

**Joint Commissioning Group**  
**Notes of 2<sup>nd</sup> June 2015 Meeting**

**Present:**

Cherry Jones (CJ), Sue Wald (SW), Jackie Walker (JW), Angela Plummer (AP), Thomas Kearney (TK), Sheila Baxter (SB), Paul Bearman (PB), Peter Nathan (PN), Nicki Millin (NM), Karen Hobbs for item 4

**Apologies:** Joy Kennard (JK), Caroline Little (CL), Caroline Gregory (CG),

<i><b>Item</b></i>	<i><b>Description</b></i>	<i><b>Action</b></i>
<b>1.</b>	<b>Matters arising and Minutes</b> <b>Update on actions:</b> Cherry to bring Health Protection over view to the August meeting Autism post diagnosis support – Lynn M Camhs – does not seem to have a waiting list, issues with interface into Tier 2. Recovery Plan to be discussed at contract meeting Children's 0 – 5 JSNA to include maternity and birth ratio and will go to Health & Wellbeing Board (HWB)	CJ LM
<b>2.</b>	<b>Continuing Health Care</b> CCG taking report to governing body to engage agency to deal with original backlog of 74 cases (which has now reduced). 2 temporary staff to continue to clear. It was agreed that the current additional 100 backlog cases will also need to be cleared as soon as possible. New performance framework to be introduced by NHS England and it is hoped that the new data base will produce the information for the performance framework. Benchmarking information shows Swindon has high unit costs but overall low numbers and low spent. It is not surprising that unit costs are high as threshold is high.	
<b>3.</b>	<b>Multi agency placement panels</b> We have a number of panels for children with complex needs, mental health and CHC. There are different processes and terms of references for the different panels. Purpose of project group: Establish the audit trail for multi agency panel decision making which feeds into CCG and SBC  Action All placements to be recorded on CHC data base Paul Bearman to draft scope for project group	PB
<b>4.</b>	<b>Learning disability self assessment Public Health England</b> Public Health England asks for a self assessment each year. The work has been led by the Learning Disability Partnership Board which is primarily a group of service users, carers and providers such as SEQOL.	

<b>Item</b>	<b>Description</b>	<b>Action</b>
	<p>There are a significant number of data items covering health.</p> <p>Action</p> <p>Self assessment to be circulated with the minutes</p> <p>Health data source to be investigated and to come back to the next meeting</p>	KH NM
<b>5.</b>	<p><b>Performance Adults</b></p> <p>Health Performance report was circulated with the papers of the meeting. Health outcomes and delayed discharge were discussed. GWH is starting the Choice Policy today so that patients are informed what they will be discharged from hospital at the earliest opportunity when it is safe and at this stage there may not be choice of provision.</p> <p><b>Children's Performance issues</b></p> <p>Increase in children in need causing pressure within children's social care.</p> <p>Action</p> <p>Report on SEN and completion of Education, Health and Care Plan</p>	PN
<b>6.</b>	<p><b>Finance</b></p> <p>End of year finance report was circulated. Children's health services delivery was break even. Children's services local authority over spent of £833k due to need for agency management staff and agency social workers. Underspent on adult social care due to savings delivered in learning disability. Public health reserve of £200k to be invested in 2015/16</p> <p>Action</p> <p>Split out detail on children's health services expenditure</p> <p>Better Care Fund expenditure to come to the next meeting as it started 2015/16</p> <p>Schools are funded through the dedicated Schools Grant which many of them use to buy additional traded services which also cover health</p>	JW
<b>7.</b>	<p><b>Public Health Outcomes Framework</b></p> <p>Areas of risk: years of life lost for women under the age of 65 was highlighted in particular</p>	
<b>8.</b>	<p><b>Health &amp; Wellbeing Strategy</b></p> <p>Detailed report on outcomes presented to Health &amp; Wellbeing Board (HWPB). HWPB believes that the priorities remain appropriate in relation to the performance and outcomes measures. A full review will be undertaken in 2016</p>	

<b><i>Item</i></b>	<b><i>Description</i></b>	<b><i>Action</i></b>
<b>9.</b>	<b>Future Agenda items</b> July/August Making Every Contact Count – Cherry Performance reports based on <ul style="list-style-type: none"> <li>- Any actions off track against Joint Commissioning delivery plan</li> <li>- Performance against section 75 outcomes</li> <li>- Risk register</li> <li>- SEN report</li> </ul>	CJ  PB
<b>10.</b>	<b>AOB</b> Concern about mental health residential care provider – Sheila to share with Nicky Gale SBC Contracts team Integrated Sexual health contract extension going to Cabinet 17 <sup>th</sup> June 2015 HWB Provider Forum the end of June 2015	SB  CJ