

JOINT STRATEGIC COMMISSIONING BOARD

Tuesday, 2 April 2019

Present:

Councillor	Chris Jones (Co-Chair)
Dr	Sue Wells (Co-Chair)
Mr	Simon Banks
Ms	Sylvia Cheater
Dr	Paula Cowan
Ms	Lesley Doherty
Mr	Paul Edwards
Ms	Nester Hawker
Ms	Lorna Quigley
Dr	Sian Stokes
Mr	Michael Treharne
Mr	Alan Whittle
Councillor	Bernie Mooney
Councillor	Stuart Whittingham

In attendance: Mr Graham Hodkinson (Joint Director)

42 APOLOGIES FOR ABSENCE

There were no apologies for absence.

43 DECLARATIONS OF INTEREST

Councillor Chris Jones declared a personal interest in agenda item 4 (Personal Story Re Integration) by virtue of her employment with the Cheshire and Wirral Partnership NHS Foundation Trust.

Councillor Bernie Mooney declared a personal interest in agenda item 8 (Neighbourhoods Progress) by virtue of her employment with Age UK.

44 MINUTES

RESOLVED:

That, subject to the addition of Mr G Hodkinson as being in attendance, the minutes of the meeting of the Joint Strategic Commissioning Board held on 2 February 2019 be approved as a correct record.

45 **PERSONAL STORY RE INTEGRATION**

The Chair introduced this item as providing an opportunity for Board Members to hear real examples of the patient experience, whether good or bad, to assist in the consideration of service integration and delivery.

Lorna Quigley, Director of Quality and Safety, advised of the experience of a young man with autism, learning difficulties and anxiety who presented with challenging behaviours. While he had been in receipt of services, during 2018 he had been detained under the Mental Health Act and he and his family had felt let down by both the NHS and the Council. Through integrated services under the Wirral Partnership, a multi-disciplinary approach had taken an holistic approach and, following fortnightly patient review care meetings, positive behaviours were being promoted and the case was being de-escalated, moving towards discharge under section 17 aftercare arrangements. After these interventions the family were now more agreeable to and supportive of an in-area placement.

Members noted the impact of working together and that while the work undertaken would have been progressed without integration, it would have taken much longer to achieve the positive outcomes identified.

RESOLVED – That the report be noted.

46 **FEE SETTING FOR 2019/20**

The Board received a report presented by the Wirral Council Assistant Director – Health and Care Outcomes, Jason Oxley, advising of the outcome of consultation with care providers with regard to proposed 2019/20 fee rates for services provided for adults and older people in Wirral and inviting the Board to consider the responses of Officers to the consultation and to approve the proposed rates and fees as recommended within the submitted report.

The proposed fees rates sought to satisfy the Council's requirement to deliver a responsive and sustainable social care market, with a quality of care that reflected local expectations, within the context of continuing significant financial pressures for both providers and the Council. In this regard, due attention had been given to local market pressures and providers' actual costs of care. The consultation had covered services provided on behalf of both Wirral Council and Wirral Clinical Commissioning Group as part of the Wirral Health and Care Commissioning joint arrangements.

The residential and nursing, supported living, extra care, domiciliary care, shared lives and re-ablement sectors were considered within the submitted report, Members being reminded that the integrated domiciliary care fee rate, including re-ablement, had been approved at the meeting of the Board held

on 5 February 2019 and advised that the integrated, intermediate Transfer to Assess service was being reviewed and would be subject to a further report later in the year.

No alternatives to the proposed increase in fee rates had been considered, the Council having duties to maintain and support a local market to deliver care and support, to commission a range of high quality appropriate services which offered people choice, and to ensure that the local market is responsive and sustainable thereby ensuring continuity of care.

In response to a query it was advised that the rates quoted were inclusive, with the quality that providers were expected to deliver being built in. A dedicated Team worked with providers to ensure this quality delivery. Comment was made as to the well presented and considered nature of the report, including the responses given to the consultation exercise, noting that the proposals secured quality while protecting the wages and pensions of those working in the sector. Regarding the requirement to achieve efficiencies to accommodate the increasing costs, it was acknowledged that this became increasingly challenging over time, but work was being undertaken with providers looking to deliver differently while providing the right quality of service.

The NHS Wirral Clinical Commissioning Group Board Members and the Members of the Wirral Borough Council Committee of the Cabinet -

RESOLVED – That

- 1. the proposed rates and fees for the residential and nursing, supported living, extra care, domiciliary care, shared lives and re-ablement sectors, as detailed in the submitted report, be approved; and**
- 2. the uplift in fees to providers apply with effect from 1 April 2019.**

47 POOLED FUND FINANCE REPORT

The Board considered a report introduced by the Chief Finance Officer, Mike Treharne, presenting the position on budgets established to support effective integrated commissioning, setting out key issues in respect of the 2018/19 shared pooled fund, the funds contributing to the 'shadow pool' for 2018/19, and the 'risk and gain' share arrangements.

Members were reminded that the 2018/19 commissioning pool comprised £131.9m from the following sources –

- Adult Social Care £40.8m
- Public Health £13.0m
- Children and Young People £ 2.0m

- Clinical Commissioning Group £22.3m
- Better Care Fund £53.7m

A breakdown of the pooled funds, together with a forecast for the 2018/19 financial year was provided within the submitted report. A net forecast risk of £0.9m on the pool overall existed as at 31 January 2019, the Section 75 agreement mandating a 50:50 share of this deficit between the Clinical Commissioning Group (CCG) and the Council.

The shadow pool in 2018/19 amounted to £532.4m, comprising budgets of £51m from Adult Social Care and £481.4m from the CCG which are not formally pooled in 2018/19.

The financial risks and challenges impacting on the partners was considered. Achievement of the CCG's £2m surplus control total was a financial challenge and risk given the £19.6m savings target to be delivered. The submitted report highlighted the gross risks and realisable mitigations identified during the working up of the CCG's financial recovery plan. A Formal Recovery Plan, approved by NHS England in 2018, described how the identified cost pressures and other risks would be mitigated. Further mitigations developed by the CCG had proved to be challenging and, on direction from NHS England, a Turnaround Director had been appointed to look at all CCG expenditure lines to identify any further efficiency opportunities to address remaining unmitigated risk. The Council's savings were on track to be delivered by year end and any slippage would be mitigated through over-achievements elsewhere, by any new options identified or by one-off actions.

In response to queries concerning the budget pressures, how they had arisen and what actions had been taken, the Board was advised that there had been increasing pressures affecting packages of care. There had been some backlog in claims and going forward the CCG and the Council needed to work on how such packages were commissioned and thereby move towards proper integration. This would require work with providers and needed to draw from the Council's experience in managing the care market. Regarding CCG finances more generally, the implications of failure to manage a £3m CCG deficit were considered which might lead to a £5m loss to Wirral healthcare funding overall.

A Member suggested that a briefing on financial issues be provided for Board Members given the differing financial and funding arrangements that existed for each of the Council and the CCG.

RESOLVED: That the report be noted.

The Board considered a report introduced by the Chief Officer and Senior Responsible Officer for Healthy Wirral, Simon Banks, presenting an update on the Healthy Wirral Strategic Plan, 'Healthy Wirral' being the prime system-wide programme to deliver sustainable and affordable long-term changes to the way that the health and wellbeing of the Wirral population is supported. The programme also supported delivery of the Wirral Plan's 20/20 pledges in relation to health and wellbeing and delivery of such ambitions within 'Wirral Together'.

Following agreement of the 5-year settlement for the NHS and the development of the NHS Long Term Plan, guidance had been provided to clarify the expectations of all integrated care systems to produce organisational level and system level operational plans for 2019-20 which would support the development of a broader 5-year strategic system plan. The Wirral 2019/20 Operational Plan was due for submission to the Cheshire and Merseyside Health and Care Partnership by 4 April 2019, and key to this plan would be alignment with the operational plans of system partners, particularly in respect of strategic intent and priorities, financial and activity assumptions. Thereafter, it was expected that a draft 5-Year Plan would be completed in July 2019 in preparation for submission in autumn 2019. Activities to ensure the engagement and inputs of system partners were to be established.

A review of Healthy Wirral programme governance and infrastructure had taken place following discussions between the Healthy Wirral Chair, the Senior Responsible Officer and key system partners. The resultant governance structure sought to establish a reporting structure that is simpler to navigate, establish clear programme and senior executive accountability to the Healthy Wirral Partners Board for the delivery of programme plan objectives, and ensure that the Partners Board is more clearly sighted on progress and programme barriers. Details of the governance arrangements, and considerations related to programme infrastructure, were considered in further detail within the submitted report.

A disappointment was expressed that a Portfolio for long term conditions had not been determined in the structure, and a concern raised that this issue might get lost as it fell within several of the Portfolios. The Board was advised that the structure arose from consultations, that there were long term condition considerations within, for example the children and mental health Portfolios, and that the purpose of the Portfolios was to bring relevant staff to work together. Sessions were to be held to raise awareness among staff of what others within the sector were doing.

Work to establish Neighbourhood Teams, supported by the Neighbourhood Transformation Manager, to ensure the adoption of a resilient approach was continuing. The leadership of Neighbourhood Co-ordinator GPs had been fundamental in supporting this work alongside system partners. Recent key

developments were outlined in the report, and further considered in a following presentation to the Board.

RESOLVED: That the report be noted.

49 NEIGHBOURHOODS PROGRESS

The Board received a presentation introduced by the Joint Director for Care and Health, Graham Hodgkinson, providing an update of work in Wirral's nine neighbourhoods that formed a core part of the Healthy Wirral Programme. The presentation described the neighbourhoods, each of which had a resident population of between 30,000 to 50,000 people, and the new ways of working across Health and Care to better and more effectively support those local populations. The neighbourhood model showed how closer working at this level would enable communities and the voluntary sector to work together with the Health and Care sector to deliver improved outcomes and responses, with a focus on what is important to local people.

Neighbourhoods are about people and the 'place' they live, and 'place based care' was concerned with using a defined set of resources to provide the best possible quality of care and health outcomes for a neighbourhood's population. The principles upon which place based care was based were advised as –

- a partnership approach, engaging stakeholders across all sectors in collaborative decision-making;
- a move from central control to being led by the people who live and work locally;
- community engagement – the encouraging of collaborative working, critical thinking and problem solving;
- local flexibility, providing a robust foundation for decision-making; and
- a long-term commitment, ensuring there is adequate time and resources to commit to this work.

The presentation further considered the features of an integrated care system and of place-based care in practice; the linkage of the approach to Healthy Wirral's agreed Mission Statement and Vision; and the features of Healthy Wirral Neighbourhood provision, considering the benefits for both local people and staff. Identified key achievements in the Neighbourhoods approach to date included the defining of the neighbourhoods, appointment of GP Co-ordinators and establishment of Leadership Teams; the establishment of a multi-disciplinary team approach; the alignment of resources and improved linkage to community resources; and the strengthening of third sector links and provision. The Neighbourhood Programme structure and the Neighbourhood Governance arrangements led by the Healthy Wirral Executive Delivery Group were outlined, while the impacts achieved by a pilot project in one neighbourhood comprising a Frailty Personal Independence Co-ordinator working with Age UK were further advised.

Going forward, the Board was advised of the immediate priorities for the neighbourhoods approach as it progressed –

- the development of a future operating model;
- embedding the digital Wirral Care Record;
- co-designing care models with a neighbourhood focus;
- continuing the improvements in integration and engagement with the third sector;
- accelerating a Population Health Management approach;
- co-producing primary care networks on the Neighbourhoods' footprints; and
- greater alignment with the Wirral Together capacity building approach.

The Chair noted that the neighbourhoods agenda was one that the Board should be rightly proud of, noting that Wirral was ahead of others across Merseyside and Cheshire and that the approach was now contained in the NHS Plan. Going forward there was a need to consider the allocation of GP practices against the primary care networks now forming to see how these linked up, but Wirral was leading with an approach that focused on people and communities, rather than on organisations.

The views of the Chair were supported, with comment made that it had been a slow and often challenging process to get agreements. With reference to the work of Personal Independence Co-ordinators and the reported reduction in referrals to GPs, it was also advised that a reduction in non-elective admissions to hospitals was also being observed. A concern was expressed that certain announcements in recent weeks might have impacts on this area of work, but this was tempered by a consideration of what had been achieved and what work underlies it. It was noted that the neighbourhoods structure presented a real opportunity for Children's Services in their improvement journey. As a short term measure services had been brought together, but the neighbourhoods as described here provided a possible model for locality delivery.

RESOLVED – That the presentation updating the Board on neighbourhood working be noted.

50 CHIEF OFFICER'S REPORT

The Chief Officer, Wirral Health and Care Commissioning and Wirral Clinical Commissioning Group (CCG), Simon Banks, introduced his report setting out some key areas of work undertaken, in addition to his usual duties and meetings, for the period from 13th February 2019 to 9th April 2019.

Regarding work in partnership with other organisations, this had included -

- monthly CCG Chief Officers meetings, including the meeting held on 12 March 2019 attended by Bill McCarthy, the new North West

Regional Director for NHS England and NHS Improvement, who had outlined his four focus areas -

- Planning and delivering sustainability through integration;
 - Places to connect with primary care delivery;
 - Ensuring collaboration at all levels; and
 - Developing an approach for a sustainable workforce for today and tomorrow;
- activities to deliver the 'Healthy Wirral' vision, objectives and outcomes by 2020, including considerations given to phlebotomy services, extra care housing, and assessment of continuing health care at the meeting of the Adult Health and Care Overview and Scrutiny Committee held on 19 March 2019;
 - meeting with the Wirral University Teaching Hospital NHS Foundation Trust Improvement Board;
 - meetings with Primary Care Wirral, the GP Wirral Federations and the Wirral Local Medical Committee, including discussions on the development of the neighbourhood model in Wirral;
 - considerations of the economic impact of health and care;
 - attendance at a meeting of the Cheshire and Merseyside Mental Health Programme Board focusing on the response to the NHS Long Term Plan requirements in respect of mental health services; and
 - attendance at a Cheshire and Merseyside Collaborative Commissioning Forum.

Further to the 'Assurance by NHS England' section within the submitted report the Board was advised that an Improvement Assessment meeting with NHS England was now scheduled for 10 May 2019 to consider issues including 'Healthy Wirral' and cost recovery. With regard to activities related to being accessible and accountable to local communities, it was advised that the scheduled meeting with Frank Field MP, referenced at paragraph 3.3.2 to the submitted report, had been cancelled due to Parliamentary business.

RESOLVED: That the report be noted.

51 CHILDREN'S SAFEGUARDING ARRANGEMENTS

The Board received a report presented by the Director of Quality and Safety, Lorna Quigley, advising that the Children and Social Work Act 2017 (the '2017 Act') was introducing new local safeguarding arrangements that would replace those currently in place under the Children Act 2014. The new arrangements would see the current Local Safeguarding Children Board replaced by new arrangements led by the local authority, the Police and the Clinical Commissioning Group (CCG) as the three statutory agencies who would have equal and joint responsibility for local safeguarding arrangements.

The new arrangements stemmed from the 'Wood Review' of Local Safeguarding Boards published in May 2016, the chief recommendation of

which was a proposal to introduce a new statutory framework for multi-agency safeguarding arrangements, the review recommending that -

- there be a requirement for all areas to move towards new multi-agency arrangements;
- there be a requirement for the three statutory agencies to design multi-agency arrangements for protecting children, and to work together on key strategic issues;
- an expectation be placed on schools and other agencies involved in the protection of children to co-operate with the new multi-agency arrangements;
- the existing system of serious case reviews be replaced by a new national learning framework overseen by a new independent body; and
- the national oversight of Child Death Overview Panels be transferred to the Department for Health.

The changes agreed had been introduced by the 2017 Act which aimed to improve support for looked after children in England and Wales, especially for those leaving care; to enable better learning about effective approaches to child protection and care in England; and to establish a new regulatory regime for the social work profession in England. The Act further required the three safeguarding partner agencies to set out how they would work together, with any further relevant agencies, to safeguard and promote the welfare of children and how the arrangements would be subject to independent scrutiny.

The partners had worked together to design a model for the new safeguarding arrangements which was compliant with the 2017 Act and made independent scrutiny of those arrangements a key feature. The proposed model was detailed within an appendix to the submitted report. It was the intention of the of the partners, as the Wirral Safeguarding Partnership, to introduce the arrangements in shadow form from 1 April 2019 through to full implementation on 1 September 2019 at which point the current Wirral Safeguarding Children Board would be stood down. These arrangements would satisfy the transitional arrangements guidance published by the Department for Education.

There was no alternative to the proposed arrangements insofar as there was a statutory requirement to have the new multi-agency safeguarding arrangements in place by September 2019. The model proposed had been subject to regular multi-agency consultation with the Wirral Safeguarding Children Board and with young people, families, professionals and the wider community during December 2018 – January 2019, all of which had informed the final proposed model.

The Board received a presentation in support of their consideration, the presentation outlining responsibilities and requirements under the 2017 Act; the purpose of new local arrangements; Wirral's proposed new arrangements, including the learning approach and approaches to be adopted more

generally in the local multi-agency partnership; and an overview and consideration of key features of the model proposed.

The NHS Wirral Clinical Commissioning Group Board Members and the Members of the Wirral Borough Council Committee of the Cabinet -

RESOLVED: That

- 1. the proposed children's safeguarding model be endorsed;**
- 2. the publication of the model ahead of shadow implementation on 31 March 2019 be noted, along with the full implementation of the new arrangements on 1 September 2019 at which point the Wirral Safeguarding Children Board will be stood down.**

52 DATE AND TIME OF NEXT MEETING

RESOLVED – That the following dates of future meetings of the Joint Strategic Commissioning Board, all to be held at 2pm in Birkenhead Town Hall unless otherwise advised, be noted -

**Tuesday 28 May 2019
Tuesday 9 July 2019;
Tuesday 10 September 2019;
Tuesday 12 November 2019;
Tuesday 14 January 2020; and
Tuesday 10 March 2020**