

Joint Committee of the Clinical Commissioning Groups (JCCCGs)

Notes of the Joint Committee of the Clinical Commissioning Groups
held on Thursday 7th June, 13:00-16:00
at Oswaldtwistle Mills Business Centre, Pickup Street, Oswaldtwistle, Lancashire, BB5 0EY

Chair	Phil Watson	Independent Chair	JCCCGs	Attended
Voting Members (One vote per CCG)	Alex Gaw	Chair	Morecambe Bay CCG	Apologies
	Andrew Bennett	Chief Officer	Morecambe Bay CCG	Attended
	David Bonson	Chief Operating Officer	Blackpool CCG	Attended
	Debbie Corcoran	Lay Member for Patient and Public Involvement	Greater Preston CCG	Apologies
	Denis Gizzi	Chief Officer	Chorley South Ribble & Greater Preston CCGs	Attended
	Doug Soper	Lay Member	West Lancashire CCG	Attended
	Geoffrey O'Donoghue	Lay Member	Chorley South Ribble CCG	Apologies
	Gora Bangi	Chair	Chorley South Ribble CCG	Attended
	Graham Burgess	Chair	Blackburn with Darwen CCG	Attended
	Mark Youlton	Chief Officer	East Lancashire CCG	Attended
	Mary Dowling	Chair	Fylde and Wyre CCG	Attended
	Paul Kingan	Chief Finance Officer	West Lancashire CCG	Attended
	Peter Tinson	Chief Operating Officer	Fylde and Wyre CCG	Attended
	Penny Morris	Chief Clinical Officer	Blackburn with Darwen CCG	Attended
	Phil Huxley	Chair	East Lancashire CCG	Attended
	Roy Fisher	Chair	Blackpool CCG	Attended
	Sumantra Mukerji	Chair	Greater Preston CCG	Attended
Tony Naughton	Chief Clinical Officer	Fylde and Wyre CCG	Attended	
In Attendance	Dawn Roberts	Representative	Cumbria County Council	Attended
	Harry Catherall	Chief Executive Officer	Blackburn with Darwen Council	Apologies
	Louise Taylor	Director	Lancashire County Council	Attended
	Neil Jack	Chief Executive	Blackpool Council	Apologies
	Sakthi Karunanithi	Director of Public Health	Lancashire County Council	Apologies
	Sayyed Osman	Director of Adult Services	Blackburn with Darwen Council	Attended
	Allan Oldfield	Chief Executive	Fylde Borough Council	Apologies
	Dean Langton	Representative	Pendle Borough Council	Apologies
	Gary Hall	Chief Executive Officer	Chorley Council	Apologies
	Kim Webber	Chief Executive Officer	West Lancashire Borough Council	Apologies
	Lawrence Conway	Chief Executive Officer	South Lakeland District Council	Apologies
	Amanda Doyle	ICS Lead	Healthier Lancashire & South Cumbria	Attended
	Andrew Bibby	Director of Specialised Services	NHS England	Attended
	Andy Curran	Medical Director	Healthier Lancashire & South Cumbria	Attended
	Carl Ashworth	Service Director	Healthier Lancashire & South Cumbria	Attended
	Gary Raphael	Finance Director	Healthier Lancashire & South Cumbria	Attended
	Jane Cass	Director of Operations	NHS England	Attended
	Neil Greaves	Communications & Engagement Manager	Healthier Lancashire & South Cumbria	Attended
	Sir Bill Taylor	Chair	Healthwatch Blackburn with Darwen	Apologies
	Charmaine McElroy	Business Manager to Amanda Doyle	Healthier Lancashire & South Cumbria	Attended
	Sue Hesketh	Office Co-Ordinator	Healthier Lancashire & South Cumbria	Attended
	Paul Hopley	Programme Lead for Mental Health	Healthier Lancashire & South Cumbria	Attended

		ACTION
1	<p>Welcome and Introductions</p> <p>The Chair welcomed the members of the Committee to the formal meeting. He explained the status of the meeting and that the Committee had invited members of the public to a drop-in session prior to the meeting commencing, in order to give them the opportunity to ask questions in advance and to understand some of the complicated issues to be discussed during this session. He added that there would still be an option to ask questions after the meeting had finished.</p> <p>This meeting had been given extra time as the meeting on 1st March was cancelled as it was not quorate due to the adverse weather conditions experienced on that day. There have been no further meetings of the JCCCGs due to the legal requirements of purdah, associated with Council elections, until today.</p> <p>For the benefit of the public in attendance the Chair explained that this is a meeting of the Joint Committee of CCGs of which there are eight. This Board brings together representatives of all of the eight CCGs.</p>	Information
1.1	<p>Apologies and Quoracy</p> <p>Apologies were received from members list above.</p> <p>RESOLVED: The Chair noted the apologies and declared the meeting quorate</p>	Information
1.2	<p>Declarations of Interest</p> <p>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.</p> <p>RESOLVED: There were no declarations of interest</p>	Information
2.	<p>Minutes from previous meetings for ratification</p> <p>There were two comments with regards to amendments to the minutes of the last meeting of the Joint Committee of CCGs held on the 11th January 2018</p> <p>Page 2 – Declaration of Interest</p> <p>In response to a query as to whether the conflict of interest declared at the January meeting was in line with the recent Conflicts of Interest Guidance, the Chair asked Sumantra Mukerji to explain it again and confirmed that as the conflict did not relate to an item on the agenda for the January meeting, it was appropriate for Dr Mukerji to remain and participate fully in the meeting in January</p> <p>Page 5 (item 4.1) is as follows</p> <p>RESOLVED: The Joint Committee agreed to endorse the framework subject to the amendments agreed during the discussion.</p> <p>Following these amendments the minutes were ratified by the Board</p> <p>RESOLVED: The minutes were ratified.</p>	Agreement
2.1	<p>Action Matrix Review</p> <p>The Chair reviewed the action matrix and the following points were discussed:</p> <p>Mental Health</p> <p>This is an agenda item at today's meeting and will be presented by Paul Hopley and Andrew Bennett.</p>	Information
3	<p>Any Other Business Declared:</p> <p>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.</p> <p>Neil Greaves would like to discuss with the Board the plans for the next meeting of the JCCCG in July</p> <p>ACTION: This was agreed and to be noted for discussion at the end of the meeting</p> <p>The Chair added that there would also be an opportunity for the public to ask questions at the end of the formal meeting.</p>	Information

<p>4.</p>	<p>Outstanding Items from the March 2018 Joint Committee of CCGs</p> <p>As noted above the meeting on the 1st March was cancelled as it was not quorate due to the adverse weather conditions experienced on that day and there have been no further meetings of the JCCCGs, due to the legal requirements of purdah, until today. Items have been agreed virtually through email by the CCGs due to the inability to bring them together in one room and competing timescales for decisions. The JCCCGs was asked to formally ratify the decisions as outlined on page 3 of the paper.</p> <p>Resolved: The Board formally ratified the decisions as outlined on page 3 of the paper.</p> <p>Amanda Doyle announced that the new digital strategy had been launched earlier today at Farrington Lodge. The event had been very well attended with a lot of energy in the room. The strategy looks very good and is a positive step forwards.</p> <p>Amanda Doyle advised that following a competitive selection and interview process that the Executive Directors posts for Lancashire & South Cumbria Integrated Care System had been appointed as follows:-</p> <ul style="list-style-type: none"> • Gary Raphael Executive Director for Finance and Investment • Andrew Bennett Executive Director of Commissioning • Jackie Hanson Executive Director of Nursing and Care Professionals • Talib Yaseen Executive Director of Transformation <p>Jane Cass has been aligned from NHSE as the Director of Assurance and Delivery and the ICS is currently out to advert for the post of Executive Medical Director.</p>	<p>For noting</p>
<p>5.</p>	<p>Commissioning Development</p> <p>The Chair invited Andrew Bennett to deliver this item.</p> <p>For the benefit of the public in attendance Andrew Bennett explained that commissioning, in this setting, relates to the planning and buying of services. This forum is not to discuss the provider issues but to agree a commissioning policy. The Commissioning Development Framework is a straight forward place-based model for commissioning.</p> <p>Following a request from the JCCCGs in January 2018, work had been completed on a more detailed and shared understanding of the neighbourhood level of commissioning, based on discussions with representatives from the Fylde Coast, Pennine Lancashire, Central Lancashire, West Lancashire and Morecambe Bay. The paper identified a shared view of the definition of a neighbourhood, the role a neighbourhood will play in a local economy (and in relation to the rest of the system) and some of the benefits a neighbourhood can deliver.</p> <p>A formal implementation plan had been agreed. Staff could be affected therefore there is a need to use a consistent set of principles in order to achieve progress. There is a need to be clear regarding what is being commissioned. The commissioning buying system has been quite fragmented and therefore we need to demonstrate we can work together. It is important that the clinical leads are comfortable that they can deliver on the agenda set out in the paper.</p> <p>Section 5 is the main body of the report which explains the current work undertaken by the various workstreams and specifically how the services will be commissioned. There have been at least 100 people involved in these discussions to date.</p> <p>The paper summarised the detailed work that sits behind all the workstreams. There is a lot of development yet to be done. The final section of the paper covers the governance arrangements and support structures that would allow this to be implemented along with the Clinical Commissioning Board to ensure the 'choreography' is right.</p> <p>The Board welcomed this paper and how this work has engaged our teams; however, it was suggested that this could be more ambitious with regards to the LD and Autism agenda. Healthwatch are carrying out a piece of work around screening and this needs to</p>	<p>Approval</p>

	<p>be tied into this piece of work.</p> <p>The Local Authorities expressed their willingness to work with Andrew Bennett on the key joint issues affecting us as a whole system. Andrew Bennett agreed to reference the Local Authorities within the governance section.</p> <p>It was commented that in some workstreams, there appeared to be too many transformation objectives and there was a need for some more local objectives, as there is a tendency for it to look too much like the national strategy.</p> <p>Amanda Doyle responded that there are many national priorities that have to be delivered. For example NHS 111 is a national 'must do' as there is evidence it reduces admissions. NHS 111 must increase the number of clinical responders to help reduce admissions. There are overlaps with Primary Care with regards to the national 'must do's', therefore there is a need to take a pragmatic approach as to how to deal with them.</p> <p>The JCCCGs was asked to approve the following recommendations:-</p> <ul style="list-style-type: none"> • Note the further development which has taken place on the Commissioning Development Framework and the Mental Health Commissioning Workstream since January 2018 • Note the development work which has taken place across six commissioning workstreams in support of the development of the Lancashire and South Cumbria Integrated Care System and its Integrated Care Partnerships • Approve the proposals for each workstream for the continued implementation of effective commissioning arrangements at the ICS, ICP and neighbourhood levels • Request that the Executive lead for Commissioning for Lancashire and South Cumbria and CCG Accountable Officers continue working together on the implementation of these arrangements, highlighting any risks to the Joint Committee. • Request that the Executive lead for Commissioning identifies the appropriate timescales to request that Governing Bodies receive further recommendations for delegated decision-making into the Joint Committee of CCGs • Receive an update on the implementation process in December 2018 <p>Resolved: The Board agreed to the recommendations listed above.</p>	
6.	<p>Special Educational Needs and Disabilities (SEND) Update The Chair invited Mark Youlton to introduce this item.</p> <p>Lancashire County Council Children's Services were recently subject to a review of SEND. In response to the review findings during April, Lancashire County Council and its partners submitted a written statement of action to Ofsted and the CQC who jointly evaluated the statement and advised that it was deemed fit for purpose. The statement set out how the local area was going to tackle the significant areas of weakness identified in the report.</p> <p>Twelve priorities were identified within five thematic areas involving all of the appropriate partners, users and carers in the system. At the recent Partnership Board communication was brought up i.e. the use of social media and how this may need to be taken into account in our plans.</p> <p>Mark Youlton will continue to lead on this piece of work with conversations taking place with the County Council and CCGs. There will be various check points across the next few months so we need to ensure the delivery of a consistent approach.</p> <p>Mark explained that the SEND statement of action only related to services delivered by Lancashire County Council. Blackpool and Blackburn with Darwen Councils have, nevertheless, taken the opportunity to consider the issues raised in the Lancashire County Council report and have made improvements to services in the light of the findings. The JCCCGs agreed that this has been a good response to the review of the services. However, a question was asked about how the Joint Committee can be assured that this does not happen again?</p>	Information

	<p>Mark Youlton responded to say that regular conversations will be taking place with schools, service users and carers as communication is key. There is a need for the communication to be delivered in the right way to develop trust and as a result of this make this successful. It was suggested that an interim report could be brought to this Board or a peer review in a year's time to provide assurance.</p> <p>Resolved: The Board acknowledged and agreed this paper.</p>	
7.	<p>Mental Health The Chair invited Paul Hopley and Andrew Bennett to introduce this item.</p> <p>Paul Hopley confirmed that there is still work in progress. Good engagement had taken place with CCGs, Providers, GPs and Local Authorities. Paul was pleased to report that public health colleagues had agreed to undertake a considered health need assessment across the four Local Authorities.</p> <p>Commissioners recognised that current arrangements have been fragmented but are now working together to develop investment plans.</p> <p>Governance structures are also being finalised to support alignment of the workstreams. There was real potential for the agreement of consistent standards and outcomes for mental health care across the ICS in future.</p> <p>Paul also mentioned that the Mental Health Steering Group, Help the Aged and the Digital Lead, Amanda Thornton, had been asked to come together and carry out a gap analysis on a national blue print. He emphasised that Lancashire and South Cumbria has some of the worst social demographics in the country and poorer outcomes are experienced by many of our patients. Demand was increasing and therefore these plans were crucial to our success.</p> <p>There was concern raised with regards to the commissioning workforce due to recent retirements within local teams. This issue will form part of the discussions with the commissioners in future meetings.</p> <p>Andrew Bennett took the opportunity to formally ask Cumbria Partnership Trust to work with Lancashire Care Trust to increase resilience and ensure mental health services are consistent in Cumbria and Lancashire and also help reduce variation across the patch.</p> <p>The Board was asked to endorse the following recommendations:</p> <ul style="list-style-type: none"> • Note the progress to date as outlined throughout the paper • Approve the final planning geographies as set out in section 2.0 • Approve the proposed governance structure and checkpoints as set out in section 8.0 • Endorse continuation of the Mobilisation Plan <p>Resolved: The Board endorsed the recommendations</p>	For endorsement
8.	<p>Any Other Business</p> <p>Neil Greaves announced that there would be a change to the venue of the next public meeting of the Joint Committee of CCGs in July. The NHS will turn 70 on the 5th July and therefore in order to celebrate this an event is being co organised with the University of Central Lancashire who will host at NHS 70 Tea Party at the University Campus, therefore as the Joint Committee of CCGs is due to take place on the same day the meeting will take place at the venue 53 Degrees. Members of the Joint Committee of CCGs are invited to come along to the celebrations with UCLAN following the meeting at 16:00.</p> <p style="text-align: center;">The next JCCCG Meeting will be held on: 5th July 2018, 53 Degrees, Fylde Road, Preston, PR1 2TQ</p>	Information
<p>The Chair thanked the Committee members and members of the public for their attendance and closed the meeting prior to taking questions from members of the public.</p>		

Topics discussed through Public Questions:

NHS 111 Service

The question was raised are there financial penalties that could be implemented if agreed service levels are not met?

There are financial penalties within contracts for providers. The specifications are fairly prescribed. The details of contracts are commercially sensitive and confidential.

Mental Health Mobilisation Plan Progress Report

The question was raised as to how the commissioning process would affect services?

The paper outlines the process for making the commissioning process more efficient and effective. On the 25th June all the commissioners will be brought together to agree a commissioning process by 31st March 2019.