

COMMISSIONING PARTNERSHIP BOARD
21/10/2021 at 1.00 pm



Present: Councillor Chauhan (Chair)
Councillors Moores and Shah
Kate Ridgen, Chief Finance Officer CCG, Dr. Ian Milnes Deputy
Chief Clinical officer, Mike Barker, Accountable Officer

Also in Attendance:

Mark Warren- Managing Director
Community Health and Adult Social
Care
Rebekah Sutcliffe Strategic Director,
Communities and Reform
Anne Ryans - Director of Finance
OMBC

1 **ELECTION OF CHAIR**

RESOLVED – That Councillor Chauhan be elected Chair for the duration of the meeting.

2 **APOLOGIES FOR ABSENCE**

Apologies for absence were received from Majid Hussain, Gerard Jones, Claire Smith, Dr John Patterson, Dr Shelley Grumbridge and Councillor Chadderton.

Mike Barker attended as a substitute for Majid Hussain.

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 29th April 2021 be approved as a correct record.

6 **PUBLIC QUESTION TIME**

There were no public questions received.

7 **NATIONAL & REGIONAL UPDATES**

The Board gave consideration to a report of the CCG Accountable Officer and Strategic Director of Commissioning, Oldham Council which contained summaries of local and national policies, strategies, and relevant news to ensure the Board remained up to date on the latest developments relevant to the Council.

An update was provided on the Greater Manchester Integrated Commissioning System (ICS), which would come into place on 1st April 2022. The ICS would include the creation of a statutory Integrated Care Partnership (ICP), which would be a joint Board,

and an Integrated Care Board (ICB) (previously referred to as the ICS NHS body/board).



Members were reminded that in Greater Manchester, under the Devolution Agreement, we had been working as 'more than an ICS' for the last five years, with strong working partnerships between health and social care and the voluntary sector. The creation of a statutory Integrated Care Partnership and Integrated Care Board would formalise those arrangements. The new statutory nature of an ICS would enable building on the ambitious and groundbreaking ways of working over the last five years and evolution to deliver even better health and care for the people of Greater Manchester.

The GM ICS would operate on three levels to deliver a new five-year vision and plan:

- Neighbourhood
- Locality
- Greater Manchester

The Board was informed that a GM Statutory ICS Transition Programme had been established, led by a Board meeting fortnightly, to oversee the transition to the new ICS arrangements. The Board was made up of representatives from all organisations which would become part of the new NHS body, as well as NHS providers and local authorities. The intention was for the GM ICS, including localities to operate with shadow arrangements ahead of the statutory change on 1 April 2022.

The Oldham transitional arrangements would be overseen by a Governing Body which would oversee the two core work areas that would work in tandem with the GM approach:

- HR and transfer of people
- CCG closedown and transfer of data and statutory duties

Locality system developments would focus on:

- Set-up of the new Oldham Health and Care System Board (including placebased responsibilities, shift of some commissioning oversight, and also oversight of strategic planning functions)
- Development of a new provider 'collaborative'
- System finances and use of resources

In relation to the National Employment Board, Members noted the majority of Oldham CCG would be covered by an employment commitment to continuity of terms and conditions. For those not covered by this commitment, guidance had set out the support that they would receive during the HR process to be followed. There was an expectation that all CCG employees would 'lift and shift' into the GM ICS on 1 April 2022, with any remaining work to determine exact roles and structures continuing after that date.

The Board noted the appointment of Amanda Doyle as the new Regional Director for the North West.



Oldham
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The Board noted the guidance and publications recently issued.

Options/alternatives

1. Note the updates.
2. Challenge the updates

RESOLVED - That the National and Regional Updates be noted.

8

SECTION 75 2020-21 YEAR END POSITION MONITORING REPORT

The Board gave consideration to a report of the Director of Finance, Oldham Council and the Chief Finance Officer, Oldham CCG which asked for consideration of the Oldham Cares Section 75 pooled budget year end position for 2020/21.

The Board was reminded that the agreement for 2020/21, including the CCG's increased contribution to the wider Oldham healthcare economy of £16.3m, had been considered and approved at the Commissioning Partnership Board on 25th March 2021.

Section 75 monitoring reports had been presented at months 6, and 8 and 9 during the 2020/21 financial year.

The report set out the Oldham Cares Section 75 (S.75) pooled budget monitoring position as at the end of the 2020/21 financial year. It showed expenditure of £176.63m, compared to a budget of £176.96m, resulting in an underspend of £0.33m. Adverse variances relating to Oldham Council services were substantially offset by favourable variances within Oldham CCG.

Options/alternatives

1. Note the contents of the report
2. Challenge the contents and recommendations in the report

RESOLVED - That the outturn position for the budgets within the S75 Agreement for 2020/21 be noted.

9

HEALTH & SOCIAL CARE INTEGRATION RESERVE

The Board gave consideration to a report of the Director of Finance, Oldham Council and the Chief Finance Officer, Oldham CCG which sought approval for the proposed use of funds held in reserves following increased flexibilities of S75 contributions within 2020/21.

The report provided the Board with an update on proposals to fund transformational activity, which would begin to address the c£90m recurrent system gap across the Oldham system.

During 2020/21 the Oldham Directors of Finance had worked together to set out the system-wide financial challenge being faced. Based on the financial plans developed by each

organisation at the start of 2020/21 the underlying gap was £87.8m for the Oldham system, before savings plans and use of reserves. Whilst there had been some movement in the elements and drivers of this position due to Covid, the year-end position still showed an underlying financial gap of approximately £90m at the end of 2020/21.



The CCG had significant scope to contribute additional funds into the pooled budget and, at its meeting on 25th March 2021, the Board agreed that these funds would be used to support the creation of a reserve totalling £10.3m in OMBC accounts, to support what would be an extremely challenging financial position in 2021/22 and subsequent years.

The report set out the following proposals for the use of reserves in 2021-2022:-

- Funding additional capacity for the next 12 months to speed up work on children's integration - £0.08m
- Contribution towards the Delivering a Sustainable Future programme of transformational change - £0.15m
- Additional contribution to the pool in response to the non-recurrent NHS system pressures as referenced in the paper of March 2021. - £5.0m with delegation, jointly, to the OMBC Director of Finance and the CCG Chief Finance Officer to finalise the technical requirements in order to utilise the funds and confirm phasing arrangements

It was proposed that a further £5.07m would remain available for future use as a Transformation Fund, to enable the requisite closing of the underlying gap within Oldham.

It was proposed that the use of the remaining £5.07m reserve be delegated to the new Oldham Health and Care System Board, with bids being reviewed and proposed by the Place Lead for Oldham, in consultation with the Chief Finance Officers of the CCG and the Council, to provide assurance as to the financial benefits and to ensure compliance with the Oldham System Financial Framework. The Board noted the use of the funds must align to the legislative and local financial frameworks applicable to Oldham Council, as the £5.07m was held in the accounts of the Council.

Options/alternatives

1. Approve the proposals in full.
2. Approve the proposals in part.
3. Do not approve the proposals

RESOLVED- That:

1. The strong history of joint working and funding arrangements in Health and Social Care in Oldham be noted.
2. The request for use of funds in 2021/22 totalling £5.23m as detailed in the report be approved.

3. Delegation jointly to the OMBC Director of Finance and the CCG Chief Finance Officer to finalise the technical requirements in order to utilise the £5m of the funds and confirm phasing arrangements be approved.
4. That approval would also be sought for changes arising from this paper through Council governance routes regarding the Use of Reserves Policy be noted.



The meeting started at 1.00 pm and finished at 1.30pm