# STRATEGIC COMMISSIONING BOARD

# 23 January 2019

Commenced: 1.00 pm Terminated: 2.15 pm

Present: Dr Alan Dow (Chair) – NHS Tameside and Glossop CCG

Councillor Brenda Warrington – Tameside MBC Councillor Bill Fairfoull – Tameside MBC Councillor Leanne Feeley – Tameside MBC Councillor Warren Bray – Tameside MBC

Steven Pleasant - Tameside MBC Chief Executive and Accountable

Officer for NHS Tameside and Glossop CCG

Dr Christine Ahmed – NHS Tameside and Glossop CCG Dr Vinny Khunger – NHS Tameside and Glossop CCG

Dr Ashwin Ramachandra - NHS Tameside and Glossop CCG

**In Attendance:** Kathy Roe – Director of Finance

Jessica Williams – Interim Director of Commissioning
Debbie Watson – Assistant Director of Population Health
Sandra Whitehead – Assistant Director of Adult Services
Anna Moloney – Consultant, Public Health Medicine

Richard Scarborough – Planning and Commissioning Officer

**Apologies for Absence:** Councillor Gerald Cooney – Tameside MBC

Councillor Allison Gwynne – Tameside MBC Councillor Oliver Ryan – Tameside MBC

Dr Jamie Douglas – NHS Tameside and Glossop CCG Carole Prowse – NHS Tameside and Glossop CCG Councillor Jean Wharmby – Derbyshire County Council

### 84 DECLARATIONS OF INTEREST

There were no declarations of interest submitted by Members of the Board.

### 85 MINUTES OF THE PREVIOUS MEETING

The Minutes of the previous meeting held on 12 December 2018 were approved as a correct record.

# 86 CONSOLIDATED REVENUE MONITORING STATEMENT - MONTH 8

The Director of Finance submitted a report providing an overview on the financial position of the Tameside and Glossop economy in 2018/19 at the 30 November 2018 with a forecast projection to 31 March 2019 including details of the Integrated Commissioning Fund for all Council services and the Clinical Commissioning Group. The total net revenue budget value of the Integrated Commissioning Fund was currently £580.816 million, against an approved budget of £580 million, an overspend of £1.0 million. The report also provided details of the financial position of the Tameside and Glossop Integrated Care Foundation Trust.

She made reference to the supporting details for the whole economy provided in Appendix 1 to the report and highlighted the following:

- Referral to Treatment remained a real concern for the Clinical Commissioning Group and the impact on the achievement of the Quality, Innovation, Productivity and Prevention Programme.
- Children's Social Care continued to experience unprecedented levels of demand placing significant pressures on staff and resources.
- Corporate costs budgets included dividend income from the Council's shareholding in Manchester Airport and this additional income would be used to offset overspends in other service areas.
- Growth continued to face pressures due to non-delivery of savings and additional costs pressures.
- Clinical Commissioning Group Targeted Efficiency Plan expected savings reported last month
  had improved by £515k largely attributable to prescribing for patients with respiratory conditions
  exceeding expectations. Additional non-recurrent benefit was due to the achievement of the
  Quality Premium, the highest ever seen in Tameside and Glossop and the success of the
  Primary Care Access tender which had gone live sooner than anticipated.

The Director of Finance advised that heading towards winter she remained optimistic that risks had been identified and covered, but there would be elements such as unexpected severe weather that would add additional pressures to front line services.

In conclusion, she was confident that the economy could meet its financial control totals and deliver an in-year balanced position, although savings delivery for 2018/19 and future years remained a key priority. Financial plans for 2019/20 and beyond were now being refined and the savings required next year remained significant.

### **RESOLVED**

- (i) That the significant level of savings required during 2018/19 to deliver a balanced recurrent economy budget together with the related risks contributing to the overall adverse forecast be acknowledged.
- (ii) That the significant cost pressures facing the Strategic Commission, particularly in respect of Continuing Healthcare, Children's Social Care and Growth be acknowledged.

### 87 TAMESIDE SEXUAL AND REPRODUCTIVE HEALTH: IN FOCUS REPORT

Consideration was given to a report of the Executive Leader and Director of Population Health setting out an overview of the sexual and reproductive health of the Tameside resident population and an update on the commissioning and provision of sexual and reproductive health services including:

- Northern Sexual Health, Contraception and HIV Service;
- RuClear;
- · Passionate about Sexual Health Programme;
- Youthink Tameside's sexual health intervention and prevention team;
- National HIV self-sampling service;
- Contraceptive services in Primary Care:
- Emergency Hormonal Contraception services in Pharmacies;
- Termination of pregnancy.

The Board commented favourably on the deep dive of the provision and reviewing the impact of the services commissioned by the Strategic Commissioning Board and outline of what the next steps should be looking to the future.

#### **RESOLVED**

That the content of the report be noted.

# 88 TAMESIDE SEXUAL AND REPRODUCTIVE HEALTH: CONTRACT EXTENSION AND FUTURE INVESTMENT

The Executive Leader and Director of Population Health submitted a report seeking approval for a range of contracts and changes to service delivery within sexual health services. It included approval for contract extensions to continue using two contracts jointly commissioned across Greater Manchester, for the provision of chlamydia screening and for support for the most vulnerable groups for HIV and Sexually Transmitted Infections, and changes to the delivery of chlamydia screening within General Practice and the extension of the Pharmacy Emergency Hormonal Contraceptive service.

It was explained that under the Health and Social Care Act 2012, local authorities had a statutory duty to commission confidential, open access services for Sexually Transmitted Infections (STIs) and Contraception, as well as ensuring that the local population had reasonable access to all methods of contraception. A range of services were commissioned from NHS providers, General Practice, Pharmacy and third sector organisations in order to fulfil these obligations.

An Executive Decision in January 2016 approved the joint procurement of a sexual and reproductive health service in a cluster arrangement with Stockport and Trafford Councils, with Stockport leading the procurement and awarding the contract. A two year extension to the contract was approved in July 2018. This arrangement was in line with the Greater Manchester Sexual Health Strategy, produced by the Greater Manchester Sexual Health Network.

The Greater Manchester Sexual Health Commissioners Group collaborated to jointly commission services across Greater Manchester including an opportunistic chlamydia screening programme provided by RuClear and an STI and HIV screening and support service provided by the Greater Manchester Passionate About Sexual Health Partnership. Both of these contracts were coming to the end of their initial term and the lead commissioners and the Partnership had agreed to extend as permitted within their contract terms subject to local agreements.

A national Health Prevention England HIV self-sampling service, operating under a framework, was due to expire on 31 March 2019 with an available extension until 29 October 2019. A tender was in progress to procure a new framework with the intention of having a new service in place by 1 April 2019.

It was reported that General Practice operated two Locally Commissioned Services (LCSs) for Sexual and Reproductive Health, Long Acting Reversible Contraception and Chlamydia screening. In addition, Pharmacies delivered one Locally Commissioned Service, Emergency Hormonal Contraception, which included a Chlamydia screening element.

The current arrangements for each of these additional services, the future options, proposed extensions and implications for Tameside was explained in detail in the report and in summary as follows:

- Extension of the RuClear contract in line with the extension granted by the Lead Commissioner;
   Manchester Council.
- Extension of the HIV and STI screening and support service in line with the extension granted by the Lead Commissioner, Salford Council.
- To cease the current LSC with General Practice for Chlamydia Screening and replace with an LSC for the provision of self-sampling kits and enhanced condom offer.
- To remove Chlamydia screening from the Pharmacy Emergency Hormonal Contraception Service.
- To extend the Pharmacy LSC to include Ulipristral (Ella One) Emergency Hormonal Contraception.
- To continue commitment to the national HIV screening service.

Members of the Board commented that the provision of sexual and reproductive health services had a positive effect on health inequalities and the continuation of services and provision of Emergency Hormonal Contraception would ensure the continued targeting of resources for those in greatest need. In addition to the individual and the community of being sexually healthy, there were also economic benefits. Failure to prevent or treat sexual ill health or to provide adequate contraception generated avoidable cost and demand across the health and social care system.

### **RESOLVED**

- (i) That approval be given to the extension of the RuClear contract in line with the extension granted by the Lead Commissioner, Manchester Council.
- (ii) That approval be given to the extension of the HIV and STI screening and support service in line with the extension granted by the Lead Commissioner, Salford Council.
- (iii) That approval be given to the ceasing of the current Locally Commissioned Service with General Practice chlamydia screening, to be replaced with a service for provision of self-sampling kits and enhanced condom offer.
- (iv) That approval be given to the removal of chlamydia screening from the Pharmacy Emergency Hormonal Contraception service.
- (v) That the extension of the Pharmacy Locally Commissioned Service to include Ulipristral (Ella One) Emergency Hormonal Contraception be approved.
- (vi) That the continued commitment to the national HIV screening service be approved.

# 89 ALLOCATION OF £1.154 MILLION ADULT SOCIAL CARE WINTER PLANS FUNDING FOR 2018-19

Consideration was given to a report of the Executive Leader and Director of Adults providing a set of high level proposals to address some of the unmet social care need in the system and would transform a number of existing services. Many of the proposals would offer improvements to the whole system and would increase options and improve outcomes to people accessing services.

It was explained that the Government had allocated £1.154 million to the Council to support the system with winter pressures. As the funding was for the period ending 31 March 2019 it was imperative to allocate the funding promptly and to commence the services / schemes in order to ensure impact during the winter period.

A set of schemes were proposed that required approval, with approximate values to date provided in Appendix 1 to the report:

- Block booking 10 transitional care home beds to support a timely discharge from hospital to a
  placement until the preferred choice of home was available.
- Offer of a short term in-house service to provide support to individuals who might otherwise end up in hospital due to a crisis at home.
- Payment of 2019/20 fee uplift to care homes brought forward to 1 January 2019 with the
  expectation that care homes work with the health and social care economy to ensure good flow
  in the system.
- Funding of two Trusted Assessor posts to build relationships with care providers and carry out assessments.
- Additional three whole time equivalent social worker posts across the Integrated Urgent Care
  Team to ensure prompt response to support admissions avoidance and prompt assessment and
  discharge from hospital.
- Additional Occupational Therapy / Manual Handling capacity to support people to remain at home safely and timely discharges from hospital.
- A holding payment for beds at homes with high demand and low vacancies to ensure they are secured pending an offer to a Tameside resident.
- Projects with the voluntary and community sector.

The proposals had been discussed with the Director of Operations at the Tameside and Glossop Integrated NHS Foundation Trust and had been shared with other service areas as appropriate. Approaches had also been made to third sector organisations and groups through Action Together.

It was also expected that other pressures and suggestions would emerge during the next few months and flexibility to use the estimated funding balance of £0.135 million would enable a prompt responsive approach to maximising the benefits of the funding award.

Members of the Board welcomed the report and that the investment over the winter period would have a positive impact on the people accessing and using the services funded through this money.

### **RESOLVED**

- (i) That approval be given to the following schemes to reduce social isolation, support people to remain living safely at home and to promote a timely and safe discharge from hospital:
  - Block booking 10 transitional care beds;
  - In-house home care services;
  - Payment of 2019/20 fee uplift to care homes brought forward to 1 January 2019;
  - Trusted Assessor posts;
  - Additional Social Worker capacity;
  - Additional Occupational Therapy / Manual Handling capacity;
  - Holding payment for beds at homes with high demand and low vacancies;
  - Projects with the voluntary and community sector.
- (ii) That delegated authority be given to the Director of Adult Social Care, following discussions with the Director of Operations, Tameside and Glossop Integrated NHS Foundation Trust, to manage the unallocated balance of £0.315 million in accordance with the funding awarded to 31 March 2019.

# 90 INTERMEDIATE CARE

The Interim Director of Commissioning presented a report providing an update on the implementation of the decisions taken by the Strategic Commissioning Board in January and May 2018 and details of how the mitigation agreed had been addressed.

The report presented to the Strategic Commissioning Board in May 2018 included extensive detail on the process towards the move of intermediate care beds from the Shire Hill site to the Stamford Unit at Tameside Hospital which commenced in June 2018. It included a review by the Interim Director of Commissioning of the Tameside and Glossop Integrated Care NHS Foundation Trust's (ICFT) response to the Commissioner's expectations and concluded that the necessary processes and plans were in place to enable the Strategic Commissioning Board to support the move of the intermediate care beds to the Stamford Unit on the ICFT site, but that the Strategic Commission should review this position, including the annual presentation of the National Audit of Intermediate Care (NAIC) results to the Strategic Commissioning Board.

Particular reference was made to the update on progress and confirmation of the current positon with regard to the delivery of intermediate care to the registered population of Tameside and Glossop outlined in the report in the following sections:

- Project management;
- Process for identification and referral of patients to intermediate care;
- Commissioning of intermediate care beds in Glossop;
- Glossop Integrated Neighbourhood Services;
- Glossop Primary Care utilisation;
- Staffing, financial, estates and legal implications;
- Delivery of all levels of intermediate care (defined by the NAIC); and

Service improvements and outcome measure.

In conclusion, the Interim Director of Commissioning made reference to participation in the 2018 National Audit of Intermediate Care (NAIC) to support the ongoing review and analysis of the Intermediate Care system in Tameside and Glossop. A Commissioner bespoke report was released by NHS Benchmarking on 14 November 2018 and detailed the position of Tameside and Glossop as a commissioner against the national position and the key points to note were outlined. The Strategic Commission and Tameside and Glossop ICFT would establish clear processes for the full assessment of the NAIC, provider and commissioner reports, and ensure issues were reported back for action via the Strategic Commission and ICFT governance as required.

Members of the Board commented favourably on the extensive work that had been undertaken to ensure the successful implementation of the Intermediate Care model and the relocation of intermediate care and rehabilitation services from Shire Hill site to the Stamford Unit on the Tameside hospital site. The Board welcomed the update on decisions previously taken and the assurances provided that the conditions set out in the report to the Strategic Commissioning Board in May 2018 had been addressed to ensure the delivery of intermediate care services to meet individual needs across the locality.

### **RESOLVED**

That the update report on progress be noted and the assurance provided that the conditions set out in the report to the Strategic Commissioning Board in May 2018 had been addressed.

### 91 DATE OF NEXT MEETING

To note that the next meeting of the Strategic Commissioning Board will be held on Wednesday 13 February 2019.