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| Sue Wald | SBC – Director Adult Social Services |
| Jackie Walker | SBC - Change Lead & Head of Finance, Vulnerable People |
| Phillipa Lamb | SBC – Strategy & Development Manager |
| Joy Kennard | SBC – Head of Commissioning |
| Lyn Frith | SBC - Strategic Commissioner SEND |
| Esther Schmidt | SBC/CCG – Joint Children’s Commissioner |
| Sheila Baxter | CCG - Mental Health Joint Commissioner |
| Gill May | CCG- Executive Nurse |
| Sharon Pell | CCG- Associate Director for Quality |

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| 1. | <p>Welcome & Apologies</p> <p>Apologies: Thomas Kearney (CCG), Graeme O'Malley (CCG); Karen Reeve (SBC), Caroline Gaulton (SBC), Matthew Hawkins (CCG)</p> | |
| 2. | <p>Notes of previous meeting 07th Feb 17</p> <p>Minutes relating to Children Review (page 2)</p> <p>Karen Reeve (DCS) has written to the CCG outlining a number of areas of concern, some of which contradict what is summarised under the Children's Review in the minute 7/2/17. It was noted CCG are responding to the points raised by Karen Reeve in writing.</p> <p>Matters arising</p> <ul style="list-style-type: none"> • SW has circulated the amended terms of reference which will be shared with Health and Wellbeing Board at the next meeting • Discussions ongoing between JW/AP/SB to understand the evidence and criteria for £192k spend for mental health. It was noted as this is part of section 75 agreement, any funding changes require a 12 month notice period, which has been given by CCG. CCG have also advised that the governance of this budget needs to be finalised. • SW has shared the previous work undertaken by Newton on A&E attendance at GWH with Go'M • SW informed the meeting that Cabinet had agreed for SBC to receive additional capacity to reshape adult social care and to tackle the ongoing cost pressures through better demand management. SW suggested Newton Europe could run a session to share the learning from their recent diagnostics on older people and with physical disabilities which has informed the change programme. | <p>JW/AP/SB</p> <p>SW</p> |

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| | <p><u>Progress on SEND reforms from CCG perspective.</u></p> <p>Presentation by ES attached for information. Key areas noted:</p> <p>The national trend shows a significant rise in the number of children diagnosed with Autistic Spectrum Disorder (ASD) – diagnosis has more than doubled since 2004.</p> <p>The average waiting time for ASD diagnosis is currently 41.8 weeks. There is a weekly referrals meeting to triage the cohort and under 5's and cases with safeguarding concerns are prioritised. 55 children are waiting for OT support and 64 children are waiting for Speech and language support. CCG has invested an additional £330,610. £128k has been identified to increase capacity to 65% and reduce waiting time to 13 weeks. £37,525k has been provided to fund an additional Educational Psychologist. Need to clarify whether funding has been allocated to GWH or SBC.</p> <p>CCG will receive monthly performance data from Saltway and GWH which will include impact measures to evaluate the effectiveness of commissioning decisions and inform future commissioning intentions. ES is not currently receiving data on TAMHS. PL to follow up SBC performance team and SBC Head of Early Help as a performance dashboard is regularly provided for TAMHS service. However, it was noted the TAMHS dashboard will include additional activity not funded by CCG as majority of funding is raised through trading with schools. ES mentioned work is underway to co-design a model for CAMHS and TAMHS which will provide a seamless service. Parent/carer forum and health watch will be consulted on proposals.</p> <p>A joint improvement SEND Action plan is in development between SBC and CCG</p> <p>Plans are in place to boost the uptake of Personal health budgets with an initial focus on children who are wheel chair users</p> <p>ES working with MG to develop robust criteria to assist with decision making on health funding for children with complex needs.</p> <p><i>ACTION: PL to request TAMHS performance dashboard is shared with ES</i></p> <p><u>Children's Services Review</u></p> <p>Currently identifying areas of investment, impact and what needs to change. A review of the funding arrangements for supporting parents whose children are on the ASD pathway is underway to assess whether shifting resources to more parenting courses may be the preferred option recognising the positive impact good parenting has on this cohort of children.</p> <p>It was noted that SBC is leading on the preparation of an Early Help Strategy for Swindon. The strategy is informed by latest research, best practice, government policy and local analytics. This document should help inform future commissioning intentions.</p> | <p>PL</p> <p>ES/MN</p> |
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| | <p>ACTION: <i>ES's presentation to be circulated with the minutes</i></p> <p><u>Transition Programme</u></p> <p>Update report shared with JCG members. It was noted a transition stakeholder event was being held at Sanford House until 8.00 pm which so far had been well attended with positive feedback</p> <p>The transition programme aims to improve joint working between Children, Adults and Economy services so children are identified earlier, aspirations of children and families are raised, and children and young people are supported to develop life skills alongside education, training and employment opportunities in preparation for adulthood.</p> <p>The commissioning workstream of the programme is addressing how we can secure a more outcome focussed model of support and encourage new providers into the market</p> | |
| 3 | <p><u>Place of Safety Section 136</u></p> <p>Still awaiting the consultation paper which was planned for Monday 13th March 2017. SBC was concerned with the delay in the consultation and the tight timescales. It was highlighted that the impact of changes on partners (e.g. operational & financial) as well as children and young people (travel) need to be considered if the service is re-located at Devizes</p> <p>There will be three public meetings as well as information in local press, letters to MPs, councillors and GP surgeries. On the proposed changes. An online survey is also to provide feedback. A presentation is planned for H&O Scrutiny in May 2017.</p> <p>Action: <i>To circulate the consultation document</i></p> | SB |
| 4 | <p>Revision on 75 changes 2017/18</p> <p>Financial schedules have been circulated and shared and are being reviewed by CCG. Additional funding for ASC will be available via BCF. Noted any changes to schedule requires 12 month notice period. Latest picture is that possibly up to £3m additional funding may be available to support older people services, demand for adult social care and hospital discharge in Swindon. Swindon Borough Council will be proposing how additional money will be allocated led by the cabinet Member. It is likely that sign off of the additional investment will need to go through Health & Wellbeing Board. It is important agencies assess the impact of budgetary decisions across the partnership. We are still awaiting BCF guidance and there will be tight turnaround to finalise and consult on our plan before H&W Board.</p> | |
| 5 | <p>Older People/Physical Disability Programme</p> <p>During December 2016, SBC undertook an assessment of our Adult Social Care Services for older people and people with physical</p> | |

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| | <p>disabilities with support from the external consultants Newton. The assessment identified:</p> <ul style="list-style-type: none"> • Opportunities for working differently • Lack of clarity around the front door-referral process into ASC • Missed opportunities for conversation with families and older people as to what their needs are • Opportunity to adopt a more strengths bases approach to assessment e.g. what can people do for themselves, and what is it that SBC ASC need to do • Delays in the hospital and link between hospital social work team and the discharge team-GWH staff is not clear • Staff spend approx. 30% of their time on paperwork & 10% on direct contact with service users • Some SBC/GWH staff not clear on what to record and where • Evidence of multiple recording on different systems and evidence of no recording • Re-enablement only available following an OT assessment in GHW <p>The following areas were identified for improvement opportunities which will also potentially deliver significant savings in the longer term:</p> <p>Front Door Project</p> <ul style="list-style-type: none"> • To work with the Sanford house organisations to make sure we are doing as much prevention as possible and they we are diverting people into community based solutions where that is the right thing to do, for those who do need help they get it quickly. Leads are Eve Marshall and Caroline Gaulton • To work with Social Workers, partners from the voluntary sector go into a design phase and test a different way of working before it is rolled out. This is planned from April to October 2017. <p>Acute work stream</p> <ul style="list-style-type: none"> • To clarify the roles and functions of: the (DART) Discharge, Assessment and Referral Team and Social Work Team at GWH • To reduce delays particularly around assessments and make sure those who need social care are identified as early as possible and the right conversations take place at the right time to get people home as soon as possible • Stop inappropriate referrals and admissions to nursing care and focus on getting people home. SBC to work with GHW staff to understand the high rate of admissions to nursing homes. Spend on nursing care is high and a disproportionate number of people are being admitted. <p>New ways of Working</p> <ul style="list-style-type: none"> • To address the lack of direct contact time spent with service users. Currently direct contact with older people and their families is estimated to be between 8-10%, direct contact with service users with Learning Disabilities is about 13% and predicted direct | |
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| | <p>contact with Children is approx. 18%. Staff spend approximately 3-5 hours per week visiting service users and 20 hours per week on paperwork. Assessment and review process are being streamlined, paperwork reviewed and practice shifted to adopt an outcome focussed approach to working</p> <ul style="list-style-type: none"> • To make reablement more accessible and targeted to improve uptake • To support SBC with re-tendering of Domiciliary care contract and the residential and nursing home contract with a focus on commissioning for outcomes rather than services. • To improve processes to collect client and health contributions for care where eligible <p>The benefits of the programme will be tracked and we will share learning, methodologies and expertise with colleagues over the time of the programme.</p> | |
| 7 | <p>Better Care Fund</p> <ul style="list-style-type: none"> • No guidance available yet. PL and G'OM in process of refreshing 16/17 BCF Plan for 17/18. PL incorporating children's services to reduce the need to prepare a separate joint commissioning intentions document. The draft BCF 17/18 will need to be cleared by CCG Executive Board. • SW and Graham have been advised of schemes headings but these may change in due course | |
| 6 | <p>AOB</p> <p>Action: JCG to receive minutes from SEND Board as a standing agenda item every alternative meeting</p> <p>Action: LF to send a proposal for establishing a separate joint commissioning group for SEND to be considered at the next meeting</p> <p>Action: JK to confirm who will attend and present performance data at the monthly AWP contract meeting following John Hugh's departure</p> <p>LF informed the group SBC is commissioning are high needs provision funding review to preempt spend of the capital grant. It was noted that any revenue implications would also need to be considered. LF/PN scoping the review April 5 2017</p> <p>ACTION: LF bring scoping document and identify any revenue implications within the term of reference</p> <p>PL thanked CCG and GWH input into the ADASS Adult Social Care self assessment</p> | <p>MN</p> <p>LF</p> <p>JK</p> <p>LF</p> |