

STRATEGIC COMMISSIONING BOARD

23 June 2021

Comm: 1.00pm

Term: 2.15pm

Present:

- Dr Ashwin Ramachandra – NHS Tameside & Glossop CCG (Chair)
- Councillor Brenda Warrington – Tameside MBC
- Councillor Warren Bray – Tameside MBC (part meeting)
- Councillor Gerald P Cooney – Tameside MBC
- Councillor Bill Fairfoull – Tameside MBC
- Councillor Leanne Feeley – Tameside MBC
- Councillor Allison Gwynne – Tameside MBC
- Councillor Joe Kitchen – Tameside MBC
- Councillor Oliver Ryan – Tameside MBC
- Councillor Eleanor Wills – Tameside MBC
- Steven Pleasant – Tameside MBC Chief Executive & Accountable Officer
- Dr Asad Ali – NHS Tameside & Glossop CCG
- Dr Christine Ahmed – NHS Tameside & Glossop CCG
- Dr Kate Hebden – NHS Tameside & Glossop CCG
- Dr Vinny Khunger – NHS Tameside & Glossop CCG
- Carol Prowse – NHS Tameside & Glossop CCG

In Attendance:

Sandra Stewart	Director of Governance & Pensions
Kathy Roe	Director of Finance
Richard Hancock	Director of Children's Services
Steph Butterworth	Director of Adults Services
Ian SaxonJayne	Director of Operations and Neighbourhoods
Traverse	Director of Growth
Jess Williams	Director of Commissioning
Jeanelle De Gruchy	Director of Population Health
Caroline Barlow	Assistant Director of Finance
Sarah Threlfall	Assistant Director, Policy Performance & Communication
Simon Brunet	Head of Policy, Performance and Intelligence

Further to the decision of Tameside Metropolitan Borough Council (Meeting of 25 May 2021), to enable the Clinical Commissioning General Practitioners to take part in decisions of the Strategic Commissioning Board, whilst they continue to support the NHS in dealing with the pandemic that all future meetings of the SCB remain virtual until further notice with any formal decisions arising from the published agenda being delegated to the chair of the SCB taking into the account the prevailing view of the virtual meeting.

1. CHAIR'S INTRODUCTORY REMARKS

The Chair welcomed everyone to the meeting and explained that this was the first meeting of the Strategic Commissioning Board since the end of the temporary Coronavirus legislation, which allowed meetings to be held virtually.

He further explained that, to enable the Clinical Commissioning General Practitioner to take part in decisions of the Strategic Commissioning Board, whilst they continued to support the NHS in dealing with the pandemic, the meeting would be a hybrid of remote and physical presence.

As a physical presence is required to formally take decisions, any formal decisions arising from the published agenda have been delegated to the Chair, taking into the account the prevailing view of

the virtual meeting.

As the first hybrid meeting, and with the need to comply with Coronavirus restrictions, the only people in the room were the Executive Members, the Chief Executive and Accountable Officer, Monitoring Officer, Democratic Services Officer and the Chair.

2. DECLARATIONS OF INTEREST

There were no declarations of interest submitted by Board members.

3. MINUTES OF THE PREVIOUS MEETING

RESOLVED

That the minutes of the meeting of the Strategic Commissioning Board held on 28 April 2021 be approved as a correct record.

4. MINUTES OF THE EXECUTIVE BOARD

RESOLVED

That the Minutes of the meetings of the Executive Board held on: 14 April, 19 May, 2 June 2021, be noted.

5. CONSOLIDATED 2020/21 FINANCE OUTTURN REPORT

Consideration was given to a report of the Executive Member of Finance and Economic Growth / Lead Clinical GP / Director of Finance. The report was the final report for the 2020/21 financial year which detailed actual expenditure to 31 March 2021.

It was reported that, at the end of an unusual and challenging financial year for the Strategic Commission and ICFT, the final outturn position on 2020/21 budgets presented a broadly balanced position, with a small underspend on Council Budgets. CCG budgets had achieved a balanced position with nil variance. The ICFT were reporting a small deficit. Given the significant pressures and challenges that had been faced over the last 12 months, this position was a significant achievement.

It was explained that COVID continued to place a significant operational strain on the system, while the longer term financial outlook was a cause for concern as the Council contended with the aftermath of the pandemic at the same time as addressing an underlying financial deficit. The financial impacts of COVID had been addressed with significant one-off funding during 2020/21 and, whilst some further additional funding was available to the Council in 2021/22 for ongoing COVID pressures, this was one-off in nature. The longer term impacts of COVID, uncertainty over future local government funding, and a lack of clarity over future operational arrangements for the CCG, present significant barriers to sustainable financial planning.

Members were advised that **Appendix 1** summarised the integrated financial position on revenue budgets as at 31 March 2021. The final outturn position on 2020/21 budgets presented a broadly balanced position, with a small underspend of £102k on Council Budgets. CCG budgets had achieved a balanced position with nil variance against budget. The final outturn position was net of a range of significant under and over spends across a number of service areas. Further detail on budget variances, savings and pressures, COVID grants and expenditure was included in **Appendix 2**.

There was an in year deficit on the Collection Fund for both Council Tax and Business Rates due to the impact of the COVID pandemic, although the Council Tax deficit was less than previously

forecast due to significantly improved collection rates in the final quarter of the year. The deficits would need to be funded in over the three financial years 2021/22, 2022/23 and 2023/24 and this was reflected in the 2021/22 budget and MTFP approved by Full Council on 23 February 2021. **Appendix 3** provided an update on Council Tax and Business Rates collection performance and the year end position on the Collection Fund.

With regard to the Capital Programme, the approved budget for 2020/21 was £47.448m (after re-profiling approved at P10 monitoring) and outturn for the financial year was £43.593m. There had been delays on a number of schemes throughout the year due to COVID, and scheme budgets had been re-profiled into the 2021/22 financial year. The final capital monitoring report for 2020/21 was appended to the report.

An update was provided on the Dedicated Schools Grant (DSG). It was explained that the Council was facing significant pressures on High Needs funding and started the 2020/21 financial year with an overall deficit on the DSG reserve of £0.557m. The 2020/21 deficit on DSG was £1.686m, mainly as a result of a continued pressure on High Needs but partly offset by surpluses on the other funding blocks. Under DfE regulations the authority had produced a deficit recovery plan which had been submitted to the DfE outlining how the Council expected to recover this deficit and manage spending over the next 3 years.

RESOLVED

- (i) That the outturn position as set out in Appendix 1 to the report, be noted;**
- (ii) That the significant variations and pressures facing Budgets as set out in Appendix 2 to the report be noted;**
- (iii) That the budget virements and reserve transfers set out on pages 36 and 37 of Appendix 2 to the report, be approved;**
- (iv) That the Collection Fund position for 2020/21 as set out in Appendix 3 to the report be noted;**
- (v) That the Capital Programme 2020/21 outturn be noted and the re-profiling of capital budgets as set out in Appendix 4 to the report be approved;**
- (vi) That the outturn position in respect of Dedicated Schools Grant as set out in Appendix 5 to the report, be noted.**
- (vii) That a Budget turnaround team be created from the Invest to Save ring-fenced allocation to reduce the budget gap and avoid the need to rely on reserves with the detail being set out in an Executive Decision to be brought forward by the Executive Member for Finance & Growth.**

6. ONE EQUALITY SCHEME ANNUAL UPDATE

Consideration was given to a report of the Executive Member, Lifelong Learning, Equalities, Culture and Heritage / CCG Co-Chairs / Assistant Director, Policy, Performance and Communications, providing an update on the annual review for 2021 which had been informed by practical examples and related projects from the past 12 months. The report also provided an update on some key equality and diversity related projects that the Strategic Commission had delivered or been part of during the last 12 months.

Members were advised that the report outlined an update on developments of the One Equality Scheme, as part of the annual review for 2021. It remained important that the case study of projects and examples of best practice were able to provide evidence in line with the schemes agreed and measurable objectives. Annual updates to the One Equality Scheme acted as an ongoing position statement and the approach to equalities. The annual review built upon work outlined in the One Equality Scheme (2018-22) and previous One Equality Scheme Annual Reviews (2019 and 2020); as well as providing new examples and evidence sources of achievements in respect of equality and diversity.

Members were advised of key equality and diversity related projects that the Strategic Commission had delivered or been part of during the last 12 months. These were most notably:

- Covid-19 Equality Impact Assessments;
- Inequalities Reference Group (IRG);
- All Equals Charter;
- Race Equality Change Agents Programme (RECAP) Cohort 2;
- Independent Advisory Group;
- North West Black, Asian and Minority Ethnic Strategic Advisory Committee;
- Workforce Race Equality Standards (WRES); and
- Supporting our workforce through Covid-19.

RESOLVED

- (i) That the content of the report be noted;**
- (ii) That the One Equality Scheme Annual Review 2021, as appended to the report, be approved for publication; and**
- (iii) That the content of the equalities update be noted.**

7. DETERMINING THE FUTURE OF THE COUNCIL AND CCG'S WORKFORCE CULTURE

Consideration was given to a report of the Executive Leader / Assistant Director for People and Workforce Development, detailing the opportunity that the Council and CCG had to create a new culture and new normal which would provide the right balance between productivity and inclusivity whilst meeting the needs of the workforce to achieve a better work life balance. Further, the report proposed engaging with external 'People Architects' to create a new working model quickly, preventing a shift back to pre Covid ways of working.

It was explained that in order to 'build back better' post COVID, experiences over the last 12 months must be learned from. This intelligence would help create a working culture that would have the right balance between how the staff had worked during Covid and a hybrid approach which would maximise productivity whilst meeting the needs of the workforce to achieve a better balance between work and home life.

Members were advised of national surveys and more recent feedback from workplaces in March 2021, summarised in the Chartered Institute of Personnel Development (CIPD). It was explained that it was pivotal that any working model created was based on the experiences and feedback from our staff and managers, balancing pros and cons whilst ensuring the needs of our business and residents was prioritised.

Members received a detailed breakdown of the survey of staff and managers about homeworking. The internal survey found that 72% of staff felt their normal job could be carried out from home and Over half of people would like to work from home permanently, a quarter were not sure, and a quarter would choose not to.

In addition to the survey completed by staff and managers, People and Workforce Development attended management teams to gather manager views on the current working model and future aspirations post-COVID. Managers were clear that they did not envisage returning to pre-COVID ways of working. They recognised that working differently had significant benefits for individuals and the organisation.

Members were advised of the benefits of a hybrid workforce including a better work-life balance, increased productivity, improved service delivery, better recruitment, decreased sickness absence, reduced estates costs, reduced mileage costs and CO2 emissions and better mental and physical wellbeing.

It was proposed that, considering the importance and widespread implications of this work, external specialists in workforce architecture be procured to assist in developing a new post COVID workforce model of the future for the Council and CCG.

RESOLVED

- (i) the principal and introduction of Hybrid Working across both the Council and CCG be approved;**
- (ii) that there will not be an immediate return to full time office based working seen prior to the COVID pandemic following the relaxation of lockdown measures and that an appropriate plan will be developed which increases productivity, inclusivity and supports a reduction in our estate; and**
- (iii) an initial investment of £50k be approved, to procure, through STAR, external specialists in workforce architecture to develop options for a new post COVID working model that increases productivity, inclusivity and supports a reduction in our estate.**

8. ADULT SERVICES COMMISSIONING INTENTIONS 2021-2022

Consideration was given to a report of the Executive Member for Health, Social Care and Population Health / Clinical Lead for Living Well, Finance and Governance / Director of Adult Services, detailing the Adult Services Commissioning intentions for 2021/2022.

It was reported that the contract for the provision of extra care support service for people with a physical and/or sensory disability commenced on the 1 April 2017 for a period of 3 years to 31 March 2020 with the option to extend for up to a further 2 years – this option was exercised and the contract was due to end on 31 March 2022. The current spend for the core element of the service 2021/22 was £228,367 – working with colleagues in Finance a tender value for 2022-23 would be agreed reflecting an inflationary uplift in line with the National Living Wage and any reasonable costs that were likely to impact during the first year of the contract.

With regard to the Integrated Community Equipment Service, it was explained that the current contract had been delivered by Ross Care and commenced 1 October 2017 for a period of 3 years with the option to extend to 30 September 2022, which had been authorised and invoked. The contract was essential in supporting the Council and CCG to achieve its health and social care goals for the population both children and adults by supporting individuals to remain living at home, maximise the use of community and family assets and reducing the need for higher cost care. Given the essential role the service played across the health and social care system permission was sought to tender the service with a view to awarding a new contract for up to 7 years (either 4+3 years or 5+2 years depending on further discussion and confirmation with Oldham MBC).

It was stated that the contract for the provision of independent advocacy for adults commenced on 7 July 2017 for a period of 5 years. As the Council had a statutory duty under the Mental Health Act 2007 and the Care Act 2014 to provide independent advocacy for adults, permission was sought to tender the service with a view to awarding a new Contract for 5 years.

Members were advised that in July 2018, the government published a Mental Capacity (Amendment) Bill which would see DoLS replaced by the Liberty Protection Safeguards (LPS). It was explained that it was difficult to predict what this would mean for the Council, in order to ensure compliance, a competitive procedure would need to be undertaken to avoid non-compliance with the CPRs until the introduction of the LPS. In order to ascertain the capacity of the market, particularly with the uncertainty of future legislation, a soft market test was launched in March 2021. Once the route to market had been established permission was sought to tender the service with a view to awarding a new contract for 5 years.

It was stated that the Council operated a Flexible Purchasing System for the delivery of daytime support that was delivered via a call of arrangement dependant on an individual accessing a service of their choice. The original flexible purchasing system had expired and in the interim whilst a new commissioning model was in the process of being developed there would be advertisements for providers to join the list of day time activities. Approval was sought to consult with current service users and providers regarding a proposed offer. Further, approval was sought following the review to procure the new commissioning model. Permission was sought to tender the service with a view

to awarding a new contract for 5 years.

The Director of Adult Services reported that the Intensive Support Service for Adults with a Learning Disability contract commenced on the 1 April 2017 for a period of 5 years with the option to extend for a period of 2 years. Not retaining this service would lead to the Council having to make alternative provision for the users of the service which could lead to returns to expensive out of borough or hospital placements. Authorisation was therefore sought to extend the contract for up to 2 years as allowed for the contract terms.

RESOLVED

That the following be approved:

- (i) Tender the provision of extra care support for people with a physical and/or sensory disability aged 18–65 at Lomas Court for a new contract to commence 1 April 2022;**
- (ii) Tender for the provision of the Integrated Community Equipment Service for a new contract to commence 1 April 2022;**
- (iii) Tender for the provision of an Independent Advocacy Service for a new contract to commence 7 July 2022;**
- (iv) Tender for a Framework for DoLS Assessors to commence no later than 1 April 2022;**
- (v) Consultation with current service users and providers regarding a proposed daytime offer. In addition, approval is given following the review, to procure a new commissioning model for daytime offer/activity/service options for a five year period;**
- (vi) That permission be given for the Director of Adult Services to approve the contract awards following the tenders, subject to compliance with the Council's Procurement Standing Orders;**
- (vii) To extend the contract for the provision of an Intensive Support Service for Adults with a Learning Disability where there is provision to do so in the contract for up to 2 years from 1 April 2022; and**
- (viii) Authority for the Director of Adult Services to approve the contract awards following the tenders, subject to compliance with the Council's Procurement Standing Orders.**

9. TARGETED NATIONAL LUNG HEALTH CHECKS

The Executive Member, Adult Social Care and Population Health / Director of Commissioning submitted a report, which provided an update on development of the Targeted Lung Health Check (TLHC) Programme within NHS Tameside and Glossop CCG (T&G CCG).

It was explained that TLHC programmes were paused from March 2020 due to COVID-19 and implementation of the fully managed 'End to End' T&G CCG TLHC service from Manchester Foundation Trust (MFT) was limited. In June 2020, NHSE published the addendum to the National standard protocol in response to COVID-19; to recommend virtual initial TLHC assessments and removed the requirement to undertake spirometry or blood pressure assessment.

TLHC programmes recommenced in August, following the publication of the Phase 3 planning guidance, which stated: 'All existing projects within the Targeted Lung Health Check programme to be live by the end of 20/21'. In September 2020, NHSE released revised Clinical and evaluation data sets and MFT confirmed their intention to work in partnership with T&G CCG to deliver a fully managed TLHC service with capacity to accommodate additional tertiary surgical capacity and CT capacity (following lengthy discussions over an extensive period of time).

In October NHSE, formally notified TLHC programmes that they would extend the length of the programme to March 2024 to accommodate the pause due to COVID-19. A revised two year trajectory was submitted to NHSE on 9 October 2020 to indicate the first T&G TLHC would commence on 1 February 2021 and the full roll out across the Locality would be completed by March 2022. This enabled all Low Dose Computed Tomography (CT) scans required by the protocol to be completed by March 2024.

The Strategic Commissioning Board on 25 November 2020, approved the recommendation to commission the 'End to End' fully managed Targeted Lung Health Check service from MFT on a phased approach to delivery. Phase 1, mobile unit operating in the existing COVID-19 safe site at the Etihad with people from Denton, Hyde and Ashton invited (duration approximately 38.5 weeks). Phase 2 would extend to Stalybridge and Glossop and the sites location would be confirmed (duration approximately 24.5 weeks). Should the constraints of COVID-19 change, the locations would be reviewed and if possible, a location within Tameside and Glossop would be used. To deliver the TLHC programme within National timeframe (2 year phased planned roll out of the TLHC programme, with all follow up Low Dose CT scans complete by March 2024), MFT continued to work in partnership to enable Contract sign off and mobilisation of the TLHC programme, and to agree a revised start date in discussion with NHSE.

Members were informed that the screening element of the Lung Health Checks, Smoking Cessation and CT scans would all be delivered in one place (One Stop) on a mobile unit close to where people live (when COVID-19 restrictions were lifted as detailed within the addendum, which was in place until March 2022). MFT would work with providers across GM to ensure that people who required any follow up care, had the choice to receive this care closer to where they lived except when support could only be delivered by specialist centres.

T&G CCG continued to work with GM Cancer and GM colleagues from MHCC, MFT, Salford CCG, Salford FT, Specialised Commissioning, and Christie to ensure coordinated approach to delivery of TLHCs. T&G CCG continued to work with partner organisations to develop pathways that incorporated TLHCs working to the revised National Standard Protocol (issued due to COVID-19 and in place to March 22).

In March 2021, MFT confirmed their commitment to joint working with T&G CCG to ensure screening commenced no earlier than 1 June 2021.

On the 23 April 2021, the CCG agreed to fund reasonable additional costs for diagnostics and other associated activity, relating to the Targeted Lung Health Check Programme and onward referral.

On 28 April 2021 MFT confirmed acceptance of their internal business case and ability to provide the managed service to T&G CCG (phase approach to delivery). MFT confirmed their intention to commence Targeted Lung Health Checks (TLHCs) within T&G CCG on 5 July 2021 (to commence in the Denton neighbourhood, as detailed in Appendix 2 to the report) with invitation letters starting to go out in June 2021. Low Dose CT scans would commence in August 2021.

In terms of funding, it was explained that the initial funding envelope available of £6.3m included a fixed element for staffing and a variable amount based on agreed trajectories. Since the initial plan was submitted, the extraction criteria had changed and therefore there was likely to be a higher variable cost element than previously anticipated. It was expected that this higher variable activity would be fully funded by the national programme.

The report concluded that the change in model due to COVID-19 would enable T&G CCG to deliver the TLHC programme as required and increase the opportunities for early identification and treatment of health issues that left undetected would adversely impact on an individual's healthy life expectancy. Progressing this programme was a key priority for the Strategic Commission and a Long Term Plan commitment.

RESOLVED

That the Strategic Commissioning Board be recommended to note the additional funding requirements and progress on the development of a fully managed 'End to End' TLHC service from Manchester Foundation Trust (MFT), who are the only tertiary provider of thoracic surgery within Greater Manchester.

10. OFSTED FOCUSED VISIT TO TAMESIDE CHILDREN'S SERVICES AND RESPONSE

The Deputy Executive Leader (Children and Families) / Director of Children's Services submitted a report setting out a brief update on the improvement journey of Tameside's Children's Social Care services, with particular reference to the progress on delivery of the 7 Sustainability Projects, the impact of Covid on the children's systems and the findings of the recent our Ofsted Focused Visit and our proposed response to this and plans to drive further improvement for the children of Tameside.

The report detailed the approach to improvement and specifically outlined the planned refocusing of existing capacity and the additional focussed capacity/investment required to address the issues identified through the Ofsted Focused Visit.

Her Majesty's Chief Inspector of Education, Children's Services and Skills was leading Ofsted's work into how England's social care system had delivered child-centred practice and care within the context of the restrictions placed on society during the COVID-19 (coronavirus) pandemic. The report was in part to respond to a letter, which was embargoed until the 25 June 2021 when it would be published on the Ofsted website at: [Ofsted | Tameside Metropolitan Borough Council](#) and therefore was exempt from publication with the report. The letter summarised the findings of a focused visit to Tameside children's services on 12 and 13 May 2021. The methodology for this visit was in line with the inspection of local authority children's services (ILACS) framework. However, the delivery model was adapted to reflect the COVID-19 context. This visit was carried out fully by remote means. Inspectors used video calls for discussions with local authority staff, carers, key stakeholders and children. They also looked at local authority performance management and quality assurance information and children's case records.

The report concluded that there was a clear understanding of the issues which faced children's services, the improvements that were needed and plans in place to address these. In order though to deliver these at the pace which children deserve and require, the pace that the Inspectorate will expect and the Local Authority needs, the realignment of existing resources and investment of additional capacity as detailed in the report would be required along with the support of the Budget Turnaround Team.

RESOLVED

- (i) That the Ofsted letter published at Appendix 1 (which is embargoed until the 25 June 2021) and summarises the findings of a focused visit to Tameside children's services on 12 and 13 May 2021 be acknowledged and the delivery of the proposals outlined in the report be approved including the Rapid Improvement Plan proposal and fruition of 7 Sustainability projects by way of response to this and to drive further improvement for the children of Tameside; and
- (ii) That Council be RECOMMENDED to approve the provision of additional budget of £461,410 in year 1 (2021/22) and £504,538 in year 2 (2022/23) and virement of the existing budget of £1,537,224 over two years (2021/23) to deliver the plans set out in the report and more specifically the budget requirements as detailed in Appendix 2 to the report.

11. URGENT ITEMS

The Chair reported that there were no urgent items for consideration at this meeting.

CHAIR