

Health & Care Executive

Date : Thursday 26th May 2016

Time : 6.00-7.00pm

Venue : Partnership Suite, Hinchingsbrooke Hospital, Hinchingsbrooke Park, Huntingdon
PE29 6NT

MINUTES

Present :

Neil Modha(NM), Chief Clinical Officer, CCG, -Chair

Aidan Thomas (AT) Chief Executive, CPFT

Stephen Graves (SG) Chief Executive, PSHFT

Matthew Winn (MW) Chief Executive, CCS

Liz Robin (LR) Director of Public Health for Cambridgeshire & Peterborough

Lance McCarthy (LM) Chief Executive, HHCT

Alex Gimson (AG) CAG Chair, STP

David Roberts (DR), Clinical Chair, SPC

Jonathon Dunk (JD) Chief Finance Officer, CCG

In Attendance:

Simon Wood (SW) Provider Sustainability Director, NHSI

Catherine Pollard (CP) Solutions Director, NHSI

Sarah Shuttlewood (SS), Director of Contracting, Performance and Delivery, CCG

Karen Key (CB) Programme Manager, STP

Jo Fallon (JF) Workstream Support Manager, STP

Gary Howsam (GH), Chair, Greater Peterborough Partnership

Ed Smith (ES), Finance Director, CUH

Apologies:

Tracy Dowling (TD) Accountable Officer, CCG - Chair

Claire Tripp (CT) Chief Executive, Papworth

Roland Sinker (RS) Chief Executive, CUH

Gareth Jones (GJ) Head of Strategy, NHSE

Agenda

1. **Reflect on comments from Boards meetings held to date including the Primary Care Programme Board (verbal)**

AG updated the HCE on the emerging themes from Board meetings held to date which included; ensuring the STP had a unique selling point (USP); the ambition and investment from primary care and; giving more focus on implementation.

DR commented that primary care is in the process of stabilising and questioned what investment primary care are expected to commit?. Primary care requires continued engagement with some quick wins to persuade GPs to be on board. GH suggested the primary care narrative should show stabilisation in primary care as a safe transition to somewhere better.

SG reflected on need for teams to build 'trust' across the system, based on experience of HHCT/PSHFT merger. Delivery will require teams to develop effective relationships

Actions

Decision: Agreed **not** to bring together all Board members together to sign off final STP submission (page turn activity), this will remain a task for Chairs & CEOs.

Action: CEO's to confirm with Chairs what is required of them, to sign off the final STP submission **CEO's**

Action: CP will draft an email to confirm with CEOs and Chairs what the ask is on 27th June, sign off for the STP submission **CP**

2. Implementation plan

AG presented the HCE with the early thinking around the central implementation team (highlighted in slide 8 of the HCE pack). HCE were advised that the total estimated annual cost was £3m (staff) + £1 m (clinical backfill, non-pay). CP commented the estimate may look high, but compares well to other relevant bench-marks around the country. The HCE were reminded that the STP should demonstrate the funding to take forward the next 5 years is in place.

Decision: It was **agreed** to fund two senior posts - a senior programme manager and an independent chair. In addition, CP reminded the group that a decision needed to be made on who would host the implementation team.

Action: AG agreed to develop the Job Descriptions. It was noted that the timescales should allow a handover with CP. **AG**

Action: HCE to confirm who will be hosting the implementation team **HCE**

3. STP submission -Key milestones to sign off the STP

The HCE noted the key milestones to sign off the STP which include – for comment 3rd June and final read through 24th June.

Action: FD forum final comments on STP draft by Tuesday 7th June 2016. **JD**

4. Actions from the last meeting

The actions from the last meeting were reviewed by the HCE by exception, action 177 - LR advised the Public Health team have confirmed the evidence base re costs savings attached to Diabetes education programmes (DESMOND).

5. Review status of key deliverables

CP advised PW will be looking for assurance that UEC has plans to relieve the short term pressure on emergency admissions.

6. Review key programme risks and issues

The key programme risks and issues were reviewed by the HCE by exception.

7. Agree agenda for the next HCE meetings

This item was not discussed.

8. AOB

CP **actioned** the HCE to review slide 4 in the HCE pack – 'Implementation: your boards are asking "what's different this time?" ... a potential answer' as this will be fed back to Boards and included in STP. **HCE**

The meeting closed at 6.50pm.

Date of next meeting: Monday 6th June, 4-6pm, Board Room, Floor 4, Peterborough City Hospital, PE3 9GZ

