

MINUTES
Integrated Commissioning Executive (ICE)
 22 February 2018

Attendees

Roger Harris – Corporate Director of Adults, Housing and Health, Thurrock Council (Joint Chair)
 Mandy Ansell – Accountable Officer, NHS Thurrock CCG (Joint Chair)
 Jo Freeman – Management Accountant, Thurrock Council
 Jeanette Hucey – Director of Transformation, NHS Thurrock CCG
 Tendai Mwangagwa - Head of Finance, NHS Thurrock CCG
 Dave Mountford, Interim Chief Finance Officer, NHS Thurrock CCG
 Mark Tebbs – Director of Commissioning, NHS Thurrock CCG
 Ian Wake – Director of Public Health, Thurrock Council
 Catherine Wilson – Strategic Lead for Commissioning and Procurement, Thurrock Council
 Iqbal Vaza – Strategic Lead for Performance, Quality and Information, Thurrock Council
 Allison Hall – Commissioning Officer, Thurrock Council
 Ceri Armstrong - Senior Health and Social Care Development Manager , Thurrock Council
 Darren Kristiansen – Business Manager Health and Wellbeing Board, Thurrock Council

Apologies

Les Billingham – Assistant Director for Adult Social Care and Community Development, Thurrock Council
 Christopher Smith – Programme Manager Health and Social Care Transformation, Thurrock Council
 Mike Jones – Strategic Resources Accountant, Thurrock Council
 Jane Foster-Taylor – Chief Nurse, NHS Thurrock CCG

Guests

Emma Sanford, Strategic Lead for Health and Social Care, Public Health
 Monica Scrobotovici, Healthcare Public Health Improvement Manager, Public Health
 Tania Sitch, Integrated Care Director Thurrock, North East London Foundation Trust
 Irene Lewsey, Head of Transformation, Thurrock CCG
 Abdul Ahad, Head of Finance Strategy, Thurrock CCG
 Martin Callingham, Chief Information Officer, Basildon and Thurrock, Southend, and Mid-Essex Hospital Trusts

1. Welcome and Introductions

Introductions were made.

2. Minutes of the last meeting

The minutes were agreed. Members considered action points arising at the 25 January 2018 ICE meeting. During discussions the following points were made:

- An update was provided on the Red Bag Initiative and members of the Executive were made aware that the bags would be distributed to care homes once governance arrangements had been agreed by BTUH.
- It was agreed that an action log would be created for members' easy reference.

Action HWB Business Manager

- Two actions were deferred until the next ICE meeting. Both actions are included within the action log that will be circulated with these minutes.

3. Digital 2020 Project – Local Digital Roadmap

Martin Callingham provided members with an update which included:

- The Local Digital Roadmap programme considers how technology and information technology can support health and social care outcomes across the Mid and South Essex STP footprint.
- The Local Digital Roadmap explores how to utilise technology through integrating systems where appropriate and ensuring that it is fit for purpose. For example, consideration has been provided to creating a regional care record which follows patients across the system and providing care professionals with easy access to information contained on patient records.

During discussions the following points were made:

- It would be helpful if the Local Digital Roadmap Programme supports CCGs to identify where funding is available. Members were informed that the Local Digital Roadmap programme is engaging with NHSI, NHS Digital and NHSE to consider how to raise awareness of funding opportunities and whether the system can be simplified.
- Members welcomed further clarification on how the Local Digital Roadmap compliments and does not duplicate Thurrock’s approach to developing integrated systems through the MedAnalytics Project. It was agreed that a separate event should be arranged to enable ICE members to explore the implications of the Local Digital Roadmap for Thurrock.

Action Iqbal Vaza

4. BCF Plan 2017 – 2019 Finance Report

Jo Freeman updated members on iBCF and BCF Funding as set out below:

The allocation of the new iBCF monies for 18-19

	iBCF	
Demographic growth older people	224,000	
Domiciliary Care – both internal & external providers	539,000	
Bridging service – extension to contract and increase in capacity	211,000	
		974,000

The 18-19 pot of unallocated funds is currently:

Carry forward from 17-18	163,777
Unallocated (as a result of 17-18 one-off projects)	154,498
CCG minimum contribution	190,912
	509,187

Members were advised that In addition to the funding set out above is the recurrent £240,000 set aside for Winter Pressures.

During discussions it was agreed that a separate meeting would be arranged to identify a long list of potential funding options for 2018/19FY. The meeting will also be used to clarify the resource envelope for 2018/19. It was suggested that the meeting should include Catherine Wilson, Mark Tebbs, Jo Freeman, Tendai Mwangagwa and Dave Mounford. It was agreed that a set of proposals will be provided to members at the next ICE meeting.

Action Mark Tebbs and Catherine Wilson

5. BCF Plan 2017-19 - Performance

DTOC Report and the BCF scorecard

Iqbal Vaza introduced the item. Key points included:

- Thurrock has performed well against the target that focusses on ASC delayed transfers of care – Number of delayed days from hospital (per month).
- The target for the proportion of older people who were still at home 91 days after discharge from hospital into reablement or rehabilitation had not been achieved in quarter three. The target was 91% and Thurrock achieved 83%. ICE members agreed that further analysis would be useful for members when considering performance against the target.

Action Iqbal Vaza

Non Elective Activity update

Abdul Ahad introduced the item. The following points were made:

- During 2017/18 a number of changes were made to the plan in partnership with Basildon and Brentwood CCG and NHS England. Main issues with reporting include:
 - A change to the HRG currency on which activity was based. This meant the number of HRGs increased from 1200 to 1800 impacting on how activity is grouped and reported.
 - There has been a change in recording of ambulatory care and Clinical Decision Unit activity into Non-Elective, which has resulted in activity showing a significant adverse variance.

During discussions the following points were made:

- Commentary is currently provided to support BCF quarterly returns so any variance from target can be explained.
- Due to changes highlighted there is a risk that Thurrock will always receive a red RAG rating. It was agreed that NHS England would be approached to request that the Non Elective Activity Target is reviewed to reflect changes that have been made to reporting arrangements.

Action Abdul Ahad

6. Social Prescribing Business Case

Jeanette Hucey confirmed that the social prescribing business case had been circulated to members for information.

7. MedeAnalytics

Emma Sanford provided members with an update on the MedeAnalytics Project, particularly around data sets. Key points included:

- The Adult Social Care dataset is currently being revised. It is envisaged that the next transfer of data will be March 2018 and then monthly.

- NHS Digital has approved the Council's application for SUS data to be incorporated into MedeAnalytics.
- College Health and their five GP practices have agreed to pilot data transmission for the Primary Care dataset
- Discussions have now taken place with relevant colleagues at SSSFT regarding IAPT data sets.
- Discussions have commenced with NELFT's Information Governance lead about including NELFT data within the MedeAnalytics Project

Members welcomed the update and agreed that a presentation should be provided to ICE members to show dataflows within the MedeAnalytics Project in due course.

Action Emma Sanford

8. Funding of Bridging Service 18/19

It was agreed that funding of the Bridging Service will be considered as part of the development of a long list of funding options recorded at item 4 of these minutes.

9. Mobilisation of services report

Catherine Wilson introduced the item and advised members that further work had been completed on the mobilisation of services report and that it would be circulated following the ICE meeting. Members were asked to check the business cases were accurate and remained up to date.

Action Catherine Wilson to provide copy of mobilisation of services report
Action all relevant members to check business cases embedded in the report and advise Catherine of any change

10. Hypertension detection programme including roll out to pharmacies

Monica Scrobotovici provided members with an update on the Hypertension Detection Project which included:

- 24,123 patients have been identified with Hypertension which is approximately 67% of all patients estimated to have Hypertension. It is estimated that 11,626 patients remain undiagnosed.
- 2,281 patients have been identified with Atrial Fibrillation (AF). It is estimated that 1,205 patients remain undiagnosed.
- The purpose of the Hypertension detection project is to increase the detection rate of Hypertension and AF by 10%.
- The project comprises three strands:
 - Using existing services to support an increase in Hypertension and AF including pharmacies and community hubs.
 - Using outreach approaches to identify patients including faith groups, job centres and employers
 - Working with General Practices (GPs)

During discussions the following points were made:

- Members welcomed plans to engage large employers across Thurrock given that many already undertake medical examinations and drug testing for their staff (e.g. Port of Tilbury).
- Thurrock CCG has written to GPs about the use of mobile machines that support the detection of AF.
- For Thurrock in Thurrock could include information about mobile machines in GP surgeries that help to detect AF within the programmes marketing material.

11. GP Funding in Collins House (Reablement beds)

This item was deferred until the next ICE meeting in March 2018.

12. Older people wellbeing service pilot – One year evaluation report

Irene Lewsey introduced the item to members. Key points included:

- Approval was given in April 2016 to fund a falls prevention service and a care home support service as a pilot using funds from the Better Care Fund.
- NELFT launched the service in October 2016 branded as the Older Adults Health and Wellbeing Service, which would support care and residential homes with the aim to reduce the need for a hospital admission and improve quality of care.
- The Older People Wellbeing Service pilot evaluation report demonstrates positive outcomes being achieved including a decrease in admissions. It was agreed that the evaluation report will be circulated with these minutes.

Action HWB Business Manager

- Current funding for the Older People's Wellbeing Service stops in March 2018 and it was agreed that Irene Lewsey and Jo Freeman will discuss potential funding for 2018/19FY outside of the ICE and will report back in March.

Action Irene Lewsey and Jo Freeman

13. Integrated Approach to Commissioning. Future structure of ICE meetings (part 1 and part 2) to support integrated commissioning

Catherine Wilson described emerging proposals to realign the terms of reference for the Integrated Commissioning Executive (ICE) to create a commissioning steering group to establish integrated commissioning across Health and Social Care in Thurrock. Key points included:

- Proposals acknowledge that this will require a review of the structure of the meetings together with a review of the membership of the Group.
- The purpose is to develop the Commissioning and Contracting Model for Thurrock CCG and Local Authority to deliver integrated commissioning within the remit of an 'Accountable Care Alliance'.
- Additional resource may be required to support the work and revises ICE structure which is likely to include two sub-groups – Finance and Contract; and Commissioning. It was agreed that a Finance and Performance group was required with Jo Freeman, Iqbal Vaza, Abdul Ahad and Dave Mountford as members and reporting to ICE by exception.

ICE members endorsed the review of the group's TOR and agreed that proposed revisions will be agreed at a future meeting.

Action Catherine Wilson and Mark Tebbs

14. AOB

Ceri Armstrong made members aware of progress with the Digital Discharge submission. The Council had been contacted by NHS England who had asked for clarification regarding supplier costs. Further updates will be provided as appropriate.