

Health & Care Executive (Teleconference)

Date : Monday 12th September 2016

Time : 3.00-4.30pm

MINUTES

Present :

Alex Gimson (AG) CAG Chair, STP - Chair
David Astley (DA) Independent Chair, STP
Stephen Graves (SG) Chief Executive, PSHFT
Roland Sinker (RS) Chief Executive, CUH
Claire Tripp (CT) Chief Executive, Papworth
Liz Robin (LR) Director of Public Health for Cambridgeshire & Peterborough
David Roberts (DR) Clinical Chair, SPC
Wendi Ogle-Welbourn (WO-W) Corporate Director: People and Communities, PCC
Joanna Yellon (JY) Locality Director Cambridgeshire and Norfolk, NHSE
Sarah Shuttlewood (SS) Director of Contracting, Performance and Delivery, CCG
Melanie Clements (MC) Medical Director, HHCT
Mark Turner (MT) Chief Operating Officer, CUHFT

In Attendance:

Catherine Pollard (CP) Solutions Director, NHSI
Simon Wood (SW) Provider Sustainability Director, NHSI
Jessica Bawden (JB) Director of Corporate Affairs, CCG
Catherine Boaden (CBo) Programme Manager, STP
Jo Fallon (JF) Workstream Support Manager, STP
Laura Gaylor (LG) Governance Manager, STP – Mins

Apologies:

Tracy Dowling (TD) Accountable Officer, CCG
Aidan Thomas (AT) Chief Executive, CPFT
Matthew Winn (MW) Chief Executive, CCS
Lance McCarthy (LM) Chief Executive, HHCT
Adrian Loades (AL) Executive Director of Social Care, CCC
Jonathan Dunk (JD) Chief Finance Officer, CCG

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| | Agenda | Actions |
| 1. | STP Set up | |

Sign off MOU for consideration by Boards (excluding appendices)

The draft MOU (V17) was circulated to the HCE prior to the meeting, which has been through extensive commentary via Finance Directors, some CCG Governing Body GP's, Chief Executives and Councils. The MOU will include an appendix (1) which will be signed by PCC and CCC, which is currently being drafted. CP will be adding in some slight amendments following on further comments from TD. The MOU will be shared with Trust Boards on 20th September.

Action: CP to reissue the MOU over the next 24 hours. HCE to send in final comments to CP by COP Friday.

HCE

(JB dialled in at 3.15pm)

LR confirmed the Local Authority Appendix (1) will be going to Health and Wellbeing Board's on the 15th and 22nd September for final sign off and won't be available for the first Provider Board (PSHFT). It was **agreed** to circulate the draft version of the appendix to HCE in the interim.

Action: LR to circulate draft Council Appendix to CP to include in the updated MOU for circulation to the HCE on 13/09/16. **LR**

The HCE **agreed** to proceed with the MOU sign off process.

Sign off Delivery Plan priorities and SROs

The latest version of the STP Delivery Plan (V37c) was circulated to the HCE prior to the meeting, AG highlighted slide 4 of the plan which outlines the improvement projects and HCE priorities as discussed at the HCE Away Session in August. The HCE **agreed** to the priorities.

CP confirmed CEO sponsors have been allocated to each Programme; however the UEC & Digital sponsors are still awaiting confirmation. CT confirmed Papworth will be the SRO for Digital on an interim basis, pending Stephen Posey's start as CEO in December. CP noted that some of the SROs / SRO organisations had been identified, but confirmation was needed.

Action: HCE to review Delivery plan and allocation of SRO's and feedback any comments to CP by COP Wednesday 14th September. **HCE**

The STP Delivery Plan will be submitted in October and will include names against projects and WTE's working on each project.

2. Update on delivery priorities – progress, emerging issues and next steps

Three delivery priorities were agreed at the HCE Away Session in August. CP provided an update on the progress, emerging issues and next steps of these:

Primary & Integrated Care Neighbourhoods

Data Analysis and identification of preferred Testbeds has been complete and this will be launched at the CCG Member's Event on 20th September where Expressions of Interest will be sought. The programme has secured CCG resource for 2 out of the 4 test beds, additional resource may be needed from PSHFT/HHCT for Project Managers for the remaining Testbed sites. CUH have already agreed to resource a 5th test bed for the Cambridge system.

UEC

A number of workshops have been organised to look at attendance avoidance, integrated urgent care and clinical model for intermediate care beds to help map out all current services and provide a comprehensive view to review capacity and/or access issues. The aim is to quantify what is missing to inform Commissioning Intentions and system investment decisions for 2017/18.

Elective Care Referral Management

This priority is being driven by the CCG as elective referral management is included in the Financial Recovery Plan. The work includes the provision of robust analysis and benchmarking of referral activity at both local systems and general practice levels.

SS highlighted the need to ensure there is clear differentiation between projects that support strategic implementation of the STP and 'today's' operational planning.

Greater clarity is needed on how these are intertwined. RS explained the new Area Executive Partnership Boards which include the A&E Delivery Group will support these discussions.

3.

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4. Mental Health Strategy

The Mental Health Strategy was circulated prior to the meeting, AG provided a brief update as the strategy has been extensively discussed at CAG. It was noted that learning disability and dual diagnosis are not included within the strategy however are not being ignored. The MH Strategy will be going to Health and Wellbeing Board's in the future.

Martin Stefan will be providing a list of proposed priorities in Mental Health which may require financial investment to the Financial Performance and Planning Group and CAG.

The HCE **agreed** to sign off the Mental Health Strategy.

5. Finance Update

CP presented the finance update to the HCE. NHSI colleagues and Finance Director's are currently working through the base case numbers and finance slides which were presented at the Bi-Partite meeting on 9th September have not been presented at this meeting. Updated slides will be circulated on Friday 16th September.

Action: JH to circulate updated finance slides on Friday 16th September

JH

The FD Forum has proposed to appoint a Non-exec Independent Chair of the Financial Performance and Planning Group (formerly the FD Forum). This would initially be on a short term interim basis and CP has revised the SDU budgets to include this. The proposal is for 0.2 WTE and the Non-exec chair could also attend HCE. The HCE **agreed** with this proposal.

Action: JH to take back HCE suggestion to FDs that 0.1 WTE might be a more acceptable time commitment.

JH

(MC left the meeting at 4pm)

CP outlined the timescales on delivering the National requirements on slide 19 of the slide pack. Submissions for September, October and December were highlighted.

Following on from discussions which took place at the HCE Away Session in August an updated was provided on the new financial incentive projects which is being delivered across three sub-workstreams with named FD Leads. The three sub-workstreams are; 17/18 Aggregate Financial Position, Financial Incentives Alignment and Contract Development and Delivery. These will be a focus at the Monthly STP meeting with Andrew Pike on 28th September.

All two year contracts will need to be signed by 23rd December, and the System is currently awaiting guidance which is due on the 20th September. Contract leads and NHSI are looking at aligning as much as possible bringing in principles from the draft MOU.

(SW left the meeting at 4.05pm)

CP confirmed NHSI team are close to National guidance and are hopeful there will be no major surprises in the guidance. It was also noted that there is a lot of support with NHSE/NHSI in regards to risk sharing. The HCE **agreed** there will need to be a phased approach to implementation.

Action: JH to suggest to FD Forum there is time set aside for an event in October for CEOs, Chairs and Finance/ Audit NEDS to understand and discuss the relative merits of redesigning financial incentives and adopting a system control total.

JH

(SW joined the meeting at 4.10pm)

6. **Update on Workforce**

Key achievements from Workforce & OD were reviewed by the HCE. CP presented slides 24-25 of the slide deck which outlined the next steps for Workforce & OD, as a Workforce Strategy will need to be developed ready for submission at the end of December. The draft will be reviewed at a HCE meeting in November.

Action: Workforce Strategy to be reviewed at November HCE.

LD/ MW

LR confirmed the Cambridge Health and Wellbeing board have an interest in workforce and will be discussing at their November development session.

7. **Procurement of community outpatients and diagnostics**

SS provided an update on the procurement of community outpatients and diagnostics, as notice has been served by CPFT and CCS on these services which will cease in April 2017. The CCG has been in discussion with local providers as a decision will need to be made at the end of this week to ensure there is a safe continuation of the services as a procurement process will need to start. Due to significant medical

workforce issues CUH have confirmed they would be unable to support this service. PSHFT have expressed an interest in running these services however due to funding/HR this could only be picked up by September 2017. SS is meeting CCS and CPFT later on today to discuss extending the notice period to 1st September to ensure there is a smooth handover of the service with PSHFT. HCE will be updated following these discussions.

8. **Sign off CWG Reports**

The Maternity & Neonatal and Children & Young People CWG reports were circulated prior to the meeting for information. The HCE **agreed** that they wish to still receive further reports from other CWGs that consolidate the work done so far.

The HCE agreed that the benefit of the reports is primarily one of consolidating the knowledge base used to inform the maternity and paediatrics service design decisions, and that the work required to publish these is not a priority. Although it was **noted** that all documents are FOI-able it was **agreed** that all CWG reports should include 'Internal working documents' within the document.

(WO-W and SS left the meeting at 4.30pm)

9. **Actions from last meeting**

The HCE reviewed the action log by exception, all outstanding actions are owned by members who were not present on the call, therefore it was **agreed** to chase these outside of this meeting.

Action: JF to review outstanding actions and chase owners.

JF

10 **Review status of key deliverables**

The HCE reviewed the status of deliverables. CP confirmed the revised STP submission which is due on 21st October will include an updated STP narrative which will have some small changes. It was proposed that a track change submission is circulated to the HCE for sign off.

11 **Review key programme risks and issues**

The HCE **noted** the current risks outlined on slide 37 of the slide deck.

12 **Agree agendas for the next HCE meetings**

The HCE **noted** the agenda for the HCE taking place on 26th September.

13 **AOB**

Social Media Data

JB provided an update on the Fit for the Future Social Media Campaign which took place from 16th August – 8th September. There have been 22,500 Twitter Impressions and 5,420 Facebook Reach.

FOI Request

JB provided an updated on the recent FOI request which the CCG has received. As the STP is currently in draft NHSE have provided steers to STPs to apply for exemptions. This however may be challenged in future once the STP is published.

The HCE **agreed** to the exemptions being applied.

Programme Director

DA confirmed CP's departure from the STP, and thanked her on behalf of the HCE for her hard work. DA confirmed the recruitment process will be starting in due course to advertise the vacancy.

The meeting closed at 4.35pm

Date of next meeting: Monday 26th September, 4-6pm, Board Room, CUHFT

Author: Laura Gaylor, Governance Manager, September 2016