

Future Fit Programme Board
Monday 17th December 2018, 2pm – 4pm
Seminar Room 2, SECC RSH Site

Attendance:

David Evans (Chair) (DE)	Chief Officer Officer T&W CCG
Dr Simon Freeman (SF)	Accountable Officer Shropshire CCG
Jan Ditheridge (JD)	CEO Shropshire Community Health
Simon Wright (SW)	CEO SaTH
Dr Julian Povey (JP)	Clinical Chair Shropshire CCG
Dr Jo Leahy (JL)	Clinical Chair T&W CCG
Debbie Vogler (DV)	Future Fit Programme Director
Andrea Webster (AW)	Future Fit Programme Manager
Haley Barton (HB)	Future Fit Project Support
Pam Schreier (PS)	STP Communications & Engagement Lead
Niki McGrath (NM)	Future Fit Communications & Engagement Manager
Phil Evans (PE)	STP Programme Director
Katie Blackburn (KB)	Chief Officer (Brecon) Powys CHC
Elaine Andrews (EA)	Associate Director of Service Transformation SaTH
Adrian Osborne (AO)	Assistant Director (Engagement and Communication) PTHB
Jonathan Bletcher (JB)	NHS England Assurance
Karen Calder (KC)	Shropshire Council HOSC
Rod Thompson (RT)	Shropshire Public Health
Vanessa Barratt (VB)	Healthwatch Shropshire
Sam Tilley (ST)	Director of Corporate Affairs Shropshire CCG
David Brown (DB)	Healthwatch Telford & Wrekin
Andy Burford (AB)	Telford & Wrekin Council
Liz Noakes (LN)	Telford & Wrekin Council
Graham Shephard (GS)	Shropshire Patient Representative

1.0 Apologies:

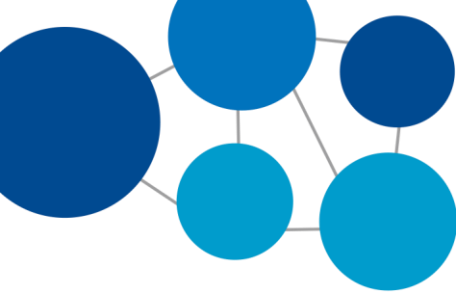
Bev Tabernacle	DoN Robert Jones and Agnes Hunt Hospital
James Houston	Welsh Ambulance Service

2.0 Minutes of the previous meeting 24th October 2018:

Title amendments to Andrea Blayney - Deputy Chief Officer (Newtown) and to Liz Noakes – Telford and Wrekin Council.

2.0 Action Log:

All items are now closed.



3.0 Update from Future Fit Programme Director on key milestones:

JHOSC Feedback:

An update was given on the two meetings recently attended; one on 3rd December and the second on the morning of 17th December. The Future Fit Team presented the executive EIA summary report, Travel and Transport Plan, Telford and Wrekin Neighbourhood plan and Shropshire Care Closer to Home plan at the JHOSC on the 3rd December 2018 meeting. The HOSC expressed that they would like further clarifications around the consolidation of Stroke services, the discussion was based around the consolidation of Stroke Services and current performance. Concerns were raised around the evidence to support the success of a centralised service and the link with improved outcomes. Concerns around capacity of CT scanners formed part of the discussion. The HOSC also requested on 3rd, more information on patient eligibility for non-emergency transport. The CCG's will be responding to this question in the new year as it's criteria is currently under review.

The JHOSC requested feedback on lessons learned. DV added that at this stage in the programme it is too early to be having a full discussion around "lessons learnt" however she stressed that the team gained a lot from the mid-point review. A "lessons learnt" report will be produced post decision making in January 2019. A short presentation was given to the HOSC and part of that was to stress the importance of continuing to engage with Seldom Heard Groups post decision-making.

The purpose of the JHOSC on 17th was to allow an opportunity for the JHOSC to formalise their response to consultation having had time to consider the reports received on 3rd December. The Programme had requested a response by no later than 3rd January 2019 to meet expectations.

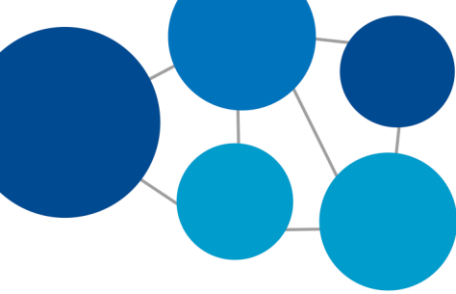
ACTION: The Joint Chairs to forward a formal response from the consultation to the SROs by 3rd January 2019.

Powys CHC Feedback:

The feedback received from Powys CHC has been positive, they have also summarised the Future Fit Public Consultation as being a good example and have expressed thanks for the transparency of the process making it ideal for them to engage with the programme. Concerns have been raised over the ambitions of the Travel and Transport Mitigation Plans and how it becomes a more deliverable plan that will be progressed. Powys CHC have updated that there is a Montgomeryshire Committee on the 8th January 2019 that the CHC have delegate approval to this committee to formally respond to the consultation.

CCG Board Feedback:

Future Fit attended both CCG Board meetings earlier this month on the 11th and 12th December 2018 and presented the draft DMBC for comment. Responses of the board members are currently being collated and non-material changes made, where material suggestions for change are proposed they will be submitted to both David Evans for Telford and Wrekin CCG and Simon Freeman for Shropshire CCG to agree an approach.



Approach to NHSE Assurance:

NHSE are holding a Local Assurance meeting on Thursday 20th December 2018, a process has been agreed and the membership of this meeting finalised.

4.0 Feedback from the Future Fit Programme Board Workshop 22nd November 2018:

The programme board have been provided with a summary from the 22nd November 2018, this workshop was split into two sessions, the morning session the members received the Consultation Findings and were given time to consider these. In the afternoon session the members received presentations from: Travel and Transport, EIA, Workforce, and Digital. There was also a clinical panel that were able to answer questions and concerns around clinical safety. No comments were made on the content of the report and so it was noted and approved for the record.

5.0 Future Fit Decision-Making Business Case (DMBC):

DV took the members through a slide stack setting out the contents of the DMBC. The Programme Board Members were being asked to receive the content of the draft DMBC and in doing so were considering approval of certain reports that form key elements of it.

The DMBC document is to provide assurance to NHSE around all the work that the Programme has done to date and since the approval of the PCBC. All the appendices mentioned in this document are available to Future Fit Programme Board members, some of which have been circulated as part of the papers for this meeting. Others formed part of the pre read material for the event on 22nd November. Links to other supporting documents were identified on the cover sheet to this item. A discussion took place on key content during and after the presentation. The key points raised were:

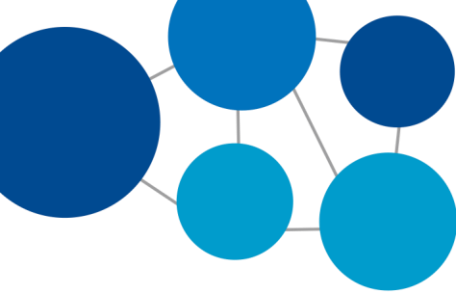
Consultation Process:

Both at the Powys CHC and at the JHOSC it was stated that it appears to be a good example of a consultation. A discussion took place on the high proportion of respondents who did not think either option met their needs. IT was noted that this was not a referendum but about understanding respondent's views of the impacts on them.

RT noted that this information is based only on individuals who have responded and even with the high response rate most of the public did not respond to the consultation / survey at all. Therefore, can we assume it reflects the majority?

SF and DE expressed that they do not like the term "more balanced" when referring to the Shropshire responses. They would prefer the term to be changed to "equal split". SF added most people who responded to the consultation have based their responses entirely on geography and where they live.

ACTION: DV to amend wording to "split" in DMBC



Stakeholder Responses:

A slide was presented that summarised the consultation responses from key stakeholder. In summary:

- The providers responses received support the preferred option being option 1
- Telford and Wrekin Council and Healthwatch Telford & Wrekin support option 2
- Shropshire Council and Healthwatch Shropshire have no preference on the options.
- WMAS have not responded – This had been escalated. Neil McKay (STP Chair) will formally raise this issue.

There was a theme around the need for digital developments as part of mitigation. SW has expressed that there are currently many IT systems in the Trust that do not have the ability to talk to other systems. Following the Future Fit consultation, the hope is to implement a fully integrate care record system.

IIA Priorities:

Following a paper that was brought to the Future Fit Programme Board in May 2018, the EIA report is now an appendix to the DMBC along with 14 recommendations and a draft mitigation plan.

The themes from the Joint CCG Board event that had a consensus were presented:

- Timescales of the programme are needed
- Improvement needed of communications to the public
- Work needed around the community offer
- Work needed around the Travel and Transport Mitigations
- IIA / EIA Alignment needed
- Nothing new has been identified

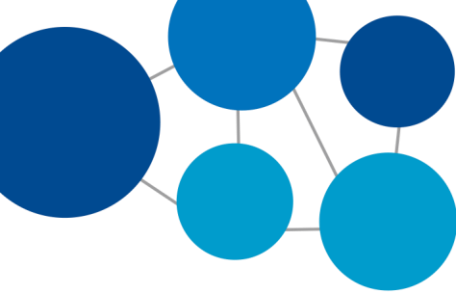
Benefit realisation:

The benefit tracker is included in the DMBC and has been developed since the PCBC. JP and SF raised concerns around the word “shift” being misleading regarding implying that activity shifts into community.

ACTION: DV to amend benefits tracker in DMBC

Managing governance to the OBC / FBC:

The Programme Board post final decision making would cease to be required in its current form. The importance of establishing an oversight group under the umbrella of the STP governance structure to oversee the development of the OBC and FBC and monitor the progress of the key actions within the mitigation plan was agreed. This had already been discussed with DV and Neil McKay.



ACTION: Phil Evans to draft a ToR for the Oversight Group and feed this back to Neil McKay for approval.

KC has queried where the Future Fit Assurance and Future Fit IIA Workstreams will sit post consultation. It was acknowledged that the STP governance arrangements were user review with the in coming Chair.

PE has agreed to review the STP Governance Structure and report back to the next Programme Board in January 2019, the role and governance of the IIA/ Assurance group post decision making.

ACTION: Phil Evans to review where the Future Fit Assurance / IIA Workstreams will siting with the STP post decision making. This will be fed back to the programme board in January 2019.

VB queried how the public will be able to engage and influence the oversight group? VB has asked that PE consider this when drafting the ToR.

VB has also expressed concerns around the DMBC specifically to point 3.3.2 where “Ambulatory Emergency Care” is mentioned however there is no definition to what this means until a later page, the document then goes on to call “Ambulatory Emergency Care” something entirely different. VB has suggested that the DMBC needs to go to a reader panel to ensure the document is fully understood.

ACTION: DV to look at wording around Ambulatory care in next version of DMBC

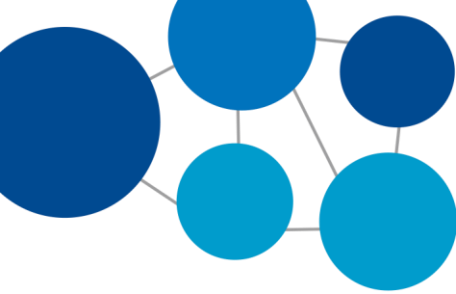
LN expressed her concerns around population growth not being taken into consideration when coming to the preferred option. LN has added that this concern was included in Telford and Wrekin Councils response to the consultation.

DB echoed LN’s concerns around responses being considered by the Future Fit team and given due consideration.

SF responded to LN’s concerns and added that it is our job to investigate and respond only to concerns that the programme believe are material, had not been previously considered and /or will have a material change on the preferred option.

VB expressed that the community offer / out of hospital offer seems to be very adult focused, VB has added that there needs to be an integrated plan / offer for community paediatrics.

JD added that the DMBC might benefit from more detail under out of hospital care and the community offer. Out of hospital programmes are responding to an awful lot more than just Future



Fit admission avoidance assumptions. It would be helpful for public understanding to be explicit of what Future Fit expect out of community care.

ACTION: DV to consider adding more detail on community programmes in the DMBC

6.0 To Receive and Approve:

Travel and Transport Mitigation Plan:

AW updated the group that since the last time the Programme Board the Travel and Transport group has met again to look at the mitigation plan to see if the mitigations are realistic and deliverable. Organisational leads have been identified rather than individual leads to agree ownership of the solutions. There will be a further report that will be finalised today that AW would circulate

SF raised the point of not knowing if the mitigation related to the Future Fit Programme specifically or if the items are on the mitigation plan due to the existing issue of the transport links in Telford and Wrekin, Shropshire and Powys already being poor.

JD has highlighted that although it is not the responsibility of the Travel and Transport group to solve the travel and transport issues of the county that already exist, it is the group's responsibility to flag these issues to the local authorities who are engaging in the meetings. It has been noted that Telford and Wrekin Council have declined to engage or attend any of the travel and transport meetings.

KC echoed this point from the JHOSC this morning that the Future Fit Programme cannot solve the existing travel link issues in the county.

The Travel and Transport Mitigation Plan was not approved. DE has suggested that more work is to be done on this to make more specific and clear under each option what is the impact of the changes on travel and transport and specifically what is needed and deliverable to reduce that impact. Reformatting of the report was suggested and recirculation to the membership for approval. This will then need to go to both CCG boards in January.

ACTION: Andrea Webster to look at reformatting the Travel and Transport Mitigation Plan. All comments are to be fed back to the AO's. A revised version circulated before 3rd for inclusion in CCG Board discussions on 8th and 9th January 2019.

EIA Report and Mitigation Plan:

PS updated the group that this is a live document that builds on the original IIA done in 2016. There are 14 recommendations that have been produced for the programme board.

LN added that although she has already expressed her views, regarding the summary table LN believed this to be flawed on page 87 of the DMBC. LN has expressed concerns around evidence

being consistent and the mitigations don't appear to be very specific, they appear to be very generalised at this stage.

PS has assured the group that the communications and engagement team have worked with both councils to use data that is available by CCG area and by local authority area. The same approach was used that used previously in the IIA's, data has never been split East and West. The EIA is specifically to look at the 9 protected characteristics plus the 4 additional characteristics agreed,

The EIA and EIA Mitigation Plan was approved by consensus.

The Programme Board noted that sponsors and stakeholders approved the plan but noted the exception of LN on behalf of T& W Council

Participate Independent Report on Consultation:

The Consultation Reports previously received by the Programme Board at the event on 22nd November were represented for final approval

This item was approved by consensus of the Programme Board

Summary of Stakeholder Responses:

This item was approved by consensus of the Programme Board

Summary of Individual Responses:

This item was approved by consensus of the Programme Board

7.0 To receive and approve Recommendations to the Joint Committee:

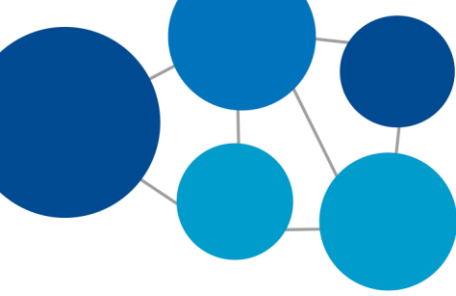
After conscientious consideration of the consultation responses and consideration of the mitigating actions and other actions developed since the approval of the PCBC, a series of 6 draft recommendations were agreed by consensus at the end of the Programme Board event on 22nd November 2018. These were subject to an agreed set of 5 mitigations that were to be developed within the DMBC. These are set out below for approval.

A 7th recommendation has been suggested by the SROs since the Programme board event to ensure that post decision making governance arrangement is made clear and that there is robust arrangement for oversight of the development of the OBC and FBC and progression of mitigations agreed.

Recommendation 1: Consultation Process

The CCG Joint Committee is asked to confirm that the Committee and its constituent Clinical Commissioning Groups have met their statutory duties and ensured that an effective and robust public consultation process has been undertaken and will be used to inform the decisions made.

This was unanimously agreed by all Future Fit Programme Board Members



Recommendation 2: On-going Engagement

The CCG Joint Committee is asked to support the need for the Clinical Commissioning groups to continue to engagement and feedback with stakeholders the outcome of the consultation and the decision-making process including those from seldom heard groups.

This was unanimously agreed by all Future Fit Programme Board Members

Recommendation 3: Principles of Consultation

The CCG Joint Committee is asked to reaffirm the model underpinning the future provision of hospital services for Shropshire, Telford & Wrekin and mid Wales upon which the consultation process was based.

This was unanimously agreed by all Future Fit Programme Board Members

Recommendation 4: Consultation Findings

The CCG Joint Committee is asked to Note that the Programme Board has confirmed by consensus that the consultation findings have presented no new viable alternative models or no new themes or key issues that might influence the preferred option.

This was agreed unanimously by all Sponsor Board members and by consensus of all Stakeholder Board members, noting the exception of Telford and Wrekin Council.

Recommendation 5: Preferred Option

The CCG Joint Committee is asked to confirm the previous unanimous decision on the preferred option, Option 1, in accordance with (a) the recommendation from the Programme Board; and (b) the following mitigations within the final DMBC

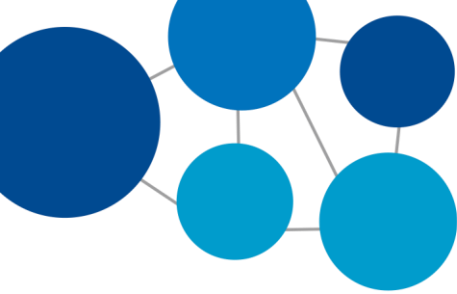
This was agreed unanimously by all Sponsor Board members and by consensus of all Stakeholder Board members, noting the exception of Telford and Wrekin Council.

NOTE: The need to ensure that Paediatric cover in the UCC is clear articulated in the DMBC was noted.

Recommendation 6:

The CCG Joint Committee is therefore asked to Receive and Approve the contents of the DMBC, including its key appendices.

This was agreed unanimously by all Sponsor Board members and by consensus of all Stakeholder Board Members noting the exception of Telford and Wrekin Council



Recommendation 7:

The CCG Joint Committee is asked to note and approve the proposal for an Oversight Implementation Group (IOG) to be established under the STP Governance structure to take forward oversight of the development of the OBC and FBC. All Sponsor organisations will be represented on this Group.

This was agreed unanimously by all Sponsor Board members and by consensus with all Stakeholder Board Members

8.0 To receive the Consultation Assurance Report:

PS presented the paper. This paper was received at the Future Fit Assurance meeting and both CCG Board meetings in December. There were no comments made from the programme board members on this item. It was therefore approved by the Programme Board

9.0 To agree papers for publication:

The programme board agreed that with the exception of draft documents all DMBC appendices can be uploaded to the NHS Future Fit Website Draft documents requiring further work are:

- Appendix 3: Travel and Transport Report
- Appendix 4: Travel and Transport Mitigation Plan
- Appendix 5: Urgent Treatment Centre Draft Specification
- Appendix 6: Draft Transfer Policy

It was also noted that the ORH Full Report may require a review prior to uploading in January due to the length of the report. It may need a covering paper. All final documents should be uploaded by January to coincide with the CCG Board meetings.

ACTION: NM to upload final version documents onto web site

10. Any other business:

There have been no items of any other business

11. Date of the next meeting:

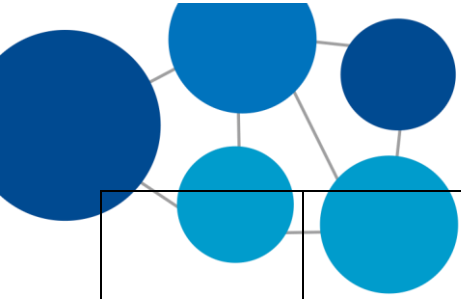
Wednesday 16th January 2019

Action Schedule

RAG Rating Key:

Completion Status	
	Overdue
	Scheduled for this meeting
	Scheduled beyond date of this meeting
	Action completed

Meeting Date	Agenda Item	Action Point	Owner	Agreed Due Date	Revised Due Date	Comments/Update	RAG rating
17.12.19	Item 3	The Joint Chairs to forward a formal response from the consultation to the SROs.	Karen Calder / Andy Burford	3 rd January			Open
17.12.2018	Item 5	To look at wording around Ambulatory care in next version of DMBC	D Vogler	3 rd January		Completed	Closed
17.12.2018	Item 5	To consider adding more detail on wider community programmes in the DMBC	D Vogler	3 rd January		Completed	Closed
17.12.2018	Item 5	Phil Evans to draft a ToR for the Oversight Group and feed this back to	Phil Evans	16 th January 2019		Verbal update to be received on the agenda	Closed



		Neil McKay for approval.					
17.12.2018	Item 5	Phil Evans to review where the Future Fit Assurance / IIA Work streams will sit within the STP post decision making. This will be fed back to the programme board in January 2019	Phil Evans	16 th January 2019		Verbal update to be received relating to the Implementation oversight group.	Closed
17.12.2018	Item 6	Andrea Webster to look at reformatting the Travel and Transport Mitigation Plan. All comments are to be fed back to the AO's. A revised version circulated before 3rd for inclusion in CCG Board discussions on 8th and 9th January 2019.	Andrea Webster	16 th January 2019		Item to be received on the agenda along with the travel and transport report.	Closed
17.12.2018	Item 7	The need to ensure that Paediatric cover in the UCC needs to be clearly articulated in the DMBC	D Vogler	3 rd January		Complete	Closed
17.12.2018	Item 9	NM to upload final version documents onto web site	N McGrath	8 rd January		Complete	Closed
17.12.2018	Item 5	To amend wording to "split" in DMBC	D Vogler	3 rd January		Complete	Closed
17.12.2018	Item 5	To amend benefits tracker in DMBC	D Vogler	3 rd January		Complete	Closed