Agenda Item 11i

Calderdale and Huddersfield Health and Social Care Strategic Review
Executive Steering Group

Notes of Meeting 30th May 2013
10.00 – 11.30 am

Bankfield Room, Dean Clough, Halifax

Present:
- Dr Matt Walsh (Chair) (MW) Calderdale CCG
- Carol McKenna (CM) Greater Huddersfield CCG
- Merran McCrae (MM) Calderdale MC
- Owen Williams (OW) Calderdale & Huddersfield NHS Trust
- Judith Hooper (JH) Kirklees MC
- Anna Basford (AB) SWYPFT

In attendance:
- Martin Cresswell (MC) Comms & Engagement
- Chris Green (CG) Programme Office
- Dr Paul Wilding (PW) Programme Office
- Brenda Powell Programme Office (minutes)

CHESG/14/01 Apologies for absence:
- Robert Flack Locala CIC
- Adrian Lythgo Kirklees MC

CHESG/14/02 Welcome and introductions
The Executive Steering Group (ESG) is not a decision making body, and whilst Locala CIC are not present, quoracy is not an issue.

CHESG/14/03 a) Notes from the last meeting 23rd April 2013
These were agreed as a true and accurate record of the meeting

b) Action Log
The action log was reviewed and updated:
- Items 3, 26 and 27 have been closed

CHESG/14/04 Programme Director’s Update
The key items in the update are the outline business case sign off, future steps for the finance group, developing proposals for the working groups including IT, workforce and estates, agree nominated leads of future working groups and confirm the key roles of the data and analytics, solutions architect, change & implementation leads.

The current rating is unchanged at amber/green. At this point MW asked for the group’s perspective now and to think about this at the end of the meeting. There was a collective agreement that the level of risk associated with the programme feels higher than amber/green and that a rating of amber/red was more appropriate. Specifically, concerns were raised about the following:
- Programme Office capacity and capability moving forward
- The size of the remaining financial gap
- The risk of further financial stringency being imposed centrally.

The ESG AGREED the recommendations for decision

CHESG/14/05 Outline Business Case update
An updated version was re-issued; this is a working document which will be finalised following further discussions. Concerns were raised that the financial business case was not enough, with the ESG needing to give a clear mandate of the next steps.
The headline figure of £19 million does not include QIPP or Interserve; this has highlighted the issues of what is a realistic target. The Director of Finance could give more clarity on this figure. CG confirmed this figure has been double checked and the savings described in the business case do not overlap with anything else.

MW stated that the NHS Calderdale position on QIPP remains challenged, and that there was an expectation that the gap would be filled at least in part by early implementation of Strategic review initiatives.

JH was concerned the finance figures do not include the social care or local authority risks. It was explained the Finance Directors had discussed the need to get a collaborative view and the finance business case would include all organisations. There was confusion over the figures in the business case and in the appendix; CG explained this was measuring incremental against aggregate savings.

The importance of pace and the switch to delivery mode was emphasised. There is an expectation that as the programme shifts its focus towards the new themes, new opportunities will emerge. Now is the time to move forward and implement those schemes which we know we can deliver.

. One of the key themes for change was self-management; there was a concern this is not visible enough in the proposed working groups.

The next key stage will be the working groups; outcomes will include what the changes would be, which staff will work differently and how this will affect patients.

Whilst there are some good ideas with the themes, they do not feel big enough and it was suggested horizon scanning should be built in. There could be work on-going nationally that the programme could build on. JH talked about the self-care programme and framework and Kirklees Council plans to commission an IT system that will build on their Connect2Support network, this programme will be scoped out to include other providers. Locala are looking at a cut of point for the current ways of working and will have a set date for working practices to change.

**ACTION: JH to circulate the self-care framework**

Clinicians previously involved in care streams feel they have a lack of knowledge about the work they have done going forward. The challenge now is look at what is stopping this work, what the ESG’s role is and how they can start the changes happen. AB was concerned about some issues such as funding flow and the use of technology; MW would like the Programme Board to inform the group of the blockages stopping these changes, the Board could also do a sense check on any draft mandates.

**ACTION: Programme Board to report any blockages back to the ESG**

CG closed the discussion by suggesting the group did not invest a lot of time on developing the business case further at this stage and that instead, the finance group will work on the finance analysis and bring a report to the next meeting.

**ACTION: Finance business case to be agenda item at next meeting**

CHESG/14/06  Locala Proposals
Due to apologies this will be covered at the next meeting.
**Update on working groups**

The ESG were asked to agree the nominations for the leads of each Working Group, these were nominated by their organisations along with nomination for the wider group membership.

The working group leads had an initial meeting and agreed to produce a valid work plan and to look at both business as usual and any ‘big ticket’ items; it was suggested these will be taken to the Programme Board on the 11th June 2013. There were concerns the working groups do not have enough time to produce proposals. It was agreed that the ESG should advise the programme board to ensure that the new theme groups are given the appropriate time and support to deliver working proposals, and without wanting to reduce pace, the ESG recognised that all involved are working under considerable pressure.

The working groups will look at the key themes and cross boundary working; this will raise issues with the footprints for each piece of work cutting across different boundaries such as integrated commissioning.

**ACTION: CM and MM to meet with Catherine Riley and Iain Baines to discuss integration across boundaries**

The ESG AGREED the nominations

**Update on Programme Organisation**

PW and Ed Parker (PA Consulting) have completed a piece of work looking at the work of the care stream and the next stages.

Data and analytics – work is on-going, but it is felt this may not be one of their priorities; the recommendation is for a lead person to sit alongside the finance group.

Change and implementation – the leads would have to understand the changes and be able to take these back into their organisations. As the working groups become established and firm up proposals this could show if the correct people are involved.

MW has looked at the Programme Management Office (PMO) capability; there has been some difficult conversation with the Commissioning Support Unit about the funding implications for their support for this programme. A new Programme Manager is now in place; to build on this the ESG need to thinking about putting people in the roles needed for the programme.

It is critical the PMO has the ability to support the working groups and governance meetings. MW confirmed that he had commitment from CG that he would continue to support the programme as we established new PMO arrangements through the next cycle.

THE ESG discussed the financing of the PMO; The CCGs have made significant financial contributions to the programme, but the context now is different, and with stringent running cost allocations, any flexibility was now at an end. At present the CCG’s are funding this though there are now financial constraints with this. MM talked about the tensions operating within her organisation, and the need for careful handling of any contribution, when the context in relation to services was one of cuts.

MW reminded ESG about the recommendations of the Gateway Review, and specifically the advice to bring this programme into ‘business as usual’. All organisations were now operating under financial pressure, and the notion of major additional funding to buy in external support was not appropriate.
MW suggested resources could be people rather than finance, if they have members of staff that do this as a day job it would help. It was recognised that each organisation is in a different situation at the moment and any offers would be appreciated. A report to give a position statement on the finances available to support the programme, current spend and the PMO capability would be produced on the back of discussions over the following week to 10 days.

**ACTION:** MW to produce a position statement

The ESG AGREED the decisions sought.

**CHESG/14/09 National Collaboration for Integrated Care and Support**

This will be a central resource that organisations can use, they are asking for expressions of interest from organisations that want to take part in this.

Following discussions it was AGREED the expression of interest is submitted, with clarity of what we are asking for. AB volunteered to help MC to complete this along with the Integrated Service working group.

**CHESG/14/10 Any Other Business**

CM - Urgent Care Recovery Action Plan: following a huge amount of work over the last week an Urgent Care Plan has been produced and circulated to the West Yorkshire Urgent Care. This is the first time there has been involvement with the Area Team in an assurance mode. The initial version has been updated and circulated to everyone who has contributed. The Area Team have asked for Chief Executive to have sight of this and to sign it off with the final version presented at the next Urgent Care Board.

**ACTION:** The updated version of the Urgent Care Recovery Action Plan to be circulated to the ESG

OW – The NHS Commissioning Board have produced a paper on the Case for Change, when this is circulated the ESG will need to have the opportunity to give this some consideration. It is not politically driven but will be a ‘tell it how it is’ paper and may have an impact on the work of this programme.

**ACTION:** Case for Change paper to be an agenda item for next ESG

**Date and time of next meeting:**

Tuesday 25th June 2013, 2.00 – 3.30pm,
Stewart Room, Broad Lea House, Huddersfield