Joint Commissioning Board

1 February 2017

Action notes of the Joint Commissioning Board held on 1st **February 2017** at 14:30 – 16:30

Carisbrooke Room, CCG HQ, Ground Floor, Apex Building A, St Cross Business Park

PRESENT:

CCG Loretta Outhwaite, Chief Finance Officer

John Rivers, Chair (Chair) Helen Shields, Chief Officer

Loretta Kinsella, Director of Quality & Clinical Services

Linda Rann, Head of Secondary Care Hospital Commissioning

Council Rida Elkheir, Director of Public Health

Kathy Marriott, Area Director (IW) of Children's Services

Cllr Richard Priest, Executive Member

Carol Tozer, Director of Adult Social Services

In attendance: Dr. Leoni Grellier, Chris Cussen, Simon Paul and Abdi Abolfazl (Item 6.4)

Mr. Gilles Bergeron (Item 6.3)

NOTED BY: Ursula Horrix, Business Administrator to the Deputy Chief Officer, CCG

1.	APOLOGIES FOR ABSENCE: Kerry Hubbleday, Strategic Manager – Finance John Metcalfe, Chief Executive Officer Gillian Baker, Deputy Chief Officer (Linda Rann attending) Welcome to Councillor Richard Priest	
2.	DECLARATIONS OF INTEREST Nothing to note. Note: Declarations of Interest yet to be received from Carol Tozer. DOI form to be sent to Cllr Richard Priest (RP) for completion prior to the next JCB (01.03.2017).	CT 62 UH/RP 62
3.	NOTES OF THE LAST MEETING The notes of the meeting held on 01.01.17 were agreed as an accurate record.	

Action Tracker

Reviewed and updated:

Occupational Therapy Wait Time to First Assessment

A letter (dated 28.12.16) regarding OT Wait time to First Assessment was circulated with the papers as a result of an action a previous meeting (December 2016). It was agreed that GB and CT would review the letter and the concerns that were raised regarding the OT Waiting List position. LR also agreed to forward to AG to review and feedback comments to GB. [Post meeting note: Letter forward by LR to GB and Alison Geddes, response sent to LR and GB 03.02.2017]

GB/CT 68 LR 68 CLOSED AG 68 CLOSED

45. Action to resolve £1.4m shortfall in the BCF

Formal response sent by the CCG to the IOW Council. There was agreement that a Section 256 would be developed. This work is now underway and should be available for signing in the next few weeks.

To be discussed on the agenda, item 4. CLOSED

60. JCB Work Plan

No feedback had been received from any member of the JCB. It was agreed children's services need to be reflected, all to review and feedback to Gillian Baker, particularly CT and KM. OPEN

All 60

To be discussed on the agenda, item 4.

64. BCF Overarching Highlight Report

64a. Workshop cancelled due to clash with Locality Workshop. Revised meeting scheduled 7th February. CLOSED

64b. CCG would continue to give £1m funding for 2017/18, it was however giving notice that this would not continue into 2018/19. HS agreed to write formally to clarify the current position. See action 45 – incorporated within CCG response letter - CLOSED

65. BCF Scheme Highlight Reports

A single page presentation had been requested to summarise how LAC's and the Health and Wellbeing Platform fit together to meet current needs. A paper was being prepared, however it was noted that there were still issues to be resolved. HS asked that this be considered a priority, RK confirmed that following a meeting scheduled w/c 6th February, the document would be circulated.

RK 65

67. IOW Prevention Strategy - DRAFT

To be discussed on the agenda, item 6, 6.2.

4. BETTER CARE FUND (BCF) BCF Section 75 (£1.4M)

A recent letter issued by the LA detailing a number of issues relating to the BCF was discussed. HS was disappointed that the press release had been issued by the LA prior to any meeting or further discussion and that this was against the agreed protocol.

Andrew Cousins had been appointed as BCF Advisor to the Isle of Wight LA and CCG. His role would assist with managing the reduced funding available and minimise any adverse effects. There was a need to clarify which services will no longer be provided in order to mitigate the impact of this and share the responsibility across the system.

LA budget was discussed; CT confirmed that the recommendation to council will be for the full 3% precept (3% during 2017/18 and 3% during 2018/19). Noted that 1% Council Tax increase raises £700k, there was also a one off New Homes Bonus Adult Social Care Grant of £727k.

CT reported that despite the New Homes Bonus the council is an overall net loser as £900k is being taken out. CT reported a savings target of £3.485m and that this is the first year that there has been a physical reduction in the budget. HS and CT agreed to share budget proposals.

HS/CT 69a

It was agreed that the financial position should be discussed further in the Commissioning Leadership Group. Creation of an overarching plan, reaching across Health and Social Care, was underway.

CB 69b

Following a response from External Audit regarding the transfer of 'support for Adult Social Care' money without a Section 75 in place, LO reported that NHSE can withdraw the funding; this was noted as a risk. If there is a Section 256 in place, External Audit would not pursue the issue but their recommendation was to contact NHSE to ensure that there is no intention to withdraw funds.

LO 69c

BCF Overarching Highlight Report

Highlight report noted without comment.

BCF Overarching Dashboard

Cathy Budden presented the BCF Dashboard. It was noted that certain areas were significantly over target.

BCF Scheme Highlight Reports

4.1 Rehabilitation/Reablement/Recovery

Highlight report noted without comment.

4.2 Locality Community Model

Highlight report noted without comment.

4.3 Carers

Highlight report noted without comment.

BCF Finance Report

Q3 finance report had not been released due to the absence of a signed BCF agreement, it was agreed that this would be brought back as an agenda item when the Section 256 was in place.

BCF Planning Guidance

Publication had been delayed, guidance now expected towards the end of February.

BCF SDIP and Risk Log (quarterly)

Cathy Budden presented the BCF SDIP and Risk Log. It was noted that two risks had been closed and removed and two new risks had been added. The SDIP had been circulated to scheme leads for up-date; no response had been received to date.

All 70 Scheme Leads

5. PROGRESS WITH INTEGRATED COMMISSIONING JCB Work Plan

The JCB work plan was presented, action (item 3. 6) still outstanding, all agreed to review and provide up-dates. It was noted that the work plan had been difficult to progress; HS asked that the focus remain on the plan for next year in terms of moving things forward.

All 60

It was agreed that this would be discussed on the Agenda at the next meeting (01.03.2017).

UH 60

Co-ordinated Access

CT asked for the Boards approval to support the work up of a revised and detailed paper to set out the Coordinated Access model to include:

- Options of delivery
- Milestones
- Impacts/benefits
- How to implement an aligned triage and decision making coordinated telephony first contact service provision across the system (between statutory partners and voluntary service provisions) for the Island.

Following agreement, a final paper will be brought back to the JCB for further consideration during April/May setting out detailed options and plan of delivery. The Board confirmed approval to support this paper and gave their agreement in principle to the proposals made.

Assistant Director Appointment

The ADIC post had been advertised, applications were being received and interviews planned to take place on the 13th and 14th March.

	Childrens Commissioning Following a recent meeting, Children's commissioners had come together to create a work plan, mapping all children's commissioning across CCG and LA. It was anticipated that this work would assist with future forecasting and budgets, maximising integrated Commissioning opportunities. It was agreed that an update to include recommendations would be provided at the April JCB.	KM 71a UH 71b
	A Task and Finish Group had been set up to monitor progress, REK raised concern regarding the ability of a new provider to work in an integrated way with the Trust and other providers.	
6. 6.1	COMMISSIONING ISSUES FOR DISCUSSION OR DECISION Review of Joint Approach to Obesity Pathway Following a brief summary and discussion around the current situation, a proposal was brought forward detailing an integrated approach to the commissioning and delivery of the weight management and obesity pathway for Isle of Wight adult residents. The paper proposes investment is made in prevention to reduce the long term consequences of obesity and surgery. Issues were highlighted around the challenge of funding. Money must	
	follow any change. A discussion followed regarding the lack of clarity regarding the responsibility for commissioning of Tier 3 services and the cost pressure of around £50k.	
	The JCB agreed that a joint pathway with a pooling of funding is the way forward. HS asked that further finance discussions take place in order to agree how to risk share across the system. REK and LR to discuss further with a view to pooling the Tier 1-4 budgets into the BCF, obtaining the investment and agreement of Commissioning Lead responsibility for Tier 3; it was agreed that a progress report would be brought to and discussed on the Agenda at the next JCB.	REK/LR 72a UH 72b
6.2	Up-date - IOW Prevention Strategy - DRAFT Noted without comment.	
6.3	Public Health Outcomes Report Noted without comment.	
6.4	Tackling the problem of alcohol abuse – Dr. Leoni Grellier Dr Leoni Grellier and colleagues from the Trust attended to present a paper regarding alcohol abuse. The presentation summarised the costs to the NHS of alcohol related admissions, followed by three case examples which highlighted the current gap in the provision of Alcohol Services on the Island.	

Costs

- Hospital team £157 K
- Community team £100 K
- Pharmacy research project NIHR grant

Savings

Delivers £286,000 savings per 100 000 population in bed days

An Integrated Alcohol Service fits in with STP and LDS/MLAFL prevention agenda (funding via this route may be a possibility) and this proposal has the potential to reduce hospital admissions, ED attendance, GP attendance and other wider system pressures with potential reduction in demand on MH services specifically as the proposal shifts delivery of care into the community from hospital. It was recognised that this could have a significant impact on reducing suffering among service users with outcomes measureable in a very short timeframe.

The board confirmed general support of the model, it was agreed that work would continue to produce a detailed business model, linking to integrated localities, feeding into Mental Health. JR asked that progress be reported at the next JCB and that this is an Agenda item at the next HWBB.

UH 73a

Draft Alcohol Strategy – up-date

REK provided a summary regarding the current draft Alcohol Strategy currently used across Wessex. The Board agreed to move forward with this and it was agreed that REK would take the lead, look at the options and report back with a clear overarching strategy and service model at the next JCB.

REK 73b **UH** 73c

7 ITMES FOR INFORMATION CQC Up-date

Following the recent 3 day inspection by the CQC, and the subsequent issue of a Section 31 notice raising quality concerns around the care and service provision for people with Mental Health needs (as in-patients and within the community), the Trust were required to provide assurance.

The CQC however, were not assured by the Trust response to the S31 notice and undertook a second inspection visit on 18th and 19th January. Concerns raised were particularly around the Trusts capability and capacity to provide safe, quality services across a wide range of areas and their capability surrounding the 'well led' KLOE expectations of executive clinical leadership.

NHSE made a decision to bring together the regulators to form a 'single item quality surveillance group' event. CT and HS agreed that papers prepared for this event would be shared with the board. A number of

CT/HS 74

conditions were set to include regular reporting around a whole range of data sets and Mental Health Implementation Plan Meetings set up with the CCG attending as a critical friend to work with the Trust to support them in working through a number of issues.

Further consideration was given to what support JCB can offer to the Trust, this would include:

- Quality Team audits
- Monitoring KPI's key lever for change
- Announced/unannounced visits
- Critical Friend Support
- MH Reconfiguration Board support to drive through change
- Supporting staff to make practical changes

8. REGIONAL / LOCAL ISSUES Council Changes Not discussed.

9. RISK LOG Noted.

10. DATE & TIME OF NEXT MEETING

Wednesday 1 March 2017, 1430 – 1630 Carisbrooke Room, Apex Building A, St Cross Business Park

Circulation:

CCG

Helen Shields, Chief Officer
Gillian Baker, Deputy Chief Officer
Loretta Kinsella, Director of Quality & Clinical Services
Loretta Outhwaite, Chief Finance Officer
John Rivers, Chair (Chair)

In attendance:

Ursula Horrix (notes)

For information:

Clinical Executive – Tracy Richards/Becky Berryman

Health & Wellbeing Board - Marie Bartlett

Cathy Budden - BCF

IW Council

Rida Elkheir, Director of Public Health
Kerry Hubbleday, Strategic Manager – Finance
John Metcalfe, Chief Executive Officer
Kathy Marriott, Area Director (IW) Children's Services
Cllr Richard Priest, Executive Member
Carol Tozer, Director Adult Social Services