

MINUTES OF THE NCL STP PROGRAMME DELIVERY BOARD
15:00-17:00 on Tuesday 11 July 2017
Room 11.11-11.12, 5 Pancras Square, London, N1C 4AG

Members	Role and job title	Attended	Deputy sent	Apologies
Helen Pettersen (HP)	STP Convenor (Chair) and SRO Lead for CCGs	✓		
Will Huxter	Director of Strategy, NCL CCGs	✓		
Caroline Clarke (CC)	Co-SRO Planned Care Workstream Chief Finance Officer, Deputy CEO Royal Free			✓
David Stout (DSt)	STP Senior Programme Director	✓		
Dawn Wakeling (DW)	SRO Estates Workstream; DASS Barnet Council	✓		
Jo Sauvage (JS)	STP Co-Clinical Lead, Chair Islington CCG	✓		
Jon Abbey (JA)	SRO Children and Young People Workstream and Director Children's Services Representative; Director Adult & Children Services Haringey Council			✓
Julie Billett (JB)	SRO Prevention Workstream; Director of Public Health, Camden and Islington	✓		
Kathy Pritchard-Jones (KPJ)	SRO Cancer Workstream; CMO UCLH Cancer Collaborative			✓
Simon Pleydell (SP)	Acting SRO Workforce Workstream; CEO Whittington Health	✓		
Mike Cooke (MC)	Vice Chair and SRO Lead for Local Authorities; CEO Camden Council	✓		
Neil Griffiths (NG)	SRO Digital Workstream; Deputy CEO UCLH	✓		
Paul Jenkins (PJ)	SRO Mental Health Workstream; CEO T&P FT	✓		
Paul Trevethick (PT)	GP Federation Representative			✓
Rachel Lissauer (RL)	SRO Maternity Workstream; Acting Director of Commissioning, Haringey CCG	✓		
Ray James (RJ)	Director Social Services Representative; Director Health, Housing & Adult Social Care (Enfield)	✓		
Richard Jennings (RJ)	STP Co-Clinical Lead; Co-SRO Planned Care Workstream Medical Director, Whittington Health NHS Trust			✓
Simon Goodwin (SG)	Chief Financial Officer, North Central London CCGs			✓

Sir David Sloman (DSI)	Vice Chair and SRO Lead for Providers and CEO Royal Free London NHS Foundation Trust	✓		
Tim Jaggard (TJ)	SRO Productivity Workstream; Finance Director UCLH	✓		
Tony Hoolaghan	SRO, Care Closer to Home, COO Islington and Haringey CCGs			✓
Sarah Mansuralli	SRO, Urgent & Emergency Care, Local Executive Director, Camden CCG	✓		

Attendees	Job Title	Reason for attendance
Kevin Monteith	Head of Programme Management	STP PMO
Sanjay Mackintosh	Social Care Lead, STP PMO	PMO Support
Jonathan Fisher	Programme Manager	STP PMO
Gen Ileris	Comms and Engagement Lead, STP PMO	PMO Support
Ceri Jacob	Director of Commissioning Operations, NHSE	Attendee
Ash More	Specialised Commissioning, NHSE	Attendee

No.	Agenda Item	Action owner
1.0	GENERAL BUSINESS	
1.1	Welcome and Apologies	
	<p>Helen Pettersen (HP) welcomed everyone to the meeting. Introductions were made and apologies noted. The meeting was QUORATE.</p> <p>HP asked DSt and WH to update the Board on the transitional arrangements and roles within the STP. They confirmed that DSt has now handed over his STP director role to WH and that for the next 6 months, DSt will focus on the implementation of the planned care delivery plan and sustainable services. HP thanked DSt for his work and leadership role in driving forward the development of the plan.</p>	
1.2	Review of minutes from the previous meeting	
	The minutes from the last meeting held on 13 June 2017 were reviewed and agreed without amendment.	
1.3	Review of action log	
	<p>The actions from the last meeting held on 13 June 2017 were reviewed. Updates on the amber actions were provided as follows:</p> <p>Action 1: SROs The PDB were asked to approve the following SRO appointments: Planned Care: Marcel Levi, CEO, UCLH replacing Caroline Clarke. With regards the Digital SRO role, discussions were ongoing and will be resolved in time for the next</p>	

	<p>meeting. It was further noted that we are still seeking a replacement for Jon Abbey for the CYP workstream and it was agreed that expressions of interest should be sought for this with a view to having this in place for the next PDB meeting.</p> <p>1. Seek expressions of interest for the CYP SRO role with a 2-week deadline for responses.</p> <p>Specialised Commissioning It was noted that this was ongoing with relevant discussions yet to take place.</p> <p>Evidence Based Medicine This is scheduled for the September meeting of the CCG Joint Committee.</p> <p>STP Delivery Finance Report The first of these reports will be prepared for the August PDB meeting</p>	WH
1.5	New Declarations of interest	
	Jo Sauvage informed the Board of her recent election to the NHS Clinical Commissioners Board.	
2.0	PLANNING	
2.1	<p>Update on the Capped Expenditure Process David Stout (DSt) provided a verbal update on CEP process including the feedback received at a recent meeting with NHSE. DSt explained that there was an acceptance at this meeting that the financial gap was not closable in 17/18, and that the focus should be on delivering the commitments we have made in the plan. HP and TJ also explained that work was underway to analyse the run rate and underlying position. Reference was made to the recent presentation on STP finance to the JHOSC that was well received by the committee and HP advised about some media coverage by the BMA who had a journalist present at the JHOSC meeting. It was agreed that the slides used for the JHOSC meeting would be circulated to the PDB for information.</p> <p>In the discussion that followed, CJ confirmed the NHSE position in terms of focusing on the trajectory for 18/19, and that closing the gap further in 17/18 was accepted as unrealistic. MC enquired whether there was now an opportunity to revisit the original plan intentions in relation to prevention and early intervention. HP confirmed that the £15M investment in the current plan remained. A further point was raised in relation the control total surplus narrative which was difficult to explain and politically sensitive. The historical factors in relation to performance in the sector was explained but acknowledged that this was complex and DSI confirmed that negotiations were ongoing with NHSI, as the RFH has not yet formally accepted their imposed control total.</p> <p>2. Distribute the presentation slides from the JHOSC meeting</p>	KM

<p>2.2</p>	<p>STP Resourcing</p> <p>WH introduced this update with reference to recent meetings with the CCG Chief Operating Officers and CSU to identify resourcing needs/gaps and to try to match people with the right skills and ambition to relevant workstreams. WH also explained that he received some welcome support from NHSE that would be directed to the planned care and CC2H workstreams. In terms of the central STP PMO, WH confirmed that he was in the process of reviewing and confirming roles going forward. Finally, WH confirmed that some Deloitte days were being used for work in Barnet and Enfield.</p>	
<p>3.0</p>	<p>DELIVERY AND ASSURANCE</p>	
<p>3.1</p>	<p>Workstream highlight reports and high level risks</p> <p>WH introduced this suite of highlight reports with reference to the summary document provided. He firstly highlighted the accomplishments summary set out at page 23 of the pack and thanked everyone for their ongoing commitment to the work. Drawing the board’s attention to the themed summary report at page 14, WH noted the key themes of the highlight reports, which included resourcing and lack of capacity including clinical leadership, staff turnover, lack of investment, and slippage. Taking the summary themed report as read, WH then invited SROs to comment briefly on respective workstream implementation highlighting anything that needed to be brought to the attention of the delivery board. The key points highlighted for each workstream are summarised below:</p> <p>Mental Health – Paul Jenkins</p> <ul style="list-style-type: none"> • Largely on track with first developments coming on stream. A high level group is looking at the issue of 24 hour MH liaison and work underway to look at how best to align with prevention. Recruitment for programme manager replacement underway. For clarity, the wording regarding acute care pathway investment and the revised delivery plan will be altered for subsequent reports. <p>Planned Care – David Stout</p> <ul style="list-style-type: none"> • MSK work proceeding and noted that Rob Hurd and GIRFT team supporting this work. Dermatology work also going well. The July workshop on Clinical Advice and Navigation (CAN) was highlighted. Not forecasting slippage at this stage but there is risk in the plan. There are challenges in relation to lack of alignment in CCGs on pathway work. <p>Estates – Dawn Wakeling</p> <ul style="list-style-type: none"> • London Estates Board met last week and Devolution Board meeting this week. MOU still not signed. Discussion about the related political issues and ministerial changes. Noted that Diane Macdonald has been recruited to work to Simon Goodwin to help with compiling information about organisational estate 	

portfolios. Work to obtain estates schedules 'terriers' is ongoing and where there are issues obtaining this information, it should be flagged to the CEOs.

Maternity – Rachel Lissauer

- Workstream delivery on track. Better Births submission due in October. Significant drive towards personalisation with the development of apps and web-based tools. Single point of access work progressing, quality and safety going well and a service user engagement exercise is planned to focus on choice, continuity and community provision.

Urgent and Emergency Care – Simon Pleydell/Sarah Mansuralli

- Concerns flagged in relation to slippage and risk due to a number of factors including people transitions and a hiatus in activity and a shortage of resources to plan and run the design sessions. The challenges around admission avoidance were highlighted, as were issues in relation to lack of agreement about activity numbers and analytics. A point was raised about the need to clarify the Children and Young people proportion of A&E usage. The interdependencies between health and social care was discussed with particular reference to the recent guidance on the Better Care Fund (BCF). This is subject to a national dispute between with the Local Government Association (LGA) and may have implications politically and in terms of reporting DTOC trajectories. The fact that two different sets of guidance had been released was flagged as very unhelpful and CJ agreed to look into the dispute to establish the current position. In conclusion, the UEC workstream is at risk of significant slippage and before the requested approval of amended project milestones can be approved, it was agreed that the related financial impact modelling needed to be completed. The resourcing issue was agreed as a major priority with admission avoidance and discharge the two key delivery plan priorities.

Workforce – Simon Pleydell

- As SP had just taken over the acting SRO role, a short update was provided emphasising the importance of connectivity with the other workstreams and the need to avoid the pitfalls of designing models of care/services that are unstaffable. Progress in relation to work on reducing reliance on bank and agency staff and mandatory training was noted.

Prevention – Julie Billett

- The revised delivery plan is broadly on track with a focus on making best use of existing resources and embedding the focus on prevention within new services such as CHINS and QISTs.

Digital – Neil Griffiths

- With reference to the supplementary paper on dependency mapping, the risks in relation to investment were highlighted. Discussion focused on the need to access additional funding to focus on the top priorities. The need to understand how

	<p>much organisations have planned to commit to digital initiatives needed to be understood with a view of trying to work more collectively as a system on the digital agenda. The need to do this mapping was agreed and to position ourselves as a system to successfully bid for national funding opportunities. There was some discussion about the return on investment table set out in the dependency mapping report that challenged some of the assumptions made.</p> <p>Care Closer to Home, Cancer, and Children and Young People were not represented at the meeting but their respective highlight reports were noted, as well as the CC2H stocktake report that was inadvertently included in the meeting pack.</p> <p>The need to focus on workstream dependency mapping emerged as a common theme for the key workstreams and the Board agreed that this work should be taken forward as a priority</p> <p>3. Undertake further dependency mapping with the key workstreams focusing on the top 3-4 dependencies in each workstream</p>	WH/SROs
4.0	Any Other Business	
	<p>There were no items of any other business discussed. The next meeting of the Programme Delivery Board was confirmed as 8th August 2017 3-5pm at 5 Pancras Square Room 11.10-11.11.</p>	
CLOSE: The meeting closed at 4:50pm.		