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COMMISSIONING PARTNERSHIP BOARD **27/09/2018 at 12.30 pm**

Present: Councillor Chauhan (Chair)
Councillors Fielding and Shah, Majid Hussain, Dr John Patterson, Dr Ian Milnes, Ben Galbraith

Also in Attendance:

Graham Foulkes	Lay Member for Patient and Public involvement
Nadia Baig	Director of Performance and Delivery
Rebekah Sutcliffe	Strategic Director of Reform
Dr Andrew Vance	GP Governing Body Member - North Cluster
Carolyn Wilkins OBE	Chief Executive / Accountable Officer

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 Councillor Chadderton.

3 **DECLARATIONS OF INTEREST**

Councillor Chauhan declared a personal interest by virtue of his employment as a General Practitioner.

4 **URGENT BUSINESS**

There were no items of urgent business received.

5 **PUBLIC QUESTION TIME**

There were no public questions received.

6 **MINUTES OF COMMISSIONING PARTNERSHIP BOARD HELD ON 30TH AUGUST 2018**

RESOLVED - That the minutes of the Commissioning Partnership Board meeting held on 30th August 2018 be approved as a correct record.

GM TRANSFORMATION FUND - OLDHAM INVESTMENT PROPOSALS

The Commissioning Partnership Board gave consideration to a report of the Alliance Director, Associate Director of Oldham Cares Programmes and the Programme Manager- Enabler Services which sought to provide the Board with assurances and an update on progress against the implementation of transformation proposals for health and social care funded through the Greater Manchester Transformation Fund (£21.3m of funds overall).

The report also sought approval for the allocation of up to £1.1 million for spend on proposals relating to pilots in services for Integrated Community Care during 2018/19 to the Oldham Health and Social Care Joint Leadership Team.

Following the Commissioning Partnership Board held in June 2018, further work had been undertaken on the Integrated Community Care proposals, Community Enablement short term proposals, Frailty Pathway design and Primary Care Led Urgent Treatment Services.

The Board were advised that the revised investment proposals relating to Integrated Care demonstrated a sufficient evidence base for the Board to allocate the GM Transformational Funding to the Joint Leadership Team.

The Joint Leadership Team would consider further the financial sustainability plans for the proposals before commencement into pilot implementation.

1. Primary Care Led Urgent Treatment Service at the Royal Oldham Hospital - A pilot had been running for this service since 16/17 and would run until March 2019 when it would be evaluated and recommendations would be submitted to the Commissioning Partnership Board.
2. Frailty – The development of a frail elderly pathway was a priority recommendation from Oldham’s Urgent Care Strategy and the proposal was to scope frailty with a view to producing a business case/implementation plan by March 2020. An Equalities Impact Assessment had been undertaken with no recommendations to implement.
3. Community Enablement - The decision required from the Board was to agree proposals which could be funded in the short term with a view to demonstrating longer term benefit to the system and a sustainable financial plan. The proposal was to deliver an enhanced community health and social care response service operating seven days a week consisting of:
 - In partnership with NWAS an Urgent Response Service that would intercept Grade 3 (urgent) and Grade 4 (less urgent) calls to prevent A&E attendance and admission.
 - Establish a home based IV Fluids Service to deliver fluids to people in the community rather than at hospital.
4. An integrated Community Response Service – To provide people with complex health and social care issues at risk of hospital admission, with an alternative which included:
 - In partnership with NWAS an Urgent Response Service that would intercept Grade 3 (urgent) and Grade 4 (less urgent) calls to prevent A&E attendance and admission.
 - Establish a home based IV Fluids Service to deliver fluids to people in the community rather than at hospital.

- Introduce seven day working for social workers located alongside the Integrated Home Response Service.
5. Pilot a Musculoskeletal Physio First Contact Project that would utilise Musculoskeletal physiotherapist as first contact rather than a GP appointment, this would be initially piloted in one of the five clusters.
 6. Establish a Multi-Disciplinary Team Co-ordination across the five clusters to ensure the involvement of primary care, community health and social care and introduce community equipment practise to support people to remain at home.

The Board discussed the proposals, made observations and asked that the key tests for the proposals would be the following:

- Outcomes
- Consultant costs/Management costs
- Localised postcode lottery
- Achieving consistency across the Borough/Clusters
- Return on Investment
- A unified approach based on need

Members were assured that the risks highlighted had sufficient mitigating actions to reduce the likelihood including ensuring adherence across the system, implementing gateway review points, the evaluation of pilots and robust change management methodology.

Each scheme had an investment case and metrics to measure performance against. Further information would be submitted to the Board scheme by scheme with planning assumptions and outcomes.

Members were further assured that no consultants would be funded from the allocation of £1.1m and that once the pilots/proposals were underway and the approach/system wasn't working it would be stopped and Members of the Board would be updated via the relevant organisational reporting mechanism.

Options/Alternatives considered

Option 1 – Agree the recommendations within the report.

Option 2 – Not to agree the recommendations within the report, this would put the transformation funding set aside for the Oldham Locality Plan and winter resilience at risk as it would delay decision making and therefore funding would likely be re-assigned to another GM Locality Programme.

RESOLVED – That the Commissioning Partnership Board would consider the commercially sensitive information at Item 9 before making a decision.

EXCLUSION OF THE 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 paragraphs 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.

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GM TRANSFORMATION FUND - OLDHAM INVESTMENT PROPOSALS

The Board gave consideration to the commercially sensitive information in relation to Item 7 - GM Transformation Fund - Oldham Investment Proposals.

RESOLVED – That:

1. The update on progress against the implementation of transformation proposals for health and social care funded through the Greater Manchester Transformation fund be noted.
2. The allocation of £1.1million of funding be delegated to the Oldham Health and Social Care Joint Leadership Team for spend on proposals relating to pilots in services for Integrated Care during 2018/19 in relation to:
 - (a) Community Enablement Short Term proposals
 - (b) Frailty Pathway Design
 - (c) Primary Care led Urgent Treatment ServicesAs detailed within the reports.

The meeting started at 12.30 pm and ended at 1.01 pm