ESBT STRATEGIC COMMISSIONING BOARD

MINUTES of a meeting of the ESBT Strategic Commissioning Board held at County Hall, Lewes on 9 March 2018.

PRESENT Councillors David Elkin, Keith Glazier (Chair) and Sylvia Tidy;

Dr Susan Rae, Dr Martin Writer, Barbara Beaton and

Julia Rudrum

ALSO PRESENT Keith Hinkley, Director of Adult Social Care and Health

Cynthia Lyons, Acting Director of Public Health

Jessica Britton, Chief Operating Officer, EHS & HR CCG John O'Sullivan, Chief Finance Officer, EHS & HR CCG Vicky Smith, Accountable Care Strategic Development

Manager

Bianca Byrne, Acting Head of Policy & Strategic Development

30 MINUTES OF THE PREVIOUS MEETING

30.1 The minutes of the previous meeting were agreed.

31 APOLOGIES FOR ABSENCE

31.1 Apologies for absence were received from Cllr Carl Maynard.

32 DISCLOSURE OF INTERESTS

32.1 There were none.

33 URGENT ITEMS

33.1 There were none.

34 QUESTIONS FROM MEMBERS OF THE PUBLIC

34.1 There were none.

35 CQC AREA REVIEW REPORT AND ACTION PLAN

- 35.1 The Board considered a report on the Care Quality Commission's (CQC) Local Area Review Report and the implementation of an Action Plan developed in response to it.
- 35.2 In response to questions from the Board, officers made the following key points:
 - The CQC has identified as an area of improvement the need for an up-to-date
 Comprehensive Needs Assessment for older people to form part of the East Sussex

Joint Strategic Needs Assessment (JSNA). This will be actioned, however, the existing JSNA does include the relevant information in relation to older people but it is presented differently. The approach currently taken is to produce JSNA Indicator Scorecards based on CCG or Local Authority areas that contain a wide range of indicators for that area including those for older people, as well as for population, income, education, housing, crime and deprivation.

- The East Sussex Health and Wellbeing Board (HWB) will be responsible for ongoing oversight of the Action Plan. A lot of the work identified in the Action Plan is already underway and will be undertaken using existing resources, however, some additional capacity will be needed in order to manage the overall delivery of the Action Plan.
- 35.3 The Chair thanked all those who were involved in the CQC inspection, which had published a report that was better than could have been expected. The Chair welcomed the fact that the CQC recognised the good work being delivered in East Sussex so far and was reassured that officers would continue to deliver services despite the enormously challenging financial situation. He believed that the Action Plan was deliverable and that the HWB would monitor its implementation.
- 35.4 The Board RESOLVED to note the report detailing the outcomes of the CQC Local Area Review report and corresponding action plan.

36 <u>EAST SUSSEX BETTER TOGETHER FINANCIAL POSITION AND PROGRESS WITH</u> THE STRATEGIC INVESTMENT PLAN

- 36.1 The Board considered a report providing an update on the ESBT financial position and progress with the Strategic Investment Plan (SIP).
- 36.2 In response to questions from the Board, officers made the following key points:
 - Work is ongoing to identify each ESBT organisations' cost reduction plans and service redesign plans. This is being done to avoid duplication, and to potentially develop a single cost reduction plan and single service redesign plan across ESBT.
 - One of the key learning points from the 2017/18 test bed year has been the difficulty in attracting additional staff to ESBT for the newly developed roles and the tendency instead for staff to move from different areas of the existing workforce, creating gaps elsewhere. Work will be undertaken to mitigate against this happening where possible during 2018/19.
 - There is now a better understanding of the support needed to develop the ESBT Locality Teams. Central support team will now assist operational managers in developing the teams during 2018/19.
 - The CQC was complementary about the ESBT community resilience workstream, for example, the development of community link workers, who make contact with and support local community and voluntary organisations in order to develop the health and wellbeing resilience in their communities. The possibility of ensuring link workers contact town and parish councils will be explored.
 - NHS Improvement (NHSI) and NHS England (NHSE) have requested that the CCGs demonstrate that they have identified all possible efficiency savings. This is to enable the contract discussions for 2018/19 to begin with the CCGs presenting the best possible

financial position that is still realistic and deliverable. From this point discussions will progress about how the CCGs can achieve its designated control total.

- The Sussex and East Surrey Sustainability and Transformation Partnership (STP) could
 potentially provide a strengthened collaborative position with which to engage in contract
 discussions with NHSI and NHSE because it includes several other CCGs with similar
 financial issues.
- ESBT was forecast to overspend on prescribing by £850k by the end of the year. This is
 due to the national lack of availability of cheaper medicine stock resulting in ESBT
 paying more for prescribing medicines than was previously the case. If this was not the
 case ESBT would have achieved an efficiency of £5.3m through new initiatives such as
 the medicines management teams that visit care homes and GP practices to assist with
 prescribing and electronic repeat prescriptions. The total expenditure on prescribing is
 around £70m.

36.3 The Board RESOLVED to:

- 1. note the East Sussex Better Together (ESBT) system financial position and scale of forecast outturn variance;
- 2. note that we are working closely with our NHS regulators, NHS England (NHSE) and NHS Improvement (NHSI) to ensure there is complete transparency and understanding of the position and mitigating plans in the remainder of 2017/18 and into 2018/19; and
- 3. endorse the recovery actions being developed and implemented collaboratively through the ESBT structures, including the financial planning framework for 2018/19

37 ESBT ALLIANCE NEW MODEL OF CARE PROGRESS UPDATE

- 37.1 The Board considered an update on the progress with further developing the ESBT Alliance and integrated strategic commissioning arrangements for 2018/19 onwards.
- 37.2 In response to questions from the Board, officers made the following key points:
 - The aims of ESBT are aligned with those of the STP. The STP includes members of ESBT and it is firmly committed to the model of care where the majority of integrated health and social care is delivered through the place-based plans such as ESBT. STPwide workstreams will include those workstreams that are more effectively delivered across a wider area such as specialist hospital services, primary care workforce, and mental health.
 - The significant financial challenge will likely impact on the assurance process of the CCGs, which is undertaken annually with NHSE. This assumption is based on what has happened elsewhere in the country to CCGs that have faced similar financial deterioration. The CCGs expect to understand this impact over the coming weeks and will be clearer about the position by the time of the next SCB meeting.
 - The STP Executive Board is due to consider a report on 3 April about what future governance arrangements could look like and how the STP will be organised in relation to place based plans.

37.3 The Board RESOLVED to:

 Note the shared learning from the test-bed year of the ESBT Alliance, and the implications for strengthened governance and leadership of the ESBT Alliance to deliver improvements to quality and finances in 2018/19, focussing initially on integrating commissioning for April 2018;

- 2. Note the current review of ESBT Alliance governance and the proposed review of the Health and Wellbeing Board and place-based governance (as recommended in the CQC Local System Review);
- Note the proposed arrangements for East Sussex County Council (ESCC), Eastbourne Hailsham Seaford Clinical Commissioning Group (EHS CCG) and Hastings and Rother Clinical Commissioning Group (HR CCG) to lead health and social care commissioning and transformation for our ESBT system together, and manage financial planning as a single process;
- 4. Note the progress being made to develop the business case for our future ESBT integrated care provider model to achieve a sustainable health and care system by 2020/21, and the plans to engage with our key stakeholders.

38 ESBT OUTCOMES FRAMEWORK PROGRESS UPDATE

- 38.1 The Board considered a report providing an update on progress with development of the evolving ESBT Alliance Outcomes Framework, available data for quarter three of 2017/18, and the proposed refreshed Outcomes Framework for 2018/19.
- 38.2 In response to guestions from the Board, officers made the following key points:
 - The outcomes chosen are ones that demonstrate that ESBT is adding value as a
 partnership and the Outcomes Framework is beginning to be used by commissioners in
 their work across the system.
 - The Healthy Start in Life outcome includes a range of sub-indicators that sit below it. As
 a system a lot of work is being done in reducing excess weight in children by working
 with schools and nurseries around a programme focussing on diet and exercise that
 involves working with staff and parents.
- 38.3 The Board RESOLVED to:
 - 1. note progress made with developing, refining and reporting performance against the draft ESBT Alliance Outcomes Framework;
 - 2. note available performance data for quarter three of 2017/18
 - 3. agree the refreshed ESBT Alliance Outcomes Framework for 2018/19; and
 - 4. note plans for further development in 2018/19.

39 STRATEGIC COMMISSIONING BOARD WORK PROGRAMME

- 39.1 The Board considered its future work programme.
- 39.2 The Board RESOLVED to note the report.

The meeting ended at 11.20 am.

Councillor Keith Glazier Chair