

MINUTES
Integrated Commissioning Executive
 17th August 2017

Attendees
Roger Harris (RH) – Corporate Director of Adults, Housing and Health, Thurrock Council (Joint Chair)
Ian Wake (IW) – Director of Public Health, Thurrock Council
Ade Olarinde (AO) – Chief Finance Officer, NHS Thurrock CCG
Tendai Mnangagwa (TM) - Head of Finance, NHS Thurrock CCG
Mike Jones (MJ) – Strategic Resources Accountant, Thurrock Council
Jo Freeman (JF) – Management Accountant, Thurrock Council
Jeanette Hucey (JH) – Director of Transformation, NHS Thurrock CCG
Mark Tebbs (MT) – Director of Commissioning, NHS Thurrock CCG
Ann Laing (AL) - Quality Assurance Officer – Adults Social Care, Thurrock Council
Les Billingham (LB) – Assistant Director for Adult Social Care and Community Development, Thurrock Council
Catherine Wilson (CW) – Strategic Lead for Commissioning and Procurement, Thurrock Council
Ceri Armstrong (CA) – Senior Health and Social Care Development Manager , Thurrock Council
Christopher Smith (CS) – Programme Manager Health and Social Care Transformation, Thurrock Council

Apologies
Mandy Ansell (MA) – Accountable Officer, NHS Thurrock CCG (Joint Chair)
Jane Foster-Taylor (JFT) – Chief Nurse, NHS Thurrock CCG
Sean Clark (SC) – Director of Finance and IT, Thurrock Council
Allison Hall (AH) – Commissioning Officer, Thurrock Council
Iqbal Vaza (IV) – Strategic Lead for Performance, Quality and Information, Thurrock Council

Item No.	Subject	Action Owner and Deadlines
1.	Welcome and Introductions	
	RH Chaired the meeting and introductions were made. No conflicts of interest were declared.	
2.	Notes of the last meeting	
	The minutes of the meeting on 22 nd of June were agreed subject to the deletion of the 2 nd paragraph in item 8 which was incorrectly reported. There were no matters arising not on the agenda.	CS to amend minutes.
3.	Better Care Fund 2017-19	

Expression of Interest in Graduation and the delayed publication of the guidance for the 2017-19 Plan

The email dated 14 August 2017 confirming Thurrock has not been agreed as one of the seven programmes put forward for graduation nationally was noted. Some feedback by letter is awaited.

CS reported that the 2017-19 BCF Guidance was finally published by NHS England on 4 July 2017 despite concerns from the Local Government Association and the Association of Directors of Adult Social Services about the requirement regarding spending on reducing delayed discharge from hospitals to be prioritised over other social care needs. The deadline for submission of the plan, to be agreed by the Health and Well-Being Board on 8th September, is 11 September 2017.

Narrative Plan

CA outlined the direction of travel for the 2017-19 Plan which continues to be on whole system redesign including the contribution of non-clinical inputs. It was suggested that the focus of scheme 3 – Intermediate Care - needs to change because of the guidance and the emphasis required on Delayed Transfers of Care. The linkages to the Sustainability and Transformation Plan will also be highlighted. The structure of the plan will again follow the Key Lines of Enquiry published along with the guidance.

JH suggested there may also be pointers for the content of the Plan in the feedback regarding graduation

Financial Plan

MJ introduced that table showing the additional funding for 2017-19 including the Improved Better Care Fund (iBCF) allocations. He highlighted that £823,000 still needed to be allocated to existing or new initiatives.

The combination of incoming grant and the Social Care precept has resulted in a net increase of circa £1m for the Health and Well-Being Board total for 2017/18.

AO noted the closing position for the Better Care Fund's total expenditure for 2016/17 which resulted in a carry forward of funds of £389k. Also, by way of context, he explained the BCF funding nationally and locally, including the iBCF and shared a schedule identifying the funding streams comprising the minimum BCF values. He noted that the uplift for the community provider in 2017/18 needed to be incorporated in the relevant service lines. Inflation of 1.79% has been applied to the CCG minimum contribution in line with guidance.

AO pointed out that in terms of governance the guidance requires the agreement of both parties to the application of iBCF funds. The financial plan, including the application of the iBCF funding, was agreed in principle, pending the allocation of the £823k to specific projects. Final agreement would be sought at the next meeting as part of the BCF

Thurrock BCF – Development Fund schemes 2017/18

Scheme	Recurrent	One Off
Implement a “Stretched QOF” in Tilbury and Chadwell		£ 68,000 for 1 year pilot
Increase the uptake of flu vaccination		£ 6,000 for 1 year pilot
Implement a depression screening and referral programme for patients on LTC registers and ASC clients aged 65+	Business case not ready yet	
Improve case finding of Hypertension and AF		N/A (£ 100k already carried forward)
Implement e-consults in Tilbury and Chadwell	No funding required	
Extend Provision of Social Prescribing	£ 100k (plus £ 37,500 already in budget) – dependent upon agreement of business case	
Alzheimer’s Society	£ 19,000	
Exercise on Referral		N/A (£ 33,000 already in budget)
St. Luke’s Hospice	Not BCF priority	
Micro-enterprises	Not BCF priority	
Home from Hospital		£75k one-year funding for pilot
Red Bag initiative	£ 2,000	
RRAS	£ 49,000 to be hosted by the LA	
Hospital Social Work Team	£ 80,000 agreed on the basis that this will give us 7 day service.	
Community based Social Work	£ 60,000	
A night service – enhancing John Stanley’s current service	£ 50,000 – on the basis that this was also available to CHC clients	
Transform Homecare/Community Nursing/Buurtzorg	Need Business case	
Bridging Service – short term domiciliary care post discharge		£ 64,000 agreed for 1 year only.

Discharge to assess beds (linked to Pickwick)	Agreed to establish £ 200k Winter Pressures fund that could go towards this. Further business case required for Discharge to Assess scheme.	
Total	£ 560k	£ 138k