

MINUTES

Integrated Commissioning Executive

29th July 2016, 9-10.30am

| Attendees |
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| Roger Harris (RH) – Corporate Director of Adults, Housing and Health, Thurrock Council (Joint Chair) |
| Mandy Ansell (MA) – Acting Interim Accountable Officer, NHS Thurrock CCG (Joint Chair*) |
| Ade Olarinde (AO) – Chief Finance Officer, NHS Thurrock CCG |
| Rahul Chaudhari (RC) – Director of Primary Care, NHS Thurrock CCG |
| Jo Freeman (JF) – Management Accountant, Thurrock Council |
| Christopher Smith (CS) – Programme Manager Health and Social Care Transformation, Thurrock Council |
| Ceri Armstrong (CA) – Directorate Strategy Officer, Thurrock Council |
| Allison Hall (AH) – Commissioning Officer, Thurrock Council |
| Iqbal Vaza (IV) – Strategic Lead for Performance, Quality and Information |
| Ian Wake (IW) – Director of Public Health |
| Les Sweetman (LS) – Strategy Manager, NELCSU |

| Apologies |
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| Sean Clark (SC) – Director of Finance and IT, Thurrock Council |
| Mike Jones (MJ) – Strategic Resources Accountant, Thurrock Council |
| Catherine Wilson (CW) – Strategic Lead for Commissioning and Procurement |
| Mark Tebbs (MT) – Director of Commissioning, NHS Thurrock CCG |

| Item No. | Subject | Action Owner and Deadlines |
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| 1. | <p>Notes (23rd May)</p> <p>The June meeting had been cancelled.</p> <p>AO updated the Group about the CCG's finances and said that CCGs were now unable to access the 1% non-recurrent transformation funding for 2016-17 (this equated to £2.2m for Thurrock CCG). The CCG had anticipated being able to access some of the 1% and had included that assumption in their budget calculations for the year. All CCGs had been asked to set aside 1% of their budget for transformation.</p> <p>AO was waiting for confirmation from NHS England as to how the 1% was to be used.</p> <p>2016/17 A&E Improvement Plan</p> | |

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| | <p>MA made the Group aware of a letter CCG Accountable Officers had received concerning the plan to improve A&E waiting time performance.</p> <p>MA also stated that a number of CCGs had been named as needing a recovery plan. Thurrock CCG had been judged by NHS England as 'requiring improvement'.</p> <p>AO updated the group on Sustainability and Transformation Plans. STPs are due to be resubmitted by September with related plans being finalised by December – e.g. the 2 year Operational Plans. This would mean all contracts would need to be agreed by December.</p> <p>IW raised a concern about whether the LA could influence the STP as there were a number of prevention priorities that needed to be reflected within the STP and data sets.</p> <p>MA said it was important to focus on local plans – e.g. For Thurrock In Thurrock</p> | |
| 2. | Local Digital Roadmap | |
| | <p>Les Sweetman, Strategy Manager for North East London Commissioning Support Unit (NELCSU), attended to update ICE members.</p> <p>LS stated that the LDR had been submitted to NHS England and was in the process of being reviewed. It had passed 19 of 23 criteria. Work would now be carried out and a resubmission would be made in October.</p> <p>One of the areas that the LDR had not passed was lack of sign-off by the Health and Wellbeing Board.</p> <p>LS stated that the document was strategic, and that it currently set out aspirations. It was not a delivery plan.</p> <p>Concerns were raised about ensuring plans contained within the LDR supported joint working across health and social care.</p> <p>LS replied that one of the aspirations within the document concerned data sharing between systems and the necessary infrastructure. The deadline for the delivery of the LDR was 2020.</p> <p>No funding would be available this year, but it was likely that some would be available for 2017-18.</p> <p>MA said that there was a need to pilot some of the work streams in the Tilbury and Purfleet Integrated Healthy Living Centres when developed. Integrated data would be essential to the IHLCs' success.</p> <p>LS said that the next step would be to establish the right delivery structure.</p> | |

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| | It was agreed that the STP and LDR would be placed on the next HWBB agenda subject to Cllr Halden's approval. | Action: CA |
| 3. | <p>Better Care Fund Plan</p> <p>CA updated the Group that Thurrock's BCF had now been approved and a letter of confirmation had been received on the 13th July.</p> <p>CS had updated the S75 agreement accordingly. A report would now need to go to Cabinet in September in order to get agreement to a waiver to allow the Council to enter in to NHS contracts. RH wanted to be sure that this was what was required and would have a separate meeting with the Council's legal team.</p> <p>AO said that all areas were required to resubmit the technical part of the BCF Plan by the 19th August. The final Plan would be brought to the next ICE for noting alongside the Q1 assurance return.</p> <p>It was agreed that final sign-off of the technical Plan would be delegated to AO and IV.</p> <p>Monitoring arrangements for the implementation of the BCF were discussed and agreed. This included:</p> <ul style="list-style-type: none"> • Highlight report to be brought to each meeting; • Finance report; and • Performance report. <p>Additionally, ICE agreed that a 'deep dive' on projects within each scheme would be carried out at each meeting – starting with scheme 1.</p> <p>Finance – AO confirmed that the CCG would pay NELFT directly until the Council had the authority to pay. This was likely to be after Cabinet had met in September. Budgetary statements would be provided to ICE as of the next meeting.</p> <p>In relation to last year's payment for performance monies (£664,303), it was confirmed that the Care Home pilot would run for 21 months (£192,500). The hypertension scheme (£100,000) was for three years – but it was unclear as to whether the amount provided was to be spread over the 3 years. IW would confirm. The amount awarded to the Falls project needed to be clarified and signed off at the next ICE. AO would confirm.</p> <p>AO said that there were two contracts for Alzheimer's UK, but that only 1 had been accounted for. It was agreed that the outstanding contract would be brought within the BCF for 2016/17 – this would cover the amount for both 2015/16 and 2016/17 = £38k. This would be financed from the balance of the brought forward funds.</p> | <p>Action: RH</p> <p>Action: AO/IV</p> <p>Action: AO/JF</p> <p>Action: IW</p> <p>Action: AO</p> |
| 4. | <p>Living Well in Thurrock</p> <p>CA proposed that the ICE act as the Living Well in Thurrock Programme's Programme Board. This would mean the</p> | |

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| | <p>timing of the ICE meetings being extended slightly (by 30 minutes). Membership of the ICE would not change, but there might be different attendees invited to the ICE meeting to report back on elements of the LWIT programme.</p> <p>ICE ToR would be altered to take account of the change.</p> <p>MA commented that there were important links with FTIT which would also be included on the ICE agenda.</p> | Action: CA |
| 5. | Five Year Forward View for Mental Health | |
| | Not discussed – previously discussed at the HWBB Executive Committee | |
| 6. | Any Other Business | |
| | <p>RH informed the Group that a report from the CQC on the Council's Joint Reablement Team was expected imminently. Improvements were likely to be required, caused by the additional pressure placed on the service by the Council having to bring homecare contracts back in house.</p> <p>An action plan would be put in place alongside an independent review of the service.</p> | |