

Meeting Title	Collaborative Commissioning Committee (Joint Committee) - Meeting in <u>Public</u>	Date	Thursday 16 April 2020
Meeting no.	5	Time	1:00pm – 1:15pm
Chair	Professor Mayur Lakhani Clinical Chair West Leicestershire CCG	Venue / Location	Via Webex

REF	AGENDA ITEM	ACTION	PRESENTER	PAPER	TIMING
CCCP/20/40	Welcome and Introductions		Professor Lakhani		1:00pm
CCCP/20/41	Apologies for Absence: <ul style="list-style-type: none"> • Caroline Trevithick • Spencer Gay • Michelle Iliffe 	To receive	Professor Lakhani	verbal	1:00pm
CCCP/20/42	Notification of Any Other Business	To receive	Professor Lakhani	verbal	1:00pm
CCCP/20/43	Declarations of Interest on Agenda Topics	To receive	Professor Lakhani	verbal	1:00pm
CCCP/20/44	To receive questions from the Public in relation to items on the agenda only	To receive	Professor Lakhani	verbal	1:00pm
CCCP/20/45	Minutes of the Collaborative Commissioning Committee (CCC) meeting held on 20 February 2020	To approve	Professor Lakhani	A	1:05pm
CCCP/20/46	Matters Arising from Collaborative Commissioning Committee (CCC) meeting held on 20 February 2020	To receive	Professor Lakhani	B	1:10pm
ANY OTHER BUSINESS					
CCCP/20/47	Items of any other business.	To receive	Professor Lakhani		1:15pm
The next meeting of the Collaborative Commissioning Committee will take place on Thursday 21 May 2020, Conference Room, 4th Floor, Leicester City CCG, St John's House, 30 East Street, Leicester, LE1 6NB					

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Minutes of the LLR CCGs' Public Collaborative Commissioning Committee meeting held on Thursday 20 February 2020 at 1:00pm in Conference Room, 4th Floor, St Johns House, 30 East Street, Leicester LE1 6NB

Present:

Dr Ursula Montgomery	Clinical Chair, East Leicestershire and Rutland CCG (Chair)
Mrs Donna Briggs	Chief Finance Officer, East Leicestershire and Rutland CCG
Mr Spencer Gay	Chief Finance Officer, West Leicestershire CCG
Mrs Michelle Iliffe	Director of Finance, Leicester City CCG
Mr Steve Churton	Independent Lay Member, West Leicestershire CCG
Mr Zuffar Haq	Independent Lay Member, Leicester City CCG
Mrs Caroline Trevithick	Executive Director of Nursing, Quality and Performance and Deputy Managing Director, LLR CCGs
Mrs Yasmin Sidyot	Interim Director of Urgent and Emergency Care, West Leicestershire CCG
Mr Tim Sacks	Chief Operating Officer, East Leicestershire and Rutland CCG
Dr Nick Pulman,	Deputy Chair, West Leicestershire CCG
Ms Chris West	Director of Nursing and Quality, Leicester City CCG
Dr Avi Prasad	Co-Chair, Leicester City CCG

In attendance:

Ms Elaine Egan Morris	CAMHS Lead Commissioner & C&YP Whole System Transformation Lead, Leicester City CCG
Ms Tamsin Hooton	Director Lead for Service Redesign
Mrs Jayshree Raval	Commissioning Collaborative Support Officer

PUBLIC GALLERY

T Illsey	BAYER
Jack Bandhan	Newmedica
Sarah Shuttlewood	Associate Director for Contracts and Provider Management, Leicester City CCG

ITEM	LEAD RESPONSIBLE
CCCP/20/29	<p>Welcome and Introductions</p> <p>Dr Montgomery welcomed the Committee members and member of the public to the Collaborative Commissioning Committee meeting.</p>
CCCP/20/30	<p>Apologies for absence:</p> <ul style="list-style-type: none"> • Professor Azhar Farooqi Clinical Chair, Leicester City CCG • Professor Mayur Lakhani, Clinical Chair, West Leicestershire CCG • Mr Andy Williams, Accountable Officer, LLR CCGs • Ms Fiona Barber, Independent Lay Member, East Leicestershire and Rutland CCG • Ms Gillian Adams, Independent Lay Member, West Leicestershire CCG • Ms Sarah Prema, Executive Director of Strategy and Planning, LLR CCG
CCCP/20/31	<p>Notification of Any Other Business</p> <p>Dr Montgomery had not received notification of any other business for</p>

ITEM	LEAD RESPONSIBLE
	<p>discussion.</p> <p>Dr Montgomery however did read out the following mainly for Mr Badhan from Newmedica who was sitting in the public gallery. Dr Montgomery informed that the CCGs would like to assure Newmedica that the organisation is addressing the concerns that they have raised. Dr Montgomery stated that given the commercial sensitivity of some of the issues, it would not be appropriate to discuss these at a public meeting. Dr Montgomery assured that the organisation is working to ensure that the complaint is resolved satisfactorily.</p>
<p>CCCP/20/32</p>	<p>Declarations of Interest</p> <p>Dr Montgomery reminded members of their obligation to declare any interest they may have on any business arising at the meeting which might conflict with the business of NHS Leicester City CCG, East Leicestershire and Rutland CCG or West Leicestershire CCG.</p> <p>Each CCG maintains a conflicts of interest register and any declarations raised at this meeting will be documented in the minutes of the meeting and action(s) will be taken to manage the conflict(s) at the meeting in in line with the conflicts of interest policy.</p> <p>Paper C – Kooth online counselling extension of contract. It was noted that there were no specific conflicts in relation to this item.</p> <p>Paper D – Early Intervention Service extension of contract. It was highlighted that the provider is a partnership between Fun and Families, ADHD Solutions and Relate. It was noted that none of the members were conflicted with either of these organisations, however need to declare if they are. None of the members were conflicted.</p> <p>Paper E – Government funding for palliative and end of life care services 2019/20: It was advised that the `funding is for investments to enhance palliative care and hospice services for adults and children, including training for GP Practices. GP members and other CCC members to declare a conflict if they are connected to any of the voluntary sector organisations detailed in the report. If directly conflicted then not to participate in the decision but remain in the meeting as it is an item on the public agenda</p> <p>No other conflicts of interest were declared.</p> <p>It was RESOLVED to:</p> <ul style="list-style-type: none"> • NOTE the conflicts of interest declared and actions taken
<p>CCCP/20/33</p>	<p>To receive questions from the Public in relation to items on the agenda.</p> <p>There were no questions received in advance of the meeting in</p>

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	relation to the items of the agenda; and this was confirmed by the member of public present at the public part of the meeting.	
CCCP/20/34	<p>To Approve minutes of the previous meeting of the Collaborative Commissioning Committee held on 16 January 2020 (Paper A)</p> <p>The minutes of the meeting held in January 2020 were accepted as an accurate record of the meeting, subject to misspell of Dr Montgomery's name on page 3 of the minutes.</p> <p>It was RESOLVED to:</p> <ul style="list-style-type: none"> • APPROVE the minutes of the meeting subject to the minor amendment. 	
CCCP/20/35	<p>To Receive Matters Arising following the meeting held on 16 January 2020 (Paper B)</p> <p>CCC/20/27: Transformation plan for Mental Health and Wellbeing for C&YP Refreshed 2019/20: The action was for Mrs Briggs to review the finances within the plan. Mrs Briggs confirmed that she is meeting with her deputy chief finance officer to go through the schedule and stated that for the purpose of the meeting the action could be closed. The committee did not object to the action being closed. Action closed.</p> <p>It was RESOLVED to:</p> <ul style="list-style-type: none"> • RECEIVE the matters arising. 	
CCCP/20/36	<p>To Approve KOOOTH Online Counselling Plus One Extension (Paper C)</p> <p>Ms Chris West presented the report which outlined a request for the use of the plus one year in the current contract to continue Kooth Online counselling for a further 12 months from April 2020 to March 2021. It was highlighted that the budget allocation is 90k per annum, which is funded from the Future in Mind Budget allocation. Ms West informed that the feedback from Children & Young People (C&YP) remains positive and provides an integral element of the system wide pathway of care that meets all levels of need. Ms West added that the feedback from C&YP demonstrates a good quality service and the performance monitoring demonstrates value for money. In addition the service has demonstrated their ability to deliver and meet the increasing demand since the commencement of the service.</p> <p>Mr Haq informed that this is positive news and good use of the funding and a great way of getting the young audience to access the service.</p> <p>Mr Churton queried what is the plan in terms of procuring the service going forward should a plus one in year contract is agreed. Furthermore from a governance aspect Mr Churton queried the extension. Ms West explained that the initial contract was for 3 years with an option to deliver for an additional year and as the service has exceeded the expectations of commissioners in delivering an online platform it is vital that access to this service remains until the service is procured as part of the Transformation plan. Dr Montgomery</p>	

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<p>informed that it would be useful to see timelines in terms of assurance that the procurement process is factored into the Transformation plan.</p> <p>Dr Pulman stated that careful consideration should be given with regards to the online advice provided and explore it is evidence based. Ms West informed that this service is part of the LLR digital offer along with healthy teens, chat health, healthy kids, and the three local authority local offer websites. The service consistently experiences high levels of C&YP accessing the online system.</p> <p>There was a general view from the committee that similar service offer should be extended in the CAMHS service and other Mental Health service.</p> <p>Dr Montgomery stated that the data highlighted on page 5 of the report was not very clear and suggested that any future papers for FIM to have clear KPIs identified other than that this is a success story and based on the evidence presented in the report, the Committee members agreed to continue to fund the service for an additional 12 months on the proviso that there is a plan in place in terms of the procurement process going forward.</p> <p>It was RESOLVED to:</p> <ul style="list-style-type: none"> • APPROVE the continuation of the service in the plus one year in the current contract for the Kooth Online Counselling Service. 	
<p>CCP/20/37</p> <p>To Approve Early Intervention Service Plus One Extension (Paper D)</p> <p>Ms West informed that similar to the Kooth report, this report also seeks approval to use the plus one year in the current contract to continue the Early Intervention Service (EI) for a further 12 months from April 2020 to March 2021. Ms West stated that the service commenced in January 2018 with a 3 years contract with an option to deliver for an additional year. The contract value is £360k per annum.</p> <p>Once again this service has also exceeded the expectations of commissioners in delivering early intervention for children and young people (C&YP) across Leicester, Leicestershire and Rutland (LLR) and receives high numbers of referrals month on month. The service has strengthened partnership working with LPT and other providers across the system wide offer for C&YP. They have implemented new internal structures to manage high numbers of referrals from GP's through Systmone and strengthened the relationship with CAMHS to receive direct referrals from the access team to avoid C&YP being placed on waiting lists or being sent back to the GP.</p> <p>Mr Haq queried the funding allocation and the difference in terms of £140k going forward in 2020/21. Ms West explained how the funding was allocated with further detail provided by Mrs Briggs in terms of how the funding element was made up.</p> <p>Dr Prasad asked if the service was on the PRISM pathway. Ms West informed that the service was under the PRISM pathway.</p>	

ITEM	LEAD RESPONSIBLE
<p>Furthermore she explained that the commissioners have met with the Early Intervention Service to identify gaps, capacity and demand of the service. As a result of the meeting the commissioners are working with the provider to plan to:</p> <ul style="list-style-type: none"> • Establish a robust referral criteria through Systmone and the new Triage & Navigation Service; • Align funding to increase capacity of the service to meet demand in the next financial year as part of the Future in Mind Budget; • Support the provider to adjust delivery to meet the needs of C&YP. <p>Mr Haq made an observation, stating that having read the report and reflecting on how successful the service is, there is still a lack of education as not many teachers are aware of this service. Ms West informed that there is ongoing education via colleagues and GP practices.</p> <p>CCC Committee members agreed to continue to fund the service for an additional 12 months on the proviso that there is a plan in place in terms of the procurement process going forward similar to the Kooth service.</p> <p>It was RESOLVED to:</p> <ul style="list-style-type: none"> • APPROVE the continuation of the service in the plus one year in the current contract for the Early Intervention Service. <p>Ms Tamsin Hooton joined the meeting.</p>	
<p>CCCP/20/38</p> <p>To Approve Government funding for Palliative and End of Life Care Services 2019/20 (Paper E)</p> <p>Dr Montgomery welcomed Ms Hooton to the meeting.</p> <p>Ms Hooton introduced the paper stating that in October 2019 NHS England wrote to all CCGs to confirm the National funding arrangements over the next 5 years for system wide Palliative and End of Life Care. She stated that the letter confirms that a further £25m is being supplied nationally, non-recurrently, through CCG allocations to support in-year investments to enhance palliative care and hospice services for adults and children in 2019/20. Ms Hooton informed that the LLR CCGs have received share an allocation of £423K.</p> <p>Ms Hooton explained that the report summarises the process undertaken to identify and prioritise proposals for allocating this funding locally. Ms Hooton then went on to explain the process and rationale behind the allocations of the additional funds. She stated that the LLR End of Life Care Task Force asked for system wide proposals for the allocation of funding set against the criteria to be submitted by 19 December 2019. There was excellent engagement from across LLR with all providers submitting proposals. A high proportion of the bids were system wide initiatives matching the cross system priorities with a shared understanding of the key gaps in</p>	

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<p>current delivery for End of Life Care across LLR. Following receipt of proposals the Task Force agreed some criteria for allocating the funding, reflecting both on local and national priorities.</p> <p>The following areas have been prioritised by the LLR Task Force:</p> <ul style="list-style-type: none"> • Training and Education • Communications and Engagement • Service Improvement • IMT <p>Ms Hooton informed that the report detailed the areas where proposed non-recurrent allocations of funding have been suggested to the palliative and end of life initiatives. The table highlighted an allocation of £403,596 across the proposed initiatives. She noted that as a result there is a small underspend of £19,404 against the total allocation received. She explained that it is proposed that this underspend is held by the Task Force giving them flexibility to allocate additional funding over the course of the year to address priorities and risks in delivering the LLR action plan for End of Life Care.</p> <p>Ms Hooton went on to describe each of the areas proposed in the report in more detail. Under the Night Nursing element Ms Hooton explained that approximately a year ago capacity within this service had been reduced based on the projected demand over the contracted hours. It was however noticed that delivery in early hours of the night proved difficult and therefore would like to expand capacity by recruiting one extra member.</p> <p>Mr Haq highlighted that a number of patients have complaint about the Night Nursing service as patients who are towards end of life are not able to get pain relief in a timely manner due to capacity issues and therefore he welcomed the idea of putting additional resource into the service. Furthermore he requested if the current process could be reviewed as patients families are struggling to get death certificates as the Coroner's have not verified the deaths as patients have not died in the hospital. Similar views were also shared by the GP colleagues in the room and a request to look at the process to ensure the families are able to obtain death certificates in a timely manner.</p> <p>Dr Prasad further added that this requires a system preparedness involving the Out of Hours (OOH) and the Coroner to have this as part of the End of Life template. In addition to allow some flexibility in the system without getting any legal or professional repercussions. His views were to review the current processes and see if they can be revised and improved, however if there is limitations to how much of the process could be revised as commissioners then the process needs to be clear and should be able to manage people's expectations accordingly.</p> <p>Ms Trevithick stated that when the Derbyshire Health United (DHU) took over the Night Nursing Service, some robust criteria were put in</p>	

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<p>place for End of Life patients and suggested reviewing of the criteria and putting nursing input back in the service. Ms Hooton stated that she would take the comments back and discuss them with the End of Life Task Force.</p> <p>It was noted that Doves Cottage is developing their clinical strategy to be able to support more patients. Ms Trevithick informed that the Giles hospice in Birmingham provides service to West Leicestershire CCG patients and queried how much of their service is being offered to Leicestershire patients and is it value for money. Ms Trevithick provided some background to this hospice and the decision that had been taken at the WL CCG's Governing Body previously. Her views were that there is a need to go back to the hospice to provide evidence in terms of equity of the service provision across the geographical areas. Dr Montgomery suggested that perhaps Ms Trevithick to have further discussion at the WL CCG Governing Body once evidence has been provided.</p> <p>Ms West commented on the proposed allocation highlighting that only a small proportion of the funding has been allocated to Children's services and questioned the rationale behind it. Ms Hooton explained that a second national allocation is to be announced shortly where the funding will predominately be allocated to the Children's services. She added that Ms Egan-Morris and Ms Thwaites should be aware of this.</p> <p>Mrs Briggs expressed concerns with regards to the last recommendation in the report which stated that the committee members to note that there will be a need to identify mainstream funding for the Night Nursing requirement after 12 months. She informed that she did not feel comfortable that believed that this will not be the only area where funding will have to be identified after 12months and suggested she would be happy to work with Ms Hooton to explore the proposed areas in further details in ensure there is affordability going forward. Ms Trevithick stated that she acknowledged Mrs Briggs concerns, however also highlighted that there is a national drive to invest in these services. There was some further discussion on the funding element going forward. Mrs Briggs stated that she absolutely agrees to invest in the End of Life services however did not feel convinced that there would only be one area where recurrent funding would be required. She stated that she would like to review those areas in detail to get a better understanding of them and to project areas where potentially funding could be required after 12 months. She expressed concerns in light of the current financial constraints that will impact next year's financial position.</p> <p>Ms Trevithick informed that she acknowledged Mrs Briggs concerns and suggested that the CCGs are signed up to the principles in terms of investing the allocation subject to the Task Force group working up the details which assures the cost effectiveness of the services going forward and to be shared with the Chief Finance Officers to agree. Dr Montgomery reiterated the principles and concluded the discussions by going over each of the recommendations highlighted in the report.</p>	

ITEM	LEAD RESPONSIBLE	
	<p>It was RESOLVED to:</p> <ul style="list-style-type: none"> • APPROVE the allocation of funding to the schemes set out in table 1, non-recurrently for one year, subject to the Task Force group working up the details which assures the cost effectiveness of the services going forward and to be shared with the Chief Finance Officers to agree <p>Ms Hooton left the meeting.</p>	
CCCP/20/39	<p>Any other business:</p> <p>Dr Montgomery did not receive any notification of any other business.</p> <p>Meeting concluded at 1:50pm</p>	
<p>Date of next meeting:</p> <p>The date of the next LLR CCGs' Collaborative Commissioning Committee will be held on Thursday 19 March 2020 1:00pm at St Johns House, 4th floor Conference Room, 30 East Street Leicester LE1 6NB</p>		

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Leicester, Leicestershire and Rutland (LLR) CCGs Collaborative Commissioning Committee (CCC)

Key

Public Action Log

Completed	On-Track	No progress made
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Minute No	Meeting Date	Item	Responsible Officer	Action Required	To be completed by	Progress as at 16 April 2020	Status

- There were no matters arising from the meeting held on 20 February 2020
- The Collaborative Commissioning Committee meeting did not take place in March 2020.