

Minutes from the Health and Well-Being Board – Financial Planning Group
Thursday 7th August 2014
Edgware Hospital
4pm – 5.30pm

Present:

(KK) Kate Kennally, Strategic Director for Communities, London Borough of Barnet (LBB)
 (AH) Andrew Harrington (Chair), Director of Transformation, Barnet Clinical Commissioning Group (CCG)
 (MOD) Maria O'Dwyer, Director for Integrated Commissioning, Barnet CCG
 (DW) Dawn Wakeling, Adults and Communities Director, LBB
 (HMG) Hugh McGarel-Groves, Chief Finance Officer, Barnet CCG

In attendance:

(KA) Karen Ahmed, Later Life Lead Commissioner, LBB
 (CM) Claire Mundle, Policy & Commissioning Advisor, LBB
 (SM) Simon Mendy, Head of PMO, Barnet CCG
 (PR) Penny Richardson, Interim Head of Service – Inclusion and Skills, LBB

Apologies:

(JH) John Hooton, Deputy Chief Operating Officer, LBB
 (NF) Nicola Francis, Family Services Director, LBB
 (PC) Peter Coles, Chief Operating Officer, Barnet CCG

	ITEM	ACTION
9.	<p>SEND reforms</p> <p>Penny Richardson (PR) briefed the group on the main elements of the SEND reforms introduced by the Children and Families Act (2014).</p> <p>PR advised the group that the Local Accountability annex provided the group with useful information about the various responsibilities agencies have in the reformed system.</p> <p>PR talked through the outstanding actions that needed to be completed in Barnet in order to ensure the borough is compliant with the new legislation. She explained that there are a few key areas that the group needed to be aware of:</p> <ul style="list-style-type: none"> • There is a need to strengthen the technical skill set of SEN assessors, nurse assessors and school staff. Whilst central government has provided resources to cover this skills gap in the short term, there is uncertainty over the longer term funding requirements to ensure the right level of skilled professionals support implementation of these reforms • The Council are working with Contact A Family to ensure that the right parent engagement and support arrangement are in place • The Council will be able to launch their Local Offer in September, but further 	

	<p>work could be beneficial to ensure that the site is comprehensive</p> <ul style="list-style-type: none"> • Engagement with health and social care staff has not been as widespread as the team would have hoped. Team meetings are now being targeted • Providers will now have a duty to contribute to the conversion of statements into EHC plans, and with the EHC assessment and planning process. PR advised that commissioners should write to their providers to set out the expectations for training and development in order to meet new statutory duties <p>ACTION: PR and MO'D to work with Howard Ford to draft a letter to providers setting out commissioner expectations about how they will meet their statutory duties, during August 2014</p> <p>ACTION: PR and MO'D to identify ways to strengthen working across teams to meet the joint working requirements of the Children and Families Act</p> <p>ACTION: CCG to ensure the agenda is scheduled onto the CCG Board forward plan</p> <p>KK informed the group of feedback following the recent monitoring visit from the Department of Education, which aimed to assess state of readiness for implementation of the reforms from September 2014.</p> <p>The visit identified the following areas for improvement:</p> <ol style="list-style-type: none"> 1) Urgently developing a plan setting out how Barnet will convert statements into EHC plans. KK stressed the complexity of this task, and the need to account for e.g. existing Continuing Healthcare arrangements for adults up to 25 years old 2) Urgently reviewing plans to monitor case work, and embedding the concept of a lead professional 3) Urgently review the future of commissioning learning disability services <p>KK stressed that there was more work to do before Barnet could take a decision on the funding and working arrangements that would support a sustainable system post-reforms. In future it should be possible to take a single view on resources that are used to support children with SEND and their families/ carers.</p> <p>KK explained that there needed to be clear connections from the Joint Commissioning Unit to the Financial Planning Group so the group could take a view on the resource requirements across education, health and social care. The responsibility of the finance group, on behalf of HWBB, is to seek reassurance that the process of implementing the reforms in being managed effectively.</p> <p>PR explained that the resources to support implementation to date have been spent on setting up the local offer website; and working with people to help them understand the new system via stakeholder groups, through a process of co-production. PR explained that decision taken over how these resources should be spent had been determined through the SEND project board. The group were not clear if there was adequate representation from the CCG on this Board.</p> <p>Action: MO'D to confirm that the CCG is properly represented through the governance structure for the programme.</p> <p>The group requested an update at the next financial planning group meeting about further barriers to progress that the group can help to unlock.</p> <p>Action: PR & MO'D to produce paper for the next Financial Planning Group</p>	<p>PR/ MO'D</p> <p>PR/ MO'D</p> <p>MO'D</p> <p>MO'D</p> <p>MO'D</p> <p>PR & MO'D</p>
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	meeting	
2.	<p>Minutes of the last meeting</p> <p>The group agreed the minutes of the previous meeting as a correct record, noting that the date of the next meeting recorded in the previous minutes was not upheld, and delayed by 1 month.</p> <p>The group then reviewed the outstanding actions identified in the previous set of minutes:</p> <ul style="list-style-type: none"> There is still work to be done to be confident about the benefits arising from S256 projects. It was agreed that the governance around determining whether pilots (ie OPIC) continues should be via the HSC operational group and then through to the HWB financial planning group, who will ensure the work fits into the vision set out in the full business case for integrated care Action: DW/MO'D to ensure this happens for future projects, and that the evaluation report of the OPIC pilot are reported at the financial planning group (NB. The impact on social care services needs to be explicit in this evaluation) MO'D will take the rapid response and single point of access schedules through the CCG's audit committee shortly. Action: MO'D to confirm to the group when this is complete The group confirmed the process for signing off the full business case (FBC) for integrated care: <ul style="list-style-type: none"> Sign-off of the FBC will occur at the CCG Board (special meeting to be arranged) and the Council's Adult & Safeguarding Committee on 2nd October The FBC will go to HWBB for review on the 18th September HWBB will also sign off the BCF submission on the 18th September The financial planning group meeting on the 4th September will be the final review point for the FBC and BCF submission ahead of HWBB on the 18th September DW and MO'D are the responsible leads for delivering the final FBC and BCF submission MO'D confirmed that plans to review mental health services will be taken forward through the mental health transformation board 	<p>DW/ MO'D</p> <p>MO'D</p>
3.	<p>Terms of Reference</p> <p>The group noted the Terms of Reference, which had been signed off by the HWBB.</p> <p>Action: KK and AH to discuss whether more frequent meetings would be helpful, based on the current workload of the group.</p>	KK/AH
4.	<p>Section 256 spend</p> <p>MO'D and DW presented the proposed S256 spend for 14/15, that is now largely agreed. The majority of investments relate to delivery of the Better Care Fund/ 5-tier model.</p>	

	<p>The group heard that S256 underspends can be rolled-forward into the coming financial year, but that the group should not plan for an underspend. Unspent funds could be allocated against the priorities set out in the full business case.</p> <p>The S256 spend will be formally agreed by HWBB in September, appearing as a schedule in the minutes for the financial planning group. SCR and integrated teams reflected in the reserve- tier 1 and 2 needs costing too.</p> <p>The group agreed to recommend the proposals to HWBB and to review S256 expenditure in line with the full business case.</p>	
5.	<p>CCG QIPP plans</p> <p>Simon Mendy (SM) presented the QIPP plans to the group. He explained that the main savings will be made in acute services, though there are plans to make significant savings in non-acute activity too. The biggest QIPP saving will be realised through demand management that curbs acute activity.</p> <p>SM noted the significant integration savings targets over the next 5 years. He explained that there are set savings targets in place for all QIPP schemes for this year and next year, and placeholders against the savings required in years 3-5.</p> <p>MO'D confirmed that there are already plans in place to meet the QIPP savings relating to integrated care, and that the full business case does not need to find ways of achieving these saving targets for the CCG.</p> <p>The group agreed that the FBC needed to specify and categorise the investments already being made (across S256/ social care funding/ QIPP investment/ primary care funding etc) and the initiatives that are already delivering savings- and map these investments and savings to the Tiers of the integrated care model. The group agreed that input from financial leads at the CCG and Council would be needed to support this work.</p> <p>Action: DW/ MO'D to ensure HMG, SM, JH are involved in this mapping exercise to support development of the FBC</p> <p>SM and HMG made a request to complete research on how the CCG should report QIPP/ BCF savings, and to come up with proposal to share with group. Action: SM/HMG</p>	<p>DW/ MO'D</p> <p>SM/ HMG</p>
6.	<p>5 tier integrated care model: business case / work programme products</p> <p>DW agreed to circulate her proposals for completing the full business case Action: DW</p> <p>DW explained to the group that the full business case was going to use the financial model developed by Capita to support the Manchester integrated care model.</p> <p>DW agreed to put the modelling team at Capita in touch with SM/HMG/ Krishna Chambar at the CCG. Action: DW</p>	<p>DW</p> <p>DW</p>
7.	<p>Integrated commissioning business case</p> <p>KK presented this work and explained its purpose was to establish the parameters of and potential for a wider commissioning partnership between the CGC and local authority, to drive integrated working. The work is exploring whether a third-party</p>	

	<p>could help the CCG/ local authority manage and mitigate some of the financial risks associated with greater joint working.</p> <p>KK explained that an outline business case for the work will be completed by Capita over the next week. She explained that a number of senior colleagues will meet on the 20th August to discuss the plans. On the 5th September, the proposals will be presented to NHS England.</p> <p>Action: AH to check CCG availability for both of these meetings.</p> <p>KK has written to the interim Accountable Officer at the CCG to explain the scope of the work, and spoken to the CCG's new Chief Operating Officer advising that this piece of work needs to link in with NHS England's review of future options for Barnet CCG.</p> <p>KK explained that this work is being steered through Partnership SCB, led by Andrew Travers (CEO of the local authority). She explained that the financial planning group should be aware of this work because the wider commissioning partnership might not allow for the BCF proposals to go ahead in future.</p> <p>HMG stressed that NHS England's review of the CCG will be complete by the end of October, and that this might affect the ability of the CCG to make big decisions about the future of partnership working.</p>	AH
8.	<p>BCF metrics</p> <p>The group agreed that this item had been superseded by the new BCF templates issued by NHS England.</p>	
9.	<p>Joint Commissioning Unit Review</p> <p>KA introduced the review, explaining that it followed on from a review of the JCU arrangements in 2013 that concluded that the JCU needed strengthening. KA explained that the review had consisted of in-depth interviews with 6 key people. She talked through her findings and pointed out that significant progress had been made in the JCU, but that further development of the team would be helpful.</p> <p>The group suggested that the group who had been interviewed should work with KA to unpick how the JCU could become a higher performing team, and co-design a series of recommendations.</p> <p>Action: KA to meet with MO'D and MK to talk through the review in detail Action: KA to meet with the individuals who were interviewed to devise a set of recommendations Action: KA, MO'D and MK to bring recommendations back to the October financial planning group meeting</p>	<p>KA KA KA/ MO'D/ MK</p>
10.	<p><u>AOB</u></p> <p>N/A</p>	
11.	<p><u>Date of the next meeting</u></p> <p>Thursday 4th September 2014, 2pm-4pm, Board Room, NLBP</p>	

