



Paper A

Joint Committee of Clinical Commissioning Groups

Meeting held 24 May 2017, 3.30pm- 5:00pm, at Sheffield CCG

Decision Summary for CCG Boards

No decisions were made at this meeting.



Minutes of the meeting of the

Joint Committee of the Clinical Commissioning Group Meeting

held 24 May 2017, 3.30pm- 5:00pm, at Sheffield CCG

Present:

Dr Tim Moorhead, Clinical Chair, NHS Sheffield CCG (Chair)
 Will Cleary-Gray, Director of Sustainability and Transformation, South Yorkshire and Bassetlaw Sustainability and Transformation Partnership
 Dr David Crichton, Clinical Chair, NHS Doncaster CCG
 Dr Richard Cullen, Clinical Chair, NHS Rotherham CCG
 Chris Edwards, Accountable Officer, NHS Rotherham CCG
 Idris Griffiths, Interim Accountable Officer, NHS Bassetlaw CCG
 Debbie Hilditch, Healthwatch Representative
 Pat Keane, Chief Operating Officer, NHS Wakefield CCG (Deputy for Jo Webster, Accountable Officer)
 Alison Knowles, Locality Director – North, NHS England
 Priscilla McGuire, Lay Member
 Dr Ben Milton, Clinical Chair, NHS North Derbyshire CCG
 Philip Moss, Lay Member
 Julia Newton, Director of Finance, NHS Sheffield CCG (Deputy for Maddy Ruff, Accountable Officer)
 Jackie Pederson, Accountable Officer, NHS Doncaster CCG
 Dr Andrew Perkins, Clinical Chair, NHS Bassetlaw CCG
 Lesley Smith, Accountable Officer, NHS Barnsley CCG
 Karen Watkinson, Corporate Secretary, NHS Hardwick CCG

Apologies:

Steve Allinson, Accountable Officer, NHS North Derbyshire CCG
 Sir Andrew Cash, STP Lead, Chief Executive STH
 Maddy Ruff, Accountable Officer, NHS Sheffield CCG

In attendance:

Jane Anthony, Corporate Committee Administrator, Executive PA and Business Manager
 Marianna Hargreaves, System Transformation Programme Lead, SYB STB
 Helen Stevens, Associate Director of Communications and Engagement, Commissioners Working Together

Minute reference	Item	ACTION
25/17	<p>Welcome and introductions</p> <p>The Chair welcomed members to the meeting.</p>	



26/17	<p>Apologies</p> <p>Apologies were received and noted.</p>	
27/17	<p>Declarations of Interest</p> <p>There were no declarations of interest.</p>	
28/17	<p>Previous minutes of the meeting held 18 April 2017</p> <p>The minutes of the meeting held on 18th April 2017 were accepted as a true and accurate record.</p>	
29/17	<p>Findings from the conversations with the public and staff on the STP</p> <p>Helen Stevens gave a presentation entitled the 'Findings from the conversations with the public and staff on the Sustainability and Transformation Plan (STP)'.</p> <p>Helen Stevens informed members that between February and April 2017, people living and working in Barnsley, Bassetlaw, Doncaster, Rotherham and Sheffield were asked for their views on the initial thinking in the South Yorkshire and Bassetlaw Sustainability and Transformation Plan.</p> <p>Helen Stevens explained the approach taken, the process used, responses gained and the headline findings. The conclusion of the findings are:</p> <ul style="list-style-type: none"> • Overall engagement in local conversations was more successful where there was an opportunity to link in with an existing group, community of community interest. • Online conversation was well supported and attracted a lot of interest. • Many people had not heard about the Sustainability and Transformation Plan before the conversation sessions. • Overall, people are supportive of the ambition (89% when first asked, dropping to 73% when they have more context) with some notable caveats: <ul style="list-style-type: none"> • They question the practicality of the ambition, are worried about losing services and the future of the NHS and want greater involvement in the next phase of the STP. <p>The JCCC were invited to comment and made the following remarks:</p> <ul style="list-style-type: none"> • The Healthwatch Representative added that colleagues and voluntary sector umbrella organisations can access deeper and broader with groups than statutory organisations. Therefore, STP 	

	<p>should continue to engage and communicate directly with these groups.</p> <ul style="list-style-type: none"> • The public want services, they are not concerned who provides them or what the delivery structure is like, they are concerned with what any changes will mean to them. • We plan for one care system with no cracks therefore we need to change to achieve this. • The response rate is good and slightly above the average. • There is already a mechanism in place for the public to engage with e.g. representative democracy. We need clarity on the areas we can shape and what we can't. We must listen, engage and change on the basis of this. • The STP and CCG's communications strategies need a joined-up approach to ensure there is no duplication. There are certain recurrent themes the public are concerned with which the STP are not leading on, however, we need to weave them through our specific consultations. <p>The next steps were highlighted and Helen Stevens stated she will be reporting back on a regular basis as we move forward.</p> <p>The Chair thanked Helen Stevens for her presentation.</p>	
<p>30/17</p>	<p>Addressing the themes identified through public consultation for the reconfiguration of Hyper Acute Stroke and changes to Children's Services and Anaesthesia.</p> <p>Marianna Hargreaves gave a presentation entitled 'How we are responding to what the public and stakeholders said'.</p> <p>The presentation outlined the themes identified through the public consultations and how the team is addressing the themes as part of the development of the decision making business cases.</p> <p>The JCCC were invited to comment and made the following remarks:</p> <ul style="list-style-type: none"> • When change is planned and implementation is phased in we need to be mindful of the impact on staff and the uncertainties it can create so as to effectively manage this. • Implementing operational change when staff leave is already taking place and in order to minimize the impact for patients it makes sense for decisions to take place to enable change in a planned way. This means proactively taking decisions where necessary. • It was confirmed that after 72 hours within a hyper acute stroke service patients would be repatriated. 	



	<ul style="list-style-type: none"> It was confirmed that there is no change to Chesterfield as that area is outside the region and the proposed model reflects this. <p>On a practical note, it was suggested that all future reports should separate both changes so that they are presented individually and not amalgamated into one.</p> <p>The Chair thanked Marianna Hargreaves for her presentation.</p>	
31/17	<p>Questions from the public</p> <p>There were no questions from the public.</p> <p>The Chair gave clarification about this meeting, the JCCC is a business meeting held in public.</p>	
32/17	<p>To consider any other business</p> <p>There was no other business brought before the meeting.</p>	
33/17	<p>Date and Time of Next Meeting</p> <p>The next meeting will take place on 28 June 2017, 3.30pm to 5.00pm, The Boardroom, Doncaster CCG.</p>	