

Rotherham Integrated Care Partnership

Minutes	
Title of Meeting:	PUBLIC Rotherham ICP Place Board
Time of Meeting:	9:00am – 10:00am
Date of Meeting:	Wednesday 4 December 2019
Venue:	Elm Room (G.04), Oak House
Chair:	Chris Edwards
Contact for Meeting:	Lydia George 01709 302116 or Lydia.george@nhs.net

Apologies:	
Conflicts of Interest:	General declarations were acknowledged for Members as providers/commissioners of services. However, no specific direct conflicts/declarations were made relating to any items on today's agenda.

Members Present:

Sharon Kemp, **(SK)** Chief Executive, RMBC
 Chris Edwards **(CE)**, Chairing, Chief Officer, Rotherham CCG
 Kathryn Singh **(KS)**, Chief Executive, RDaSH
 Janet Wheatley **(JW)**, Chief Executive, Voluntary Action Rotherham
 Dr Gok Muthoo **(GM)**, Medical Director, Connect Healthcare Rotherham CIC
 Chris Preston **(CP)**, (Deputising for L Barnett) Acting Director of Strategy & Transformation, TRFT

Participating Observers

Dr Richard Cullen **(RC)**, Rotherham CCG Chair
 Cllr David Roche **(DR)**, Joint Chair, Heath & Wellbeing Board, RMBC

In Attendance:

Ian Atkinson **(IA)**, Chair, Rotherham ICP Delivery Team
 Lydia George **(LG)**, Strategy & Development Lead, RCCG
 Gordon Laidlaw **(GL)**, Head of Communications, Rotherham CCG
 Andrew Clayton **(ACI)**, Head of Digital, Rotherham CCG
 Jenny Lingrell **(JL)**, Joint Assistant Director of Commissioning, RMBC
 Wendy Commons **(WC)**, ICP Support Officer, Rotherham CCG

There were NO members of the public present.

Item Number	Discussion Items
1	Public & Patient Questions
There were no questions raised.	

Children & Young People's Transformation Group
Subject – Child & Adolescent Mental Health Services (CAMHS)
Presented by Jenny Lingrell

Jenny Lingrell highlighted that there had been two recent inspections one by the CQC and the other by the System Improvement Team. Positive feedback had been received from both. In relation to CAMHS, the CQC had; been impressed with the highly skilled compassionate staff focus on patient need; acknowledged the strong partnership working and; heard from patients and carers that staff are responsive and flexible.

As part of the 4 week wait trailblazer pilot, the System Improvement Team reported that the intellectual disability pathway ensures equity of access, the safety nets group supports the reduction in stigma and engages young people creatively, and acknowledged both the multi-disciplinary working of the eating disorders pathway and the peer support workers employed in the service. Currently 89% of cases referred are receiving 2 contacts from the service within timescale and additional children's wellbeing practitioners are in training posts. Service delivery is expected to become more consistent in the new year.

JL also highlighted that the mental health schools team trailblazer pilot is progressing well with staff now recruited and engagement with the schools involved good.

JL reported high number waiting for the diagnosis of ASD/ADHD as the service is unable to keep pace with level of demand. She went on to outline a number of actions being taken to address the trajectory including an event planned for January 2020 to examine the pathways in detail and help give more clarity. In the meantime, a clear action plan has been put in place to reduce the waiting times. These are structured into 3 areas; ensuring the current referral pathway works efficiently; adding capacity to the current pathway and taking a whole system approach.

Kathryn Singh acknowledged the issues and the need to better understand the increase in referrals. The critical factor is workforce and recruitment however despite numerous attempts RDaSH has not been able to adequately recruit staff. Alternative approaches such as the introduction of Healios are being employed. Written feedback and recommendations from the unannounced visit to Rotherham CAMHS is awaited.

Following discussion it was noted that a number of approaches are being undertaken. CAMHS has been made an investment priority which has resulted in real improvement. Work has taken place across the system to improve the diagnostic pathway with schools and practices, however further work is still required to address the trajectory.

Place Board thanked JL and the Children & Young People's Transformation Group for the work being undertaken. Chief Executive Officers agreed to take escalation in relation to ASD/ADHD by looking in more detail at the issues and actions. A review of the position will take place again in February/March to see if there has been improvement and determine whether any future change is required.

Action: CEOs/JL/LG

Urgent & Community Care Transformation Group
Subject – Integrated Single Point of Contact
Presented by Chris Preston

Chris Preston gave an update on progress highlighting that the focus has moved from structural change to integrated ways of working with integrated points of contact across the wider system re-affirmed as a key theme. The intention is to use Intermediate Care and Re-ablement health and social care multi-disciplinary community hub as a test bed. Work is due to be undertaken on defining how the hub will work in practice and scoping the co-location of a re-ablement team. The team will be supported by the use of the Directory of Services and the Rotherham Health Record.

Concerns were noted around the capacity to deliver particularly with winter approaching, the pace and scale of the change and upskilling staff. However, mitigations have been put in place including backfill arrangements to release specialist resource; phased implementation and co-location of staff facilitating the transfer of knowledge and increased levels of risk tolerance by acute decision makers in the community setting.

Place Board thanked Chris Preston and the group for the update on progress.

Mental Health & Learning Disability Transformation Group

Subject – Community Crisis and Home

Presented by Ian Atkinson

Ian Atkinson gave an update on progress advising that self harm training has now been completed and capacity has been increased which in turn has released social work capacity. A successful bid from the Community Crisis Transformation Fund and inclusion on the Urgent and Crisis Mental Health Care national pilot have seen further allocations.

IA explained that workforce recruitment and retention is proving challenging for both RDaSH and RMBC. Last year police street triage over the winter period proved to be a good way of preventing crisis however this year the required workforce is not available. The levels of suicide and drug related deaths seen in Rotherham recently has also had an impact and affect our staff in community crisis teams. A number of ways of supporting resilience are currently being examined. Further work is also required to enhance the crisis helpline but this is also recruitment dependent.

The bed base at both Swallownest and Woodlands is experiencing higher delayed transfers of care (DTocS) than seen before but the move to care at home is in line with our strategy. Funding has also been agreed to address delayed transfers of care (DTocS) but a wider approach is required.

Work to fill the vacancies required to deliver the action plan continues including a bid submitted for additional funding to support workforce issues.

Sharon Kemp thanked IA for the update. Recruitment is an issue across Place and needs to be addressed collectively as part of the OD and workforce discussions going forward.

Noting the concerns around DTocS, it was agreed that further discussion is required at CEO level to determine next steps. In the meantime, to aid discussion Place Board asked the Delivery Team to undertake a piece of work using recent case study examples to determine the complexity involved in changing the current system.

Action: IA/LG/CEOs

Place Board recognised the amount of work being undertaken by the Group and requested an update on the action undertaken at the next meeting.

Action: IA

Place Board members thanked Ian Atkinson for the update and assurance provided.

3

Enabling Group Update – Digital

Andrew Clayton attended to give an update on the work being undertaken by the Digital Enabling Group. However, due to the limited time at this meeting and the importance of the digital agenda, it was agreed re-schedule the update for the February meeting to allow more detailed discussion to take place. In the meantime, ACI will escalate the issues outlined in the slides via e-mail to relevant Partner Chief Executive Officers as appropriate. These challenges and issues are around capacity and delays in receiving datasets for mental health and local authority for Rotherham Health Record.

Action: ACI/SK/CP

It was agreed to extend the public session in February to 2 hrs, ie 9am to 11am.

Action: LG/WAC

Discussion turned to the use of the Rotherham Health App in conveying winter messages. Gordon Laidlaw will share messages about the App and its use with Partners.

Action: GL

4

Rotherham ICP Place Plan – Progress Update

Lydia George reported that progress is being made towards the refreshed plan. The final draft will be sent to all Partners for reviewing internally within their organisations before the ICP Place Board is asked to sign it off in February 2020. It was noted that a few areas of narrative are still outstanding and LG will escalate any issues or barriers to completion via partner CEOs.

Discussion followed about engaging Health Select Committee (HSC). Sharon Kemp will consider how this can best be undertaken during the current period of 'purdah'. It was noted that the Health & Wellbeing Board will be the governance route for signing off the Plan on behalf of the Council.

Action: SK

5	Rotherham ICP Performance Report – Quarter 2
<p>Overall the position reported this quarter is positive with the combined number of milestones either on track or completed. Specific areas of concern and the associated challenges had been discussed earlier in the meeting as part of the transformation group updates. These related to ASD/ADHD diagnoses and early help assessments for the 0-19 service.</p> <p>There had been little fluctuation in KPI performance for any of the RAG ratings. The position remains similar to Quarter 1 with the exception of one new 'red' rating relating to new permanent admissions to residential nursing care for adults. Further work is required to understand the reasons for this.</p> <p>Members noted the progress with delivery of the ICP Place Plan as at the end of October 2019.</p>	
6	Winter Plan and Preparedness Update
<p>As agreed, this item will be added throughout the winter period to enable Partners to flag any related issues by exception. There was nothing to highlight this month other than the delayed transfers of care (DTC) discussed earlier in the meeting under the Mental Health & Learning Disability Transformation Group update.</p>	
7	Draft Minutes from Public ICP Place Board – 6 November 2019
<p>The minutes from the previous meeting were APPROVED as a true and accurate record. There were no matters arising.</p>	
8	Communication to Partners
<p>Gordon Laidlaw will work with Partners on conveying winter messages and Health App information. In future, Members agreed to create short videos highlighting key points from Place meetings which will be publicly 'tweeted'.</p> <p style="text-align: right;">Action: GL/All</p>	
9	Risk/Items for Escalation
<p>Partner CEOs will discuss the issues highlighted around delays in the diagnosis of ASD/ADHD for CAMHS and Delayed Transfers of Care (DTCs) with mental health beds. Updates will be received at the February meeting.</p> <p style="text-align: right;">Action: Partner CEOs/LG</p>	
10	Future Agenda Items
<ul style="list-style-type: none"> • OD & Workforce Update – Workforce Maturity Index (tbd) • Rotherham ICP Communications & Engagement Strategy (Feb) • Digital & Finance Update (Feb) • Rotherham ICP Place Plan (Feb) • Quarter 3 Performance Framework (Mar) • Rotherham Provider Alliance Update (Feb) <p>Standard Agenda Items</p> <ul style="list-style-type: none"> • Delivery Dashboard/Performance Framework (quarterly) • Transformation Groups Spotlight Updates (monthly) • Enabling Group Updates (monthly) • Rotherham Provider Alliance Update (monthly) • Impact of Brexit Updates (Feb) • Primary Care Network Updates (as required) 	
11	Date of Next Meeting
<p>Wednesday 5 February 2020 at 9am at Oak House, Bramley.</p>	

Membership

NHS Rotherham CCG (RCCG) - Chief Officer - Chris Edwards (Joint Chair)

Rotherham Metropolitan Borough Council (RMBC) - Chief Executive – Sharon Kemp (Joint Chair)

The Rotherham Foundation Trust (TRFT) - Chief Executive – Louise Barnett

Voluntary Action Rotherham (VAR) - Chief Executive – Janet Wheatley

Rotherham Doncaster and South Humber NHS Trust (RDaSH) - Chief Executive – Kathryn Singh

Connect Healthcare Rotherham Ltd (Rotherham GP Federation) – Dr Gok Muthoo

Participating Observers:

Joint Chair, Health and Wellbeing Board, RMBC - Cllr David Roche

Joint Chair, Health and Wellbeing Board, RCCG - Dr Richard Cullen

In Attendance:

Deputy Chief Officer, RCCG – Ian Atkinson (as Delivery Team Place Joint Chair)

Director of Legal Services, RMBC

Head of Communications, RCCG – Gordon Laidlaw

Strategy & Development Lead, RCCG – Lydia George