

MINUTES

Health & Social Care Integration Board

Date: 19th May 2015
Time: 13:00-15:00
Venue: Conference Room 3, Ground Floor, Building 2, NLBP

Attendees: Dawn Wakeling (DW), Maria O'Dwyer (MO), Gina Shakespeare (GS), Muyi Adekoya (MA), Katie Donlevy (KD), Rachel Wells (RW), Zoe Garbett (ZG), Chris Baxter (CB), Pam McClinton (PM), James Benson (JB), Mathew Kendall (MK), Julie Pal (JP), Karen Spooner (KS), Jeff Lake (JL), Grace Natoli (GN), Melanie Brooks (MB)

Apologies: Debbie Frost (DF), Jackie Laidlaw (JLL), Fiona Jackson (FJ)

Chair: Dawn Wakeling (DW)

Minutes: James Hallifax (JH)

No	Item	Lead
1	Minutes of the previous meeting and matters arising	
	<p>Richard Milner and Peter Coles to be removed from Membership List.</p> <p>MO noted that BEH membership confirmation was still outstanding.</p> <p>MA agreed with a suggestion to include KPIs relating to End of Life into the BILT evaluation with input from North London Hospice colleagues.</p> <p>Action: MA to provide advanced care planning report at September meeting.</p>	MA
2	Programme Update	
	<p>MB informed that she had recently come into post as the BCF Implementation Lead and updated the Board on the number of projects and initiatives in place.</p> <p>Community Point of Access MA reported that 97% of GP practices are using the CPA.</p> <p>OPIC MA proposed focus on the level 1 group of patients as shown in her presentation.</p> <p>MA showed that, of responses received from practices, the majority of patients were in their own homes and housebound. RW suggested that this showed that more bespoke targeting was needed. JB asked that the outstanding responses to the survey be collated as soon as possible so that the data can be acted on before the next HSCI Board.</p>	

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	<p>MA advised that extra work was needed to map the survey data to Social Care data, whether the patients are known to community healthcare and their addresses.</p> <p>Action: MA to provide update at next meeting.</p>	MA
3	Health and Social Care Integration Steering Group Terms of Reference	
	The board agreed the Terms of Reference.	
4	Tier 2 Mobilisation and Planning	
	<p>ZG gave an update on progress to date in relation to planning for Tier 2. ZG reported that Tiers 1 and 2 are closely linked and proposal is to merge the governance for both tiers through one steering group, with representation from Prevention.</p> <p>GS commented on the paper that the metrics around Tier 2 are currently too obscure.</p> <p>JP asked that the contributions of charities and voluntary organisations be more clearly highlighted.</p> <p>JL suggested clearer alignment with and demarcation from previous projects and the need to reflect what was in the business case.</p> <p>DW informed that LBB are training Dementia Friends and expanding the dementia adviser provision.</p> <p>KS suggested that there needed to be clear detail on what MECC will look like and what impact it will have on services.</p> <p>Action: ZG to report at the next meeting on joined-prevention, improvements to the referral pathway for universal services and the expansion of Expert Patients including impact, costs and success factors.</p>	
5	Fall Referrals	
	<p>KS gave a presentation to Board. She reported there is a high number of GP referrals which was a success for the project.</p> <p>MB asked about the links with enablement providers. KS replied that there are direct referral links with Housing 21.</p> <p>MO proposed a deep dive into the mobility and falls categories in the data presented.</p>	

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	MO suggested links with Tier 1 and 2 and the use of PACE and London Ambulance Service data.	
6	Care Homes PID	
	<p>MA informed that the first meeting regarding the Care Homes PID and asked the group if the project could go ahead. KD and MK asked for more opportunity for input from their respective disciplines, hospitals and social care. JP asked that learning from Healthwatch also be included. JB suggested more direct involvement from care home managers.</p> <p>DW proposed that the project be taken forward in June and agreed that more involvement would be needed from other parties including CQC and the Barnet IQICH team. KD also emphasised the need to involve nurses, therapists and other medical professions. MK noted that a social care view was lacking and the need to ensure this is incorporated.</p> <p>GS suggested that the scope of the project was very heavy for a 6 week timescale. MO replied that the timescale would likely be extended.</p> <p>The PID was agreed.</p>	
7	BILT Evaluation	
	<p>MA proposed expanding the BILT pilot to the entire West locality in September and using an evaluation of this to inform a full investment plan.</p> <p>DW queried the reality of March 2016 as a date for full implementation across the localities. MA replied that it would be possible as the only test would be the expansion to West locality. MO suggested that March 2016 would be start of the implementation.</p> <p>GS asked whose information governance the BILT falls under. DW replied that there will be a specific information sharing agreement for BILT. GS asked that this be made clear in the PID.</p> <p>It was agreed by the board that the evaluation and expansion should go ahead.</p> <p>MO proposed further discussion between Health and Social Care colleagues in the steering group to look at the detail of the BILT expansion.</p> <p>KD highlighted the need for continual refinement of the BILT.</p>	MA

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	Action: MA to set up meeting for discussion and steering of the BILT expansion.	
8	AoB	
	BCF - DW informed that the BCF return is due 29 th May and that MB, GN and MA are working on it. The schedule for reporting has also been released MO asked that GN share the reporting schedule with Matt Powls.	
9	Date of the next meeting	
	Tuesday 8 th September 2:00 - 4:00pm North London Business Park, Conference Room 3	