

Group members	Sue Metcalfe (Chair) (SM) Alan Wittrick (AW) Simon Cox (SC) Adrian Snarr (AS) Amanda Bloor (AB) Amanda Brown (ABr) Alison Levin (AL) George Campbell (GC) Dr Alistair Ingram (AI) Carol Greaves (CG)	
Apologies	Rachel Potts Dr P Garnett Debbie Newton Dr Mark Hayes	
In Attendance	Bob Wiggins (BW) John Patterson Judith Knapton Lorrain Naylor Sue Lattaway (Minutes)	
Date	Thursday 11 October 2012 Sovereign House, Kettlestring Lane, Clifton Moor, York	
No.		Action Lead
1.	Apologies As noted above.	
2.	Minutes of the meeting held on 12 July 2012 The minutes were agreed as an accurate record of the meeting held on 13 September 2012.	
3.	ToR for strategic collaborative commissioning Board (the title of the group moving forwards) The ToR have not been approved, however they were submitted as part of authorisation. Progress in place to go through at Governing Body. AB reported that there are key issues with the Risk Sharing agreement. AS commented that it needs to be consistent across all CCGs. AB commented it needs working through otherwise it becomes ineffective. BW stated that there needs to be clear objectives as part of the final working mechanisms. SN said that Airedale and South Tees wanted to participate in this group – AB suggested setting a conference facility for people who are unable to get through to the meeting.	

4.	<p>Collaborative Commissioning and Risk Sharing Agreement</p> <p>A Snarr (AS) discussing with the financial team</p> <ul style="list-style-type: none"> • Are people happy with the list • Is there anything they would like to add <p>Version 4 – S Cox (SC) commented that none of the amendments that were discussed have been added – AS to up-date.</p> <p>C Greaves (CG) asked, was it shared out on budget or weight capitation, CG understood that it was shared on budget – AS needs to verify and make clear in the document.</p> <p>AS to amend NCA's (non contract activity). It was agreed that the finance team needs to go through NCA's.</p> <p>AS commented that apart from high cost patients it would be beneficial for 2012.</p> <p>BW felt we had to accept that figures are going to change.</p> <p>AS felt that it was important to agree now – need to get it right by end of financial year.</p> <p>AS thought it was important to make sure CCGs know their position.</p> <p>Finance team figure out the mechanics and re-aggregate.</p> <p>AS said the High Cost patient report has not been worked through – need rules in place.</p> <p>The agreement has the support of the group in principle; further work needs to be done. AS to bring back to the next meeting. AS will aim to e-mail the amended agreement to the group by the 31st October to give everyone time to read through before the next meeting.</p> <p>AS asked if the paper had been pitched at the correct level – the group agreed that it had.</p>	<p>AS</p> <p>AS</p> <p>AS</p> <p>AS</p>
5.	<p>CCG and CSS Relationships</p> <p>Not discussed</p>	
6.	<p>CCG and LMC Liaison</p> <p>Not discussed</p>	

7.	<p>PCT Financial Position</p> <p>AS explained to the group the financial position at present.</p> <p>BW reported 10m savings from turn around plan – Financial Plan is to bring back to 19m position (need to deliver 10m).</p> <p>SC said in terms of the Board, each CCG needs to deliver a narrative paper sharing how they are going to deliver savings. BW agreed 1 page summary from each CCG.</p> <p>SM up-dated the group on costs of elective and stated that each CCG needed to be able to report to the Board on the details of their recovery plan.</p> <p>Discussion with each CCG regarding where they are with their financial recovery plan.</p> <p>A Wittrick stated that he was concerned that although each CCG had a plan he needed an outline figure from them to take back to the meeting with the SHA scheduled for later that evening.</p> <p>Summary</p> <p>SM stated that each CCG need to have a plan and summary paper outlining a realistic figure.</p> <p>CCG Officers to have a discussion with Chris Long on Monday to be clear about the presentations from each CCG at the Board meeting of 25 October.</p> <p>Work needs to take place with Board Members.</p>	<p>All Locality Leads</p> <p>SM</p>
8.	<p>Enhanced Services including Choose and Book LES</p> <p>Not discussed</p>	
9.	<p>Out of Hours Service and NHS 111</p> <p>SM reiterated what had previously happened regarding OOH's in that several meetings had taken place with Harrogate Trust to discuss provision of OOH's service after 2013. Harrogate Trust have given notice on service and also cancelled the final meeting. It was discussed at last Collaborative Commissioning group meeting that there seemed to be no alternative but to tender the service. Amanda Brown (AB) had agreed to draw an out line project paper which she now presented to the group for discussion and comment.</p> <p>Next steps</p> <p>AB to amend project paper with suggestions and bring back to the November meeting.</p> <p>Summary</p> <p>The group all agreed to renew the contract over 5 years.</p> <p>All agreed to continue with the business case.</p> <p>All agreed it was an opportunity to look at local options.</p> <p>BW felt it was important to have a central element with local flexibility.</p>	<p>AB</p> <p>AB</p>

10.	<p>John Patterson gave a talk to the group regarding which services will transfer from CSU to CCGs</p> <p>Following on from the guidance relating to adult safeguarding, CCGs are expected to follow a similar model to that of children’s safeguarding (named designated professionals) and that safeguarding cannot sit with a CSU. This impacts on both vulnerable people commissioning and continuing care as well as adult safeguarding directly.</p> <p>In addition to this, just before the handover date for Continuing Healthcare, CSU expressed their concern that the risks of taking Continuing Healthcare into the CSU were too great for them. In the meeting, there was discussion on the range of services that have a number of characteristics which would be better placed in partnership arrangements with the Local Authorities. These characteristics include:</p> <ul style="list-style-type: none"> • Direct patient activity commissioning • Vulnerable groups associated with the activity • Delivered in partnership with Local Authorities <p>The group agreed that a number of services would be best placed within a small business unit, directly managed by a senior level role (and hosted by CCGs) with an exit strategy of placing services into partnership arrangements with the Local Authorities. The list of services (not all with CSU) included:</p> <ul style="list-style-type: none"> • Adult Safeguarding • Vulnerable People commissioning • Continuing Healthcare • Infection Prevention & Control • Children’s commissioning <p>The group agreed that the model was appropriate as proposed, and that Adrian Snarr with support from John Pattinson would discuss with the CSU withdrawal and safe movement of those services affected.</p>	
11.	<p>Judith Knapton talk to the group about Careers moving over to CCG’s</p> <p>Summary</p> <ul style="list-style-type: none"> • Names of people that are going to be involved. • Operating framework – plans in place • Developing implementation plan • Names need to represent at meetings. • Alzheimer’s Society, LSDO – all CVS – not delivering contracts and are due to end in March. Judith recommends that notice is given on the contracts and they are not extended due to non delivery. This would end local level agreements. • AB suggested talking with voluntary sector and re-write KPI’s/plans. • CCG’s need to make a decision by next Friday. • Judith Knapton to re-send service specifications to the group 	JK

12.	<p>Progress to Authorisation Not discussed</p>	
13.	<p>Any Other Business</p> <p>Telehealth Simon Cox stated that – need a CCG or Collaborative decision on whether to extend the contract with Tunstall. SR CCG – low take up on Telehealth VoYCCG – have not decided what to sign up for Harrogate – not sure they would sign up for another 3 years AS stated that it would have to be an individual decision from each CCG.</p>	
12.	<p>Date of Next Meeting –</p> <p>Thursday 8th November 2012 at 9.00 am – 12.00 noon Boardroom, Sovereign House, Clifton Moor, York.</p>	