

**Joint Health Overview and Scrutiny Committee
Briefing on the NES work
November 2016**

1. Introduction

Work to develop a strategy for the North East Sector (NES) is currently being managed across through the Oversight Group being independently chaired by Mike Farrar. The intention is that this work should drive commissioning of one acute service contract across the sector, three locality care contracts and support the development of an agreed Clinical Services Strategy across the NES.

The Chief Executives of Bury, Rochdale and Oldham Local Authorities(LAs), the Chief Officers of the Clinical Care Groups (CCGs) which initially included North Manchester CCG and Pennine Acute Hospitals Trust/Salford Royal Foundation Trust have been engaged and involved in this work across the NES.

This report provides an update on the draft independent report that has been produced by Mike Farrar which was submitted for discussion and comment on 16th November 2016 to the Oversight Group.

2. Background

The Oversight Group includes all the LA and CCG Chief Executives and Chief Officers across the NES. In March, they agreed to review together their plans for sustainable high quality acute services for their population.

The Group have supported work at NES to better align the plans of all CCGs and PAHT in terms of finance and activity, although this is not yet fully concluded.

The Group also received in October, a NES Transformation Fund proposal which was due to be agreed at the meeting on 16th November.

3. Current position

The Oversight Group received Mike Farrar's draft independent report. The key points are noted below and the report was taken back for redrafting:

- The report outlines a recommendation around the development of an integrated single commissioning function to produce a single specification/contract for acute care across Bury, HMR and Oldham. It would also produce a single specification for specialised and out of sector services. This was the subject of discussion for the vast proportion of the meeting, but was agreed in principle.
- At locality level, commissioning would be integrated between LAs and CCGs for out of hospital care in the first instance, with a suggestion that this might move to a sector approach over time.
- The meeting discussed the need for this work to actively link into the Single Hospital Service work streams with regard to North Manchester General Hospital.
- Locality services must work to consistent service specifications and standards based on best evidence or practice.
- It was acknowledged that current LCO models were at different stages of development but should aim to have a commonality of approach.

- In terms of acute services, support was given by the sector to the continued arrangement with SRFT and LA's were keen to support and be involved in discussions around the long term management contract for PAHT with NHS Improvement.

4. Actions agreed at the meeting

The Oversight Group debated the report at length, especially with regard to commissioning. They agreed to the formation of a NES wide group which would include Council Leaders and clinical leaders to be in place in shadow form by January 2017. An Executive Group would undertake the work programme to support this Board. The group members agreed to produce a nomination process and suggested membership of the group to the next meeting. This would be formally established in April 2017.

The Group agreed that a programme resource and infrastructure would be required to support this work and that the existing NES bid should be reshaped to request that.

The Group requested engagement in discussions related to the current planning round and the development of a shared NES plan which would be in detail for 12 months, but include a further 2 years. This would be based on the current work being undertaken on the Annual Plan, but would also formally include plans within the LAs.

The Group agreed to begin construction of a narrative that can be used with local politicians, councillors and in all organisations about the NES work.

5. Next steps and recommendations

The JHOSC is asked to note this report.

The draft report is currently being reshaped by Mike Farrar, with the intention that this will be agreed in December 2017. The CCGs, Local Authorities and PAHT will draft formal responses to the draft report to feed into this process.

The JHOSC may wish to request a full briefing when the report is agreed in December after it has been agreed at the GM Health and Social Care Partnership Board.