



Surrey Health and Social Care

SURREY COMMISSIONING COMMITTEES IN COMMON MINUTES

Committees in Common between the following organisations:

NHS Frimley ICB	✓
NHS Surrey Heartlands ICB	✓
Surrey County Council	✓

Date	Wednesday 14 December 2022	Time	14:30 – 15:50
Venue	Virtual meeting/ Woodhatch Place, Reigate (Surrey County Council)		

Members/ Attendees:

Name	Title/ Role	Attendance (✓)/ Apologies (A)		
		Surrey Heartlands ICB	Frimley ICB	Surrey County Council
Convener				
Ian Smith (IS)	Chair, Surrey Heartlands ICB			
Members				
Ian Smith (IS)	Chair	✓		
Clare Stone (CS)	Surrey Heartlands ICB Director of Multi-Professional Leadership and Chief Nurse	✓		
Prof Claire Fuller (ProfCF)	Chief Executive Officer	A		
Karen McDowell (KMc) <i>On behalf of ProfCF</i>	Chief Operating Officer / Deputy Chief Executive	✓		
Matthew Knight (MK)	Chief Finance Officer ICB	✓		
Dr Timothy Bates (TB)	Clinical Director – Integrated Services	A		
Sarah Bellars (SB)	Chief Nursing Officer		✓	
Samuel Burrows (SBU)	Chief Transformation & Digital Officer		A	
Richard Chapman (RC)	Chief Finance Officer		✓	

Name	Title/ Role	Attendance (✓)/ Apologies (A)		
		Surrey Heartlands ICB	Frimley ICB	Surrey County Council
Tracey Faraday-Drake (TFD)	Director for Children and Young People and All Age Learning Disabilities and Autism		✓	
Tim Oliver (TO)	Council Leader			A
Cllr Clare Curran (CCu) <i>On behalf of TO</i>	Cabinet Member for Children			✓
Cllr Sinead Mooney (SMo)	Cabinet Member for Children and Families			✓
Cllr Mark Nuti (MN)	Cabinet Member for Adults and Health			✓
Attendees				
Jane Bremner (JB) <i>For Item 7</i>	Head of Commissioning: Mental Health, Adult Social Care, Surrey County Council		✓	
Stephen Murphy (SMu) <i>For Item 7</i>	Deputy Director of Mental Health Commissioning, NHS Surrey Heartlands ICB		✓	
David Wimblet (DW) <i>For Item 7</i>	Commissioning Manager, Mental Health / Guildford & Waverley Adult Social Care		✓	
Sarah Ford (SF) <i>For Item 8</i>	Senior Commissioning Manager, Surrey County Council		✓	
Liz Bruce (LB) <i>For Item 9</i>	Joint Executive Director - Adult Social Care and Integrated Commissioning, Surrey County Council		✓	
Andrew Evans (AE) <i>For Item 9</i>	Health and Care Integration Programme Manager		✓	
Debo Sokoya (DS)	(Minute-taker) Governance Manager, Surrey Heartlands ICB		✓	

Item No.	Discussion and actions raised	Who	By when
1	<p>Welcome, Introductions and Apologies</p> <p>The Convener welcomed members and attendees; apologies were received as detailed above.</p> <p>The Convener notified members and those present that the meeting was being webcast live via the Surrey County Council website. Additionally, he reminded all present that the meeting would be recorded for administration purposes only.</p> <p>The Convener also confirmed that the Surrey County Council Committee were meeting 'in person' to fulfil their decision-making requirements. NHS Frimley ICB and NHS Surrey Heartlands ICB were meeting virtually.</p> <ul style="list-style-type: none"> Confirmation of Convener The Committees confirmed IS as Convener for this meeting. 		

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2	<p>Declarations of Interest</p> <p>a) To receive confirmation from all members and attendees that their entry in the Register of Interests is up-to-date, accurate and complete. The Convener noted the register of members' and attendees' interests included in the meeting papers. The Convener invited members and attendees to report any new declarations or any amendments to the register.</p> <p>b) To receive any declarations of interest pertinent to items on this agenda. The Convener invited members and attendees to report any conflicts pertinent to items on this agenda. None were received.</p>								
3	<p>Quorum</p> <p>The required quorum was met for the following organisations:</p> <ul style="list-style-type: none"> • NHS Frimley ICB • NHS Surrey Heartlands ICB • Surrey County Council 								
4	<p>Minutes from last meeting on 21/09/2022</p> <p>The minutes of the last meeting were presented.</p> <p>Decision Applicable to:</p> <table border="1" data-bbox="252 1151 1070 1267"> <tbody> <tr> <td data-bbox="252 1151 935 1189">NHS Frimley ICB</td> <td data-bbox="940 1151 1070 1189">✓</td> </tr> <tr> <td data-bbox="252 1196 935 1234">NHS Surrey Heartlands ICB</td> <td data-bbox="940 1196 1070 1234">✓</td> </tr> <tr> <td data-bbox="252 1240 935 1267">Surrey County Council</td> <td data-bbox="940 1240 1070 1267">✓</td> </tr> </tbody> </table> <p>The above Surrey-wide Commissioning Committees:</p> <ul style="list-style-type: none"> • APPROVED the minutes of the last meeting. 	NHS Frimley ICB	✓	NHS Surrey Heartlands ICB	✓	Surrey County Council	✓		
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5	<p>Action Log</p> <p>It was noted that there were no actions from the last meeting.</p>								
6	<p>Questions from members of the public</p> <p>No questions were received from the public.</p>								
7	<p>Approval request for Community Connections: contract extension</p> <p>JB, SMu and JL presented the paper and gave a background of the provision of community connection services. JB confirmed that the request was to extend current contracts by a year and to give time for an innovative and legally compliant and procurement of Community Connections plus other identified services. She highlighted the intention to continue to work collaboratively with a range of providers and commissioners to deliver a co-produced and co-ordinated voluntary sector mental health offer in Surrey for future years.</p>								

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	<p>SMu advised that the activity had increased year on year. This has resulted in a high-volume service of about six thousand (6000) people being supported by the Community Connections across Surrey. This also fits into the NHS long term plan regarding growing and expanding the voluntary sector services to people requiring mental health support.</p> <p>JL highlighted that previous reviews demonstrated good positive outcomes and that the providers had brought significant additional added value through their ways of working over a number of years and had been able to leave additional funding over and beyond the funding that is made available through the contracting arrangements. This is an area Community Connections want to build on in the future model and to work well with partners to coordinate effectively and get the best possible value out of the money available to invest.</p> <p>The Convener advised that he recently visited the Woking Safe Haven and confirmed that the people were excellent and provided a great impressive service. He asked if there was any intention for the Woking Safe Haven to open during the daytime. SMu advised that a daytime opening could be achieved as Woking Safe Haven was opened for 24 hours during the pandemic as extra support and there was some increase in activity. As part of the finance recovery, a review of how much the increased hours could support the rest of the clinical system was underway and a meeting is scheduled for Friday to discuss this issue.</p> <p>MK advised that he was aware the service was going to be reviewed over the next 12 months. He asked JL in the event that the review has to be carried out quickly, if it was possible to incorporate a notice period into the contract, to enable a position to enact service changes more quickly. JL confirmed he would review the contract and insert the notice period to ensure that the wording of any extension, if approved today is up to the period specified, through to the 31st of March 2024 or sooner and subject to being able to complete the work.</p> <p>SMo asked for details of how the services at Woking Safe Haven are checked and measured to provide the needs of the residents particularly during out of hours. SMu in response explained that there is a service specification in place with all the details that are required for the provider to deliver and submit monthly data returns. This provides details of the number of people accessing the service and also some narrative of their experience. Feedbacks are also taken from workers and the people who access the service.</p> <p>Additionally, there is an 'open system' and technically anyone can attend, i.e. they do not have to live in the area or be</p>		

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	<p>registered with a GP. Personal data such as names or date of birth are not requested as service users felt this was intrusive and were not comfortable to share this information when they attend the service.</p> <p>JB advised that an engagement work was conducted as part of the bigger picture project with a number of people who use Safe Havens. The staff and people who use the services were engaged and the feedback gathered informed the newly revised service specification for when the new services come online and continuous feedbacks are sort to help improve the service. The committee encouraged the sharing of the data from the feedback of service users.</p> <p>The Convener advised that when he visited Woking St Peters Hospital, it was encouraging to note that the staff were very complimentary of the service because it has helped to reduce some of the pressures in the A&E department.</p> <p>The committee noted the details of the good service provision provided to service users with lots of common-sense listening advice on lifestyles and commended the team for their excellent work.</p> <p>Recommendation: The Surrey-wide Commissioning Committees are asked:</p> <ul style="list-style-type: none"> TO APPROVE a one-year additional extension of Community Connections contracts, taking the expiry date to 31 March 2024. <p>Decision Applicable to:</p> <table border="1" data-bbox="252 1368 890 1480"> <tr> <td>NHS Frimley ICB</td> <td>✓</td> </tr> <tr> <td>NHS Surrey Heartlands ICB</td> <td>✓</td> </tr> <tr> <td>Surrey County Council</td> <td>✓</td> </tr> </table> <p>The Surrey-wide Commissioning Committees:</p> <ul style="list-style-type: none"> APPROVED a one-year additional extension of Community Connections contracts, taking the expiry date to 31 March 2024. 	NHS Frimley ICB	✓	NHS Surrey Heartlands ICB	✓	Surrey County Council	✓		
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8	<p>Outcome of the first procurement of providers to the Supported Independent Living Approved Provider List</p> <p>SF presented the paper advising that it was for information and it set out the outcome of the first round of procurement of providers to the Supported Independent Living Approved Provider List (APL). SF highlighted the following key background information and next steps: A provider list (APL) for supported independent living providers was established; although historically, the team had not worked in this way. Everything purchased was on a spot basis with individual providers and negotiating on a case-by-case</p>								

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	<p>basis. This led to a lot of variation between providers and variations in quality or value for money.</p> <p>The approved provider list (APL) was established in the wider context of the accommodation with carers support strategy. A tender opportunity was presented to the market and providers were asked to submit bids. The providers were asked to bid on two lots: LOT 1 was standard support and LOT 2 was enhanced support. This allowed for the selection of providers who have more skills and experience, for example with behaviour that challenge people with learning disability and autism.</p> <p>The approved provider list (APL) would operate initially for 15 months with an option of extension. The future plan is to move towards a dynamic purchasing system for supported independent living and to conduct some of the preparation work during the life of the APL. A significant amount of engagement and consultation events was held to focus on establishing the list. A significant amount of feedback from providers impacted the way the APL developed. Approximately 4,050 providers attended each event and some internal consultation took place with the workforce who would be impacted by the operation of the APL.</p> <p>SF advised that the plan is to review the APL list about every 3 months to allow new providers to join and to provide an opportunity for those who did not get through the initial procurement exercise to bid again. The marketing engagement would continue to be part of the ongoing development progress.</p> <p>A Task and Finish Group was also set up to manage some of the key feedbacks from providers, particularly on rates for example for sleep inn, policies relating to voids and absences and to help shape the model of care in the market.</p> <p>JL advised that a structure on quality was key with a very clear structure set of expectations on service standards, outcomes and deliverables. Previous pattern of structures has changed and part of the development of the DPS approach was introduced. The commercial element of the pricing structure which is critical to both the Council and the wider system as a whole is essential to move forward. A good structure, fairness in pricing to help align carefully and closely to people's assessed needs would be a key point of focus moving forward. The management of disability provisions is an area of ongoing joint commissioning and working through the DPS, which provides an opportunity to further the collaboration between the Council and Surrey Heartlands.</p> <p>The Convener advised that the more engagement made with providers and understanding of where they are coming from and getting service level agreement is a great trend across the system.</p>		

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	<p>TFD suggested that there was a need to figure out how to capture the accommodation and support needs of those with autism and learning difficulties with complex needs in a framework approach as a specialist area.</p> <p>Jl in responding explained that this was a big theme of the discussions in the marketing engagement events hence the two different 'lot' structures to help differentiate the service. Learning is also taking place through the work with providers where care cube has been used to access packages and level of spend. Jl further explained the need for tailoring of service at an individual personalised level to reflect, the complexity of different ways in which autism can present itself. Therefore, the team has an exception process to provide some structure and consistency and most importantly, transparency to be fair to the individuals, providers and the public.</p> <p>SF clarified that for providers that wanted to bid for the enhanced 'lot', they were asked to address a specific question which was how they would be able to meet the needs of individuals who may have behaviour that challenges or may have particularly complex needs.</p> <p>SF assured the committee of the consultations and engagements with services users, providers and taking views from some of the benchmark authorities to adequately support and address needs.</p> <p>MK highlighted that the process falls under a different legal framework than the CHC framework, that the NHS is used to using. Therefore, for the next stage of the process, the finance team would have to get involved, which might probably need a legal review from an NHS point of view.</p> <p>SMo thanked SF, Jl and the team for their work of producing a strong commissioning strategy that reduces the financial risk to the Council and providers, she was very pleased to see progress made so far.</p> <p>The Convener thanked the team for their brilliant work which is progressing well.</p> <p>Recommendation: The Surrey-wide Commissioning Committees are asked:</p> <ul style="list-style-type: none"> • TO NOTE the update. <p>The Surrey-wide Commissioning Committees:</p> <ul style="list-style-type: none"> • NOTED the update. 		

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9	<p>Surrey Integrated Commissioning System - Legal and Financial Framework (Approval of Integrated Commissioning MOU and Partnership Agreement)</p> <p>LB introduced the paper and advised that the attached document illustrated the journey towards integrated commissioning, how business is done together and how we work together in a way that is successful.</p> <p>LB advised that part of the work was to ensure the right governance is in place for the ICS. The partnership agreement relates to commissioning and delivery of health and care services. She emphasised that there is a shared ambition for the future of health and care services and for the system across Surrey County Council, Surrey Heartlands and Frimley and a commitment to integrate and deliver better outcomes and also to support a sustainable health and care system.</p> <p>Therefore to ensure that whatever is done is sustainable there is a partnership agreement to set out the terms and principle through which we work together as partners to bring staff and resources together in joint posts or to work in integrated teams. The Memorandum of Understanding sets out the high-level principles of how to do business together.</p> <p>LB outlined that there was a need to have in addition a legislative framework, the section 75 (part of the NHS Act 2006), which enables partners to do business legally together. Therefore, an MOU, a partnership agreement and a legislative framework are required. LB advised that there was more work to do to develop further how we join our commissioning functions and activity and maximize our resources together.</p> <p>AE highlighted the mechanisms and tools that enable working together to enable effective integrated commissioning. He reiterated that these documents reflect a point in time as many staff and colleagues are already operating within the context of the framework and making use of the processes that are outlined, particularly in the partnership agreement and the section 75 joint posts, which does not just mean joint funded posts but joint line management and responsibilities across organisations.</p> <p>AE explained that the partnership agreement was developed with HR, Legal and Finance colleagues across the three organisations. There will be unforeseen things, people will come into the system and go, some would share experiences that have worked very well somewhere else and there is an overall commitment to keep these documents living, up to date as we learn and develop together.</p> <p>AE acknowledged that the MOU was slightly less developed although it had some high level principles which many would</p>		

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	<p>recognise as standard principles of ways of working. He outlined what would feature in an updated MOU in the next six to 12 months for clearer articulation are: a program of work to reaffirm our ambition, where we want to be heading towards, what the governance would look like, what resources we need in place, some clarity on roles and responsibilities, how we are going to build our culture and behaviours together and what infrastructure would underpin it.</p> <p>TFD asked how to support the MOU without the detail around the specification or the schedules. NB acknowledged the challenges highlighted by LB and AE and explained that there are ongoing work needing sufficient material that reflects our coming together in integrated ways although there are overarching principles that would help govern decision making in each of the services and teams. There is the need to do the detailed work across the three organisations with the right people and the right teams having the conversations.</p> <p>There is now a description of what the mental health team have historically done up until now which is developing as a system and having a more integrated way of delivery showing some ways that it is evolving and changing. The agreement of the MOU would give in principle a baseline for high level principles for each service teams to further develop.</p> <p>SM highlighted the operational arrangement between Frimley and Surrey Heartlands for mental health commissioning the section 117 as an example. The simple detailed collaborative arrangement documented would be shared for learning.</p> <p>MN thanked AE and the team for the very detailed paper as it enables working together, commissioning together and providing services together to make sure that all residents are supported. Agreeing the MOU would assist and move forward the commissioning process at pace.</p> <p>Recommendation: The Surrey-wide Commissioning Committees are asked:</p> <ul style="list-style-type: none"> • TO APPROVE the Surrey Health and Care Integration Commissioning Partnership Agreement, which includes the Section 75 financial schedule for joint posts. • TO AUTHORISE Legal Services to seal the Partnership Agreement, which includes the Section 75 financial schedule, the same on behalf of the Council. • TO APPROVE the content of the Memorandum of Understanding with the intention to update this document as the shared ambition and new operating model for integrated commissioning is agreed and implemented over the next 6-12 months (and beyond). 		

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	<p>Decision Applicable to:</p> <table border="1" data-bbox="256 264 1070 383"> <tr> <td data-bbox="256 264 935 300">NHS Frimley ICB</td> <td data-bbox="940 264 1070 300">✓</td> </tr> <tr> <td data-bbox="256 306 935 342">NHS Surrey Heartlands ICB</td> <td data-bbox="940 306 1070 342">✓</td> </tr> <tr> <td data-bbox="256 349 935 383">Surrey County Council</td> <td data-bbox="940 349 1070 383">✓</td> </tr> </table> <p>The above Surrey-wide Commissioning Committees:</p> <ul style="list-style-type: none"> • APPROVED the Surrey Health and Care Integration Commissioning Partnership Agreement, which includes the Section 75 financial schedule for joint posts. • AUTHORISED Legal Services to seal the Partnership Agreement, which includes the Section 75 financial schedule, the same on behalf of the Council. • APPROVED the content of the Memorandum of Understanding with the intention to update this document as the shared ambition and new operating model for integrated commissioning is agreed and implemented over the next 6-12 months (and beyond). 	NHS Frimley ICB	✓	NHS Surrey Heartlands ICB	✓	Surrey County Council	✓		
NHS Frimley ICB	✓								
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Surrey County Council	✓								
10	<p>AOB None</p>								
11	<p>Meeting close Meeting closed at 15:50.</p>								
<p>Date of next meeting: 22 March 2023, 14:30- 16:30</p>									
<p>Signed and agreed by:</p> <p>Date: DD MMM YYYY Ian Smith NHS Surrey Heartlands ICB (Convener)</p>									