

North East London Strategic Planning Board
Action Log

Friday 29th April 2016

7 Kirkdale Kirkdale House, meeting room A,B and C Boardroom

Attendees:

Jane Milligan (JM) – Chair	Chief Officer, Tower Hamlets CCG - NEL STP Lead
Steve Gilvin (SG)	Chief Officer, Newham CCG
Cheryl Coppel (CC)	Chief Executive, London Borough of Havering - NEL STP local Authority Lead
Alwen Williams (AW),	Chief Executive, Barts Health
Meradin Peachey (MP)	Director of Public Health, Newham - STP Public Health Lead
Tara-Lee Baohm (TLB)	Deputy Director of Strategic Delivery, BHR CCGs
David Maher (DM)	Deputy Chief Officer & Programme Director, C&H
Nigel Turner (NT)	NEL STP Finance Lead
Sam Everington (SE)	CCG Chair, Tower Hamlets CCG - NEL STP Clinical Lead
Hilary Ross (HR)	UCLP
Tom Travers (TT)	Chief Finance Officer, BHR
Fiona Peskett (FP)	BHRUT
Matthew Hopkins (MH)	Chief Executive, BHRUT NEL STP Provider Lead
Lee Outhwaite (LO)	NHS Improvement
Tracey Fletcher (TF)	Chief Executive, HUH
Nigel Burgess (NB)	Health Education England
Ceri Jacobs (CJ)	NEL Area Director, NHS England
Oliver Excell (OE)	NEL STP PMO Manager
Joy Ogbonna (JO)	NEL STP PMO Support
Adam Mills (AM)	NEL STP PMO Support
Thomas Carnegie (TC)	NEL STP PMO Support

Apologies:

Julian Nettel (JL)	Independent Facilitator
Jacqui VanRossum (JVR)	NELFT
Grainne Siggins (GS)	Director of Adult Social Care, London Borough of Newham
Neil Kennett-Brown (NKB)	Director of Transformation, WEL CCGs
Jane Gateley (JG)	Director of Strategic Delivery, BHR CCGs
Steve Russell (SR)	BHRUT
Terry Huff (TH)	Chief Officer, Waltham Forest CCG - NEL STP CCG Lead
Conor Burke (CB)	Chief Officer, BHR CCGs
Paul Haigh (PH)	Chief Officer, City & Hackney CCG
Clare Highton (CH)	CCG Chair, City & Hackney CCG NEL Clinical Senate Chair
Robert Dolan (RD)	Chief Executive, ELFT
Russ Platt (RP)	Specialist Commissioning, NHS England
John Brouder (JB)	Chief Executive, NELFT

Agenda Item/Summary	Lead	Outcome/Update	RAG
<p>1. Welcome & Introductions JM started the meeting with a brief introduction from members of the group. She welcomed colleagues to the meeting and noted the apologies.</p> <p>Objective of meeting JM noted that the meeting will be focused on the proposed workstreams and also outline what we take forward to the meeting scheduled for the 3rd May with Simon Stevens and Jim Mackey.</p>	JM		
<p>2. Minutes and Matters arising Minutes and actions from the last meeting held on the 24th March were reviewed and content was agreed to be accurate. Most of the actions were noted to be complete and JM gave an update on outstanding actions.</p> <p>Terms of Reference (ToR): The ToR will continue to be reviewed regularly to ensure we have the right membership and focus. JM noted the independent facilitator in the person of Julian Nettel will be joining the team in future board meetings.</p> <p>Update on resources for Local Authority- JM reported Helena Pugh started with the PMO team as the Local Authority STP Engagement lead.</p> <p>More work is required for specialised commissioning from NHS England and the outstanding actions to be picked up on the agenda.</p> <p>The matters arising were on the agenda.</p>			

<p>3. General programme update</p> <p>AM gave a brief update on the progress of the programme to date highlighting activities completed and upcoming activities, key milestones, risk and issues.</p> <p>Points made from the discussion on the update included:</p> <ul style="list-style-type: none"> • Concern on lack of sign off from the Local Authority (LA) in the governance pack presented. CC asked why Local Authorities were not included in the formal sign off process JM noted that this is in response to NHS E guidance which indicates that CCG GBs and Trust Boards are formal signatories of the plan. However, Local Authorities will be actively engaged and involved in the development of the STP (and a Local Authority Engagement Lead has been appointed to facilitate this). • JM noted that there has been engagement with the LA authorities and the CCGs and Providers with upcoming engagement events around May with chairs across CCGs and Providers. • MH suggested in the stakeholder mapping on the comms plan it would be good for the team to understand the politics of the H&WBB when planning the engagement. The proposition will be fed to Zoe Anderson the PMO lead. • SG recommended we need to focus at this stage on making sure that what we are doing is a local shared commissioning approach that takes into account what CCGs, providers and local authorities are trying to achieve. 			<p>In progress</p>
--	--	--	--------------------

<p>4. Governance – Proposition for June submission sign off</p> <p>TLB gave a verbal update on the STP submission sign off timelines. The key points noted were:</p> <ul style="list-style-type: none"> • Mapping of CCG/Board arrangements identified it was not viable to take the June submission through these forums for sign off. • There has been engagement with governance leads to agree a process for delegated authority with a view that the submission in June is a draft and subject to formal sign off. • The PMO team has been working with CCG and Trust governance leads to identify appropriate delegated sign off for the June STP submission. • It was noted that the slide pack needed amendment for both Redbridge and Havering. AM to make amendments on membership to the slides for Redbridge and Havering. <p>The group noted recent discussions on the change in delivery timelines for STP submission. CJ mentioned that this will be clearer after the 3rd May stocktake meeting with Simon Stevens.</p> <p>Tracey Fletcher asked whether the June STP submission should be signed off through public meetings of the CCG GBs and Trust Boards.</p> <p>TLB noted that since some organisations did not have public meetings within the planned sign off window, to ensure consistency across the patch it had been proposed that the June submission would be signed off in private noting that the final STP document would be signed off in public through the respective CCG GBs and Trust Boards.</p> <p>Tracey Fletcher highlighted that it would be helpful to have a guarantee date when an early draft of the STP would be available so this could be shared with the CCG GBs and Trust Boards.</p> <p>JM suggested we have a meeting with Healthwatch to brief them on progress update on the process.</p> <p>SE made suggestions to have a Q&A in place. TLB noted that a local Q&A has been developed as a component of the comms plan. NHSE developing comms/Q&A group discussed this needed to target: GB/Board members; patients; other staff. CJ to action</p>	<p>AM</p> <p>CJ</p> <p>PMO team</p>	<p>AM to make amendments on membership to the slides for Redbridge and Havering.</p> <p>Update of the stocktake meeting will be fed back to the group.</p> <p>Contact Healthwatch and organise a meeting with STP leads</p>	<p>Complete</p> <p>In progress</p> <p>In progress</p>
--	-------------------------------------	--	--

Items Discussed/ Actions	Lead	Outcome/Update	RAG
<p>5. Future of Clinical networks in London – Letter from Andy Mitchell’s office</p> <p>JM gave a verbal update of the letter received and advised further information still to come.</p>			
<p>6. Finance and activity Report</p> <p>NT gave a verbal update on finance report.</p> <ul style="list-style-type: none"> The consolidation approach has been used for the April 15th submission and the use of existing template, e.g. for the Monitor’s LTFM for providers and the 2016/17 operating plan for commissioners. He raised concerns on capabilities within the organisation, particularly Providers with a view that the National ask has not been filtered to the people or individuals doing the work. It was agreed that colleagues in the room communicate to their team on what the National ask is and raise if extra resource is required. He met with PwC to understand how we can incorporate their model that they are developing for BHR’s ACO project to avoid duplication of effort and advised the plan needs to be done with proper forecasting of the planning model. <p>The group noted that it would be best to understand how we are building in the specialised and direct commissioning ask into the plan at this stage.</p> <p>C J to check if direct commissioning is producing any guidance</p> <p>There was uncertainty on how we get a consistent view of what the drivers are for the gap analysis. JM to liaise with Tom/Henry to talk through and align the gap analysis.</p>			
<p>7. Proposed workstreams</p> <p>OE presented the proposed workstream papers with the aim to agree and sign off the workstream.</p> <p>Key points discussed included:</p> <ul style="list-style-type: none"> Separation of primary care and the whole system prevention might pose a challenge. Clarity needs to be made if the tabled workstreams aligns with what has been agreed with governing bodies on the 5 touch point which are Maternity, Urgent care, cancer, mental health and KGH ED changes. Primary care should be changed to “Primary Prevention” as we are not focusing on primary care. The workstreams should be aligned to the strategic 	<p>OE</p>	<p>OE to refine the workstream structure to align with the key areas to address the financial, health and wellbeing, and care and quality gaps</p> <p>PMO to coordinate a series of workshops with provider and commissioner leads to agree key areas of focus and plans to address</p>	

<p>financial gap to define what we need to do at the NEL wide level.</p> <ul style="list-style-type: none"> • CC proposed holding two workshops with commissioner and provider leads to agree the key areas of focus at a NEL level and plans to address these over the next 5 years. <p>It was agreed to refine our approach on the workstream with some high level key areas</p>			
<p>9. Risks and Issues</p> <p>OE provided an overview of the key risks in the risk log and highlighted that the key risk to the 30th June submission was the lack of clear guidance from NHSE on the format and content of the submission</p> <p>CJ noted that NHS E is not planning to release any further detailed guidance regarding the 30th June submission. Therefore it is for local areas to develop their STP plans to address the key local issues.</p> <p>Alwen Williams noted that NEL should drive the development of the STP rather than looking to NHS E for guidance.</p>	<p>OE</p>	<p>The risk and issues log to be updated</p>	<p>In Progress</p>
<p>10. 3rd May Stocktake: systems asks to national team and STP resourcing</p> <p>The stocktake meeting on the 3rd will be with Simon Stevens and Jim Mackey. JM however noted that the discussions from the STP will be taken to the meeting, e.g.</p> <ul style="list-style-type: none"> • Estate challenges • Population growth • Highlights on the management of challenges on the present resources • Delivery model • Specialised commissioning with opportunity to ask NHS E what the potential freedom is to manage the capital issue. • Payment mechanism on what has been achieved and what we need to do. <p>HR highlighted some key pointers for the meeting:</p> <ul style="list-style-type: none"> • Describing leadership/government • Having 3 or 4 game changing areas • Articulate what would be looked differently in 16/17 • What the risks are locally? 	<p>JM</p>	<p>JM to feedback update from the stock take meeting to the group</p>	<p>In Progress</p>
<p>11. AOB</p> <p>None was raised.</p>			
<p>Next Meeting: 26th May at Boardroom A/B/C, Kirkdale house, 7 Kirkdale house Waltham Forest CCG from 11.30am – 1.30pm</p>			

Future meeting date: 23 rd June			
--	--	--	--