

# SHEFFIELD CITY COUNCIL

## Joint Commissioning Committee

### Meeting held 29 April 2019

**PRESENT:** Sheffield City Council  
Councillors Olivia Blake, Lewis Dagnall, Jackie Drayton and Chris Peace

Sheffield Clinical Commissioning Group  
Dr. Tim Moorhead, Mark Gamsu, Brian Hughes (Substitute Member) and Dr. Leigh Sorsbie.

#### Also in Attendance

John Mothersole, Chief Executive, Sheffield City Council  
Greg Fell, Director of Public Health, Sheffield City Council  
Eugene Walker, Executive Director, Resources, Sheffield City Council  
Jayne Ludlam, Executive Director, People Services, Sheffield City Council  
Phil Holmes, Director of Adult Services, Sheffield City Council  
Dawn Walton, Children and Schools Commissioner, Sheffield City Council  
Nicki Doherty, Executive Director, Care out of Hospital. Sheffield Clinical Commissioning Group  
Julia Newton, Director of Finance, Sheffield Clinical Commissioning Group  
Jennie Milner, Integration and Better Care Fund Lead

## **1. ELECTION OF CO-CHAIRS AND WELCOME**

- 1.1 **RESOLVED:** That Councillor Chris Peace, Cabinet Member for Health and Social Care, Sheffield City Council and Dr Tim Moorhead, NHS Sheffield Clinical Commissioning Group, Governing Body Chair, be appointed Co-Chairs of the Committee.

## **2. APOLOGIES FOR ABSENCE**

- 2.1 An apology for absence was received from Maddy Ruff and Brian Hughes attended the meeting as the duly appointed substitute.

## **3. DECLARATIONS OF INTEREST**

- 3.1 Members of the Committee were requested to declare if they had any interests which may impact on their participation in decisions at future meetings of the Committee. The following interests were declared:-

Dr Tim Moorhead – GP and shareholder in Primary Care Sheffield, a not for profit enterprise.

Councillor Jackie Drayton – Husband was an employee in the Voluntary Sector.

Mark Gamsu – Trustee of 3 voluntary organisations in the City, full details available on the CCG website.

Councillor Olivia Blake – Non-Executive Director of the Sheffield Health and Social Care Trust and partner of a Trustee of the Heeley City Forum.

Councillor Lewis Dagnall – Partner of a Non-Executive Director of the Sheffield Health and Social Care Trust and Trustee of the Heeley City Forum.

- 3.2 Members of the Committee commented that there was a need for clarification as to how interests would be managed by the Committee. It was agreed that the Director of Public Health, Sheffield City Council, Greg Fell and the Executive Director of Delivery, Care Outside of Hospital, Sheffield CCG, Nicki Doherty, would clarify this and report back to the next meeting of the Committee.

#### **4. PUBLIC QUESTIONS**

- 4.1 There were no public questions submitted. It was agreed that, should any written questions be required to future public questions, the responses be agreed with the Co-Chairs.

#### **5. JOINT COMMISSIONING FOR HEALTH AND CARE - TERMS OF REFERENCE**

- 5.1 The Director of Public Health, Sheffield City Council, introduced a report outlining the proposed Terms of Reference for the Committee. He commented that the establishment of the Committee had been jointly agreed by the City Council and the Clinical Commissioning Group and officers from both sides had been involved in its formation.
- 5.2 The work of the Committee focused on three broad areas as outlined in the report but it was not limited to that. The Committee was accountable to both bodies. It was scheduled to meet bi monthly but could meet more often if the committee agree.
- 5.3 Mark Gamsu commented that the challenge for the Committee was demonstrating the added value that the Committee would bring. It presented an opportunity to establish a shared conversation and a shared approach to complex issues.
- 5.4 Dr Tim Moorhead commented that the focus of the committee is using a single commissioner voice to improve patient experience, tackle health inequalities and achieve quality services, whilst ensuring financial sustainability for the city.
- 5.5 Mark Gamsu raised that the Committee needed recognise the links to the integrated care system, captured in the TOR .
- 5.6 **RESOLVED:** That:-

- (a) the Committee agreed amendments to the Terms of Reference, and revised copy to be brought back to the next meeting;
- (b) details of attendees to be removed from the diagram on page 9;
- (c) add the term 'and outcomes' to the end of the sentence in paragraph 3.2.5 of the report to read 'Improved people experience and outcomes'; and
- (d) add details of how conflicts of interest will be managed.

## **6. JOINT COMMISSIONING FOR HEALTH AND CARE - PRINCIPLES**

- 6.1 The Director of Public Health, Sheffield City Council, and the SCCG Lead Officer submitted a report updating the Committee on progress on delivering the Sheffield City Council and Clinical Commissioning Groups (SCCG) integrated commissioning agenda. It set out the principles that had been agreed that would underpin the re-commissioning of services and gave an example of how this might work based on the Mental Health Transformation Plan risk share.
- 6.2 Greg Fell, Director of Public Health, Sheffield City Council, introduced the report and commented that the principles outlined were mostly based on the learning already shared by the City Council and the CCG Discussion was needed on how to embed the principles and how they would link in to finances.
- 6.3 Mark Gamsu commented that, traditionally, Sheffield had a good tradition of working with local communities. The Committee needed to build on that on a broader strategic level. The Committee should also not lose sight of previous experience and outcomes.
- 6.4 Dr Leigh Sorsbie stated that Quality and Equality Impact Assessments (QEIA's) often became mixed in with inequalities and they often didn't address the issue of inequalities. Consideration should be given to ensuring papers brought the committee are clear on how inequalities will be addressed. The Committee acknowledged that QEIA's should not just be a tick box exercise and should demonstrate a real impact.
- 6.5 Dr Tim Moorhead discussed how the committee could ensure it adds benefit to the health and social care system. Ensuring the commissioning cycle is appropriately followed to deliver transformational change that the committee can support. The committee requested baseline data to provide a platform to measure change from.
- 6.6 **RESOLVED:** That the Committee approves the Joint Commissioning Principles and requests a baseline data set.

## **7. JOINT COMMISSIONING FOR HEALTH AND CARE - PRIORITIES**

- 7.1 The Director of Public Health, Sheffield City Council and the SCCG Lead Officer submitted a joint report providing the objectives and priorities for Joint Commissioning of Health and Care and a summary of initial considerations for change to be included in the joint commissioning plan.

- 7.2 Nikki Doherty, Executive Director of Delivery, Care outside of Hospital, introduced the report and commented that it was recognised that targeted investment was needed. The report identified feedback and joint working that had taken place.
- 7.3 Councillor Chris Peace, Cabinet Member for Health and Social Care, commented that it was important to highlight the issues of housing, Special Educational Needs Development (SEND) and mental health and these were important priorities which the Committee should start their focus on.
- 7.4 Following a question from Councillor Jackie Drayton, Cabinet Member for Children and Families, Nikki Doherty commented that frailty did not necessarily mean older people who were frail it would include preventing frailty with an all age approach. It was important to ensure people were living well as close to their home as possible.
- 7.5 Mark Gamsu commented that the priorities in the report outlined where the City Council and the CCG had responsibility. They did not focus on a particular conditions, which was a positive approach to transformation. However it was less clear how these had being decided as the priority and requested the background to deciding these were the priorities.
- 7.6 Dr Tim Moorhead commented that there was well recognised methodology for undertaking the work that the Committee was prioritising. The Committee needed to ensure reports received reflected the commissioning cycle had being duly followed and wasn't responsive to current crisis. It was also important for the Committee to understand the work of providers and consult with service users to gauge their views.
- 7.7 Councillor Olivia Blake commented that the Committee needed to hear citizens stories to establish gaps in systems and why they existed. Frailty was not inevitable in all cases. Councillor Chris Peace added that the Committee needed a breakdown of what services were offered, where the gaps were and how the Committee could add value.
- 7.8 **RESOLVED:** That the Committee approve the priorities outlined in the report and background content to the priorities to be brought to the next meeting.

## **8. DATE AND TIME OF FUTURE MEETINGS**

- 8.1 **RESOLVED:** That:-
- (a) the next meeting of the Committee be held on Monday, 24 June 2019, at 12:30pm at the Town Hall; and
  - (b) a Work Programme outlining future agenda items for the Committee be included as a standard agenda item for future meetings of the Committee.