Black Country and West Birmingham Joint Commissioning Committee (JCC)

Minutes of Meeting dated 14th February 2019

Members:

Dr Salma Reehana – Chair, Wolverhampton CCG Andy Williams – Accountable Officer, Sandwell & West Birmingham CCG Dr Helen Hibbs – Accountable Officer, Wolverhampton CCG Dr Anand Rischie – Chair, Walsall CCG Prof Nick Harding – Chair, Sandwell & West Birmingham CCG Matthew Hartland – Chief Finance and Operating Officer, Dudley CCG; Strategic Chief Finance Officer Walsall and Wolverhampton CCG's James Green – Chief Finance Officer, Sandwell & West Birmingham CCG Jim Oatridge – Lay Member, Wolverhampton CCG Julie Jasper – Lay Member, Dudley CCG and Sandwell and West Birmingham CCG Mike Abel – Lay Member, Walsall CCG Peter Price – Lay Member, Wolverhampton CCG Alastair McIntyre – Portfolio Director, Black Country and West Birmingham STP

In Attendance:

Charlotte Harris - Note Taker, Black Country and West Birmingham STP

Apologies:

Paul Maubach – Accountable Officer, Dudley CCG & Walsall CCG Dr David Hegarty – Chair, Dudley CCG Laura Broster – Director of Communications and Public Insight Paula Furnival – Director of Adult Social Care, Walsall MBC Simon Collings – Assistant Director of Specialised Commissioning, NHS England

1. INTRODUCTION

- 1.1 Welcome and introductions as above.
- 1.2 Apologies noted as above.
- 1.3 Dr Salma Reehana asked the committee if anyone had any declarations of interest they wished to declare in relation to the agenda of the meeting. It was noted that there would be some conflict of interests for the Accountable Officers due to the papers that were being discussed.
- 1.4 Matthew Hartland offered some comments on the minutes of the meeting held on the 10th January from Paul Maubach. It was noted that for 2.1.4, there was a difference in the papers going to the Governing Bodies because Andy Williams made a suggested change to the paper after the deadline for papers for Walsall and Dudley CCGs had past. There needed to be additional action added to the action log regarding James Green and Matthew Hartland to review the overall financial flows in and out of the STP; and the potential changes in flows that might arise from significant new services such as MMH; to assess any overall risks that might arise within the STP or for the STP as a whole. It was also noted that for item 3.1, it needed to include the recommendations that were made and the (different) conclusions that were reached and agreed upon the meeting. It was agreed that Dr Helen Hibbs would review this item and amend to reflect this. It was also noted that in item 6, Dr Anand Rischie served

his term for 12 months and Dr Salma Reehana will now be chairing the JCC for the next 12 months.

- 1.5 The action register was reviewed (see table at the end of the notes). Actions delivered were confirmed and others taken within the agenda.
- 1.6 In regards to action 091, it was agreed this would be picked up with the Clinical Leadership Group (CLG).
- 1.7 In regards to action 102, this will be discussed at the CLG but there is not enough information to approve this at the moment. This will be raised at a later date.
- 1.8 In regards to action 128, the legislative change proposals are now listed in the Long Term Plan.
- 1.9 In regards to action 130, they are reviewing next year's contract agreements. There will a paper to the March meeting.
- 1.10 In regards to action 131, Alastair McIntyre and Dr Helen Hibbs have a meeting with the leaders of the Black Country Authorities. It is important to keep dialogue open.
- 1.11 In regards to action 132, Sarah Shingler has offered to lead a review on a specific piece of work on TCP for children.
- 1.12 In regards to action 133, James Green distributed a paper on *Black Country Infrastructure Cost 2019/20.* This included additional spend items and the funding going forward including the share between the organisations in the STP. There have been discussions from the Providers as to whether some of the items should be a CCG cost only. Additional costs were highlighted and included; Administration assistant B4, Programme Manager x4 (B 8a/b) and Transformation support Managers x3 (B 8a/b). It would result in £114,867 per organisation of the STP. It was suggested to approach the Providers regarding contribution. It was noted that there may be need for immediate support regarding TCP and Personalisation due to the contracts of staff ceasing in March. It was agreed the Finance Directors will review the detail and this will be presented to the Health Partnership Board on Monday 18 February. It was confirmed this would be cash contributions. It was suggested to add the average cost needed for areas to be driven to greater understand the work being put into the workstreams. There was also a suggestion to review the method of equal shares, or whether capitated or budget based contributions would be more appropriate.
- 1.13 There was a discussion regarding the length and detail required within the minutes. It was noted that for a formal meeting, evidence behind decision making would need to be include. There was a discussion on how to present the JCC minutes to the Governing Bodies.

Actions:

Alastair McIntyre to discuss with Paul Maubach the comments received regarding the length of the minutes and the level of detail of the discussion required. Dr Salma Reehana and Alastair McIntyre to discuss whether the full minutes of the meeting or a summary paper should be provided to each Governing Body.

2. CCG TRANSITION BOARD

2.1 The first meeting of the CCG Transition Board is occurring after the JCC meeting. Each Governing Body has received the draft Terms of Reference (TOR) and are supportive of the group. There were some concerns raised regarding the need to bring forward and deliver the option appraisal. It was noted that there is a need to be clear on what the end state will be

and what they are transitioning to, with clear milestones. There were discussions regarding the need for independency such as with the Chair of the group, the Transition Director and getting advice from other economies. There is a need to ensure staff and morale are maintained. There were questions raised regarding the authority of the Transition Board and accountability.

2.2 There were questions raised regarding the consultation of Sandwell & West Birmingham CCG and the impact this may have. In regards to the boundary for Sandwell & West Birmingham, there is an agreed process and it is being reviewed in the context of commissioning as a STP. There will be close engagement with partners. The option appraisal will be viewed in the April Governing Body, with a formal consultation period and a proposition put to vote by the June/July Governing Body. There was a discussion on Primary Care Networks (PCN) being geographically based and the boundary issue it could result in for some practices depending on the decision. It was noted, the Black Country will need to work with the Birmingham and Solihull STP to ensure that Midland Metropolitan Hospital remains sustainable during any changes.

3. CLINICAL LEADERSHIP GROUP UPDATE

3.1 At the CLG meeting on 07 February, there was a discussion on the implications of combining RightCare and Get It Right First Time (GIRFT), a presentation from Anna Lock on the End of Life Working Group, and a review of the Vulnerable Services paper. The output of this will be combined with the previous work completed by Richard Beeken. The schedule of the meetings will change from March to the third Thursday of the month, but will remain at 16:00-18:30. It was agreed the minutes of the meeting could be circulated at the JCC.

4. FORMALLY DELEGATED AREAS

4.1 **Transforming Care Partnership**

4.1.1 The programme is in red escalation. The National team are noted to be exercised with the performance. At the end of November, the target was to have 20 CCG patients discharged, and 11 Specialised Commissioning patients. However, there are 17 delayed CCG patients with 9 being post programme, and 9 delayed Specialised Commissioning patients with 4 being post programme. There are measures in place including weekly Case Management meetings and reports to the Directors of Nursing. There are weekly calls with NHS England (NHSE) and week by week discharge plans. This programme will continue in the next financial year with standards at CCG level as well as TCP. For Sandwell & West Birmingham, the target will be 7 CCG patients discharged and 7 Specialised Commissioning patients discharged. For the other CCGs, the targets are 4 and 4 respectively. There are 5 Children and Young patients that will be separated out. There is a need to discharge those patients that can be. This programme is important and is the right for the patients.

Action: Dr Helen Hibbs to highlight the individual problematic areas for each CCG to the Accountable Officers for additional support to the Transforming Care Partnership programme.

4.2 Mental Health

4.2.1 This item was deferred until March.

5. RISK REGISTER

5.1 The risk register has had no changes made since January. It was suggested there be a review of the risk rating of TCP in light of the update from Dr Helen Hibbs.

6. MATTERS OF COMMON INTEREST

6.1 Place Based Update – Walsall Together

6.1.1 Matthew Hartland presented on Walsall Together. KPMG has been working on the Business Case for Walsall Together with the draft being sent through the Governing Body. There were some challenges on the clinical model. They are currently going through the NHSE Service Change process. They are not going through an ISAP process. Year one will be implementation, with a hard launch in 2021. Lessons learnt will be shared with Sandwell & West Birmingham.

6.2 **Performance and Assurance Return**

6.2.1 Alastair McIntyre presented a narrative report alongside the output report from Aristotle. In future, key issues and trends will be highlighted. There are no new issues to report. There are some new requirements on the transformation requirements from NHSE which will be presented at the next meeting.

6.3 West Midlands Quality Review Service

- 6.3.1 Tim Cooper presented a paper on *West Midlands Quality Review Service Proposal to Black Country and West Birmingham STP 2019/20 Work Programme*. There are different arrangements on how the West Midlands Quality Review Service (WMQRS) is contracted across the Black Country. The WMQRS complete clinical quality assurance and clinical peer reviews. They are improvement focused. The Black Country are the biggest users of clinical peer reviews. They offer an opportunity to learn from each other and improve. A different arrangement was proposed whereby the resources across the STP is pooled through the CLG and there would be 12 credits available for use across the patch.
- 6.3.2 It was agreed that if this was to be agreed, it would need to be across the STP. It was also noted that this cost was not included in the paper provided in item 1.12. Dr Anand Rischie suggested a two tier approach with there being local credits for local issues and the STP having separate credits.

Action: The Accountable Officers to research the benefits of the West Midlands Quality Review Service proposal and to speak to their clinical nurses to understand the current use of the service.

6.4 SCC Planning Commissioner Update

6.4.1 This item was deferred until March.

7. FEEDBACK FROM GOVERNING BODIES

7.1 This was discussed under item 2.

8. UPDATE FROM STP

8.1 The STP is currently in the Planning round. This will need to be aligned across the STP. The Activity and Finance plans have been submitted. The aggregation of these plans needs to be completed by 19 February. Matthew Hartland noted there needs to be clarity from Sandwell & West Birmingham on repatriation as there is a risk for the provider and the STP control total. Wendy Macmillan is pulling together the submission from individual CCGs.

Action: James Green to share the Activity and Finance plans that have been submitted by the Black Country.

8.2 At the STP Leaders event, there were discussions regarding the misalignment between NHSE and NHS Improvement (NHSI). The senior management team should be confirmed by the end of March. The "agenda for change" staff will be in an interim situation. From April, there should be more alignment between NHSE and NHSI. There were also discussions on the Long Term Plan and the PCNs having a Clinical Accountable Officer around the STP table. There will be a different model of commissioning with strategic commissioning. There will be a maturity matrix for becoming an ICS. It is unclear on the procedure should a STP not meet the criteria of an ICS. There will be monitoring of the transformation programmes and there will be a focus on digital work across the West Midlands. There is a big drive for system working.

9. ITEMS FOR INFORMATION

9.1 Alastair McIntyre discussed the letter from Prof Keith Willett on the EU Exit. There is a workshop in Leicester on 15 February. Feedback will be given post the session. It was confirmed this item is on the agenda at all Governing Bodies. The risk of capacity for the UK was discussed regarding medical treatments increasing from UK citizens living, working or studying abroad.

10. ANY OTHER BUSINESS

10.1 Alastair McIntyre noted a SharePoint form requiring completion for access to the system.

11. DATE OF NEXT MEETING

Thursday 14 March, Boardroom, Walsall CCG, Jubilee House, Bloxwich Lane, Walsall, WS2 7JL

JCC Action Log

No.	Date	Action	Lead	Deadline	Status Update
130	10 th Jan 2019	Analysis of differences between each place based arrangements in regards to financial flows with reasoning and any risks this could result in for the STP.	James Green Matthew Hartland		
131	10 th Jan 2019	Collaboration work to be completed on the future relationships with Local Authority if there is a move to a single CCG as per the Long Term Plan.	Andy Williams Dr Helen Hibbs Paul Maubach		
133	10 th Jan 2019	A presentation of overall financial commitments for the JCC and STP to be delivered.	James Green		
134	10 th Jan 2019	James Green and Matthew Hartland to review the overall financial flows in and out of the STP; and the potential changes in flows that might arise from significant new services such as MMH; to assess any overall risks that might arise within the STP or for the STP as a whole.	James Green Matthew Hartland		
138	14 th Feb 2019	The Accountable Officers to research the benefits of the West Midlands Quality Review Service proposal and to speak to their clinical nurses to understand the current use of the service.	Andy Williams Dr Helen Hibbs Paul Maubach		
139	14 th Feb 2019	James Green to share the Activity and Finance plans that have been submitted by the Black Country.	James Green		

135	14 th Feb 2019	Alastair McIntyre to discuss with Paul Maubach the comments received regarding the length of the minutes and the level of detail of the discussion required.	Alastair McIntyre	Completed
136	14 th Feb 2019	Dr Salma Reehana and Alastair McIntyre to discuss whether the full minutes of the meeting or a summary paper should be provided to each Governing Body.	Dr Salma Reehana Alastair McIntyre	Completed
137	14 th Feb 2019	Dr Helen Hibbs to highlight the individual problematic areas for each CCG to the Accountable Officers for additional support to the Transforming Care Partnership programme.	Dr Helen Hibbs	Completed