

**South Yorkshire and Bassetlaw Sustainability and Transformation  
Partnership**

**Collaborative Partnership Board**

**12 May 2017, The Birch/Elm Room, Oak House, Rotherham**

**Decision Summary**

<b>Minute reference</b>	<b>Item</b>	<b>Action</b>
<b>41/17</b>	<b>Minutes of the previous meeting held 7 April 2017</b>  The following amendment was required at 39/17, Bassetlaw paragraph, 2 <sup>nd</sup> line, Barnsley should be altered to read Bassetlaw.	<b>JA</b>
<b>43/17</b>	<b>National Update</b>  <b>SYB Memorandum Of Understanding</b> <ul style="list-style-type: none"> <li>a) That Will Cleary-Gray would collate all feedback and comments regarding the draft and bring revised MOU to the next Collaborative Partnership Board Meeting on 9<sup>th</sup> June.</li> <li>b) That members should forward any further feedback to Will Cleary-Gray.</li> </ul>	<b>WC-G</b>  <b>ALL</b>
<b>44/17</b>	<b>Finance update</b>  <b>Stroke Business Case</b> <ul style="list-style-type: none"> <li>• A short note to members will be circulated that identifies the process that was used concerning the submission of the three capital bids e.g. how they got from the list to being submitted to the Department of Health in the timescales involved.</li> </ul> The following additional comments were made by members: <ul style="list-style-type: none"> <li>• It is important that the revised figures regarding the Stroke blueprint and analysis are shared with stakeholders to inform understanding of potential changes and impact.</li> </ul>	<b>JC</b>  <b>JC</b>
<b>46/17</b>	<b>Update on Programme Activity:</b> <b>a. Workforce</b>  Members noted the connection with the Workforce Framework paper previously presented to the Collaborative Partnership Board and Tim Gilpin and Peter Hall would support a discussion at a future Collaborative Partnership Board Meeting.	<b>TG/PH</b>
<b>47/17</b>	<b>b. Proposed Joint Infrastructure and the DWP Initiative</b> Kevan Taylor informed members there would be a presentation and proposal regarding the DWP initiative at the next Collaborative	<b>KT</b>

	Partnership Board meeting in June.	
<b>49/17</b>	<p><b>d. Cancer</b></p> <p>The Chair advised members that the Cancer Alliance Board agreed a shared inter provider transfer (IPT) policy at the May Cancer Alliance Board meeting and has advised the Collaborative Partnership Board at this meeting that the policy had been signed off and was ready to be sent out to partners. After discussion members agreed that the Clinical Reference Group would finalise any outstanding clinical issues within 6 weeks, which will need to be agreed to ensure we are able to successfully operationalise the policy.</p>	<p><b>CRG</b></p> <p><b>CPB</b></p>
<b>51/17</b>	<p><b>Findings from conversations with the public and staff on the SYB STP</b></p> <ul style="list-style-type: none"> <li>all future Board reports will be circulated as a single PDF as well as the combined 'Master All' document.</li> </ul> <p>Helen Stevens added that her work stream will be looking at a SYB STP website, branding and narrative and a report will be brought to the next Collaborative Partnership Board meeting.</p>	<p><b>JA</b></p> <p><b>HS</b></p>
<b>55/17</b>	<p><b>Update on Organisational Development</b></p> <p>The Collaborative Partnership Board agreed:</p> <ul style="list-style-type: none"> <li>4/5 senior people should be nominated as enablers from each 'place' on the Board.</li> <li>Social Kinetic will circulate a questionnaire for Board members and those nominated as enablers to complete, this will be 'live' for 2 weeks.</li> <li>Social Kinetic will then analyse the data received back from the questionnaires.</li> <li>A wider team event should be arranged e.g. a one day workshop, 10am to 4pm for approximately 80-100 people should be arranged for the whole Collaborative Partnership Board and Team to attend.</li> </ul>	<p><b>ALL</b></p> <p><b>Social Kinetic</b></p> <p><b>Social Kinetic</b></p> <p><b>Social Kinetic</b></p>

# South Yorkshire and Bassetlaw Sustainability and Transformation Partnership

## Collaborative Partnership Board

### Minutes of the meeting of 12 May 2017, The Birch & Elm Room, Rotherham

Name	Organisation	Designation	Present	Apologies	Deputy for
Sir Andrew Cash	South Yorkshire and Bassetlaw STP	STP Lead/Chair & CEO, Sheffield Teaching Hospitals NHS F T		✓	
Adrian Berry	South West Yorkshire Partnership NHS FT	Deputy Chief Executive		✓	Rob Webster CEO
Adrian England	Healthwatch Barnsley	Chair	✓		
Ainsley Macdonnell,	Nottinghamshire County Council	Service Director		✓	Anthony May CEO
Alison Knowles	Locality Director North of England,	NHS England	✓		
Ben Jackson	Academic Unit of Primary Medical Care, Sheffield University	Senior Clinical Teacher	✓		
Catherine Burn	Voluntary Action Representative			✓	
Chris Edwards	NHS Rotherham Clinical Commissioning Group	Accountable Officer	✓		
Chris Holt	The Rotherham NHS Foundation Trust		✓		Louise Barnett
Des Breen	Working Together Partnership Vanguard	Medical Director	✓		
Greg Fell	Sheffield City Council	Director of Public Health	✓		John Mothersole CEO
Frances Cuning	Public Health England	Deputy Director of Health and Wellbeing	✓		
Helen Stevens	South Yorkshire and Bassetlaw STP	Assoc. Director of Comms & Engagement	✓		
Idris Griffiths	NHS Bassetlaw Clinical Commissioning Group	Interim Accountable Officer	✓		
Jackie Pederson	NHS Doncaster Clinical Commissioning Group	Accountable Officer,	✓		
Jane Anthony	South Yorkshire and Bassetlaw STP	Corp Admin, Exec PA, Business Mgr	✓		
Janette Watkins	Working Together Partnership Vanguard	Director	✓		
Janet Wheatley	Voluntary Action Rotherham	Chief Executive	✓		
Jeremy Cook	South Yorkshire and Bassetlaw STP	Interim Director of Finance	✓		
John Mothersole	Sheffield City Council	Chief Executive	✓		First Hour
John Somers	Sheffield Children's Hospital NHS Foundation Trust	Chief Executive	✓		
Julia Burrows	Barnsley Council	Director of Public Health	✓		

Julia Newton	Sheffield Clinical Commissioning Group	Chief Finance Officer	<input type="checkbox"/>	✓	
Kathryn Singh	Rotherham, Doncaster and South Humber NHS FT	Chief Executive	✓		
Kevan Taylor	Sheffield Health and Social Care NHS FT	Chief Executive	✓		
Lesley Smith	NHS Barnsley Clinical Commissioning Group	Accountable Officer	✓		
Louise Barnett	The Rotherham NHS Foundation Trust	Chief Executive		✓	
Maddy Ruff	NHS Sheffield Clinical Commissioning Group	Accountable Officer		✓	
Matt Powels	NHS Sheffield Clinical Commissioning Group	Director of Commissioning	✓		Maddy Ruff
Matthew Groom	NHS England Specialised Commissioning	Assistant Director		✓	
Matthew Sandford	Yorkshire Ambulance Service NHS Trust	Associate Director of Planning & Dev	✓		
Mike Curtis	Health Education England	Local Director	✓		
Neil Taylor	Bassetlaw District Council	Chief Executive	✓		
Paul Smeeton	Nottinghamshire Healthcare NHS Foundation Trust	Chief Operating Executive	✓		
Richard Jenkins	Barnsley Hospital NHS Foundation Trust	Interim Chief Executive	✓		
Richard Parker	Doncaster and Bassetlaw Teaching Hospitals NHS F T	Chief Executive	✓		
Richard Stubbs	The Yorkshire and Humber Academic Health Science Network	Acting Chief Executive	✓		
Rob Webster	South West Yorkshire Partnership NHS FT	Chief Executive	✓		
Rupert Suckling	Doncaster Metropolitan Borough Council	Director of Public Health	✓		
Sean Raynor	South West Yorkshire Partnership NHS FT	District Service Director, Barnsley and Wakefield	✓		Adrian Berry
Sharon Kemp	Rotherham Metropolitan Borough Council	Chief Executive	✓		
Steve Shore	Healthwatch Doncaster	Chair		✓	
Will Cleary-Gray	South Yorkshire and Bassetlaw STP	Sustainability & Transformation Director	✓		

Minute reference	Item	Action
40/17	<b>Welcome and introductions</b>  The Chair welcomed members and noted apologies for absence.	
41/17	<b>Minutes of the previous meeting held 7 April 2017</b>  The following amendment was required at 39/17, Bassetlaw	<b>JA</b>

	<p>paragraph, 2<sup>nd</sup> line, Barnsley should be altered to read Bassetlaw.</p> <p>Subject to the above amendment the minutes of the meeting were accepted as a true and accurate record and would be published.</p>	
<b>42/17</b>	<p><b>Matters arising</b></p> <p>All matters arising would be picked up as part of the agenda.</p>	
<b>43/17</b>	<p><b>National Update</b></p> <p><b>South Yorkshire and Bassetlaw Memorandum Of Understanding</b></p> <p>Will Cleary-Gray updated members on the progress of the Memorandum of Understanding (MoU). The MoU is not a legal contract, nor does it serve to replace the legal framework or responsibilities of our statutory organisations. It is an agreement that sets out the framework within which our partner organisations will come together to establish how we will develop as an Accountable Care System.</p> <p>A draft was shared with Collaborative Partnership Board members attending the South Yorkshire and Bassetlaw Sustainability and Transformation Partnership (SYB STP) timeout on 28 April 2017. Feedback from the timeout was incorporated into the draft MoU and those present at that meeting agreed the revised document should be shared with statutory organisations. The draft was circulated with an accompanying letter from Sir Andrew Cash in which he outlined the context of the MoU, the document being a first draft and requested their feedback which would be incorporated into the document.</p> <p>The draft MoU has also been shared with NHS Improvement and NHS England and with the Five Year Forward View Team.</p> <p>Will Cleary-Gray will collate all further feedback and comments regarding the draft and bring a revised MoU to the next Collaborative Partnership Board meeting on 9<sup>th</sup> June 2017.</p> <p>The following comments were made by members:</p> <ul style="list-style-type: none"> <li>• A sentence should be added to the document regarding stakeholders because as provider groups start to develop and emerge they will also be part of the stakeholder agreement and as such should be invited as and when they develop.</li> <li>• This is a helpful and very well written document, this is a social movement of working together.</li> <li>• 'Parties to' and 'partners in' is a useful way to make a distinction between the various stakeholders and how they may wish to be reflected in the MOU.</li> <li>• Clarify 'partners' and 'parties': 'partners' provide support for the direction of travel, 'parties' are organisations that will be signing the MoU.</li> <li>• Yorkshire Ambulance Service is a Trust therefore the word 'Foundation' should be removed when referring to this service.</li> <li>• In the glossary it may be helpful to have an explanation of both 'horizontal' and 'vertical' parties.</li> </ul> <p>Will Cleary-Gray agreed to incorporate the above comments into the draft.</p>	<p><b>ALL</b></p> <p><b>WC-G</b></p> <p><b>WC-G</b></p>

	<p>The Chair urged members to forward any further feedback direct the Will Cleary-Gray.</p> <p>The Collaborative Partnership Board noted the Memorandum of Understanding.</p>	<b>ALL</b>
<b>44/17</b>	<p><b>Finance update</b></p> <p>Indicative Budget 2017-18</p> <p>Jeremy Cook presented his finance report to the meeting drawing attention to the following issues:</p> <p><b>Capital</b> Capital bids had been submitted to the Department of Health under very tight deadlines.</p> <p>STP had submitted 3 bids but as yet has not received any feedback on them from the Department of Health.</p> <p><b>STP Budget 17/18</b> Jeremy Cook added the STP budget for 2017-18 had not yet been worked up as notification of funding from NHS England and NHS Improvement. The Chair advised members she would update them from a national meeting held in London on 2<sup>nd</sup> May 2017 that both she and Will Cleary-Gray attended.</p> <p><b>Financial modeling</b> Jeremy Cook advised members that a simplified version of the financial plan was being developed. The Finance Steering Group meeting on 23<sup>rd</sup> May 2017 will receive a presentation regarding the progress.</p> <p><b>Hyper acute stroke services business case</b> Jeremy Cook informed members that there is a difference between the blueprint and analysis figures in terms of the way forward for the hyper acute stroke services business case.</p> <p>Will Cleary-Gray advised members that the team has been working through the revised flows with Yorkshire Ambulance Service to establish clarity. The reviewed flows would be shared with stakeholders.</p> <p>Jeremy responded to comments from members as follows:</p> <ul style="list-style-type: none"> <li>• There was some urgency around the capital bids as the submission deadline was tight. In future it is expected that such urgent items are channelled through the new Executive Sub Group. The Executive Steering Group is not formed at the moment and Terms of Reference are being taken to the Financial Oversight Committee today and the Executive Steering Group on Tuesday, 16<sup>th</sup> May and will circulated thereafter.</li> <li>• A short note to members will be circulated that identifies the process that was used concerning the submission of the three capital bids e.g. how they got from the list to being submitted to the Department of Health in the timescales involved.</li> </ul>	<b>JC</b>

	<p>The following additional comments were made by members:</p> <ul style="list-style-type: none"> <li>• We must ensure we are aware of the national parameters of bids and their criteria so we can adapt our cases to fit.</li> <li>• It is important that the revised figures regarding the Stroke blueprint and analysis are shared with stakeholders to inform understanding of potential changes and impact.</li> </ul> <p>The Chair thanked Jeremy Cook for the information provided.</p>	JC
45/17	<p><b>Summary update to the Collaborative Partnership Board</b></p> <p>The Chair gave members an update on recent national discussions. The Chair and Will Cleary-Gray attended the STP National meeting with Chairs and CE's present from the other 8 STP systems on 2<sup>nd</sup> May 2017.</p> <p>The Chair informed members that discussion had taken regarding:</p> <ul style="list-style-type: none"> <li>• Working with the Centre,</li> <li>• Understanding support offer from the Centre including transformational funding,</li> <li>• Understanding how the 9 Accountable Care Systems (ACS) will work together and share information as an emerging ACS.</li> </ul> <p>The Chair conveyed the following key items that she took away from the meeting:</p> <ul style="list-style-type: none"> <li>• The timeline for developing a Memorandum of Understanding which was ending in June.</li> <li>• The national priorities.</li> <li>• The focus on delivery and transformation.</li> </ul> <p>The Chair added that she was awaiting the outcomes from the national ACS meeting which would provide detail and clarity regarding the above discussions and areas where we work with the Centre and other emerging ACS.</p> <p>Will Cleary-Gray presented the remaining summary report updates to the Collaborative Partnership Board.</p> <p>The Collaborative Partnership Board received the report and welcomed the updates provided from each of the STP work streams that they would use to inform local discussions.</p>	
46/17	<p><b>Update on Programme Activity:</b></p> <p><b>a. Workforce</b></p> <p>The Chair welcomed Linda Crofts, Head of Learning &amp; Development, Sheffield Teaching Hospitals to the meeting. Linda Crofts was also supporting the STP workforce work-stream.</p> <p>Linda Crofts added that it is important to acknowledge that developing the workforce is an opportunity as well as a challenge to achieving successful transformational change.</p> <p>Linda Crofts informed members she was here today to talk through work developing the Excellence Centre and to seek the support of colleagues in the Partnership. At the moment the Excellence Centre is looking to strengthen their Employer Forum.</p>	

	<p>Linda Crofts gave her presentation to Board members.</p> <p>Linda Crofts responded to comments from members as follows:</p> <ul style="list-style-type: none"> <li>• We should recognise our unregistered workforce is vital to transformational change</li> <li>• We have a good infrastructure in South Yorkshire, we need to bring together the Excellence Centre and Faculty for Advanced Practice.</li> <li>• South Yorkshire has developed good partnerships regarding the development of its workforce, it needs to build on the successes and relationships it already has. Such partnerships are not as well developed in other areas and it would be detrimental to the collaborations already built up if we were to replicate the model to include other areas.</li> </ul> <p>Members made the following additional comments</p> <ul style="list-style-type: none"> <li>• We should understand the resources we have in our different organisations and note that we could work better if we are better connected.</li> <li>• We should ensure there is no duplication i.e. we should change our mindset and create a culture of coming together, noting the potential to focus on learning and development and pool our resources.</li> <li>• Healthcare systems need to understand different skill sets are required outside hospitals. We need to bridge the skill gap to ensure staff are developed and able to respond to take care of people outside of hospitals.</li> <li>• If trained well, some staff bands can potentially free up higher grades so they are able to undertake additional training when required.</li> <li>• We must factor in a consistent approach across South Yorkshire in order that sectors and roles within it are not destabilized.</li> <li>• Social care is keeping people out of hospital. 'Place' relates to 60% of what is going on in STP and therefore we should start discussions with social care teams and their representatives.</li> </ul> <p>Collaborative Partnership Board members thanked Linda Crofts for attending this meeting and for her presentation.</p> <p>Members noted the connection with the Workforce Framework paper previously presented to the Collaborative Partnership Board and Tim Gilpin and Peter Hall would support a discussion at a future Collaborative Partnership Board Meeting.</p>	TG/PH/BC
47/17	<p><b>b. Proposed Department of Work and Pensions (DWP) initiative</b></p> <p>Kevan Taylor informed members there would be a presentation and proposal regarding the DWP initiative at the next Collaborative Partnership Board meeting in June.</p>	KT
48/17	<p><b>c. Urgent Care</b></p> <p>The Chair welcomed Rachel Gillott, Programme Director Urgent and Emergency Care, SYB STP to the meeting.</p> <p>Rachel Gillott gave her presentation to Board members.</p>	



	Members were informed that Urgent Care is a big area of work and what this work area is still looking at is identifying two or three major items they want to progress.	
49/17	<p><b>d. Cancer</b></p> <p>The Chair highlighted that the draft Memorandum of Understanding articulates a move towards a new performance management framework for Cancer. One which will require a clear Inter Provider Trust policy to support the safe and timely transfer of patients between providers:</p> <p><i>“We will work to deliver the 62 day referral to treatment standard at system level as a single measure across our provider organisations. This will create capacity to focus not only on the headline target but also enable us to focus on measures which hold the greatest significance to people affected by cancer such as quality of life, whilst also working to improve inter provider transfers within 38 days”.</i></p> <p>The Chair added the challenges for this work area being:</p> <ul style="list-style-type: none"> <li>• 62 days target from referral to treatment - there are clear time pressures in terms of expectation of the achievement of 62 day performance, with a significant national focus. The explicit timeframes within which 62 day performance must be met include 70% of provider organisations must meet the target by July with 100% of provider organisations and Cancer Alliances by September 2017.</li> <li>• A 38 day transfer protocol</li> <li>• What constitutes transfer?</li> <li>• As part of current conversations it is expected that providers will be expected to sign up to a local IPT policy as a requirement to access the Sustainability element of the STF.</li> <li>• We are also aware that any Cancer Transformation funding will also be released based on progress towards recovery of 62 day performance as an SYB&amp;ND system.</li> </ul> <p>There has been a significant amount of work, over 18 months to the shared IPT policy. This has been a hugely challenging process in which we have asked organisations and individuals to shift focus from local organisational performance towards a ‘new world’ acceptance of collective responsibility for shared performance in line with the future aspirations of the Cancer Alliance and STP. Reporting the 62 days as a whole system takes away any focus on grey areas that damage relationships and allows us to get the pathway right for patients.</p> <p>In considering the work to date, the current national focus and the emerging MOU, the Cancer Alliance board agreed the shared Inter provider transfer (IPT) policy at the May Cancer Alliance Board meeting and require the support of the Collaborative Partnership Board to progress.</p> <p>Members responded with the following comments:</p> <ul style="list-style-type: none"> <li>• Bearing in mind governance protocol the policy should go back to the Clinical Reference Group (CRG) to sign off before us.</li> <li>• We could sign up to the overall policy, dotting the i’s and crossing the t’s is down to implementation and at the CRG.</li> <li>• The policy needs any issues resolved before we sign it off e.g. exactly what defines a referral. If it can’t be resolved by the CRG within a specific time then it should go externally to be</li> </ul>	

	<p>resolved and then come back here for signing off in 6 weeks time.</p> <p>The Chair advised members that the Cancer Alliance Board agreed a shared inter provider transfer (IPT) policy at the May Cancer Alliance Board meeting and has advised the Collaborative Partnership Board at this meeting that the policy had been signed off and was ready to be sent out to partners. After discussion members agreed that the Clinical Reference Group would finalise any outstanding clinical issues within 6 weeks, which will need to be agreed to ensure we are able to successfully operationalise the policy.</p>	<p><b>CRG</b></p> <p><b>CPB</b></p>
<b>50/17</b>	<p><b>e. Mental Health &amp; Learning Disabilities</b></p> <p>Unfortunately, due to constraints on time Kathryn Singh and Jackie Pederson were unable to give their presentation. However, they suggested that members read the section of Paper D which provided up-to-date information.</p>	
<b>51/17</b>	<p><b>Findings from conversations with the public and staff on the SYB STP</b></p> <p>Helen Stevens presented her report to the Collaborative Partnership Board. The report consisted of 3 elements:</p> <ul style="list-style-type: none"> <li>• an overarching report,</li> <li>• a summary report of community responses about the South Yorkshire and Bassetlaw Sustainability and Transformation Plan(SYB STP),</li> <li>• an analytical report on the current views of the SYB STP.</li> </ul> <p>Helen Stevens reported that there had been good engagement in this process and took this opportunity to thank Healthwatch and the voluntary sector for their assistance which has helped to inform this report.</p> <p>Helen Stevens agreed that:</p> <ul style="list-style-type: none"> <li>• the information contained in this report can now go into the public domain,</li> <li>• all future Board reports will be circulated as a single PDF as well as the combined 'Master All' document.</li> </ul> <p>Helen Stevens added that her work stream will be looking at a SYB STP website, branding and narrative and a report will be brought to the next Collaborative Partnership Board meeting.</p> <p>The Collaborative Partnership Board noted this report.</p>	<p><b>JA</b></p> <p><b>HS</b></p>
<b>52/17</b>	<p><b>Independent Review of Hospital Services</b></p> <p>Unfortunately, due to constraints upon time this item was not discussed and members were referred to the written update.</p>	
<b>53/17</b>	<p><b>Review of Commissioning</b></p> <p>Unfortunately, due to constraints upon time this item was not discussed.</p>	
<b>54/17</b>	<p><b>Hyper Acute Stroke Services and Children's Services</b></p> <p>Unfortunately, due to constraints upon time this item was not discussed, however, there was a comprehensive report circulated on this subject.</p>	

55/17	<p><b>Update on Organisational Development</b></p> <p>The Chair welcomed Grace Doherty and Claire Cater from Social Kinetic to the meeting.</p> <p>Grace Doherty and Claire Cater gave their presentation to the meeting. The presentation summarised the work embarked upon so far with Social Kinetic.</p> <p>The next phase for Social Kinetic would be to focus on human factors and they outlined the next phase of their programme for Board members consideration.</p> <p>The Collaborative Partnership Board agreed:</p> <ul style="list-style-type: none"> <li>• 4/5 senior people should be nominated as enablers from each 'place' on the Board.</li> <li>• Social Kinetic will circulate a questionnaire for Board members and those nominated as enablers to complete, this will be 'live' for 2 weeks.</li> <li>• Social Kinetic will then analyse the data received back from the questionnaires.</li> <li>• A wider team event should be arranged e.g. a one day workshop, 10am to 4pm for approximately 80-100 people should be arranged for the whole Collaborative Partnership Board and Team to attend.</li> </ul> <p>The Chair and Collaborative Board members thank Social Kinetic for their presentation and their attendance at this meeting.</p>	<p><b>ALL</b></p> <p><b>Social Kinetic</b></p> <p><b>Social Kinetic</b></p> <p><b>Social Kinetic</b></p>
56/17	<p><b>Any Other Business</b></p> <p>There was no other business brought before the meeting.</p>	
57/17	<p><b>Date and Time of Next Meeting</b></p> <p>The next meeting will take place on 9 June 2017 at 9.30am to 11.30am.</p>	