



Healthier Together – Sponsoring Board

Date: Monday 24 September 2018, 2.30 – 5.30pm

Venue: City Hall, College Green, Bristol

Final minutes

Present:	Name	Initials	Job title
	Sara Blackmore	SB	Director of Public Health for South Gloucestershire
	Judith Brown	JB	Chief Executive, North Somerset Community Partnership
	Amanda Deeks	AD	Chief Executive, South Gloucestershire Council
	Linda Gorton	LG	Portfolio Administrator, Healthier Together
	Jim Hanbury	JH	Exeter Leadership consulting
	Ron Kerr	RK	Healthier Together Independent Chair
	Michele Narey	MN	Director of Operations, Bristol Community Health
	Ned Naylor	NN	Deputy Director System Transformation Group, NHS England
	Laura Nicholas	LN	Programme Director, Healthier Together
	Graham Paine	GP	Chair, Weston Area Health Trust
	Rachel Pearce	RP	Director of Commissioning Operations, NHSE South West
	Jennifer Quincey	JQ	Portfolio Administrator, Healthier Together
	Hayley Richards	HR	Chief Executive AWP
	James Rimmer	JRi	Chief Executive, Weston Area Health NHS Trust
	Julia Ross	JRos	Chief Executive, BNSSG CCG
	Janet Rowse	JRow	Chief Executive, Sirona
	Eric Sanders	ES	Trust Secretary, University Hospitals Bristol
	Sheila Smith	SS	Director for People and Communities, North Somerset Council
	Ruth Taylor	RT	Chief Executive, One Care BNSSG Ltd
	Sarah Truelove	ST	Deputy Chief Executive and Chief Finance Officer, BNSSG CCG
	Jenny Winslade	JW	Executive Director of Nursing and Governance, SWAST
	Robert Woolley	RW	Chief Executive, University Hospitals Bristol NHS Foundation Trust

	Andrea Young	AY	Chief Executive, North Bristol Trust
	AICS TEAM: Kaylee Talvitie-Brown Harriet Aldridge Catherine Evans Christopher French Sunni Murdock	KT-B HA CE CF SM	
Apologies:			
	Helen Bailey	HB	Chief Executive, North Somerset Council
	Julia Clarke	JC	Chief Executive, Bristol Community Health (BCH)
	Morgan Daley	MD	Healthwatch
	Mike Jackson	MJa	Executive Director to Resources - Head of Paid Service, Bristol City Council
	Martin Jones	MJo	Medical Director, BNSSG CCG

Item	Topic	Action
1	<p>Minutes and Actions from the previous meeting</p> <p>1.1 Apologies for Absence</p> <p>Apologies for absence were recorded through the Chair</p> <p>1.2 Approval of minutes from the meeting held on 02 August 2018</p> <p>The minutes of the meeting held on 02 August 2018 were approved and agreed as an accurate record of the meeting, with no further amendments.</p> <p>1.3 Review of Action Log</p> <p>The Action Log was reviewed, to be updated with the following additional comments:</p> <p>Item 4. JRo confirmed that Janet Meek has written to CCG Chief Officers to confirm the new co-commissioning approach to Specialised Commissioning, with the lead taken by BNSSG.</p> <p>Item 17. LN advised that the revised risk register will be presented at the next Sponsoring Board meeting.</p>	LN
2.	<p>Approach to joint system working – AICS workshop (session facilitated by KT-B and team)</p> <p>KT-B introduced the aims of the session, which were to set out key principles, agreeing a shared governance structure and next steps.</p> <p>Starting with some feedback from the group, questions and comments raised included:</p> <ul style="list-style-type: none"> - How are the Local Authorities included in the AICS programme, given that they have very different governance arrangements? 	

- This work needs to be real and relevant so we need to be very clear on why we are going through this process (the 'so what?')
- Important to be able to build something that can work for all the partners, and turn any concerns into positives.
- Keep it as simple as possible
- Success will come from having a governance structure which is facilitating and enabling.

HA outlined how governance ensures overall control, but it's also about the people, values and principles, as well as culture and behaviours. Sleek governance is key to ensuring success. Core to this is a three tiered approach involving:

- Locality
- Place
- Systems

This in turn means that we do not necessarily need every partner involved at every level. The role of the Chairs Reference Group should also be seen as a core element of an holistic governance structure.

KT-B then facilitated a feedback session around the governance presentation, and how the AICS programme will proceed - as summarised below:

- The Chairs Reference Group already worked well and should be kept, with an expanded role in the STP.
- Why were we having further conversations around governance when we already have a good structure in place? It is more important for us to think about how we get to our single plan. The System Delivery Oversight Group have already presented a set of ambitions and milestones as a framework for this. There is still more work to do but it's moving in the right direction.
- We need to know what links the shared vision and the single system plan. What are the goals we're trying to achieve? We know what our high level goals are but what does this mean at a population level? We need clearer achievable goals with a commitment to delivering them.
- It is a complicated picture – we do have some locality based arrangements but we have to accept there are many challenges still to be addressed. We have a single population, a single pot of money, huge challenges and, one might argue, more organisations than we need. We can continue to talk about our shared goals and vision however we really need to commit to working towards the shared plan which has already been set out and presented to the group.
- While the Local Authorities are different in that they have many layers of responsibility across different budget streams, they can still talk about the areas that are directly linked to NHS delivery

and be part of this process.

- How do the group determine the structure and content of the ICS? This will co-evolve with agreement of the partners to work together with shared actions.
- There is a single system plan and we have the 10 priority programmes, but there is also an acknowledgement that not all members are fully clear on what the next steps are around these, or the consequences of what is planned; more clarity is needed in order to move things forward.

KT-B facilitated a group activity on the question “if Healthier Together was a high performing STP, what would be the key principles to ensure success?” Feedback comments summarised below:

Group 1

- A way of working that shifts resources
- Democracy and transparency
- What does a locality look like?
- How do we commit resources?
- Involve members of the public in the ICS design
- Important to consider the role of the citizens panel
- Ensure collective engagement
- Payment mechanisms with shared outcomes and goals

Group 2

- Commonality of vision and goals at a system level
- Transparency across systems
- Being predictive and planned rather than reactive
- Ensuring clinical decision making is at the forefront of our work
- How can we be genuinely transformative?

Group 3

- Absolute clarity on what we are doing
- Being very clear on what we're expecting from each organisation and what they are expected to contribute
- Clear ambitions and a clear shared performance management framework
- Having a performance management framework that is meaningful to our populations.

Other comments and feedback included:

- The importance of having the same understanding and analysis of the problem across our organisations
- Being able to have those 'honest' conversations and a commitment trust and honesty.
- We have many of these principles already but need to reframe them for clarity
- We have to mandate these behaviours not only at this level but across all our teams
- Important to think about the practical differences we can all make

	<ul style="list-style-type: none"> - We need to be able to learn from mistakes, and also celebrate successes - Acknowledging that we have made great progress in working together as a team - The importance of language, how documents are written in a clear and transparent way – key to helping all understand their roles - Working to ensure that each meeting doesn't become a 'refresher' of the previous one <p>The session concluded with evaluation forms, and a reminder that the leadership group have all been invited to the NHSI ACT leadership day on October 19th (NOTE – this session has now been cancelled).</p>	
3.	<p>Healthier Together programme plans</p> <p>Some of the programme plans have been further refined, and the final versions are going to be uploaded to the Healthier Together website.</p> <p>The Sponsoring Board signed off these programmes, and ownership for ongoing development and updates will now sit with the relevant steering groups.</p> <p>ACTION: LN to present the new format progress reporting for the programmes at the next Executive Group meeting.</p>	LN
4.	<p>Acute Care strategy</p> <p>It was acknowledged that the strategy has been clearly and succinctly set out in the paper, and the plan is to now proceed with it.</p> <p>The Board were requested and gave their endorsement to:</p> <ul style="list-style-type: none"> - the proposed approach to developing a Healthier Together Acute Care Collaboration strategy - the proposed product and output of the strategy - the draft set of principles for collaboration <p>MN presented an additional comment from Julia Clarke on the strategy as shown below:</p> <p>“Support the transfer, where appropriate, of care into community settings and primary care by making available and accessible, specialist opinion and support to community based multi-disciplinary teams enabling higher acuity patients to be cared for safely at home avoiding hospital admission altogether or enabling an earlier discharge”.</p>	
5.	<p>Regular report for partner boards</p> <p>As discussed at previous meetings, this paper is intended for circulation by organisations to their own Boards.</p> <p>It was noted that the report contained a lot of system level data and information, but less detail on what actions are being taken. There was also a discussion around the level of information in the report that</p>	

	<p>it was appropriate to be shared more widely. It was agreed that the report should be more 'high level' and also include more positive news.</p> <p>ACTION: LN to amend the report and circulate to Partner Board secretaries for onward communication to boards.</p>	LN
6.	<p>SWLA Leadership Development funding proposal</p> <p>The paper outlined the submission to the South West Leadership Academy for a bid to support leadership and system development to support achievement of the ambitions of the Five Year Forward View.</p> <p>The Board were requested to note the content of the submission. It was also noted that this funding is separate to the recent GP CEPN funding and this money is specifically ring fenced to support STP's and their locality forum groups.</p>	
6.	<p>Any Other Business</p> <p>JRow presented an item on the General Management training scheme, and asked the Board to note that the Steering Group will be re-formed. This will impact on representation from BNSSG STP as some members will be asked to step down, so to note for awareness.</p> <p>JRow also shared that news that the ICB initiative is now live – a great success story and a massive cultural change.</p> <p>No additional items of business were raised.</p>	
<p>Date of next meeting:</p> <p>Monday 26 November, 2.30 – 5.30pm, Conference Room, UHB Trust HQ, Marlborough Street, Bristol</p>		