



**DRAFT Minutes from the Health and Well-Being Board – Financial Planning Group
Thursday 6th October 2014
North London Business Park
11.00am – 1.00pm**

Present:

(KK) Kate Kennally (Chair), Strategic Director for Communities, London Borough of Barnet (LBB)
 (DW) Dawn Wakeling, Adults and Communities Director, LBB
 (HMG) Hugh McGarel-Groves, Chief Finance Officer, Barnet CCG
 (PC) Peter Coles, Interim Chief Operating Officer, Barnet CCG
 (MOD) Maria O’Dwyer, Director for Integrated Commissioning, Barnet CCG

In attendance:

(KA) Karen Ahmed, Later Life Lead Commissioner, LBB
 (CM) Claire Mundle, Policy & Commissioning Advisor, LBB
 (RH) Ruth Hodson, Head of Finance, LBB
 (MK) Mathew Kendall, Assistant Director- Community and Wellbeing, LBB
 (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
 (AH) Andrew Harrington, Director of Transformation, Barnet Clinical Commissioning Group (CCG)

	ITEM	ACTION
1.	<p>Minutes of the last meeting</p> <p>The group noted that previous minutes had been presented to HWBB and so were no longer draft minutes</p>	
2.	<p>Action Log</p> <p>CM updated the group that the outstanding action to set up a check point meeting to review the savings assumptions in the Better Care Fund across with the savings plans of the CCG and LBB had not been needed in order to complete the work.</p>	
3.	<p>SEND reforms</p> <p>MOD confirmed to the group that she was not convinced Barnet has adequate arrangements in place to meet the requirements of the new legislation. She explained this had been due to gaps in the children’s commissioning team, and that she had now employed an interim manager before the substantive post can start (1st week of January). She suggested there might be a need to bring additional capacity in to accelerate this piece of work, and was completing an exercise to identify what additional costs this recruitment would be.</p>	

<p>KK asked PR for an update of where Barnet was in terms of implementing the legislation. PR gave the following summary of progress:</p> <ul style="list-style-type: none"> • There are well developed operational links around early support for 0-5 year olds, and statutory responsibility for the health service to notify the Council about those children that will need a statement • The statutory assessment process typically works well, though there is a shortfall in community paediatric support as reports from the team are often late, and the Council is held to account for this. • There is more commissioning to do around speech and language, and occupational therapies, which has been acknowledged by joint commissioners. Because this hasn't progressed, this is now costing money for the Council who are needing to spot purchase support • Under the new statutory process, advice requests should be copied to the local authority, but this is not yet happening • For young adults with SEND up to the age of 25, the team are not clear about where in the local system to go for health advice • There are more risks to both the Council and CCG around the 16-25y/o arena due to the changes required to commissioning arrangements for this group • There is a shared commitment to place young people locally in line with the Winterbourne Concordat • The CCG has some catching up to do to ensure Barnet can deliver joint assessments for Education, Health and Care (EHC) Plans, but this work is progressing • There has not yet been a review to assess the specialist support that the CCG might need to commission <p>PR stressed that work needed to happen to ensure Barnet was compliant with statutory timelines, for which the local area is held to account by central government.</p> <p>KK reflected that there were issues of compliance, issues of process and issues of commissioning at play.</p> <p>PR suggested that having robust accountability and monitoring arrangements in place would assist the process of resolving these issues. She presented reports from areas including Wakefield, who had produced MoUs for joint working arrangements to support delivery of the SEND reforms. She suggested it would be helpful to develop something similar for Barnet.</p> <p>PR also recommended that the CCG needed to create a separate health action plan to ensure that they were compliant against Part 3 of the legislation.</p> <p>MOD proposed that PRs recommendation for a new management group be changed to the establishment of a task and finish board who could bring the work up to speed quickly. KK suggested this group meets at least until the end of the financial year, and agrees the work programme that will be taken forward by the head of joint commissioning when they start in January 2015.</p> <p>MOD and PR were tasked with setting up the Task and Finish group. This group will need to receive assurance of compliance from the CCG, and their action plan, and will also need to work through process issues around EHC plans and how these are agreed, what their relation is across with Continuing Health Care, and</p>	<p>MOD/ PR</p>
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	<p>issues with the transition period that need to be sorted.</p> <p>KK recommended the group also needed to consider commissioning and purchasing priorities, including how this work sits alongside the Section 75 agreement for adults with learning disabilities; and the Section 75 agreement for speech and language therapies. The group will need to decide what schedules need to be in place (ie is one new overarching schedule created that covers EHC plans, access to CAMHS provision etc.?)</p> <p>KK requested 2 products be returned to this group from the Task and Finish Group: 1 (by December 2014) – an update relating to compliance (including action planning) / presentation of an MOU for decision making processes 1 (by Spring 2015) - Joint commissioning priorities for sign off</p> <p>KK advised that the CCG should be reporting compliance to its Governing Body as soon as possible.</p> <p>KK also advised that the CCG should update the update report that is going to the Governing Body using material from the paper produced by PR.</p>	<p>MOD/ PR MOD/ PR MOD MOD</p>
<p>4.</p>	<p>Mental Health Commissioning</p> <p>The group agreed that the Council and CCG needed a single approach to commissioning mental health services.</p> <p>MOD explained:</p> <ul style="list-style-type: none"> • That in May 2014, the CCG Board had had a discussion around Mental Health services and whether to continue with the current provider • A project group had subsequently been set up to look at a way forward, which is currently writing its report. This is due to come back to the CCG Governing Body on the 23rd October. • The local authority including public health has been involved in the project group. The group have commissioned a health economic impact assessment, benchmarking on finances, a population needs assessment and a review of what good practice models are • That most partners were not happy to take the proposals forward following health economic impact assessment. • The group continued to commissioning work on benchmarking, that is currently being written up, which has shown don't put enough money in mental health services • A highlight report from the needs assessment is being written • There has been stakeholder engagement with GPs and communities, supported by Healthwatch – feedback from this has gone to the Mental Health Trust and Transformation Board • It is unlikely at this stage that a whole new service will be re-commissioned • Barnet is collaborating with other CCG partners to explore options to move forward • The project group haven't finalised their conclusions and recommendations but all work is being fed into the Transformation Board <p>PC explained that the mental health trust is currently working with the TDA to assess the longer term viability of the Trust. He suggested that the work that had been done by the project group is still valuable as it helps define the current issues</p>	

<p>KK requested that when the paper goes to the CCG Board, the local authority position should also be bought through.</p> <p>KK explained that the current Section 75 for mental health services expires in August 2015, and doesn't necessarily need to be renewed as integrated provision. It would be possible for the CCG to focus on treatment whilst the local authority predominantly focus on community based recovery/ work with primary care to respond and manage in community.</p> <p>KK explained that the joint approach to commissioning was due to be discussed at HWBB in September so the Councils proposals for future service provision could go to the October Adults & Safeguarding Committee. Whilst this did not happen, there is now an opportunity to bring plans back together.</p> <p>MOD proposed that the Council's plans needed to be raised at the Transformation board on 9th October, and also need to be considered alongside the enablement model. The plans also need to link to the community mental health pilot in the south of the Borough.</p> <p>The group agreed there was a need to create a very clear set of recommendations together, to present back to the Trust.</p> <p>The group agreed that a paper was required for the HWBB to set out the 2 organisation's policy positions, signalling that a decision has to be made, explaining what the approach to development of the implementation plan is, what the timescales for implementation are and highlight any outstanding issues.</p> <p>KK asked DW and MOD to agree a joint senior lead to take this work forward.</p> <p>KK explained that James Mass (Lead Commissioner for Family and Community Wellbeing) will bring a group together to develop an implementation approach to development of a service specification following the Committee report being submitted. She stressed this should be seen as an opportunity to develop a joint programme of work and quality improvement, and a shared approach to leadership for mental health services.</p> <p>She suggested the group needs to answer following questions:</p> <ul style="list-style-type: none"> • What the Council (both public health and social care) and the CCG need to do together/ achieve as tri-partite commissioners? • What can the organisations influence in terms of service quality at BEHMHT? • What can the organisations influence in terms of the CCG's pilot in south locality? • What messages should be given to the NHS through the HWBB report re joint commissioning? 	<p>DW/ MOD</p> <p>DW/ MOD</p> <p>DW/ MOD</p>
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<p>5.</p>	<p>5 tier integrated care model</p> <p>DW explained that she had received informal feedback that the BCF is likely to be approved with support, which she explained was very positive news.</p> <p>She also explained that the business case has been referred to full Council for approval on 4th November.</p> <p>KK expressed thanks for all the work that had been done to get to this point, particularly to Karen Spooner who had been instrumental in developing the proposals.</p> <p>DW explained that the task now is to refresh the governance and programme management arrangements that are needed to take the work forward, and to be clear on project tolerances.</p> <p>She also said that there was a need to map out how those services in BCF that are currently only in ideas phase should become mobilised.</p> <p>KK explained that the group also needed to formalise work on developing the approach to pooling that will underpin the BCF from April 2015.</p> <p>KK proposed that the BCF pooled budget arrangements should appear as a schedule on the overarching Section 75 agreement, including detail about the amount of money being allocated in the BCF, and the principles governing overspends and underspends. DW presented arrangements from Ealing’s BCF outlining an agreement around risk share and overspends.</p> <p>KK highlighted the need to develop principles about what Barnet is trying to achieve through the pooling mechanism, how the Section 75 will work ie who is the commissioning agency, who is managing the contracts, and how does risk and reward gets dealt with.</p> <p>KK said there was a need to develop a set of tolerances around risk sharing, and that there should be organisational due diligence on those options. She also asked for both organisations’ base budgets to be made explicit in this arrangement, and for both organisations to confirm that the additional investment required to take forward the proposals in the BCF is available.</p> <p>DW explained that she and MOD needed support from finance colleagues, and respective legal teams, from the outset to confirm that the additional funding is available.</p> <p>KK requested that further principles be developed around:</p> <ul style="list-style-type: none"> • How money for demographics and inflation are treated • What the commercial model is for future years ie how is this being contracted/ who is delivering it/ how it is achieving savings <p>DW and MOD confirmed to the group that they were happy with the timescales set</p>	<p>DW/ MOD</p> <p>DW/ MOD</p> <p>DW/ MOD</p> <p>DW/ MOD</p> <p>HMG/ JM</p> <p>DW/ MOD</p>
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	<p>out in the business case for savings to be realised.</p> <p>KK noted that there was a need to develop these principles with relation to wider commissioning partnership as a whole, and the context of the CCG financial recovery plan / implementation of the Care Act, and agreed that KK and PC would ensure this was picked up.</p> <p>KK asked DW and MOD to discuss outside this meeting what capacity was required over the coming month to deliver this work prior to the next HWBB finance group, and to confirm next steps by end of week to KK and PC</p> <p>The whole group were asked to give comments on the schedule from Ealing to DW.</p>	<p>KK/ PC</p> <p>DW/ MOD</p> <p>All</p>
<p>6.</p>	<p>Draft Adults & Safeguarding Commissioning Plan</p> <p>KK explained that the draft Adults and Safeguarding Commissioning Plan had been brought to the group so that the CCG has early sight of the draft and can help shape the final version of the document. KK explained that the final version of the plan was being presented on 20th November to the Committee, and requested that joint commissioners give comments to KA and James Mass well in advance of this date.</p>	<p>All</p>
<p>7.</p>	<p>Development of CCG Delivery Plan</p> <p>KK explained that a date had been set up at the end of October for CCG and LBB colleagues to review the contents of the delivery plan and actions in Adults, Children’s and Public Health Commissioning Plans, so that the group can bring together a single work plan for the JCU.</p>	
<p>8.</p>	<p>HWBB engagement with providers - letter from Jeremy Hunt, Secretary of State for Health</p> <p>The group discussed the letter that had been sent to local NHS providers and Chairs of Health and Wellbeing Boards, requesting that HWBBs consider the membership of major providers on their Boards/ opportunities for on-going engagement with providers.</p> <p>Concerns about extending formal Board Membership to providers were expressed as set out below:</p> <ul style="list-style-type: none"> - That the sovereignty of the Board as a commissioning body, with particular public health commissioning responsibilities, could be undermined by the presence of providers - That consistent presence of Board Members is invaluable to the Board being able to deliver its work, and that it is not clear that providers would be able to offer this consistency - That the existing Health and Social Care Integration Board already brings providers together under the HWBB to shape commissioning plans relating to integrated care, and provides a strong mechanism for engagement 	

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	<p>DW and MK explained that the Health and Social Care Integration Board is a valuable mechanism for engagement with providers. The task is to redefine what the purpose of this group will be moving forward.</p> <p>KK suggested that the minutes of this Integration Board go through HWBB in the same way that the minutes from the financial planning group are presented to the Board for approval.</p> <p>The group agreed that CM would draft a letter on behalf of Councillor Hart, Chairman of the Health and Wellbeing Board, setting out a proposed position for Barnet.</p>	<p>DW/ MK</p> <p>CM</p>
9.	<p><u>AOB</u></p> <p>KK raised an estates issue at Northgate school, and requested that the group agree to take a whole-system view on this issue.</p> <p>KK agreed to send details through to HMG for a view, in the first instance.</p>	<p>KK</p>
10.	<p><u>Date of the next meeting</u></p> <p>Thursday 6th November 2014, 2pm-4pm, Board Room, NLBP</p>	