Health and Social Care Board

Minutes of the Western Local Commissioning Group held on Wednesday 28th September 2022 at 2pm via Zoom video link

PRESENT:
Cllr Josephine Deehan, Local Government Representative/Chair
Mr Hugh Casey, General Dental Practitioner Representative
Mr Donall Henderson, Community and Voluntary Representative (joined at 2.15pm)
Cllr John McClaughry, Local Government Representative
Dr Jacintha O'Kane, General Medical Practitioner Representative
Cllr Brian Tierney, Local Government Representative (left at 2.28pm)
Ms Catherine Cassidy, Deputy Director for Social Care and Children, SPPG

APOLOGIES:
Mrs Mary T Conway, Community and Voluntary Representative
Mrs Siobhan Donald, Nursing Representative, PHA
Dr Paul Molloy, General Medical Practitioner Representative
Mrs Fiona Teague, Health and Wellbeing Improvement Manager, PHA
Cllr Victor Warrington, Local Government Representative

IN ATTENDANCE:
Mr Paul Turley, Assistant Director of Commissioning/Commissioning Lead, SPPG
Ms Claire McGinley, Senior Commissioning Manger, SPPG (left at 3.00pm)
Mrs Charlene Shongo, Assistant Corporate Business Manager, SPPG
Ms Hayley Thomas, Corporate Business Officer, SPPG

21/22	**CHAIR'S WELCOME AND OPENING REMARKS:** The Chair welcomed Members to the September meeting. A particular welcome was extended to those attending their first meeting of the Western LCG, Mr Paul Turley, Ms Catherine Cassidy and Mrs Charlene Shongo. Mr Turley is replacing Mr Brian McAleer as Commissioning Lead on the Western LCG, Ms Cassidy is representing Social Care, Children and Adults and Mrs Shongo has recently been appointed to Assistant Corporate Business Manager, SPPG Western Office. A round of introductions took place.	
22/22	**APOLOGIES** Apologies for absence were received from Mrs Mary T Conway, Mrs Siobhan Donald, Dr Paul Molloy, Mrs Fiona Teague and Councillor Victor Warrington.	
23/22	**MINUTES OF THE PREVIOUS MEETING** The minutes of the previous meeting held on Wednesday 8 June 2022 were agreed on the proposal of Councillor McClaughry.	

24/22	**COMMISSIONING LEAD UPDATE** **Engagements** • Commencing, Mr Turley advised that he and Cllr Deehan had attended the LCG Chairs and Leads meeting earlier in the day. The discussion included the role of the LCG's going forward in the context of the new Integrated Care System (ICS) and the agenda for the months ahead. **SPPG Priorities** • Mr Turley said Members would be aware that SPPG is part of the Department of Health. The Deputy Secretary responsible for the SPPG Mrs Sharon Gallagher, had been extremely clear on the SPPG priorities for the year: - 1. Service Delivery, and getting back to levels of service prior to the Pandemic; 2. Transition to the new Integrated Care System (ICS); and 3. Other ongoing business we engage with. In terms of Service Delivery, Mr Turley said new systems had been set up and conversations ongoing with SPPG, Trusts, Department of Health and the Permanent Secretary, Mr Peter May. He added that as part of structural changes within Health, a Performance Transformation and Executive Board had been established. Issues relating to service performance in Trusts were reported on a monthly basis to this forum. Mr Turley took Members through a template created with Trust colleagues which included 50 key objective areas across all Programmes of Care. These would look to follow key performance areas across ambulance services, unscheduled care services, elective services, outpatient services, inpatient and day cases and imaging and diagnostic services. He spoke of the particular focus on cancer and stroke, cardiology and specialist services, all of which fall under Acute Care. Under Community Care, he advised that adult day care services, children's social care, mental health services, community nursing and community dental services would also be monitored. In relation to Primary Care – the focus was on General Dental Services, General Ophthalmic Services, Primary Care Eye Care Services, Community Pharmacy and General Medical Services. Mr Turley advised that under each of these headings the baseline activity recorded in 2019/20 was the expectation as to what Trusts would attain in 2022/23. On the basis that a Trust is able to reach the baseline figure, Mr Turley explained the thresholds to Members; 5% below the baseline figure would be RAG (Red, Amber, Green) rated red, between -5 to -1 would acquire a	

	RAG rating of Amber and a figure above -1 would be RAG rated as Green. Greater than 5% would secure a RAG rating of Blue. As Trusts reported regionally (August 2022 activity) two Trusts had already reported 50% or more of their service performance baselines in red. One Trust reported 41%, the other 48%. In relation to the Western Trust, Mr Turley reported a figure of 36% of targets not being reached in terms of the baseline approach. He also drew Members attention to the improved performance regionally in relation to outpatient assessments, inpatients and day cases, scope works and Allied Health Professional (AHP) performance. However, he spoke of the significant concern on a number of areas, some of which were often profiled in the media such as, access to cancer services, ambulance handover times at Emergency Departments, access to Adult Day Care Services, and childrens social care and social work. A further area highlighted was access to district nursing services which all Trusts were experiencing difficulties and challenges around providing the service to the 2019/20 level. As a continuous assessment process Mr Turley spoke of his contact with the Western Trust in the development of a formalised approach. **He suggested that Western Trust Performance be kept as a standing item on the agenda going forward.** Mr Turley invited comments from Members. The Chair thanked Mr Turley and agreed with the need for a standing item. While she commended the WHSCT on its performance against other Trusts, 36% of services in the red still required a lot of work and highlighted the need for local targeted resources as Trusts continue to struggle with the pandemic and staff absences. Mr Turley countered that SPPG were working with Trusts on the challenges around performance, particularly in relation to staffing. However, he reminded members that the performance target being asked by the end of September or by exception, the end of March 2023, was the Trusts own 2019/20 level of performance and not the commissioned levels. In addition, Ms McGinley said it has been helpful for all parties involved to now have a clear process in place that identified and clarified targets, timeframes and deadlines. The ongoing focus and work towards meeting identified targets was to be welcomed. Moving on to speak about the move to the Integrated Care System (ICS), Mr Turley updated Members on the discussion from the LCG Chairs/Leads meeting earlier in the day. He said there was some concern and disquiet that discussion around the ICS had eased recently. With no Members having been directly involved in any ICS workstreams the Chair commented that there was a general feeling that they had not been kept informed of developments and progress.	**PT/HT**

	Mr Turley explained that the ICS had been initially taken forward as a programmed piece of work within the Health and Social Care Board (HSCB). The governance arrangements had now changed with a Department of Health led programme support structure established. The Senior Responsible Officer (SRO) for the Programme was confirmed as the DoH's Permanent Secretary, Mr Peter May. Mr Turley shared a slide which detailed the new Programme Structure, comprising of an ICS Steering Board, an Operational Delivery Group into which an ICS Advisory Forum and TUC Forum would contribute and from which a number of ICS workstreams would flow. This structure would provide a renewed emphasis on opportunities for LCGs to input directly into the process. The Chair welcomed this unique opportunity to transform the way in which health and social care would be delivered and the LCG's role to ensure the needs of the population be properly addressed. She focused on the importance of partnership working to ensure services would not be duplicated and service users and carers receive the best service possible. Concluding, Mr Turley proposed the LCG receive a significant workshop on ICS**. He advised a workshop had been provisionally scheduled for 19th October 2022 and asked Members to note this date in their diaries.** **<u>First Day Brief</u>** Advising of another piece of work which had been mandated in terms of the ICS, Mr Turley said a First Day Brief for the new Area Integrated Partnership Boards (AIPBs) was to be taken forward by the Integrated Care Partnerships (ICPs) in conjunction with LCGs in each of the localities. This work would scope the provision of services in the community and voluntary sector. Mrs Joni Millar, ICP Business Manager would join the meeting shortly to provide an update. **<u>Financial Situation</u>** Mr Turley referred to the current financial position and reflected on the impact of the lack of budget for health and social care due to the current situation within the Executive. He stated that health and social care had to work on a financial outline based on the 2021/22 financial year. In addition, he reminded them that the formal mandate for the current Ministers in post was due to expire on 28th October 2022, raising the need for decisions as to how matters would be addressed after this period. As a result, Trusts had already been asked to work through various projections, such as, to cut down significantly on locum spend. Trusts had been asked to reduce the current cumulative locum spend across the Region from almost £300m to £15m. The need to closely manage the impact of this	**All**

action on services was discussed. As part of this work he added that SPPG officers were currently engaged in a significant piece of work to get unallocated balances out to Trusts for services.

Letter from Department – Extension to LCG Contracts

Members would have received a letter extending their Term of Office until 30th September 2023. Members were asked to consider if they would be content to stay on in their role. Necessary steps would be taken in relation to any Members who exceed the 8-year Term of Office.

The Chair commented that the contribution of LCG Members across all backgrounds was invaluable and she would welcome Members remaining in their roles.

Service Issues

Mr Turley went on to highlight a number of service issues which included:

- Cancer Strategy
  He reminded Members that the Cancer Strategy, consulted on last year, advised a total of £720m would be required to fully implement the Strategy over a 10-year period.

  Again, referring to the political situation, he said this had not progressed as was hoped and given the current challenges and under performance any focus and reorganisation would be welcomed. He informed Members of the recent establishment of the DoH's Northern Ireland Cancer Programme Board which would incorporate the Cancer Strategy Implementation Board along with the Northern Ireland Cancer Network.

  Mr Turley welcomed this significant move in relation to addressing pressures in cancer provision.

- Maternity Services
  Mr Turley spoke of communication between DoH and the Regulation and Quality Improvement Authority (RQIA) in relation to the need to have a significant review of maternity services across Northern Ireland.

  He reminded members of recent high-profile reports concerning the quality and provision of maternity services in England over the past number of years with underlying issues of staffing and staffing shortages. He reported on similar staffing concerns within the SEHSCT in relation to midwifery led services and maternity services within SWAH in the WHSCT area. He and the Chair agreed that both areas be kept under observation.

  In respect of the additional investment in elective services, Mr Turley said Members would be aware that Omagh Hospital had been identified as Northern Irelands second regional Day Procedure

	Centre. The utilisation of smaller hospital facilities was welcomed by all. • Primary Care Service Issues Mr Turley advised Members of his regional SPPG responsibility on Primary and Community Care Infrastructure Development. At a regional meeting, he advised there had been some welcome news regarding the progression and design work for Lisnaskea Hub. In terms of the Cityside Hub, engagement with the WHSCT in the context of design plans was proceeding with the submission of a planning application expected in the Spring of 2023. Commenting the Chair said Members would be aware of the support for Primary Care offered through the Multi-Disciplinary Teams (MDTS). She noted that while MDTs had been rolled out in the Northern sector of the Trust area the issue of accommodation for new Primary Care Team members had delayed the rollout in the Southern sector. She added that Fermanagh and Omagh District Council had been proactive in lobbying the Minister and Department of Health for funding for extra provision within GP Practices. **Mr Turley responded that he had requested an update from the Integrated Care Primary Care Lead on the pressures Primary Care in the West and undertook to report back at a future meeting**. The Chair said she would appreciate an update on these challenges and welcomed the additional funding recently announced by the Minister to support Primary Care. Dr O'Kane referred to previous discussions regarding International Medical Graduates not being able to secure contracts in Northern Ireland at the end of their training. Given the pressures on General Practice she asked Mr Turley if priority could be given to the possibility of a scheme to offer short term contracts to allow them to stay in NI to work. **Mr Turley undertook to liaise with Integrated Care colleagues and report back to Dr O'Kane**. • Mental Health Services Mr Turley advised of a model around inpatient mental health to have 5/6 Centres of Excellence across the region. He confirmed Gransha Park as the centre of excellence in the Northern sector of the Western Trust and of a centre in Omagh to be proposed in a business case currently being prepared. He advised of three outstanding business cases, Antrim (Northern); South East and the West (Omagh). In terms of preparedness, he said Antrim had been prioritised as critical. The SPPG and Departmental colleagues had recently requested an update on the business cases for mental health and learning disability services.	**PT** **PT**

	Concluding his update Mr Turley invited questions/comments from Members. The following points were noted: • Mr Casey spoke of the crisis in the provision of NHS Dentistry and General Dental Services as highlighted by the Panorama programme, with most Practices no longer accepting new NHS patients. He said the reduction in support payments from 25% to 10% is pushing more Dental Practitioners away from NHS work. In addition, he talked about the difficulties in recruitment and retention with the increase in 'corporates' and the deterioration in the oral health of the population. Referring to the Oral Health Strategy in 2007 which found the Oral Health Contract was not fit for purpose and Pilots run in 2015/16, he asked Mr Turley to seek any additional update regarding the situation. The Chair thanked Mr Casey for raising this issue and remarked on the need to support dental colleagues in the provision of general dental services. She referred to the cost of living crisis and how many families will not be in the position to pay privately for dental services and **suggested this be kept as an item on the agenda**. **Mr Turley noted the Chairs comments and undertook to seek advice and input from Integrated Care colleagues to gain an understanding of dental provision in the West and feedback to Mr Casey.**	**HT** **PT**
25/22	**<u>ICP SCOPING EXERCISE</u>** The Chair welcomed Mrs Joni Millar, ICP Business Manager for an update on the Area Integrated Partnership Board Locality Scoping Exercise. Setting the context, Mrs Millar explained the Area Integrated Partnership Board (AIPB) Locality Scoping exercise was part of the local implementation workstream set up by the Department of Health to carry out scoping that would act as part of the induction for the new AIPBs to better recognise the existing landscape and work alongside the wider statistical evidence to gain an understanding of partnership working and networks. A copy of the presentation was shared on screen with Members and covered the following themes: - • Implementation – Short Term Priorities • Key Elements • Infrastructure • Health Intelligence • Co-ordinating Group • Membership • Reporting	

	The Chair thanked Mrs Millar for her presentation highlighting the importance of health intelligence in targeting vital resources to the areas of greatest need. In addition, Mr Turley agreed and stated that the local populations needs are required to be known to effectively and efficiently commission healthcare. In response to the query if the mandate had been delivered across all localities Mrs Millar advised there had been operational issues accessing PageTiger (software tool being used to help access interactive online information). Liaison with SPPG Communication colleagues was ongoing to resolve these matters. An offer to return to a future LCG meeting to provide a demonstration was welcomed by all present. **The Chair requested a copy of Mrs Millar's presentation to be shared with Members.**	**HT**
26/22	**DRAFT SCHEDULE OF WLCG MEETINGS UNTIL MARCH 2023** Members approved the draft schedule of WLCG meetings until March 2023.	
27/22	**ANY OTHER BUSINESS** • Mr Turley reminded Members of the LCG Workshop scheduled for 19th October 2022. A communication will be issued to Members to confirm. As there was no further business, the Chair thanked Members for their input and attendance and closed the meeting.	**PT/HT**
28/22	**DATE OF NEXT MEETING** The next meeting will take place on Wednesday 30th November 2022 via zoom.	

SIGNED: _____

DATE: _____