

Joint Commissioning Group
Notes of 2nd November 2015 Meeting

Present:

Sue Wald (SW), Jackie Walker (JW), Sheila Baxter (SB), Nicki Millin (NM), Cherry Jones (CJ), Paul Bearman (PB), Matthew Hawkins (MH), Louise Tapper (LT), Lynn Frith,), Angela Plummer (AP), Thomas Kearney (TK), Gill May (GM), Lisa Samak (LS)

Apologies: Joy Kennard (JK), Caroline Little (CL), Caroline Gregory (CG) Peter Nathan (PN),

<i>Item</i>	<i>Description</i>	<i>Action</i>
1.	<p>Matters arising and Minutes</p> <p>Update on outstanding actions :</p> <p>Cherry to bring Health Protection over view to the December meeting</p> <p>Newton Europe clarification received, financial model sessions were held. Details to be presented to Strategic Planning Group 13 11 2015. Sue to circulate finance slides. Discussions now taking place within CCG and SBC on implications. Sue and Angela have asked Newton to revise the savings for adult social care from 30% opportunity to 20% opportunity for preventative services. One of the areas highlighted as a preventative service was falls prevention. Gill has had discussion with Public Health. Results of discussion at CCG. Discussion to come back to JCG December</p> <p>Sue forwarded the details of patients with four visits a day to Gill for an audit.</p> <p>Mental health transformation plan submitted and additional information on spent given, now awaiting feedback</p> <p>Personal health budgets: CCG have appointed project manager to develop.</p>	<p>CJ</p> <p>SW</p>
2.	<p>Finance</p> <p>Adult social care budget projected to underspent due to early delivery of savings for 2016/17 in learning disabilities of £313k. This is a revised forecast as the additional 700 hours of dom care per week plus 14 discharge to assess beds have created a budget pressure of £950k. If the increase in care packages continues then the discharge to assess beds would be at risk from January 2016. Angela to identify dementia with delirium cases and ask CCG team to undertake audit. Specialist dementia community team starting 1st December 2015 and this team could inreach into discharge to assess bed. Pathway for patients with delirium to be circulated</p>	<p>AP</p> <p>TK</p>

Item	Description	Action
	<p>BCF Swindon Borough Council has identified a saving of £100k from reducing isolation scheme. Quarterly return is due the end of November. BSF return to go to CCG Executive and HWB</p> <p>Children's Services Projected overspent on children's social care due to social work agency costs and placements. Social work managers have been recruited as well as front line social workers. This has an implication for children's budget 2016/17. Karen Reeve raised capacity of the named nurse for looked after children, paediatric and speech and language therapy and asked CCG to consider additional funding 2016/17</p> <p>Action Report to Health & Wellbeing Board on Better Care Fund performance</p>	NM/SW
3.	<p>Performance Children's Performance report – now to be presented every 2 months.</p> <p>Adults</p> <p>Sue circulated performance report. Admission to residential care for older people increased significantly in August and September, mainly older people over the age of 85 into nursing care. Assessments completed within 28 days is improving according to SEQOL data for September which has not yet been included in these figures.</p> <p>Delayed discharge: Delayed discharge figures are still high but have improved from GWH to 170 days whilst SWICC accounted for 202 days. Angela has shared the high levels of delayed discharge issue with front line staff and managers in SEQOL in SWICC who did not seem aware of the issue. Planning meetings to outline discharge process have been held with follow up this month. Health Overview and Scrutiny asked for a whole systems report. First draft to be shared with SEQOL and GWH and circulated to this group.</p> <p>Equipment: Issue of equipment ordered through community nursing. Louise Tapper has had initial meeting with SB and asked for staffing list. There is an opportunity to look at the use of equipment and technology and how this supports reduction in care packages.</p>	LT
4.	<p>Risk register Risk register had been updated by CCG and was shared. There are now a large number of risks and overlap with CCG risk register and SBC risk register. Jackie and Paul agreed to meet to look at how to combine CCG</p>	

Item	Description	Action
	joint risks with JCG risks. SBC has a new format	
5.	<p>CHC</p> <p>CHC check list needs to be completed by SEQOL DART or GWH before submitting a request for high level residential/nursing and very high care packages. High numbers of self funders asking for CHC check list Angela and Paul met and discussed need for a staff consultation document as there will be a paragraph in the Accountable Officer report. Draft internal audit report arrived yesterday. There is a need for CCG to now determine the options for future of service. Discussions today on Finance function in CCG</p>	
6.	<p>Performance indicators for RAU, Rapid Response and Reablement</p> <p>Rapid assessment unit has KPIs already.</p> <p>Reablement and rapid response should link but needs to link to RAU so that RAU can discharge into those rapid response services. Currently Reablement was separately but has now structurally been brought together with Rapid Response. Initial baseline could be</p> <ul style="list-style-type: none"> • Number of referrals into rapid response/reablement • Number from RAU to rapid response/reablement • Response time by Rapid response/reablement to referrals and nature of response <ul style="list-style-type: none"> ○ hours of dom care delivered ○ advice and information offered ○ crisis bed 	
7.	<p>AOB</p> <ul style="list-style-type: none"> ○ AWP: inpatient capacity is improving for older adults and those of working age. NHS England have written to CCG on options for funding next year where funding is based on a new formula including capitated budget or PBR. A number of issues identified around Delayed Discharge, personalisation ○ Chalkdown: Issue for CCG as patients are registering with local GP as permanent when it should have been temporary registration. ○ Carers return to NHS England ○ Social care activity report: Matthew to set out information request 	

<i>Item</i>	<i>Description</i>	<i>Action</i>
8.	Future meetings December: <ul style="list-style-type: none"> ○ Newton diagnostic – December 2015 ○ AWP ○ Aftercare for Section117 After Care Plan and responsibilities ○ Chalkdown ○ Commissioning for Quality and Innovation (CQIN) update – Gill 	