

COMMISSIONING PARTNERSHIP BOARD
29/04/2021 at 1.00 pm



Present: Majid Hussain (Chair)
Councillors Chauhan, Fielding, Moores and Shah
Ben Galbraith, Chief Finance Officer and Dr. Ian Milnes, Deputy Chief Clinical Officer

Also in Attendance:

Mike Barker	Strategic Director of Commissioning/Chief Operating Officer
Liz Drogan	Head of Democratic Services
Dr. Shelley Grumbridge	GP Governing Body Member - East Cluster
Gerard Jones	Managing Director Children and Young People
Anne Ryans	Senior Management Team
Dr. Andrew Vance	GP Governing Body Member - North Cluster
Sian Walter-Browne	Principal Constitutional Services Officer
Mark Warren	Managing Director Community Health and Adult Social Care

1 **ELECTION OF CHAIR**

RESOLVED – that Majid Hussain be elected Chair for the duration of this meeting.

2 **APOLOGIES FOR ABSENCE**

Apologies for absence were received from Dr Patterson, Graham Foulkes, Dr Gopi Mudiyyur, Claire Smith, Rebekah Sutcliffe, Nicola Hepburn and Dr Carolyn Wilkins.

3 **URGENT BUSINESS**

There were no items of urgent business received.

4 **DECLARATIONS OF INTEREST**

There were no declarations of interest received.

5 **MINUTES OF PREVIOUS MEETING**

RESOLVED that the minutes of the meeting of the Commissioning Partnership Board held on 25th March 2021 be approved as a correct record.

6 **PUBLIC QUESTION TIME**

There were no public questions received.

7 **CONTRACT EXTENSION - PROVISION OF STAIRLIFTS, CEILING TRACK HOISTS, VERTICAL AND STEP LIFTS AND GANTRY HOISTS**

Consideration was given to a report of the Managing Director Community Health and Adults Social Care (DASS), which sought approval to extend a contract for the provision of stairlifts, ceiling track hoists, vertical and step lifts and gantry hoists. The initial term of the contract ended on 31st May 2021: the report requested approval to extend the contract by a further year, from 1st June 2021 to 31st May 2022.

The Board noted that the commercially sensitive information would be considered at Item 11 of the agenda

Options/alternatives
Considered at Item 11 of the agenda.

RESOLVED that the Board would consider the commercially sensitive information contained at Item 11 of the agenda before making a decision.

8

WHITE PAPER BRIEFING

Consideration was given to a report of the Strategic Director of Health and Resources which provided a briefing on the recently-published NHS White Paper entitled Integration and Innovation: Working Together to Improve Health & Social Care for All.

Members were informed that the proposals in the white paper were considered in the following themes:

- Working together to integrate care – statutory Integrated Care Systems (ICSs) with “dual structure” governance arrangements (the main focus of the policy briefing).
- Reducing bureaucracy – removing requirements on competition and procurement in the NHS.
- Improving accountability and enhancing public confidence – the formal merger of NHS England and NHS Improvement and new powers for the Secretary of State (SoS).
- Additional proposals – many related to public health and adult social care.

Proposals would be set out in a Health and Care Bill, with legislation in place for implementation in 2022.

The white paper had been influenced by the extensive collaboration and innovation that partners from all sectors had demonstrated in tackling the pandemic. It showed a good understanding of how health, social care and public health fitted together, while stakeholders’ concerns, such as ICSs potentially undermining effective place-based arrangements, had been listened to.

Members noted that overall, this white paper was a positive development. The lack of information on social care reform remained a gap, and the proposals would need to be carefully worked on.

Members expressed disappointment that the issues around health inequalities had not been addressed.

RESOLVED that the report be noted.

9

NHS OPERATIONAL PLANNING PROCESS

The Board gave consideration was given to a report of the Strategic Director of Health and Resources which provided a briefing on the NHS operational planning process.

Members noted that all NHS organisations needed to participate in a mandatory operational planning process. The paper outlined the process for the 2021/22 financial and planning year, which NHS Oldham CCG was currently undertaking.

- A. Supporting the health and wellbeing of staff and taking action on recruitment and retention:
 - 1. Looking after our people and helping them to recover
 - 2. Belonging in the NHS and addressing inequalities
 - 3. Embed new ways of working and delivering care
 - 4. Grow for the future

- B. Delivering the NHS COVID vaccination programme and continuing to meet the needs of patients with COVID-19:

- C. Building on what we have learned during the pandemic to transform the delivery of services, accelerate the restoration of elective and cancer care and manage the increasing demand on mental health services:
 - 1. Maximise elective activity, taking full advantage of the opportunities to transform the delivery of services
 - 2. Restore full operation of all cancer services
 - 3. Expand and improve mental health services and services for people with a learning disability and/or autism
 - 4. Deliver improvements in maternity care, including responding to the recommendations of the Ockenden review

- D. Expanding primary care capacity to improve access, local health outcomes and address health inequalities:
 - 1. Restoring and increasing access to primary care services
 - 2. Implementing population health management and personalised care approaches to improve health outcomes and address health inequalities

- E. Transforming community and urgent and emergency care to prevent inappropriate attendance at emergency departments, improve timely admission to hospital for ED patients and reduce length of stay:
 - 1. Transforming community services and improve discharge
 - 2. Ensuring the use of NHS111 as the primary route to access urgent care and the timely admission of patients to hospital who require it from emergency departments

- F. Working collaboratively across systems to deliver on these priorities:
 - 1. Effective collaboration and partnership working across systems

2. Develop local priorities that reflect local circumstances and health inequalities
3. Develop the underpinning digital and data capability to support population-based approaches
4. Develop ICSs as organisations to meet the expectations set out in Integrating Care
5. Implement ICS-level financial arrangements

Members noted that NHS providers had already submitted their draft capital and cash plans to NHS England and NHS Improvement, and localities had submitted a first draft of their financial plans, and the remainder of the submission timelines.

RESOLVED that the report be noted.

10 **EXCLUSION OF PRESS AND PUBLIC**

RESOLVED that, in accordance with Section 100A(4) of the Local Government Act 1972, the press and public be excluded from the meeting for the following items of business on the grounds that they contain exempt information under paragraph 3 of Part 1 of Schedule 12A of the Act, and it would not, on balance, be in the public interest to disclose the reports.

11 **CONTRACT EXTENSION - PROVISION OF STAIRLIFTS, CEILING TRACK HOISTS, VERTICAL AND STEP LIFTS AND GANTRY HOISTS**

The Board gave consideration to the commercially sensitive information in relation to Item 7 – Contract extension request - provision of stairlifts, ceiling track hoists, vertical and step lifts and gantry hoists in domestic properties where residents have disabilities.

RESOLVED that the recommendations as detailed within the report be agreed.

12 **OLDHAM HEALTH AND CARE SYSTEM GOVERNANCE AND DEVELOPMENT**

The Board gave consideration to a report of the Strategic Director of Health and Resources, which contained commercially sensitive information in relation to Oldham's Health and Care System Governance and Development

RESOLVED that the recommendations as detailed within the report be agreed.

13 **OLDHAM CCG DRAFT FINANCIAL PLAN 2021/22**

The Board gave consideration to a report of the Chief Finance Officer, Oldham CCG, which contained commercially sensitive information in relation to Oldham CCG Draft Financial Plan H1 2021/22.

RESOLVED that the recommendations as detailed within the report be agreed.

The meeting started at 1.00 pm and ended at 2.11 pm

