

STP Board

Date: Thursday 25 January 2018
Time: 14.00-15.45
Location: Room 8, Deakin Centre, Addenbrookes Hospital, Hills Road, Cambridge, CB2 0QQ

Present:

Alex Gimson (AG) Interim Independent Chair & CAG Chair – *Chair*
Julie Spence (JS) Chair, CPFT
Tracy Dowling (TD) Chief Officer, CPFT
Prof John Wallwork (JW) Chairman, Papworth
Stephen Posey (SP) Chief Executive, Papworth
Rob Hughes (RH) Chairman, NWAngliaFT
Stephen Graves (SG) Chief Executive, NWAngliaFT
Gary Howsam (GH) Clinical Chair, CCG
Sheila Bremner (SB) Interim Chief Officer & STP Accountable Officer, CCG
Mike More (MM) Chair, CUHFT
Roland Sinker (RS) Chief Executive, CUHFT
Will Patten (WP) Service Director: Commissioning, People & Communities, CCC & PCC – *Deputising for Wendi-Ogle Welbourn*
Katie Johnson (KJ) Consultant in Public Health, CCC & PCC – *Deputising for Liz Robin*
Councillor Anna Bailey (AB) Chair of Adults Committee, CCC
Councillor Wayne Fitzgerald (WF) Deputy Leader and Cabinet Member for Integrated Adult Social Care and Health, PCC
Catherine Pollard (CP) Executive Programme Director, SDU

In attendance:

Laura Anthony (LA) Programme Governance Manager, SDU - *Minutes*

Apologies:

Nicola Scrivings (NS) Chairman, CCS
Matthew Winn (MW) Chief Executive, CCS
Liz Robin (LR) Director of Public Health for Cambridgeshire & Peterborough
Wendi Ogle-Welbourn (WO-W) Corporate Director: People and Communities, PCC

| Agenda | Action |
|--|---------------|
| <p>1 Standing items by exception</p> <p>AG welcomed the group and introductions were made. It was noted that the STP Board meetings are currently in private, however, there is a commitment that STP Board will hold meetings in public going forward.</p> <p><u>Declarations of interest:</u> There were no declarations of interest made.</p> <p><u>Minutes from previous meeting and outstanding actions:</u> The minutes from the meeting held on the 30 November were agreed as a true reflection of the discussion.</p> <p><u>Matters arising:</u></p> | |

The STP formally **noted** the ratification of Sheila Bremner as the STP Accountable Officer.

GH confirmed the CCG have reviewed the STP Board Terms of Reference with their internal auditors and there are a number of comments on the content. LA confirmed feedback has now been shared with CP/LA and these are currently being reviewed. Concerns were raised by RH on the governance documents which are being reviewed at each Board and whether this will delay the process.

Action: CP/LA to confirm comments received on the Terms of Reference and update the STP Board on any changes required. CP/LA

(JS and SG entered the meeting at 14.10)

The action log was reviewed and the following actions updated:

- Action 29: TD confirmed training materials on the Zero Suicide Alliance will be circulated to the STP Board.
- Action 32: CP has discussed with EEAST representation at the STP Board. It has been confirmed Locality Directors sit across other STP Boards in neighbouring STPs, who are not executive level Directors. It was **agreed** that this is appropriate and if required escalations can be made to the Chair and Chief Executive of EEAST. It was **noted** that there is positive representation across the STP groups including UEC. Action complete.
- Action 38: RH updated the STP Board on the Independent Chair recruitment, due to the withdrawal of candidates it was **agreed** postpone the interviews for the Independent Chair for two to three months whilst further work is done to ensure there is the strongest possible field of candidates. SB proposed that during the interim a current Chair should support conversations with Regional Directors and to gain clarity on the STP plan.

Action: Chairs to discuss and confirm proposal how best to process given the postponement. RH to feedback following discussion. RH

Action: LA to cancel hold for Independent Chair interviews. LA

- Action 45: It was **noted** the HCE/GPFV meeting was due to take place on 30 January, this delay is due to the LMC meeting which is taking place on the afternoon of 25 January. AG confirmed GP involvement across Clinical Communities is very good.

Action: CP/GH to circulate outcomes and next steps following the HCE/GPFV meeting on 30 January to the STP Board. CP/GH

(WF entered the meeting at 14.25)

STP successes for December 2017 and January 2018: The STP Board **noted** the achievements for December and January. TD highlighted

the Heart Failure service is now fully recruited to and the Enhanced JET is also nearly fully recruited to.

GH highlighted there has been a good level of clinical engagement at the integrated urgent care workshops which have been taking place in January.

Highlight reports:

The STP Board **noted** the Health and Care Executive highlight report for the 21 December and the Care Advisory Group highlight report for the 11 January.

CP presented the Financial Performance and Planning Group highlight report of the Away Day which took place on 10 January. Strategic Commissioning is due to be discussed at the March STP Board and it was confirmed that discussions at FPPG and HCE will be presented to the STP Board in detail.

The System Delivery Board highlight report was presented by CP. A Digital workshop is taking place on 1 February.

2 Cambridgeshire and Peterborough Local Workforce Advisory Board

The STP Board **agreed** to support the nomination of TD as Chair for the Cambridgeshire and Peterborough Local Workforce Advisory Board (LWAB). TD **agreed** to discuss key working housing as part of her handover for the role.

It was **agreed** to share the Terms of Reference of LWAB with the STP Board for information.

Action: LA to circulate the LWAB Terms of Reference to the STP Board. LA

Action: TD to present to the STP Board on LWAB to provide clarity on the workforce agenda and differences between LWAB and HRD responsibilities. TD

3 Feedback from STP Regional Review

SB provided feedback from the STP Regional Review held on the 22 January, the meeting focused on the challenges to progress in terms of delivering the STP over the last six months. There were also discussions on the size of the financial challenge in the system collectively and at individual organisation level. The Regional Director has requested a follow up meeting in February and the system to produce a recovery plan. It was **noted** that formal feedback has not been received yet, however should be received in the next few days.

It was recognised that the recovery plan may take time, however the system needs to be explicit in planning and process.

SB confirmed the HCE Time Out session planned for the afternoon of 25 and 26 January would be used to focus on moving forward and being clear on three to four areas the system can deliver on in 2018/19

which collectively will be bold whilst achieving the must dos around DTOCs and A&E national targets.

Following feedback received the STP Board **agreed** the importance of Chairs involvement in the response to Regional Directors.

Action: Informal meeting of STP Board members to be organised to review the response prior to the Regional Director meeting. LA

4 Adult social care transformation

AB provided an overview of the CCC initiatives, brief highlights included:

- Over the last 18months with the change of leadership there has been a rapid pace of change.
- CCC has a total gross budget of £556m excluding schools, has saved £176m over the past five years and have to save £106m over the next five years.
- 76% of the CCC budget is on adult and children social care, which has seen savings of £20m in this financial year.
- CCC is the third lowest County Council funded authority in the country.
- There is current Government consultation on the funding of local authorities. It would be helpful if the CCG could respond to the consultation to support the County Council.
- £8m of the transformation fund has been invested and will produce £40m worth of recurrent savings.
- Bold and radical work is being completed to stay within budget.
- A pilot called Neighbourhood Cares has started, based on Buurtzorg principles, and the CCC is looking into commissioning reablement care from SK Nurses who have adopted the Buurtzorg model.
- There is low unemployment in Cambridgeshire which makes recruitment challenging.
- There has been an increase in the number of children needing support and increasing complexity of need, resulting in a sharp rise in the Looked After Children's budget - work is focusing on prevention and increasing the number of foster families.
- Educational attainment gaps exist - we have been awarded funding for East Cambs and Fenland in the Opportunities Fund

WF provided a brief summary on reflections on the need to improve outcomes and save money and focus on prevention and redesigning services.

AG confirmed the STP vision for integrated neighbourhoods is aligned with the principles of the Buurtzorg model.

GH raised concerns on the need to ensure there is a safety net around transformation and what the knock-on effect this could potentially have on Primary Care.

5 Co-production with the public ‘one system message’

The STP Board **noted** the update on system-wide communications and engagement.

6 Health and Care Executive Strategy Away Day

The STP Board **noted** the objectives of the HCE Time Out session.

7 Future agenda planner

It was **agreed** to refresh the STP Board future agenda planner following the STP Board discussion.

Action: CP/LA to update the STP Board future agenda planner to reflect the STP Board discussions. CP/LA

8 AOB

No items were raised under AOB.

The meeting closed at 15.45.

Author: Laura Anthony, Programme Governance Manager, January 2018