

**Joint Committee of the Clinical Commissioning Groups (JCCCGs)**
**Notes of the Joint Committee of the Clinical Commissioning  
Groups held on Thursday 5<sup>th</sup> July 13:00 -16:00  
at 53 Degrees, University of Central Lancashire, Fylde Road, Preston, PR1 2TQ**

<b>Chair</b>	Phil Watson	Independent Chair	JCCCGs	Attended	
<b>Voting Members  (One vote per CCG)</b>	Penny Morris	Chief Clinical Officer	Blackburn with Darwen CCG	Attended	
	Roger Parr	Chief Finance Officer	Blackburn with Darwen CCG	Apologies	
	Graham Burgess	Chair	Blackburn with Darwen CCG	Attended	
	David Bonson	Chief Operating Officer	Blackpool CCG	Apologies	
	Roy Fisher	Chair	Blackpool CCG	Attended	
	Denis Gizzi	Chief Officer	Chorley South Ribble & Greater Preston CCGs	Apologies	
	Matt Gaunt <i>(Attended on behalf of Denis Gizzi)</i>	Chief Finance Officer	Chorley South Ribble & Greater Preston CCGs	Attended	
	Geoffrey O'Donoghue	Lay Member	Chorley South Ribble CCG	Apologies	
	Gora Bangi	Chair	Chorley South Ribble CCG	Apologies	
	Phil Huxley	Chair	East Lancashire CCG	Apologies	
	Michelle Pilling <i>(Attended on behalf of Phil Huxley)</i>	Lay Member Patient & Public Involvement	East Lancashire CCG	Attended	
	Mark Youlton	Chief Officer	East Lancashire CCG	Apologies	
	Jackie Hanson <i>(Attended on behalf of Mark Youlton)</i>	Director of Quality & Performance - Chief Nurse	East Lancashire CCG	Attended	
	Tony Naughton	Chief Clinical Officer	Fylde and Wyre CCG	Apologies	
	Tom Marland <i>(Attended on behalf of Tony Naughton)</i>	GP	Fylde and Wyre CCG	Attended	
	Mary Dowling	Chair	Fylde and Wyre CCG	Attended	
	Peter Tinson	Chief Operating Officer	Fylde and Wyre CCG	Attended	
	Debbie Corcoran	Lay Member for Patient and Public Involvement	Greater Preston CCG	Attended	
	Sumantra Mukerji	Chair	Greater Preston CCG	Attended	
	Alex Gaw	Clinical Chair	Morecambe Bay CCG	Apologies	
	Andrew Bennett	Chief Officer	Morecambe Bay CCG	Attended	
	Clive Unitt	Lay Member	Morecambe Bay CCG	Apologies	
	Doug Soper	Lay Member	West Lancashire CCG	Apologies	
	Mike Maguire <i>(Attended on behalf of Doug Soper)</i>	Chief Officer	West Lancashire CCG	Attended	
	Paul Kingan	Chief Finance Officer	West Lancashire CCG	Apologies	
	<b>In Attendance</b>	Dawn Roberts	Representative	Cumbria County Council	Apologies
		Dominic Harrison	Director of Public Health	Blackburn with Darwen Council	Attending
Harry Catherall		Chief Executive Officer	Blackburn with Darwen Council	Apologies	
Louise Taylor		Director	Lancashire County Council	Apologies	
Neil Jack		Chief Executive	Blackpool Council	Apologies	
Sakthi Karunanithi		Director of Public Health	Lancashire County Council	Attended	
Sayyed Osman		Director of Adult Services	Blackburn with Darwen Council	Attended	
Steve Thompson		Director of Finance	Blackpool Borough Council	Attended	
Allan Oldfield		Chief Executive	Fylde Borough Council	Apologies	
Amanda Doyle		ICS Lead	Healthier Lancashire & South Cumbria	Attended	
Andy Curran		Medical Director	Healthier Lancashire & South Cumbria	Apologies	
Carl Ashworth		Service Director	Healthier Lancashire & South Cumbria	Apologies	
Declan Hadley		Digital Lead	Healthier Lancashire & South Cumbria	Attended	
Gary Raphael		Finance Director	Healthier Lancashire & South Cumbria	Attended	
Gillian Crankshaw		Pathology Collaboration Project Manager	Lancashire & South Cumbria Pathology Partnership	Attended	
Jane Cass		Director of Operations	NHS England	Attended	
Jean Wright		Project Director	Lancashire Teaching Hospitals NHS FT	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 Coordinator	Healthier Lancashire & South Cumbria	Attended
	Talib Yaseen	Executive Director of Transformation	Healthier Lancashire & South Cumbria	Attended

			ACTION
<b>1</b>	<p><b>Welcome and Introductions</b></p> <p>The Chair welcomed the members of the Committee to the formal meeting and introductions were made. He added that a drop in session for members of the public was held directly before the meeting today, but there would still be an option for the public present to ask questions after the meeting had finished.</p> <p>The Chair took the opportunity to congratulate Blackburn with Darwen Borough Council via Dominic Harrison on being successful in obtaining the Local Government Achievement Award for 2018. The council has been recognised for achievements in community developments. The council has been described as an 'outstanding example of modern local government' which is 'underpinned by strong, consistent and humble leadership and an unwavering mission to put the customer first'.</p>		<b>Information</b>
<b>1.1</b>	<p><b>Apologies and Quoracy</b></p> <p>Apologies were received from members listed above.</p> <p><b>RESOLVED: The Chair noted the apologies and declared the meeting quorate</b></p>		<b>Information</b>
<b>1.2</b>	<p><b>Declarations of Interest</b></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><b>RESOLVED: There were no declarations of interest</b></p>		<b>Information</b>
<b>2.</b>	<p><b>Minutes from previous meetings for ratification</b></p> <p>The Chair advised that a comment had been received with regards to the minutes of the last meeting on the 7<sup>th</sup> June 2018 in terms of them being briefer than in previous months and not necessarily capturing the active engagement of members of the Committee.</p> <p>Specifically with reference to the discussion around Improving Access to Psychological Therapies (IAPT) at the June 2018 meeting, it was discussed that the overarching strategy and outcome measures would be set at an Integrated Care System (ICS) level and contract control and delivery would be at an Integrated Care Partnership (ICP) level. This was stated and agreed, but not recorded so explicitly. Michelle Pilling responded by asking that the IAPT discussion be amended within the minutes to reflect this. .</p> <p>Mary Dowling shared concerns in relation to the briefer minutes but also suggested that if the draft minutes were available in a more timely manner and could be sent out to members of the Committee in advance for comments, then this would reduce discussion time at these meetings and lead to a more accurate record.</p> <p>The Chair asked the Committee if they were content with ratifying the minutes subject to the additional information being added regarding the IAPT discussion. This was agreed.</p> <p><b>RESOLVED: The Committee agreed the minutes subject to the amendments regarding the IAPT discussion</b></p>		<b>Agreement</b>
<b>2.1</b>	<p><b>Action Matrix Review</b></p> <p>The Chair reviewed the action matrix. All actions were closed</p>		<b>Information</b>
<b>3</b>	<p><b>Any Other Business Declared:</b></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>There was no other business declared.</p>		<b>Information</b>
<b>4.</b>	<p><b>Pathology Update</b></p> <p>The Chair invited Jean Wright to deliver this presentation.</p>		<b>Noting</b>

Jean Wright introduced herself to the Committee and advised that the purpose of the presentation today was to apprise the Committee on the progress of the pathology collaboration programme.

She explained that the collaboration is made up from a group of provider organisations working together to improve pathology services across Lancashire and South Cumbria. Some of the challenges currently faced by Trusts across the patch in terms of pathology services are in relation to recruitment of specialised staff and affordability of modern technologies and estates. Across most of our Trust sites, estates are in a poor condition and no longer fit for purpose.

Jean Wright added that a Strategic Outline Case (SOC) has been produced and the recommendations within the case have been approved by the Trusts as part of the Collaboration Board. The Trusts involved are Blackpool Teaching Hospitals NHS Foundation Trust, Lancashire Teaching Hospitals NHS Foundation Trust and University Hospitals of Morecambe Bay. East Lancashire Hospitals NHS Trust decided to participate in the collaboration after the SOC had been produced and hence their activity was not included in the original document. As part of the approval process NHSI have now asked for this Trust's information to be added. Expected timeline for completion is the end of September 2018.

The project team is continuing with the detailed work required to produce an Outline Business Case (OBC) for all four Trusts to deliver a single Pathology Service across Lancashire and South Cumbria.

The planned service model would be a pathology hub facility for non-urgent activity delivered outside of core hours. By co-locating services there is an ability to deliver economies of scale and efficiencies. Essential Services Laboratory (ESL), inpatient and emergency work will continue to be delivered on an individual Trust basis, but it is anticipated that the estates will be smaller. Jean Wright explained that as this is largely a non-patient facing service, patients will not see any direct changes in how their care is delivered. She added that Anticoagulant and Phlebotomy services are not included within the remit of the collaboration. Discussions are ongoing as to where the pathology hub will be located.

Jean Wright explained that staff engagement has taken place via drop in sessions and written updates via directorates

Jean Wright further added that the collaboration will deliver service efficiencies and value for money. She explained that financial models have been developed demonstrating that after payback on capital investment, savings across four Trusts of £11m per annum can be achieved and reinvested in other healthcare services. She added that a capital bid has been awarded to build the hub and develop ESLs and this is expected to be completed within the next three to four years.

The Chair thanked Jean Wright for the presentation and asked for any questions.

Michelle Pilling asked if there had been any patient involvement with regards to the collaboration.

Jean Wright responded by advising that there had been very little patient involvement in the collaboration as these are non-patient facing services and patients will not see any direct changes in their care.

Mary Dowling queried who will be commissioning the service and asked the percentage of savings in comparison to the total spend. Mary Dowling also asked for assurances that new innovations not currently included within the collaboration will not be overlooked.

Amanda Doyle explained that the collaboration is being commissioned at Lancashire and South Cumbria level.

	<p>Jean Wright advised that the savings are between 10-15% of the total spend and by doing things differently this will reduce duplication and variation, producing service efficiencies. She added that any new innovations that are not currently in sight will be taken into account as the collaboration develops.</p> <p>Sumantra Mukerji asked with regards to specimen integrity and the plans around transportation of these. He also queried how existing contracts which have a number of years left to run are being handled.</p> <p>Jean Wright responded stating that work is ongoing with transport companies with regards to specimen integrity and with other similar collaboratives to discuss their transport issues and learn from them.</p> <p>She further explained that in respect of existing contracts, this is high on the agenda and discussions are ongoing with current providers.</p> <p>Roy Fisher commented that it would be useful to see the timeline in respect of implementation. Jean Wright responded by advising that a timeline will be made available for the next pathology update to the Joint Committee of CCGs.</p> <p>Steve Thompson asked regarding the impact this would have on Local Authority Coroners Services.</p> <p>Jean Wright responded to say that mortuary services had not been included within the remit of this process for now and would remain within the Trusts.</p> <p><b>RESOLVED: The Committee noted the paper</b></p>	
<p>5.</p>	<p><b>Preparations for Formal Consultation</b> The Chair invited Gary Raphael to present this item,</p> <p>Gary Raphael explained that the Lancashire and South Cumbria ICS does not currently have the resources and expertise to be able to design and deliver an effective engagement and consultation programme, sufficient to enable the ICS to conclude formal consultation on service changes in compliance with all regulations, law and best practice.</p> <p>Gary Raphael added that given the urgent need to initiate the necessary work now, it has been decided to buy-in the strategic and operational assistance required, alongside the development of our in-house capabilities.</p> <p>He further explained that it is important to appreciate that the current in-house service has made substantial progress in developing our capabilities. However, moving to formal consultation requires significant resources and expertise which cannot be accommodated within our current staffing resources.</p> <p>Gary Raphael stated that the purpose of the update today is to apprise the Committee of the progress that has been made in securing the necessary expertise and resources needed to undertake formal consultations; He added that the strategic approach will be developed over the next few weeks in between Committee meetings.</p> <p>Mary Dowling expressed that she was happy to support this approach and requested that value for money and best use of resources be referenced in the September update.</p> <p><b>RESOLVED: The Committee noted the paper</b></p>	<p><b>Noting</b></p>
<p>6.</p>	<p><b>ICS Digital Strategy</b></p> <p>The Chair invited Declan Hadley to present this item.</p> <p>Declan Hadley stated that the ICD Digital Strategy was approved on 6<sup>th</sup> June by the ICS Board. He explained that the content has been developed in partnership with a wide</p>	<p><b>Noting</b></p>

	<p>stakeholders over several months and that the approach outlined in the strategy focuses on using technology to empower population of Lancashire and South Cumbria in terms of taking an active role in their health, wellbeing and care.</p> <p>Declan Hadley explained that in the future patient data will be used to help prevent, predict and respond to illnesses and conditions. He added that there is a commitment to share information and help patients get the right treatment at the right time, with a strong focus on prevention.</p> <p>Michelle Pilling asked how consent would be obtained from patients with mental health conditions and substance misuse issues.</p> <p>Declan Hadley responded by advising that there are strict new regulations with regards to releasing and sharing data and frontline staff need to start the conversations with all patients to get them engaged in this process.</p> <p>Sumantra Mukerji commented that the more we empower patients the better. He added that there is a lot of variation within general practice in terms of patient empowerment which are opportunities to be maximised.</p> <p>Declan Hadley explained that a tool has been developed called Advice and Guidance which was presented at a recent Care Professionals Board meeting. This tool securely enables GP's and other specialists to connect with other clinicians to determine pathways of care in a digital multi-disciplinary environment. This is automatically updated within the patient Egton Medical Information Systems (EMIS) record. He added that in other areas, this has proven to reduce unnecessary hospital admissions.</p> <p>Declan Hadley explained that we are working with other Exemplar Programmes and GPs are testing various processes and solutions whilst focusing on patient involvement and helping other GP practices come on-line.</p> <p>Mike Maguire commented that the ultimate focus is to keep people healthy and that there are many examples of good practice and resources that we can utilise, such as the Behavioural Insight Team within Public Health.</p> <p>Andrew Bennett queried the level of disruption and change this technology is likely to have within the NHS.</p> <p>Declan Hadley responded by advising that with regards to workforce there are no indications or plans in replacing staff with machines or technology. It is about changing the way we work and empowering patients to take greater control of their care and health and wellbeing, in addition to shaping services in line with the developing technology agenda to enhance care.</p> <p><b>RESOLVED: The Committee noted the update</b></p>	
7.	<p><b>Any Other Business</b> There was no other business to discuss.</p>	<b>Information</b>
8.	<p><b>Questions from the Public</b></p> <p><b>Nick Fogg – 38 Degrees</b> Q - Nick Fogg felt that the venue was unsuitable for hosting the JCCCGs and commented that this was the second time this venue had been used. Nick Fogg also commented that hard copies of the agenda and papers should be made available for the public at the meeting.</p> <p>A - Phil Watson responded with regards to the venue. He explained that the reason the meeting was held today at this venue, was due to UCLAN hosting an NHS70 celebration to launch the Lancashire and South Cumbria One Health Strategy. He added that Committee members had been invited to the launch of this strategy and so the meeting needed to be within the vicinity. He apologised on the unsuitability of the venue and this will be noted going forward. With regards to hard copies of the agenda and papers for the public, this will be taken into account for future meetings.</p>	<b>Information</b>

Q - Nick Fogg also raised his concern with regards to Fylde Coast Integrated Care Partnership progress and asked whether seminars could be held for the public to fully understand how these partnerships will function.

A - Amanda Doyle explained that Integrated Care Partnerships are not new organisations; they are a partnership of existing statutory organisations working more collaboratively together for a defined population (such as the Fylde Coast). She added that the JCCCGs is the formal commissioning function of the Lancashire and South Cumbria ICS. She explained that local engagement events within Integrated Care Partnerships have been held and are planned for the future, which the public are invited and encouraged to attend. She added that if members of the public would like to make any additional suggestions on how they would like to be engaged within their Integrated Care Partnerships or the wider ICS, these would be welcomed.

**Hilary Ward – Chorley Campaigner**

Q - Hilary Ward asked when the minutes of this meeting would be made available to the public and whether Private Finance Initiatives (PFI) would be used to fund the new builds within the pathology collaboration.

A - Gill Crankshaw responded by advising that NHS capital is being used to fund the new builds and PFI will not be used. Phil Watson advised that the minutes of the meeting cannot be approved until ratified at this meeting. He added that the minutes are not always the best way to communicate to the public, as the content can be quite complex and difficult to understand without the wider context.

Q - Hilary Ward asked how data sharing will work with private companies.

A - Declan Hadley responded that there were strict legislation around data sharing and organisations would not mislead patients by sharing data inappropriately.

**Brian Todd**

Q - Brian Todd raised his concerns with regards to his understanding that Blackburn with Darwen and East Lancs CCGs were merging.

A - Graham Burgess responded to advise that there are no plans to merge the two CCGs. The two CCGs will remain as statutory bodies. There have been discussions however with regards to merging office functions across the CCGs, in order to deliver efficiencies.

Q - Brian Todd also raised his concern with regards to the Pennine Healthier Sustainability and Transformation Plan and asked when the public would be consulted on this.

A - Graham Burgess responded to advise that numerous meetings have been held with the public to discuss the plan and they will happily forward the feedback from this to Mr Todd. **Graham Burgess agreed to contact Mr Todd with feedback from public engagement events.**

**James Clayton – Chorley Campaigner**

Q - James Clayton asked whether there should be a public debate with regards to the pathology collaboration.

A - Jean Wright responded to say that legal advice had been sought on whether a public consultation is required for the pathology collaboration. It has been advised that as there will be no changes to patient facing services, a public consultation is not required.

**The next JCCCGs Meeting will be held on:  
2<sup>nd</sup> August 2018 (Workshop)  
Room 231 Preston Business Centre  
13:00 – 15:00**

The Chair thanked the Committee members and members of the public for their attendance and closed the meeting.