

**Chief Officers Group
Wednesday 19th February 2020**

Minutes & Actions

Present: Chris O’Gorman, Kath Wynn Jones, Tina Wardle, Liz Thompson, Jill Logan, Gill Pearl, Jeff Green, Barry Dixon, Ben Gilchrist & Marie Graham.

In Attendance: Sajid Hashmi, Neil Gibson & Luke Fisher.

Apologies: Mark Cunningham & Lynn Stafford.

No.	ITEM	ACTION
1.	<p>Welcome & Introductions</p> <p>Neil from Bury VCFA welcomed members to the meeting & asked for introductions.</p>	
2.	<p>Meeting notes of 20th November 2019</p> <p>Agreed as a true record with no matters arising.</p>	
3.	<p>Bury LCO</p> <p>Chris O’Gorman, Chair & Kath Wynn Jones CEO, Bury LCO provided an outline of their respective roles within the LCO.</p> <p>Chris explained his role as the independent chair of Bury LCO & previously worked as a chief officer for 2 organizations gaining insight in the VCF Sector.</p> <p>Kath presented an Overview of the LCO explaining that the LCO is membership style body consisting of 7 partners: Bury Council, Northern Care Alliance, Pennine Care, NHS Foundation Trust, Sonar Care Support, Bury GP Federation, BARDOC (Doctor’s on call/ out of hours primary care service) & Bury VCFA.</p> <p>The LCO Partnership Body is not a legal entity but bound by formal agreement.</p> <p>The LCO, through integrated care, bring together more health and social care organizations together.</p> <p>The LCO approach is a ‘single voice’ across member organizations; funded by the GM Transformation Fund, which pays for the staff & on-going work in changing services.</p> <p>The first year of LCO operation is almost complete (Est April 2019) & has established key areas of transformation.</p> <p>5 Neighbourhood Teams have been established with Team Managers who connect with the Social Prescribing Team at Bury VCFA. It was suggested that team managers to meet VCF organisations to establish closer working relations.</p>	

<p>Objective: To reduce patient visits to GP & establish Care Plans for high risk patients. Explored the Stockport Neighbourhood Model- initiatives such as Walking Groups have reduced patient visits to GP by 25%.</p> <p>Challenges: Addressed the issue of lack of connections to mental health teams/services. However, 2 x mental health link workers have been employed- how can they integrate to Neighbourhood services?</p> <p>More resources/work focused on mental health and children. Objective: to introduce all age services from April 2020.</p> <p><u>The Transformation Program</u></p> <p>Objective: Bed based capacity- The transfer of patients from Fairfield Hospital' to other sites. Alternative roles to develop new roles to increase clinical capacity. The 'Rapid Response Service'- A service for patients managed at home, rather than through A&E. The program prevents an increase in hospital admissions & provides patients independence at home.</p> <p><u>End of Life Services</u></p> <p>Service commissioned & developed by the CCG. The service is well managed, with high user engagement and will continue from April 2020.</p> <p><u>Q & A/Comments Panel:</u></p> <p>Q: LCO having no influence or connection to programs that provide an existing service.</p> <p>Action: Chris & Kath agreed for open discussions for individual meetings to link in mental health services.</p> <p>Q: No meetings or advancements have occurred with the LCO. Existing community care services have no connection with integrated Neighbourhood Team. Community organizations have skills & experience to enhance the integrated partnership with the Neighbourhood Team.</p> <p>Chris & Kath noted the LCO covers all aspects of physical & mental health. Ideally the Neighbourhood Teams are aware of resources in their locality.</p> <p>The LCO are to implement more mental health input by April 2020, urgent planning to begin by March 2020.</p> <p>Action: Agreed to establish team meetings for a conversation with Neighbourhood Teams & VCFA Sector.</p> <p>Action: Agreed to share contact details via VCFA between present community/charity organizations with the Neighbourhood Team Leaders.</p> <p>Q: How does the LCO reach out to individuals that require support but have no access to resources?</p>	<p>CO & KWJ</p> <p>SH & NG</p> <p>ALL</p>
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	<p>Kath explained that interventions were put in place such as public sector referrals.</p> <p>Q: What connection does the LCO have with the CCG?</p> <p>Kath explained that there is a strong connection with the CCG. The LCO & partners come together to review services & financial sustainability.</p> <p>Members commented that, it appears the statutory sector develops plans prior to bringing them to the voluntary sector. It was said that given the skills and knowledge of Bury voluntary sector the sector should be involved in the process during the initial and ongoing stages of development particularly those plans and policies that have a significant impact of the sector.</p> <p>Q: With the walk in services moving from Bury to Fairfield Hospital, how will patients access the service? How the plan around community changes will affect the public?</p> <p>Chris noted the locality plan is a 3 years plan and aims to address the following areas:</p> <ul style="list-style-type: none">• The patient engagement is low.• Attending one-off talks with Health watch is not systematic.• There is a small team in place to increase communications & through other sources (newsletters/social media etc.)• This year there will be regular sessions to open the LCO to patient & user groups to describe the LCO service & identify what is needed.	
4.	<p>Greater Manchester VCSE Commissioning Framework and Delivery Plan</p> <p>Marie Graham, GMCVO and Ben Gilchrist provided an outline focusing on the following points:</p> <p>80% of VC organizations in GM are not in receipt of public funding, however their services are important to the community.</p> <p>Various VC practices have been explored with colleagues being consulted on overcoming issues.</p> <p>There are 101 VCA organizations involved in these conversations.</p> <p>Social Value – Commissioners are moving away from cost based to social value based contracts. Furthermore, coproduction means being involved in the decision-making process.</p> <p>The STAR Social Value Toolkit outlines that sociula value should be an approach to delivery. The VS should be involved ijn developing the evaluation framework for commissioning.</p> <p><u>A summary of 7 recommendations have been identified with the framework signed off by the Joint Commissioning Fund</u></p>	



	<p>Recommendation 3 (3A) The delivery of the commissioning academy is in place to drive implementation of the Commissioning Framework.</p> <p>Action: Any links from Bury that join the academy – pass on the details via VCFA to all members of the group.</p> <p>Recommendation 6 (6A) Social Value is ahead across GM in comparison to the rest of the UK. The 1% community levy is money used for local provision.</p> <p>Recommendation 7 To deliver the Framework, it must be monitored and evaluated by the Joint Commissioning Team. The voluntary sector need to be actively involved in local authorities measurements. Baselines need to be set to track progress & establish starting points across each area. Bury is a key area identified for the Framework.</p> <p>For Information – One Commissioning sits under the LCO the voluntary sector representative is Georgina McNulty, Bury Social Prescribing Manager.</p> <p>Other Issues Connect 5 Train the Trainers 12th March – Creative Living to send VCFA details</p> <p>Community Leaders Training Pack – Contact Ben Gilchrist for a pack.</p> <p>Identified the mental health *Connect Five* training event on 12th March (Manchester) as an effective training initiative for effective conversations. Based on ‘5 Ways to Wellbeing’.</p> <p>Q: Do the LCO Neighbourhood Teams have access/aware of the ‘connect Five’ training sessions?</p> <p>Integrated Neighbourhood Teams Packs include ‘Deck of Cards’ as an effective tool to promote health services.</p> <p>Action: All to actively promote the Framework Model (pdf available from Marie Graham at GMCVO).</p> <p>Q: how can GMCVO and 10GM support Bury voluntary sector. A: Social Value training could be offered to VCF organisations.</p>	<p>ALL</p> <p>ALL</p>
<p>5.</p>	<p>Any Other Business</p> <p>Gill Pearl said that there are still some spaces available for the Personal Safety training day on Friday 25th March.</p> <p>Also Speakeasy have a spare portable microphone and speaker available to give out.</p>	
<p>5.</p>	<p>Date and time of next meeting TBA</p>	