be more beneficial if a single commissioning pot could be agreed. This could be within the wider scope of the EWB Transformation Plan to join up existing works and identify gaps to be filled. It was felt that there is a need for the SCG to project manage joining up and aligning commissioning for children's health services.</p> <p>It was agreed that further discussions were needed in this area to agree a way forward as the additional funding on offer could be used to fund a different type of post and this was a good example of the governance structure working.</p> <p><b>Action: Further discussions to be held regarding this item (Helen Lammond-Smith, Val Raynor, Merle Davies)</b></p> <p><b>Correction: the report was not proposing an additional commissioner post but proposing additional funding to support joint commissioning.</b></p>
4.	<p><b>Savings discussion</b></p> <p>Steve Thompson outlined the current position: the high level message is that there is a £20m gap next year, with a different composition than originally thought. The breakdown had been agreed in principle with £9m from service changes and £11m from commercial developments.</p> <p>The Spending Review is next week but we won't have the settlement figure until just before Christmas. £3.5m will come from adult social care and discussions are needed regarding the potential impacts on CCG, there are also other areas where cuts will lead to increased demands in other areas, and a consultation period will begin on Monday.</p> <p>A discussion followed and it was agreed that it would be very helpful if CCG partners were overt and vocal about the impact this would have on health services, particularly in relation to public health cuts, which could be as much as £6-7 million, plus £1.2m in year. It helps the CCG with their discussions with NHS England about how Blackpool is suffering as a result of all the combined cuts, and a direct link can be made to the impact on A &amp; E.</p> <p>It feels worse in the local authority than in health but BTH are required to make £25m in efficiency savings, but without changing any services. Activity is increasing and it is a massive challenge.</p> <p><b>Action: Further discussions to take place following CSR and settlement (at January meeting)</b></p>
5.	<p><b>Intermediate Care Commissioning Review</b></p> <p>Helen Lammond-Smith advised that the implementation phase of the review was underway; an HR and finance sub-group had been established, and a report was due to go to the Clinical Leadership Team shortly.</p>

6.	<p><b>New models of care update</b></p> <p>Mark Johnston gave a presentation on the EPC model, describing the integrated care model that will wrap integrated care coordination and care provision teams around patients and primary care, at the appropriate scale.</p> <p>At the neighbourhood level, groups of practices will work together. There are some issues to work through regarding the social care element. With regards to the Wellbeing support worker roles; there are similar roles within adult social care teams so we need to ensure there isn't duplication. There are also the new Community Connectors in development by the Fairness Commission. The teams at neighbourhood level educate people to self care.</p> <p>The workshops have brought some clarity but we need to bring it all together.</p> <p>Further discussions to take place and updates to future meetings.</p>
7.	<p><b>Draft Health and Wellbeing Annual Report</b></p> <p>Venessa Beckett asked for comments on the draft Annual Report which would be presented to the HWB on 2 December.</p> <p><b>Action: Comments/amendments to Venessa as soon as possible</b></p>
8.	<p><b>Health and Wellbeing Board Draft Forward Plan (for info)</b></p> <p>To be circulated.</p>