

Bradford District Assembly | Assembly Steering Group Meeting Minutes

Monday 18th November 2019 | 10am – 12pm at CNet

Present: Kim Shutler (KS) (Chair), Soo Nevison (SN) (Community Action), Janet Ford (JF) (CNet), Javed Khan (JK) (CNet), Helen Speight (HS) (HWB Forum Co-Chair), Jon Royle (JR) (Safer Communities Forum Co-Chair), Mark Nicholson (MN) (Equalities Forum Co-Chair), Peter Horner (PH) (Young Lives Forum), Yasmin Khan (YK) (Safer Communities Forum Co-Chair), Helen Davey (HD) (HWB Forum Co-Chair), Tony Dylak (TD) (Community Economic Forum Co-Chair)

In attendance: Saima Ashfaq (minutes), Cathy Elliott (BDCFT), Catherine Jowett (BDCFT)

Apologies: Nasim Qureshi, Steve Blackman, Cassandra Walker

Item		Action
1	<p>Introductions, and apologies</p> <p>Note:</p> <p><i>i. Declarations of interest to be declared against each agenda item as appropriate</i></p> <p><i>ii. Equalities: Discussions/decisions/issues that may have a disproportionate effect on protected characteristics to be raised against each agenda item as appropriate.</i></p>	
2.	<p>Minutes of the last meeting and matters arising</p> <p>Agreed as a true record</p> <ul style="list-style-type: none"> • Item 4 – Young Lives Consortium were invited and nominated Nasim Qureshi to represent them at Infrastructure meeting • Item 5 – KS has been in touch with Born in Bradford (BiB) to invite them to a meeting in the near future. All agreed it was a good idea to develop a relationship with BiB and invite them to an ASG meeting • Item 7 – JF explained that the ASG Terms of Reference ideally needs to be looked at once the Infrastructure Review has been finalised as if done now it will need to be done again. All agreed to wait until the Review is complete to look at the Assembly structure 	

	<ul style="list-style-type: none"> • Item 10 – The Careers Fair has been postponed until March 2020. There will be generic VCS stands. SN to send round draft list to look at which VCS orgs would like to be included in which themes • Item 11 – Initial Reps meeting to be set up. JF and BC to identify who to invite and also liaise with SN to create a 1 page proposal on the outline of a reps meeting. Suggestion to have a briefing paper which include key strategic headlines and circulate this to reps regularly • Item 12 – Hate Crime – RMG dates are on hold until after purdah. Penny Wangari-Jones, Co-chair of Equalities Forum, waiting for dates to present presentation around hate crime 	<p>SN to circulate draft list for VCS orgs to identify themes of interest</p> <p>JF and BC to work together to organise a Reps Meeting</p>
3.	<p>Cathy Elliott & Catherine Jowett, Bradford District Care NHS Foundation Trust Chair</p> <p>Catherine Jowett is the Volunteer Lead at the Care Trust.</p> <p>Cathy Elliott is the new Chair of the Care Trust Board. She gave an introduction to herself and her background. Cathy has been meeting different organisations as part of her induction. She has currently been in post for 9 weeks.</p> <ul style="list-style-type: none"> • Requested honesty in what is working and not working between VCS and BDCFT • BDCFT Board looking at system working and partnership working at a neighbourhood level so essential to work with VCS, Primary Care Networks and Council • Trying to bring service user voice into work. Paul Hogg launching new strategy called Shared Voices in January. Request for feedback when this is shared. • Discussions with reps from Mental Wellbeing Provider Forum members last week brought up the issue of connecting together or putting together a jigsaw of services to understand Prevention Pathways, Ill Health Pathways and support afterwards. NHS is funded for ill Health, BDCFT want to work in partnership to support the whole pathway. It was also highlighted that BDCFT needs to be better at valuing the VCS as a critical friend, as well as what BDCFT can give back i.e. training, commissions and procurement, possibility of reserving a certain percentage of NHS training to VCS • SN said that a culture change needs to be developed to break down the barriers volunteers face when trying to volunteer across multiple places • Catherine explained that the NHS are also looking at a new Cadets Scheme for 14-18 year olds to volunteering within the health sector. This project is in its early stages and is in partnership with St Johns Ambulance Service and NHS England. Good opportunity for Bradford to be involved in this pilot scheme. YK highlighted that involving communities is essential to planning prevention 	

	<ul style="list-style-type: none"> • SN suggested All Age Prevention Help/ Partnership Working as a theme for next years Assembly Conference • HS pointed out that the Care Trust does not seem to have representation at a lot of meetings and so is not working as a system yet. Very little around Gypsy and Traveller mental health. Proper representation is needed to work like a proper system. PH pointed out that BDCFT should be involved in Early Help • BC questioned what Cathy meant by prevention as different parts of the system have different definitions of prevention. Cathy answered that the Care Trust needs to define what prevention is and are working on a national way of working. Catherine reiterated that the message is getting through to clinicians and there certainly is a shift • Cathy said that practical discussions were needed to form partnerships. KS suggested SPG as a potential arena for this • TD pointed out that one of the things that the BDCFT did well was siting their services in VCS orgs, creating a dual benefit to VCS orgs and the BDCFT. Patients would prefer to be in a non-clinical arena for mental health and wellbeing. This could be done across the VCS and would be a real opportunity for co-production and co-design • KS mentioned empty health space which could be let out to community groups for free rather than leaving buildings empty. Would be good to see this brought up to a systems level • JR fed back that traditionally BDCFT used to be big players in Substance Misuse Services but now all seems to be in VCS. This means there is a real disconnect with mental health. Issues around who owns this element and commissioning issues • BC highlighted that it was important not to forget people when talking about systems and processes • Cathy said that there is work going on to better interact with neighbourhoods and said that she was happy discuss further when she has more information • Cathy said they would continue to liaise with ASG particularly around training opportunities and the Shared Voices Strategy launch in January <p>KS thanked Cathy and Catherine for attending.</p>	
4.	<p>Infrastructure Review & update</p> <ul style="list-style-type: none"> • KS sent out an email following on from VCS and external stakeholder workshops • A few people from ASG met to discuss the process for the next step of the review • Karl has included feedback given from both VCS and Stakeholder Workshops in his report 	

- Council and NHS need to agree terms of engagement, paper will be going to Council Management Team (CMT) and Joint Clinical Committee (JCC) this week which sets out that they want to jointly commission using a co-design approach with VCS and all stakeholders
- Karl will be presenting the final Infrastructure report by 1 December. It will be a public document
- No intention for Infrastructure cuts in budget proposals
- KS went through the timescales of the process, document circulated
- Request made to VCS Transformation fund for £5K to support co-ordination and facilitation of the next stages process.
- SN to have conversation with Ian Day regarding a potential underspend to match the 5K
- If all agree with timescales a project plan will be drawn up by the CCG
- Next ICB meeting is on 20 December – Broadly to be signed off here. Discuss input of Health funding and length of funding on a systems level – 4 +1 years to be requested
- Agreement of extension and timelines to be clarified for current, Children, Neighbourhoods and Engaging People contracts
- Scoping workshop to be held in the beginning of January with stakeholders to identify core functions of the contract at a high level. Health and Local Authority to identify who will attend this on their behalf
- Once functions have been jointly agreed, a T&FG for each function will be created with a remit to identify objectives and outcomes for that function. These are to be presented to providers who will be tasked with coming up with a delivery model to be considered.
- Dialogue between Providers and Commissioners to take place on 1st of June and 3 months have been scheduled for organisations to mobilise
- If no agreement this point of a model, the three months is where it would go out to tender
- Discussion around the difference between grants and tenders
- SN commented that there was not enough clarity on when the wider sector would be involved – add comments, assumptions and caveats
- Rachel Stanton suggested as the consultant to co-ordinate the next stages including facilitated sessions.

SN to speak to Ian Day

SN to contact Rachel Stanton

All broadly agreed with the timeline

Timeline to be taken to CMT and JCC this week. By the end of the week KS will update all on progress from this meeting.

<p>5.</p>	<p>Early Help and Prevention update</p> <p>Superintendent Sally Friar and Inspector Nick Haigh introduced themselves.</p> <p>Documents circulated.</p> <p>The idea of a Prevention and Early Help project originated from the Health and Wellbeing Board. Aims and objectives were presented and agreed for Bradford District. Discussion has been ongoing around the definition of Prevention and Early Help however aims of the project have been agreed in order to move the project forward. Sally clarified this is not a police project but rather a partnership from different agencies.</p> <ul style="list-style-type: none"> • 5 different work streams: One Front Door, Out of Hours, Keighley Pilot, Workforce Development, Policy, Processes and ISA • Still conceptual until the project has been signed off by the Health and Wellbeing Board next week • Sally went through timeline of the programme • Out of Hours initially will look at joining up statutory services then look at how other orgs will come in. PH asked what the expectations for the VCS would be for Out of Hours • Not looking at building capacity for VCS to provide services but joining up what is currently available for Out of Hours • HS stressed that the VCS should be able to refer from early stages as well, not just statutory orgs • HD and YK to liaise with Sally and scope which other VCS organisations might be able to input • Parameters for each stream yet to be devised • Keighley Pilot – Pilot for Prevention and Early Help Project. A multi-disciplinary meeting where all agencies involved come together for a case conference to produce a joint care plan for individuals and families. KS raised issue of capacity of VCS orgs to attend the number of meetings that may be required. Sally replied that the pilot will identify learning and will highlight issues that do and do not work. What works in Keighley may not work in Bradford. First meeting will be held on 3rd of December • BC questioned how much buy in was there within the health system and raised concerns around there not being the traction or the profile within health for this project and questioned whether there was duplication with other health initiated work. Sally replied that part of her role is to co-ordinate and identify what is already happening. KS pointed out that it needs to cascade from the Health and Wellbeing Board • SN pointed out that this is not Early Help and Prevention, it is more Early Help around stopping escalation. Prevention is about stopping them getting there in the first place so that One Front 	
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	Door is not needed. JK highlighted that when Prevention is clumped together with other areas, the need to focus on Prevention is lost. This is not Prevention, sounds more like crisis. Sally agreed.	
6.	ASG Manifesto Item deferred	
7.	BVCSA Update Item deferred	
8.	AOB Meeting ended at 12.10pm	