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| Minutes of the Joint Committee of the Clinical Commissioning Groups Agenda Item 17404held on Thursday 2nd March 2017, 1pm – 3pmat the University of Central Lancashire, 53 Degrees Hall, Preston, PR1 7BQ  |

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| **Chair** | Phil Watson (PW) | Independent Chair | JCCCGs | Attended |
| **Voting Members** | Alex Gaw | Chair | Lancashire North CCG | Apologies |
| Andrew Bennett | Chief Officer | Lancashire North CCG | Attended |
| Chris Clayton | Chief Clinical Officer | Blackburn with Darwen CCG | Attended |
| David Noblett | Lay Member  | Greater Preston CCG | Attended |
| Sumantra Mukerji | Chair | Chorley & South Ribble CCG  | Attended |
| Doug Soper | Lay Member | West Lancashire CCG | Attended |
| Marie Williams | GP Member  | Blackpool CCG | Apologies |
| Geoffrey O’Donoghue | Lay Member  | Chorley South Ribble CCG | Attended |
| Gora Bangi | Chair | Chorley South Ribble CCG | Attended |
| Graham Burgess | Chair | Blackburn with Darwen CCG | Attended |
| Mark Youlton | Chief Officer | East Lancashire CCG | Apologies |
| Mary Dowling | Chair | Fylde and Wyre CCG | Attended |
| Paul Kingan | Chief Finance Officer | West Lancashire CCG | Attended |
| Phil Huxley | Chair | East Lancs CCG  | Apologies |
| Roy Fisher | Chair | Blackpool CCG | Attended |
| Tony Naughton | Chief Clinical Officer | Fylde and Wyre CCG | Apologies |
| Michelle Pilling | Deputy  | East Lancashire CCG | Attended |
| Adam Janjua | Deputy  | Fylde and Wyre CCG | Attended |
| Kirsty Hollis | Deputy  | East Lancashire CCG | Attended |
| **Non-Voting Members** | Allan Oldfield  | Chief Executive Officer | Fylde Council | Apologies |
| Amanda Doyle | Accountable Officer | Healthier Lancs & South Cumbria | Attended |
| Andrew Bibby | Director for Specialised Services | NHS England | Apologies |
| Andy Curran | Medical Director | Healthier Lancs & South Cumbria | Attended |
| Dean Langton | Chief Executive Officer | Pendle Council | Apologies |
| Gary Hall | Chief Executive Officer | Chorley Council | Attended |
| Gary Raphael | Finance Director | Healthier Lancs & South Cumbria | Attended |
| Harry Catherall | Chief Executive Officer | Blackburn Council | Attended |
| Jane Higgs | Director of Operations | NHS England | Apologies |
| Jo Turton | Chief Executive Officer | Lancashire County Council | Apologies |
| Kim Webber | Chief Executive | West Lancs Borough Council | Apologies |
| Lawrence Conway | Chief Executive | South Lakeland District Council  | Attended |
| Neil Jack | Chief Executive Officer | Blackpool Council | Apologies |
| Samantha Nicol | Programme Director | Healthier Lancs & South Cumbria | Apologies |
| Sir Bill Taylor | Chair | Healthwatch | Apologies |
| Diane Wood | Chief Executive | Cumbria County Council | Apologies |
| Mike Wedgeworth | Deputy  | Healthwatch | Attended |
| David Tilleray | Deputy | West Lancs Borough Council | Attended |
| Sakthi Karunanithi  | Deputy | Lancashire CC | Attended |
| Steve Thomson | Deputy | Blackpool BC | Attended |
| **In attendance** | Jacquie Allan | Exec Support Officer | Healthier Lancs & South Cumbria  | Attended |
| Dionne Standbridge  | Director | Pennine Lancashire | Attended |
| Peter Tinson | Chief Operating Officer | Fylde and Wyre CCG | Attended |

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|  |  | **ACTION** |
| **17-03-1** | **Welcome and Introductions**The Chair welcomed the members of the Committee to their second formal meeting. He explained the status of the meeting and that the Committee had invited members of the public to observe what happens at these important decision making meetings. He clarified that this was a meeting held in public but not a public meeting, although the members of the public would be allowed to ask questions relating to agenda items at the end of the meeting. He explained to the members of public the voting rules of the JCCCGs. | **Info** |
| **17-03-2** | **Apologies and Quoracy**Apologies were received from Alex Gaw, Jane Higgs, Dean Langton, Sam Nicol and Allan Oldfield. All other non-attendees sent deputies as above.The meeting was declared quorate.***RESOLVED: The Chair noted the apologies.*** | **Info** |
| **17-03-3** | **Declarations of Interest** The Chair requested that the members declare any interests relating to items on the agenda. The Chair reminded those present that if, during the course of the discussion, a conflict of interest subsequently became apparent, it should be declared at that point.***RESOLVED: No declarations of interest were notified.*** | **Info** |
| **17-03-4** | **Minutes from the previous meeting held on the 2nd February 2017**The minutes of the meeting were reviewed, and amendments proposed. Mary Dowling said that she had some changes to suggest and offered to do this outside of the meeting to save time. This was agreed. The Chair asked that with the changes, the Committee accept the final minutes as a true and accurate account of the meeting. ***RESOLVED: The minutes of the meeting were accepted as a true and accurate record of the meeting on the 2nd February 2017.*** | **Info** |
| **17-03-5** | **Action Matrix Review**The Action Matrix from the previous meeting was reviewed and all of the outstanding items would be covered on the agenda, with the exception of reference 17-01-9 Evaluation and Hurdle Criteria which would be on a future agenda. The Committee also noted that the final version of the Terms of Reference for the Committee were awaited and this should remain as an action.***RESOLVED: The action matrix was reviewed and the outstanding issue noted.*** | **Info** |

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| **17-03-6** | **Any Other Business Declared:**The Chair asked the members of the Committee if they had any other business they wished to declare for discussion at the end of the meeting.***ACTION: Mr Doug Soper asked that the work plan for the Committee be discussed.*** | **Info** |
| **17-03-7** | **Programme Board Feedback**Amanda Doyle, Chief Officer for the Healthier Lancashire and South Cumbria Programme gave an update on the main topics of discussion from the recent Programme Board meeting. The planned change to the Programme Management team had taken place and the role of the externally contracted team would now be undertaken by Carl Ashworth’s team from the Commissioning Support Unit, who were already supporting collaborative programmes across Lancashire and South Cumbria. Consequently the structure and contacts will change while the central team is being established. Once finalised the contact list will be issued to the members of the JCCCGs.Karen Smith from Blackpool Council had been appointed as the Senior Responsible Officer for the Regulated Care Workstream. She had given a detailed presentation to the Programme Board on the workstream and had identified issues that could be influenced locally at STP level, rather than nationally. There was also a presentation on the Third Sector. Stewart Lucas from Mind discussed how the voluntary sector can connect with the Local Delivery Plans and Sustainability and Transformation Plans. David Houston from Trinity Hospice then spoke about hospices and the opportunities that existed to engage with them. Lancashire currently has 8 hospices.Neil Greaves gave an update on the public facing narrative for the change programme and the Senior Responsible Officers had received the latest draft, which was included on the JCCCGs’ agenda. Declan Hadley presented a paper on integrated diagnostics and asked the Programme Board to support the proposal to create an integrated diagnostics workstream. He sought commitment from all the organisations identified to participate in the proposed collaborative arrangements. All the organisations at the meeting agreed to sign up to the proposal and Declan was tasked to put a group together to own the work, establish a clinical leader and then take their proposal to the Provider Group, prior to reporting back to the Programme Board. An update on this will be reported to the JCCCGs in August 2017.Amanda then concluded with a brief update on the work plan which is in the process of being completed. At this point a question was asked about the current position of STPs as there had been a lot of press speculation about them being in different positions. Amanda confirmed that we are in a strong position and the plan we have and the work we are doing is supported nationally. It was agreed that a more detailed discussion would be more appropriate in a development session. This led to the question about the members of the Committee receiving copies of the Programme Board Papers, which was not agreed. The Programme Board does not meet in public therefore the papers from that meeting do not go in the public domain. Once the minutes from the Programme Board have been ratified, these can be issued to the JCCCGs members for information.***ACTION: Once the Central Team has been established a contact list will be issued to the members of the JCCCGs.******ACTION: An Integrated Diagnostics Paper update to be presented at the August 2017 JCCCGs meeting.******RESOLVED: Once the Programme Board minutes have been ratified, these may be issued to the members of the JCCCGs.***  | **Info** |
| **17-03-8** | **Communications and Engagement**Neil Greaves discussed the “Delivering the Message” document, which he had distributed to the members of the JCCCGs. He confirmed that Senior Responsible Officers for each of the workstreams had also been closely involved in ensuring that the content sufficiently explained what was happening and they had indicated the changes that they wanted making to the document. He then gave the Committee the opportunity to voice any suggestions they had to improve the document.On the whole the document was felt to be compelling, effective and well mapped out. Several members made comments to improve key elements of it and these would be reflected in the final document as far as possible. One of the main suggestions was that the documents could be more sensitively worded by emphasising that health improvements are important and can also lead to financial benefits. The Healthier Lancashire and South Cumbria Programme was described as part of a collaborative effort among organisations across Lancashire and South Cumbria but the JCCCGs considered that it was much more and in particular had responsibilities to develop a new vision for health and care services across the region.A request was made for an animated version to be created once the final document is produced as this would assist older adults and people with learning disabilities to understand the issues.It was felt this was an important document to reach out and engage not only the general public but also the third sector, local councillors and our local MP’s. The communication and engagement teams from Lancashire and South Cumbria had all been involved in creating the document and a revised version was being taken to focus groups for final discussion. This would then be circulated to the Committee members and it was agreed that Amanda Doyle could sign off the document on behalf of the JCCCGs.***ACTION: For the Committee to forward any additional comments to Neil Greaves for inclusion in the amendments.******RESOLVED: The Committee agreed that Amanda Doyle could sign off the document* once the changes had been made.** |  |
| **17-03-9** | **Local Delivery Plans (LDP) presentations from 2 areas** |  |
| **Pennine Lancashire**Chris Clayton introduced himself as the new Senior Responsible Officer for the Pennine Lancashire Local Delivery Area, replacing Sally McIvor. He took the opportunity to thank Sally for all of the input she had put into the programme.He outlined the programme that had been running for approximately 18 months and the similarities across the Lancashire programmes. He spoke in detail about the Pennine Lancashire Case for Change and other issues including: health and wellbeing; care and quality; and finance and efficiency. The timeline for developing the new models of care was shown, with the scheduled consultation and implementation periods now being undertaken. He reported that significant and extensive programmes of communication and engagement were taking place with the public, workforce and politicians, including via social media. The health improvement priorities included respiratory, cardiovascular, frailty, mental health, psychological support, cancer, children and maternity, musculoskeletal and end of life. He emphasised that Pennine Lancashire are working together to design an accountable care system, with a memorandum of understanding already signed. There is a governance framework in place and regular meetings are in progress. It had been agreed that the new model of care has to be in place before organisation structures are reviewed. He concluded by suggesting that the ‘ask’ of the STP from Pennine Lancashire is:1. Clarity over the District General Hospital offer for Pennine Lancashire residents
2. Determining the tertiary specialist network offer for Pennine Lancashire residents
3. Managing lead commissioner arrangements as we move towards “accountable care” in LDPs and deciding how services that fall outside an LDP
4. How we standardise enablers such as digital, workforce – should we do them once and implement at HL&SC level?
5. Standardisation on some elements of the programme which are implemented in LDPs – e.g. prevention / primary care?
6. Can the STP / JCCCGs provide the scale required to ask important questions nationally e.g. social care funding?

Chris Clayton stated that we cannot tackle all of the areas at once and these need to be planned.In view of some of the work that was being led by Andrew Bennett, he was tasked with drawing-up a draft description of what Accountable Care means, for distribution to members of the Committee.***ACTION: Andrew Bennett to circulate a draft description of Accountable Care.******RESOLVED: The presentation was received and noted.*** |  |
| **West Lancashire** Paul Kingan, Chief Finance Officer for West Lancashire LDP presented an update on the programme. He highlighted that this LDP was relatively small and included 19 GP practices, 3 neighbourhoods and had a population of 112,000. All of the 19 practices have signed up to one federation.Due to the boundaries of the LDP, they also have to take into account both Merseyside and Greater Manchester STPs along with Lancashire and South Cumbria, because of the complicated mix of patient flows.The acute patient flows are largely towards Merseyside and Greater Manchester, but the community and local services are provided in Lancashire. The LDPs key focus is it’s out of hospital strategy and Paul quoted the 1948 World Health Organisation definition that -*“Health is a state of complete physical, mental and social well-being, and not merely the absence of disease or infirmity.”*He displayed a slide highlighting the LDP strategy which covered:1. Community Services Transformation
2. Primary Care Transformation
3. Out of Hospital strategy “Building the future together”
4. Health inequalities including Well Skelmersdale

Paul discussed the links between the local delivery plan and the Healthier Lancashire and South Cumbria plan, and played a video on “Well Skelmersdale” and asked the Committee to consider the inter-relationships. The ask of the STP from West Lancashire is:1. How can we link this with the prevention workstream?
2. How can we link this with the enablers?
3. How do we get the pace needed?

***ACTION: Paul Kingan to circulate the web link for the video.******RESOLVED: The presentation was received and noted.*** |  |
| **17-03-10** | **Child and Adolescent Mental Health**Peter Tinson presented the Lancashire Children & Young People’s Emotional Wellbeing & Mental Health Transformation Programme discussing the commitment to children and young people and highlighting the issue that 75% of mental health issues start by the age of 18.The programme has been in existence for 18 months and there is a full programme board in place. The plan for the programme was signed off in January 2016. The plan for 2017/18 has recently been refreshed and the funding which is spent collaboratively across the region had been identified.Through engagement in stakeholder workshops they had gained views on the experiences and needs of young children and currently produce a monthly bulletin to keep them informed on the work of the programme.Recent CAMHS patient surveys show that there is a high level of satisfaction and happiness from parents, carers and children for most aspects of the services, although there are still issues to be addressed including waiting times and lack of community venues. The programme acknowledges that although they have made a lot of progress there is still a lot more to undertake. The information presented covered Lancashire and Peter said that the scope of the programme in future has to include South Cumbria.***RESOLVED: The presentation was received and noted.*** |  |
| **17-03-11** | **Any Other Business**The item requested by Doug Soper was covered in Amanda Doyle’s opening points and no other business was noted. | **Info** |
|  | **Closing remarks**The Chair thanked the Committee members for their attendance and noted that he was delighted at the interest shown from the General Public and closed the meeting prior to taking questions from the gallery.The date and venue for the next meeting are to be confirmed, but the Chair asked that the Committee members still keep the 6th April 2016 in their diaries. |  |

**Topics discussed through the Public Questions:**

STP documents and their clarity

Terminology used in documents received from NHS England

Minutes from meetings – availability on website

PWC report issued by Lancashire County Council

Bed situation and how it is being managed

Social Care cut backs and impact of closure of leisure centres

Federations of General Practices and accessibility

Clarification of financial information provided at last meeting