

Minutes



SHAPING OUR FUTURE

Cornwall and the Isles of Scilly
Health and Social Care Plan

Meeting Title: STP Transformation Board

Date: 17 March 2017

Time: 9am – 11am

Location: 2N.03, New County Hall, Truro

Attendees: Kate Kennally (Chair) (CExec Cornwall Council), Trevor Doughty (Strategic Director, Cornwall Council), Cllr John Pollard (Leader, Cornwall Council), Dr Barbara Vann (Chair, Cornwall Partnership Trust), Phil Confue (CExec, Cornwall Partnership Trust), Tracey Lee (STP Interim Programme Director), Jim McKenna (Chair, Royal Cornwall Hospitals NHS Trust) Kathy Byrne (CExec, Royal Cornwall Hospitals NHS Trust), Thomas Lafferty (Director of Corporate Affairs, Royal Cornwall Hospitals NHS Trust), Amanda Fisk (Director Assurance & Delivery, NHS England), Christina Quinn (Director, NHS SouthWest Leadership Academy), Joe McEvoy (Director of Delivery, NHS England), Dr Phil Dommett (Kernow Health Community Interest Company), Simon Bell (Chief Finance Officer, Kernow Clinical Commissioning Group), Dr Peter Merrin (Chair, Cornwall & Isles of Scilly Local Medical Committee), Francis Gillen (Director IM&T, South Western Ambulance Foundation Trust), Jayne Howard (Chair, Cornwall Healthwatch).

Additional Attendees

Helen Childs (Kernow Clinical Commissioning Group for Jackie Pendleton), Karl Simkins (Director of Finance, Royal Cornwall Hospitals NHS Trust item 3c), Dave Dingwall (GE Healthcare Finnamore –item 4), Jonathan Hale (GE Healthcare Finnamore item 4), Garth Davies (Royal Cornwall Hospitals NHS Trust item 5), Cllr Rob Rotchell (Chair, STP Sub Committee item 6), Andrew Abbott (Kernow Clinical Commissioning Group item 7), Peter Stokes (Chief Operating Officer, Kernow Health Community Interest Company item 7) Nick Hayden (Cornwall Council, Project Manager), Charlie Sims (Cornwall Council, minutes)

1 Apologies Dr Iain Chorlton, Jackie Pendleton, Ann James, Theo Leijser, Cllr Christine Savill, Christina Quinn, Phill Mantay, Jayne Howard and Cllr Andrew Wallis.

2. Minutes of the previous meeting

K Kennally welcomed those present and introduced Thomas Lafferty (Royal Cornwall Hospitals NHS Trust) as a new member of the Board, in recognition of K Byrne's multiple roles represented on the Board.

In response to a question from Healthwatch Cornwall, it was agreed that the minutes once agreed by the Board would then be made public.

The following amendments were made to the minutes of 17 February 2017:

- Add Tracey Lee to the list attendees

- Amend item 3, Resourcing sentence to read:

KB reported 25% of some officer time from NHS England and NHS Improvement had been secured to support local systems and support providers of the Shaping Our Future programme.

- Item 6 Key strategic documents for consideration and comment Jim McKenna asked for his comment on the commissioners to be struck from the minutes.

Update of actions identified in the action log from last meeting

See attached updated actions log.

3. Consolidated Performance Management Report

a. Programme Directors Update

T Lee gave an update to the Board. She focused particular attention on the red risks and issues not addressed elsewhere on the agenda: she flagged that the readiness assessment undertaken by our strategic partner, supported by feedback from the first phase of engagement and the work of the Scrutiny Sub-Committee indicated the need for a longer time frame to develop the business case than was originally set out in the phase 3 programme brief. The timeframe is being reviewed in detail, and a revised plan will come to the next Board.

b. Update of resources

T Lee reported that significant progress had been made in resourcing the joint team from local expertise. There are still some gaps, particularly in modelling, estates and IMT, where we may need to draw in resources from elsewhere. This is being explored with a range of partner and regulatory organisations.

A Fisk reported that NHS England have offered funding for primary care and are committed to working closely with the Joint Core Team.

K Byrne agreed that things are moving at pace. It is a cultural shift to staff seeing the Shaping our Future (SOF) as their full time day jobs. However we may need to continue to use consultants judiciously to fill gaps and help with capacity and capability when it is not available locally.

P Confue advised that the four key health and care organisations had confirmed their commitment by establishing a shared budget to ensure the SOF is sufficiently resourced to deliver.

Action: K Kennally asked that T Lee produce a staff chart for the next Board so that members could see the staff involved.

c. Update on finances

Karl Simkins (Director of Finance for Royal Cornwall Hospitals NHS Trust) attended for this item and circulated a summary note for the Board on the current position. Significant work is being carried out on the plans within finance. Chief Officers were briefed yesterday. A financial evaluation of each of the programmes has been undertaken highlighting the significant work to be done in developing the plan.

Action: A Fisk welcomed the priorities set out for early action and asked for further clarification on how these would be taken forward and the associated timeframes for future meetings.

Action: K Kennally also requested that a financial performance report for the system is required for subsequent meetings as part of the assurance framework for the Board.

There was a specific discussion about the Clinical Commissioning Group (CCG) financial position, and how this impacted on the SOF. Conversations are taking place with NHS England. A Fisk commented that CCG had made considerable progress, but that the handling of legacy issues will need to be reflected within the requested financial report.

d. Update from Chair of Clinical Practitioner Cabinet

A written update was provided by Dr Iain Chorlton. T Lee, who attended the meeting, commented that the last meeting, attended by a clinician from the Clinical Cabinet for the Devon STP, had fostered positive connections on behalf of the residents of east and north Cornwall. In particular, there was a commitment to jointly agree access criteria for pathways to avoid a postcode lottery. The draft engagement report was discussed, with a recognition of the importance of strengthening clinical engagement in this next phase.

4. Plan for developing Full Business Case/Outputs of GE Healthcare Finnamore (GEHCF) assignment

Dave Dingwall (GEHCF) attended for this item. He gave an overview on the work required to be undertaken for the Full Business Case (FBC) to be achieved. Some work streams are more developed than others, and their conclusion overall is that significant work is required to develop a robust and coherent plan that is ready for public consultation, particularly to ensure strong engagement and co-production of the service model with stakeholders in the next phase.

K Byrne commented that the Chief Officers had met with GEHCF earlier that week and received a more detailed analysis of their work and their recommendations on next step priorities. She particularly commented on the need for a renewed focus on getting the productivity workstream delivering at pace. **Action:** K Kennally asked that all organisational leads take back an action to review this within their organisations. T Lee noted that this will also be reviewed at the Executive Delivery Group.

K Bryne supported the need for a longer time frame to build in sufficient time for engagement as well as the technical modelling work required.

P Confue commented on the need to better articulate how benefits will be realised to strengthen the articulation of the case for change.

J McKenna questioned the likely revised timeline for the FBC development. K Byrne responded by outlining the need to ensure that as well as meeting NHS England assurance requirements, we also address the need for a strategic business plan to support the opportunities to be realised by the devolution deal. Taking into account all considerations and feedback, the latest planning looks like we will have a draft business case by the autumn but this needs signing off at the Programme Board before presenting to the Transformation Board.

Action: T Lee to bring revised timescale for FBC to the next Transformation Board meeting

K Kennally remarked that monitoring progress against the project plan for the FBC will be critical in providing assurance that we are on track.

B Vann added that there should be a refresh of communications if the plan moves to autumn, including with all levels of staff.

Action: Garth Davies to develop communications to stakeholders informing of extension to timescales for development of FBC once extension approved by Programme Board.

5. Communication and Engagement report

Garth Davies presented the report relating to the engagement undertaken in phase two of the programme. He described the extensive engagement that had taken place, involving 5,000 people, and noted there is a need to reach out to the under 35s in the next phase. G Davies summarised the main themes from engagement, as well as areas of concern. He described the recommendations and the next steps in terms of actions for developing the FBC to ensure it reflects on community feedback.

F Gillan disagreed with the references to the 111 service and had seen factual inaccuracies in documents that needed to be corrected. K Kennally responded to highlight that the report was recording what the general public had said and if there are mistakes in other documents then this should be taken up with the relevant officer. It was noted that the development of detailed plans will be supported by a strong evidence base.

H Childs added that it was refreshing to see such a detailed piece of analysis and helpful going forward. In response to a question from H Childs, G Davies provided assurance that the specific recommendation relating to the establishment of a command centre was in response to engagement feedback about the need for integrated discharge planning.

P Merrin noted that it will be important but challenging to engage with the under 35s, and that this will need careful consideration.

B Vann was pleased to see the focus on children and mental health services. G Davies agreed to share with her the analysis by Exeter University. P Confue noted the relatively low investment in mental health services locally.

P Dommett noted the need to address the lack of consistency in engagement processes highlighted in the Scrutiny Sub Committee statement.

There was also discussion with regard to the need to be able to provide assurance that new service models will be established, before there are any changes to existing services, and the need to be clear about how concerns with regard to access will be addressed, including with digital developments and links with public transport. J Pollard added that Scrutiny endorse what the engagement and public is saying with regard to the need to have strong alternatives.

The Board signed off the report. **Action:** It was agreed to work alongside Healthwatch Cornwall on the next steps. T Lee and G Davies to action.

Shaping our Future Branding and Communications

G Davies discussed the galvanizing of communication leads from across organisations, to coalesce activity around supporting *Shaping our Future*. **Action:** A monthly planner of activity will be produced for the next Transformation Board.

6. Feedback from Scrutiny Sub-Committee process

Cllr Rob Rotchell attended for the item, gave an overview on the position statement and went through the Scrutiny Sub Committee process and timescales and the organisations involved.

It was confirmed that the Health and Adult Care Overview and Scrutiny Committee will continue in the new Council (after May elections).

The unanimous view of the Sub Committee was that the document produced was not an Outline Business Case. Areas of concern were highlighted. The expectation is that when the FBC emerges, issues raised in the position statement are addressed. Scrutiny needs to be involved along the way.

K Byrne responded saying that the comments are in the main helpful, although the tone not consistent with previous discussions. She expressed disappointment at not being able to comment on the statement before it was published, particularly as the basis for some statements was unclear. She confirmed that Chief Officers have taken on board the findings and she will be responding to the statement, on behalf of NHS Chief Officers, in due course. She added that the statement was not particularly helpful for public confidence and noted that the framing of the report has made the job harder. She noted the importance of working more closely in the future.

R Rotchell replied that they will evidence their conclusion, and added that the statement should not be seen as a criticism of staff or their work, and reflected on the timing of the statement in relation to the local elections.

J Pollard added that words are important and the Scrutiny Committee must understand its important role and act as a partner to help shape the result.

Action: A Fisk asked for clarifications regarding the NHS England comments and who provided the response from NHS England.

K Kennally advised on the Scrutiny role during the forthcoming election period and that Cllr Rotchell remains the Chair until 4 May. It will be key to ensure that the new Committee Members receive a comprehensive induction on the STP.

Action: It was agreed that the Chief Officer response will be circulated to the Board members.

7. Primary Care plan

Peter Stokes and Andrew Abbott (joint Senior Responsible Officers) attended for this item and circulated a summary presentation which set out the workforce challenges being experienced in primary care and the priorities for action. **Action:** Presentation to be e-mailed to Transformation Board members.

P Dommett and P Merrin noted the need to engage on the case for change with frontline GPs, and the use of a strong and clear narrative. P Merrin set out some of the engagement work planned to support this. H Childs commented that the CCG's

Governing Body has agreed to prioritise at pace its direct work with members.

A Fisk commented that Primary Care Home had huge potential in Cornwall, and reinforced the fragile nature of primary care.

Action: K Kennally asked how we take this forward and ensure plans for primary care are joined up and coherent with the broader plan. She asked the Programme Management Office to look at the best route to take these issues forward.

Action: TL committed to ensuring that future papers come with cover sheets on the purpose and contribution of the Transformation Board, underpinned by papers that more obviously align with the agenda.

8. One Vision

Trevor Doughty thanked all those involved in the One Vision work and gave a brief synopsis. He highlighted the really good work happening, but recognised the need for future plans to better reflect the work taking place in children's services.

P Confue commented that in view of the reference in the One Vision document to procurement, the board need to decide if One Vision is a partnership programme or a commissioning strategy. **Action:** Commissioners were asked to consider the removal of a statement related to shaping the market, and report back.

J McEvoy mentioned that NHS England are going to invest in a CAHMS tier 4 Unit in Cornwall.

He gave the perspective of Specialist Services, with regard to commissioning, and how best to secure improved outcomes, etc. **Action:** H Childs was asked on behalf of the CCG to confirm the Senior Responsible Officer for Specialist Services, with whom Joe McEvoy can work.

There was also a discussion on the scope of the strategic commissioning function, with regard to children's services.

Action: T Lee said she would pick up points with colleagues.

9. Devolution Update

J Pollard gave a brief update.

10. Programme Monitoring & Control Strategy

Noted. No discussion.

11. Health and Wellbeing Board report

Noted report. No discussion.

12. Forward Plan

Noted. **Action:** It was agreed that this would be fleshed out in line with the project plan being developed for the delivery of the plan.

13. Any Other Business

K Kennally reported that the 5 year Forward View document was due out shortly.

Date of next meeting: 21 April 2017. 9 – 11am. 2N03, County Hall, Truro