



A meeting of the Healthier Together Committees in Common (CIC) was held on 17<sup>th</sup> December 2014.

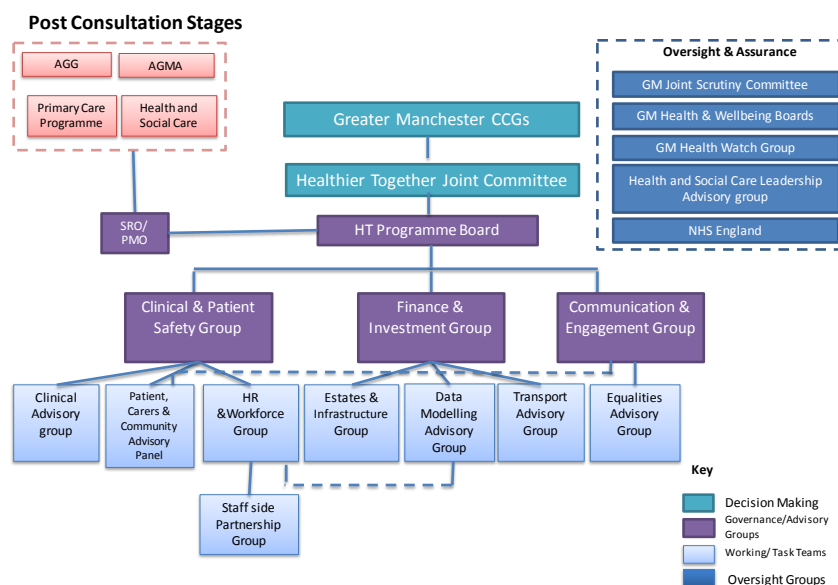
Members received a number of reports and presentations focused on the recent public consultation; these included:

- **The revised governance structure and decision making phase of the programme** with a report from the Department of Health Gateway Review Team.
- **the consultation responses** from the independent organisation, Opinion Research Services, and an interim Integrated Impact Assessment from an independent organisation, Mott MacDonald.
- **the public consultation process** an interim report from the External Reference Group, which was set up to scrutinise and provide independent feedback on the communication and public engagement processes; and a lessons learnt report from the Service Transformation team.

Resolutions of the CIC meeting are captured below in **bold**.

## Revised governance and decision making phase

A presentation was given on the new governance structure for the decision making phase.



The main changes are:-

- an overarching Programme Board with commissioner and provider membership. Whilst not a decision making body this will provide advice and guidance to the Committee in Common and meets monthly from January, allowing discussion of all aspects of single services including new and emerging models.
- a number of “working/task and finish groups” to assist decision making and plan for implementation.

**The CIC confirmed its commitment to high quality standards of patient care being implemented as soon as possible; working with providers, with the aim to reach consensus on change across Greater Manchester if possible.**

A report was presented from the Gateway review team who met with senior stakeholders in November 2014, to discuss the next phase of the programme and the challenges of the decision making phase. The report included 6 recommendations to be completed by the end of March 2015, which included: gaining a greater understanding of the practical workforce implications of the modelling undertaken to date; and ensuring the source for the capital expenditure required is identified for each option.

A commitment was made that the HR and Workforce Group would take forward the recommendation on workforce and undertake more detailed supply/pipeline analysis to aid discussions on the transition implications for Healthier Together. The group will also initiate thinking about the implementation phase, starting to develop Greater Manchester workforce and recruitment policies. The Finance and Investment group will take forward the recommendation on capital.



## The consultation responses

The review of the first part of the consultation responses shows that there is widespread support for the need to change services as well as support for the primary care standards, joining up health and social care and the need to improve quality and safety standards.

The review of responses also highlighted that a number of potentially different ways of meeting the quality and safety standards set by Healthier Together have been put forward:-

- that four hospitals could compromise a Single Service, not only three hospitals;
- that there is a need for 6 single services;
- that there is a need for only 3 single services;
- three joint submissions from Trusts with 'sector' models; and
- better terminology could make clearer to the public the concept of single service.

**A commitment was given that the Service Transformation team, firstly through the Clinical and Patient Safety group would review the responses (mainly from organisations) which have highlighted different approaches, to determine where enhancements could be made to the model of care, or where there are viable alternative models of care or options. Consideration of other issues such as transition, affordability and travel will also need to be considered for any new models.**

The review of consultation responses and the Integrated Impact Assessment also highlighted the importance of travel and access, with responders ranking this as the second most important criteria after quality and safety, and with the need for local services being emphasised.

**A commitment was given that the Transport and Assess group would lead the further development of the transport analysis, updating existing analysis to account for any updates to the transport infrastructure and adding additional detail through the inclusion of further metrics.**



## The public consultation process

An initial report was provided by the Chair of the External Reference Group. The report is framed around how effective the pre-consultation period was in terms of engagement; whether the public consultation was robust, open and transparent; and whether the public consultation satisfies the four tests of reconfiguration- namely strong patient and public engagement.

The ERG reflected that a range of effective and engagement activities were used, with action being taken to rectify or improve processes where issues were raised, although a number of lessons could be learnt for subsequent engagement. The final ERG report will be provided to the CIC at a later meeting.

In addition, a report was presented summarising the lessons learnt through the public consultation period. The report was based on feedback from three events held with key stakeholders.

**The report was welcomed by the CIC as a tool to share with other areas that may be reconfiguring services and initiating public consultation, a commitment was also made that the key lessons would be used to set some principles for future meetings of the CIC, including for example principles around communication, governance, engagement and transparency.**

***The next meeting of the CiC will be held on the 21st January 2015.***