

| Meeting: Strategic Commissioning Board (Public) | | | |
|---|---|--|---------|
| Meeting Date | 05 October 2020 | Action | Approve |
| Item No | 3 | Confidential / Freedom of Information Status | No |
| Title | Minutes of Last meeting and Action Log | | |
| Presented By | Cllr E O'Brien, Co-chair of the SCB and Bury Council Leader / Dr J Schryer, Co-Chair of the SCB and CCG Chair, NHS Bury CCG | | |
| Author | Emma Kennett, Head of Corporate Affairs and Governance | | |
| Clinical Lead | - | | |
| Council Lead | - | | |

| Executive Summary |
|--|
| Introduction and background The attached minutes reflect the discussion from the Strategic Commissioning Board held on 7 September 2020. |
| Recommendations It is recommended that the Strategic Commissioning Board: <ul style="list-style-type: none"> Approve the Minutes of the Meeting held on 7 September 2020 as an accurate record; and Note progress in respect to agreed actions captured on the Action Log. |

| Links to Strategic Objectives/Corporate Plan | Choose an item. |
|---|-----------------|
| Does this report seek to address any of the risks included on the Governing Body / Council Assurance Framework? If yes, state which risk below: | N/A |
| <i>Add details here.</i> | |

| Implications | | | | | | |
|--|-----|--------------------------|----|--------------------------|-----|-------------------------------------|
| Are there any quality, safeguarding or patient experience implications? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | N/A | <input checked="" type="checkbox"/> |
| Has any engagement (clinical, stakeholder or public/patient) been undertaken in relation to this report? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | N/A | <input checked="" type="checkbox"/> |
| Have any departments/organisations who will be affected been consulted? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | N/A | <input checked="" type="checkbox"/> |

| Implications | | | | | | |
|--|-----|--------------------------|----|--------------------------|-----|-------------------------------------|
| Are there any conflicts of interest arising from the proposal or decision being requested? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | N/A | <input checked="" type="checkbox"/> |
| Are there any financial implications? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | N/A | <input checked="" type="checkbox"/> |
| Are there any legal implications? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | N/A | <input checked="" type="checkbox"/> |
| Are there any health and safety issues? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | N/A | <input checked="" type="checkbox"/> |
| How do proposals align with Health & Wellbeing Strategy? | N/A | | | | | |
| How do proposals align with Locality Plan? | N/A | | | | | |
| How do proposals align with the Commissioning Strategy? | N/A | | | | | |
| Are there any Public, Patient and Service User Implications? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | N/A | <input checked="" type="checkbox"/> |
| How do the proposals help to reduce health inequalities? | N/A | | | | | |
| Is there any scrutiny interest? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | N/A | <input checked="" type="checkbox"/> |
| What are the Information Governance/ Access to Information implications? | N/A | | | | | |
| Has an Equality, Privacy or Quality Impact Assessment been completed? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | N/A | <input checked="" type="checkbox"/> |
| Is an Equality, Privacy or Quality Impact Assessment required? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | N/A | <input checked="" type="checkbox"/> |
| Are there any associated risks including Conflicts of Interest? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | N/A | <input checked="" type="checkbox"/> |
| Are the risks on the CCG /Council/ Strategic Commissioning Board's Risk Register? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | N/A | <input checked="" type="checkbox"/> |
| Additional details | | | | | | |

| Governance and Reporting | | |
|---------------------------------|-------------|----------------|
| Meeting | Date | Outcome |
| | | |

| | | | |
|--------------------------------------|---|--|--------------------------------|
| Title | Minutes of the Strategic Commissioning Board Virtual Meeting on 7 September 2020 | | |
| Author | Emma Kennett, Head of Corporate Affairs and Governance | | |
| Version | 0.1 | | |
| Target Audience | Strategic Commissioning Board Members / Members of the Public | | |
| Date Created | September 2020 | | |
| Date of Issue | September 2020 | | |
| To be Agreed | October 2020 | | |
| Document Status (Draft/Final) | Draft | | |
| Description | Minutes of the Strategic Commissioning Board on 7 September 2020 | | |
| Document History: | | | |
| Date | Version | Author | Notes |
| | 0.1 | Emma Kennett | Forwarded to Chair for review. |
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| Approved: | | | |
| Signature: | | <p>.....</p> <p style="text-align: right;">CLlr O'Brien</p> | |

Strategic Commissioning Board Virtual Meeting

| MINUTES OF MEETING |
|---|
| Strategic Commissioning Board Virtual Meeting 7 September 2020 16.00 – 17.00 Chair – Cllr O'Brien |

| Voting Members | |
|-----------------------------|---|
| Cllr Eamonn O'Brien | Leader, Finance & Growth, Bury Council (Chair) |
| Dr Jeff Schryer | NHS Bury CCG Chair |
| Cllr Jane Black | Cabinet Member Corporate Affairs & HR, Bury Council |
| Mr Will Blandamer | Joint Executive Director of Strategic Commissioning, Bury Council & NHS Bury CCG |
| Fiona Boyd | Registered Lay Nurse of the Governing Body, NHS Bury CCG |
| Mr Peter Bury | Lay Member Quality & Performance, NHS Bury CCG |
| Dr Daniel Cooke | Clinical Director, NHS Bury CCG |
| Dr Cathy Fines | Clinical Director, NHS Bury CCG |
| Mr Howard Hughes | Clinical Director, NHS Bury CCG |
| Mr David McCann | Lay Member Patient & Public Involvement, NHS Bury CCG |
| Cllr Tahir Rafiq | Corporate Affairs & HR, Bury Council |
| Cllr Andrea Simpson | First Deputy Leader, Health & Wellbeing, Bury Council |
| Cllr Lucy Smith | Transport & Infrastructure, Bury Council |
| Cllr Tamoor Tariq | Deputy Leader, Children, Young People & Skills, Bury Council |
| Mr Mike Woodhead | Joint Chief Finance Officer, NHS Bury CCG and Bury Council |
| Others in attendance | |
| Mrs Catherine Jackson | Director of Nursing and Quality Improvement, NHS Bury CCG |
| Ms Lesley Jones | Director of Public Health, Bury Council |
| Cllr Nick Jones | Council Opposition Member, Bury Council |
| Cllr Michael Powell | Council Opposition Member, Bury Council |
| Mrs Carrie Dearden | Communications and Engagement Manager, NHS Bury CCG |
| Mrs Julie Gonda | Director of Community Commissioning (DASS) |
| Mrs Lynne Ridsdale | Deputy Chief Executive, Bury Council |
| Ms Janet Witkowski | Head of Legal Services, Deputy Monitoring Officer and Data Protection Officer |
| Mrs Emma Kennett | Head of Corporate Affairs and Governance, NHS Bury CCG / Business Support (minutes) |

| Public Members | |
|-----------------------|----------------|
| Mr Peter Magill | Bury Times |
| Ms Barbara Barlow | Public Meeting |

MEETING NARRATIVE & OUTCOMES

| 1 | Welcome, Apologies And Quoracy |
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| 1.1 | The Chair welcomed those present to the meeting and noted apologies had been received from: - <ul style="list-style-type: none"> • Cllr Cummins, Housing Services, Bury Council |

| | <ul style="list-style-type: none"> • Cllr David Jones, Communities & Emergency Planning, Bury Council • Mr Geoff Little, Chief Executive, Bury Council / Accountable Officer, NHS Bury CCG • Mr Chris Wild, Lay Member, NHS Bury CCG | | |
|---------|---|------------------------------------|-------|
| 1.2 | The Chair advised that the quoracy had been satisfied. | | |
| 1.3 | The Chair reported that there originally wasn't a Public Meeting planned this month however due to the current Covid-19 position, a meeting had been deemed necessary. | | |
| ID | Type | The Strategic Commissioning Board: | Owner |
| D/09/01 | Decision | Noted the information. | |

| 2 | Declarations Of Interest | | |
|---------|--|--|-------|
| 2.1 | The Chair reported that the CCG and Council both have statutory responsibilities in relation to the declarations of interest as part of their respective governance arrangements. | | |
| 2.2 | It was reported that the CCG had a statutory requirement to keep, maintain and make publicly available a register of declarations of interest under Section 14O of the National Health Service Act 2006 (as inserted by Section 25 of the Health and Social Care Act 2012). The Local Authority has statutory responsibilities detailed as part of Sections 29 to 31 of the Localism Act 2011 and the Relevant Authorities (Disclosable Pecuniary Interests) Regulations 2012. | | |
| 2.3 | The Chair reminded the CCG and Council members of their obligation to declare any interest they may have on any issues arising from agenda items which might conflict with the business of the Strategic Commissioning Board. | | |
| 2.4 | Declarations made by members of the Strategic Commissioning Board are listed in the CCG's Register of Interests which is presented under this agenda and is also available from the CCG's Corporate Office or via the CCG website. | | |
| | <ul style="list-style-type: none"> • Declarations of interest from today's meeting | | |
| 2.5 | The Registered Lay Nurse of the Governing Body, NHS Bury CCG reported that there had been an update to her declaration of interest in light of a temporary appointment at DWF Law. It was noted that a new declaration form had been submitted in this regard and a new register would be made available for the next SCB meeting. | | |
| | <ul style="list-style-type: none"> • Declarations of Interest from the previous meeting | | |
| 2.6 | There were no declarations of interest from the previous meeting raised. | | |
| ID | Type | The Strategic Commissioning Board: | Owner |
| D/09/02 | Decision | Noted the published register of interests. | |

| 3 | Minutes of the last Meetings and Action Log | | |
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| | <ul style="list-style-type: none"> • Minutes <p>The minutes of the Strategic Commissioning Board meeting held on 3 August 2020 were agreed as an accurate record.</p> | | |

| 3.1 | <ul style="list-style-type: none"> Action Log <p>There were no updates in relation to the Action Log.</p> | | |
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| ID | Type | The Strategic Commissioning Board: | Owner |
| D/09/03 | Decision | Approved the minutes of the meeting held on the 3 August 2020. | |

| 4 | Public Questions | | |
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| 4.1 | There were no public questions raised. | | |
| ID | Type | The Strategic Commissioning Board: | Owner |
| D/09/04 | Decision | Noted the information. | |

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| 5. | Covid-19 and the Bury Response | | |
| 5.1 | <p>The Joint Executive Director of Strategic Commissioning, Bury Council & NHS Bury CCG provided a presentation in relation to the latest Covid-19 position and the Bury Response. The Director of Public Health also provided an update on the position. It was reported that: -</p> <ul style="list-style-type: none"> Bury now had one of the highest coronavirus infection rates in England, falling within the top 10 areas. While rates across Greater Manchester were dropping, Bury's continued to rise – and was now three times the national average. This was Bury's sixth weekly rise in a row. Current statistics were indicating a Covid-19 rate of 45 per 100,000 population. Household transmission remained an important source of new infections, as people spread the virus they had caught in the community to their families. Those aged 18 – 39 accounted for more than half of the new cases in Bury, and the percentage of positive tests had also increased. The cases were spread across all of the wards in the borough. Given the geographically dispersed nature of the cases across the borough and that household transmission was significant, it was possible at least some of the rises related to flows of people to adjacent boroughs for reasons of work and leisure. The ethnic profile of cases is beginning to change from July where 50% of cases identified as Asian and 50% White British to 14% and 57% in mid Aug. The governance / partnership approach being adopted within the borough was outlined. The digital communications undertaken in relation to the Covid-19 were outlined. Looking forward, Bury needed to strengthen its Covid-19 response in order to address some of the challenges ahead. The latest testing information was available on the Council website which had been subject to a number of changes to cope with demand. | | |
| 5.2 | <p>The following comments/observations were made by Strategic Commissioning Board members: -</p> <ul style="list-style-type: none"> The need to ensure that appropriate resources are available to act upon any breaches in Covid-19 rules in the locality. The need to review the current local position in relation to staff working from home given some of the recent changes in national guidance. The Director of Public Health commented that Bury had a higher proportion of people that were unable to work from home than in other boroughs due to the type of jobs that people hold. | | |

| | <ul style="list-style-type: none"> • The consequences of 'Business as Usual' not occurring in some areas needed to be assessed in terms of any adverse consequences in the short, medium and long term. • Some examples of where Covid-19 measures had worked well were provided including good compliance with mask wearing in Scotland. It was highlighted that there was a need to reinforce the local messaging within this area. • There were significant challenges in relation to enforcement, policing, licensing and communications. | | |
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| ID | Type | The Strategic Commissioning Board: | Owner |
| D/09/05 | Decision | Noted the update. | |

| 6. | Covid-19 Testing |
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| 6.1 | The Joint Executive Director of Strategic Commissioning, Bury Council & NHS Bury CCG and the Director of Nursing and Quality Improvement presented a report in relation to Covid-19 testing. |
| 6.2 | The paper outlined the plans for a resilient and longer-term (>6 months) testing solution to manage the borough response to Covid-19 disease. |
| 6.3 | The cost for this service was estimated at a monthly cost of £92,000. It was noted that this was the upper estimate and it was anticipated that costs would reduce as the exact requirements were established with providers, but it was felt prudent to have costs in at the upper estimate. |
| 6.4 | It was highlighted that the Locality Outbreak Plan detailed the strategic response for widening testing across the borough to respond to increasing prevalence of Coronavirus disease locally. It was noted that by ensuring the CCG and Council have the right plan and resources in place we will be able to deliver the testing response required to meet national or local requirements. |
| 6.5 | The strategic testing response had different components to ensure all people have equal opportunity to get tested if they have symptoms. |
| 6.6 | Additionally, built into the plan was a structure that could deliver mass testing of asymptomatic public should the EWS triggers indicate a need to do this. The diagram showed the way we would deliver testing across the borough with a range of testing mechanisms providing a robust response |
| 6.7 | It was reported to date that Walk up testing sites had been set up at Mosses Centre and Chesham Fold for individuals who are experiencing symptoms of the virus. The plans for further sites across the borough were outlined. |
| 6.8 | The Joint Chief Finance Officer referred to the £92k funding and commented that there was no specific budget to cover these costs. It was highlighted that the majority of costs related to the Out of Hours testing component and commented that there was a need to ensure there was no duplication of existing spend. It was reported that this funding should fall within the scope of the Pooled Budget arrangements and any overspend would need to be risk shared across the CCG and Council. The Director of Nursing and Quality Improvement commented that there was still potential for some NHS Covid-19 funding to support some of these costs however nothing had been confirmed as yet. It was agreed that the Joint Chief Finance Officer would review the funding for this area once the exact costs were known and assess whether any additional national funds have been provided. |

| 6.9 | <p>The governance for this would need to be aligned with existing Pooled Budget arrangements / agreed delegations to ensure no Ultra Vires decisions were being made.</p> <p>The following comments/observations were made by Strategic Commissioning Board members: -</p> <ul style="list-style-type: none"> The need for a community based testing approach with easy access to those with symptoms. The communication within this area needed to be clear. | | |
|---------|--|---|-------------|
| ID | Type | The Strategic Commissioning Board: | Owner |
| D/09/06 | Decision | Noted the content of this paper and supported in principle the funding outlined within the paper for a resilient Covid-19 borough-based testing service subject to the Joint Chief Finance Officer confirming the exact funding arrangements. | |
| A/01/01 | Action | It was agreed that the Joint Chief Finance Officer would review the funding for this area once the exact costs were known and assess whether any additional national funds have been provided. The governance for this would need to be in line with existing Pooled Budget arrangements / agreed delegations to ensure no <i>Ultra Vires</i> decisions were being made | Mr Woodhead |

| 7. | CHC Recovery |
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| 7.1 | The Director of Nursing and Quality Improvement presented a report in relation to CHC Recovery. |
| 7.2 | It was reported that the National framework for NHS CHC was suspended in March 2020 in response to the Covid-19 outbreak and the Rapid Discharge Pathway was implemented. As part of the phase 3 guidance we have been advised that the confirmed CHC re-start date is the 1st September 2020. Following discussions with the Regional/GM CHC leads and NHSEI, there was now further clarity on what this would look like and how localities would need to respond. |
| 7.3 | It was noted that there would need to be a CHC Recovery Team in place for 7 months to address the backlog of approximately 400 assessments that have built up since the suspension of the CHC process. |
| 7.4 | It was highlighted that the minimum cost of the recovery team was approximately £462k, this takes in to account agency fees, as agency is the likely source of these staff. In a national webinar on 25th August it was confirmed that there would be national funding to support the recruitment of these staff but the value and nature of this was not confirmed. |
| 7.5 | <p>The key recovery points were: -</p> <ul style="list-style-type: none"> There would be now allowances made for the Greater Manchester local lockdown in terms of a delay to the re-start date. It was expected that there will be a number of local lockdowns moving forward so local areas are asked to adjust locally how they deliver the service in response to these. This will mean that a number of assessments will need to take place virtually using technology to support the assessment process. NHSEI have stated (although not had it in writing) that they expect anyone who received a package of support under the new guidance to continue to receive this |

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| 7.6 | <p>until 31st March 2020 at which point they expect that all will have had an assessment to establish a long-term package of support and funding pathway.</p> <ul style="list-style-type: none"> Any new cases would receive a package of transitional funding for 6 weeks after this irrespective of whether the assessment has taken place then funding will be picked up by the local CCG. The CCG will be asked for a trajectory for how we manage the cases from 1st September to 31st March and this will be monitored on a monthly basis by NHSEI. The regional leads have asked for a communication strategy to come centrally as many individuals may be unaware that the funding is only interim and that they will be expected to pay or contribute towards care. Locally we have asked for additional support with top ups and other cases where families may be asked to contribute to care costs. There was expected to be a significant increase in the number of complaints and appeals (local and independent reviews at NHSEI). The CCG was aware the claims companies have already been in contact with individuals and are expecting this increase. They have advised this will have an impact upon CHC for a number of years and it is likened to the PUPOCs (Previously Unassessed Periods of Care). There was additional guidance expected centrally but it is unlikely that this will streamline or change the CHC assessment process as they need it to withstand legal challenge in the future and not render us at risk of retrospective reviews. Central funding had not yet been clarified to support CCGs with staffing requirements for the additional work and managing the backlog. <p>The Director of Nursing and Quality Improvement envisaged that there would be funding available to support this work however this was not confirmed as yet.</p> |
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| ID | Type | The Strategic Commissioning Board: | Owner |
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| D/09/07 | Decision | Considered the report and supported the recruitment of the additional staff as laid out in this report subject to the specific funding streams being confirmed. | |

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| 8. | Hospital Discharge and Covid-19 |
| 8.1 | <p>The Joint Executive Director of Strategic Commissioning, Bury Council & NHS Bury CCG submitted a report in relation to Hospital Discharge and Covid-19.</p> <p>It was reported that: -</p> <ul style="list-style-type: none"> The paper explained the new arrangements for hospital discharge introduced on March 19th 2020 to respond to the COVID-19 pandemic. It illustrated the effects on the Bury System and recommended rationalisation of the provision to remove waste whilst ensuring sufficient provision remains to allow the ongoing delivery of the Covid-19 Hospital Discharge Guidance. Spurr House would stop admitting hospital patients from 1st September 2020 with remaining patients continuing to be funded, their care would be free and they would have their long term needs assessed within 6 weeks. Spurr House would return to delivering respite. The 2 extra care flats would be returned to general let and the occupants would have their long term needs assessed. The 11 COVID beds at Gorseley Clough would transition to Non Covid beds and deliver nursing discharge to assess and end of life care. Heathlands would continue to deliver 19 D2A nursing beds. |

| | <ul style="list-style-type: none"> • There would be a continuation of purchasing home care from the independent sector, it would be provided free of charge for the patient for up to 6 weeks and delivered with a reablement focus during which time the patients will have their long term needs assessed. • There would be a continuation of spot purchase care homes beds where patients will stay for up to six weeks for end of life care or to have their future care needs assessed. • Continuing Health Care and Funded Nursing Care Assessments would restart on 1st September, these assessments would be carried out in the community and will be completed within the 6 weeks of free care. They will not take place in the hospital. • Hospital discharge pathways will continue and MOATS continue to be minimised. | | |
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| ID | Type | The Strategic Commissioning Board: | Owner |
| D/09/08 | Decision | Approved the content of the report. | |

| 9 Any Other Business and Closing Matters | | | |
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| 9.1 | The Chair summarised the main discussion points from today's meeting and thanked members for their contributions. | | |
| ID | Type | The Strategic Commissioning Board: | Owner |
| D/09/09 | Decision | Noted the information. | |

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| Next Meetings in Public | Strategic Commissioning Board Meeting: <ul style="list-style-type: none"> • Monday, 5th October 2020, 4.30 p.m., Formal Public meeting via Microsoft Teams (Chair: Cllr E O'Brien / Dr J Schryer) |
| Enquiries | Emma Kennett, Head of Corporate Affairs and Governance emma.kennett@nhs.net |

Strategic Commissioning Board Action Log – September 2020

Status Rating



- In Progress



- Completed



- Not Yet Due



- Overdue

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|---------|--|-------------|--|--------------|--|
| A/09/01 | It was agreed that the Joint Chief Finance Officer would review the funding for this area once the exact costs were known and assess whether any additional national funds have been provided. The governance for this would need to be in line with existing Pooled Budget arrangements/ agreed delegations to ensure no <i>Ultra Vires</i> decisions were being made | Mr Woodhead | | October 2020 | |
|---------|--|-------------|--|--------------|--|