

# PIP STEERING COMMITTEE MEETING

Meeting on Thursday 17<sup>th</sup> May 2007  
Stafford PGMC

**Present:**

Stuart Poynor, South Staffs PCT CEO and PIP Chair  
Andy Spencer, PIP, Lead Clinician  
Steve Cropper, Keele University  
Julia Greensall, PIP  
Jonathan Howell – South Staffs PCT  
Diane White, Coventry PCT  
Jon Cook, NHS West Midlands

**Apologies:**

Cheryl Sherratt, South Staffs PCT  
Janet Anderson, New Cross, Wolverhampton  
Kate Reynolds, University Hospital of North Staffordshire  
Gunjan Patel, South Staffordshire Community Trust  
Richard Beeken, BCH  
Andrew Crawshaw, ROH, Birmingham  
Angela Moore, Wolverhampton PCT  
Jacob Samuels, Burton Hospital  
Martyn Rees, Shrewsbury & Telford NHS Trust  
Jaishi Vaid, Telford & Wrekin PCT  
Alison Wood, Shrewsbury & Telford NHS Trust  
David Coan, Hereford Hospital  
Matthew Jones, Alder Hey  
Vicky Brain, PIP  
Nicky Smith, PIP

## 1. MINUTES OF THE LAST MEETING

The minutes from last meeting on 25<sup>th</sup> January 2007 were accepted as a true record.

## 2. MATTERS ARISING

**Noted:** The talk given by Mike Deegan (Chief Executive at Manchester Children's Hospital) at the end of the last meeting had been well received and well attended. The title of the talk was 'The Future of the DGH'.

## 3. Chair of PiP

Andy explained that one of the people who had previously expressed interest in the post - Paul O'Connor, CEO at BCH - had subsequently written to him, declining the offer of joint PiP Chair. Andy had replied to Paul expressing disappointment at his decision; PiP would have benefited from having two Co-chairs, each bringing to the table a wide variety of skills and views. However, Paul has said that he will continue to support the work of PiP, in whatever way he can.

Andy said that he was pleased to have Stuart Poynor, CEO at South Staffs PCT, appointed as Chair.

Jon had said that Stuart's appointment would be helpful for PiP, as historically it had been difficult for the organisation to engage effectively with commissioners on developments in children's services.

**Agreed:** It would be helpful if Stuart and Andy arranged to meet with Paul in the near future.

## 3. New appointment – Project Manager – Shropshire Health Economy

Julia was pleased to report that Vicky Brain had been appointed to this post and started working in the Shropshire Health Economy on April 24<sup>th</sup>.

Work has been undertaken in Shropshire for over a year now, and a WTD Steering Group - first chaired by Margaret Bamford (Chair of SaTH trust) and then Steve Evans (Medical Director at SaTH) has been directing the work, to ensure that children's services would meet the requirements of the Working Time Directive (WTD) by 2009.

Julia has prepared an 'End of Project report' which will be circulated to all those who had been members of the WTD group.

Jon Cook explained where the funding around the monies for WTD has come from. Initially, funding had been made available to the then 3 SHAs from the Care Services Improvement Partnership (CSIP) - for work around developing networks for paediatrics and maternity services - and ensuring that services would be WTD compliant by 2009.

One of PiP's strengths has been that it has achieved effective clinical engagement, and based on work that PiP had undertaken in Shropshire & Staffordshire, a larger sum of money was made available to the SHAs the following year. Some of this money is being used to support the work of project managers and clinical leads across the West Midlands.

#### **4. Subscriptions & Finances**

A report was tabled which had been produced by the finance link at UHNS. This showed that PiP had been able to 'carry forward' about £36,000 into 2007/ 08. Although it was acknowledged that this was helpful and the current financial situation relatively healthy (due largely to the monies from CSIP for WTD projects), there was the underlying issue of maintaining the level of subscriptions. During the past two years, a number of trusts – themselves facing greater financial pressures - were increasingly questioning the subscriptions, and a small number had, reluctantly, stopped their subscription.

**Actions:** As Stuart meets regularly with the other PCT CEOs he will take the opportunity to talk about the benefits of subscribing to PiP.

Stuart - as new Chair of PiP – will write to the CEOs at acute trusts and PCTs, to reiterate the benefits of membership of PiP.

Stuart will offer advice on how the presentation of the budget reports could be improved, to better reflect 'Income & Expenditure'.

#### **5. Constitutional review**

There was a discussion concerning PiP's constitution, which requires reviewing.

In order to engage more effectively with commissioners, a Paediatric Specialised Services Advisory Group (PSSAG) had been established and Chaired initially by Kieron Murphy, and then by Jonathan Howell. It was acknowledged that there is now the opportunity to work more closely with the newly appointed Children's Leads (although their role is wide), and commissioners in PCTs. When considering some of the clinical projects, who are developing across networks (rheumatology, Child sexual abuse work), there is a need to engage with commissioners across 'boundaries' to ensure 'joined up' working.

**Agreed:** As Stuart Poyner is now the PiP Chair and as Jonathan Howell will be continuing with Specialised Services commissioning, we will now have strong links with Commissioners.

The work of the PSSAG can be brought within the remit of the PiP Steering Group.

**Actions:**

The existing Terms of Reference for the PiP Steering Group and the remit for

the PSSAG will be amended and brought into one document.

This will be appended to the letter which is to be circulated to acute trusts and PCTs.

Julia to liaise with Steve Cropper and Jonathan Howell to look at this.

Letter to be sent out by end of June 07.

## **6 West Midlands Specialised Services Agency (WMSSA)**

Jonathan Howell explained the changes that had taken place with respect to commissioning specialised services across the West Midlands (WM).

*(Please see newsletter sent out with these minutes).*

The accountability for commissioning specialised services will now be with the new WM Specialised Commissioning Team (SCT), replacing the WMSSA. At a sub-regional level, the LSCGs have been replaced by local collaborative commissioning boards and there is an LCCB for Staffordshire and Shropshire.

The LCCB will support links with the PCTs for both specialised services and where the PCTs decide to commission on a wider basis for services that might not otherwise be defined as specialised, such as ambulance services where the needs are similar for each PCT.

Commissioning managers from the WMSCT will have a geographical responsibility and also take the strategic lead for a particular service across the region. For instance, Rob Lusuardi will be the WMSCT assistant director covering Staffordshire and Shropshire; he will have lead responsibility for the local trusts and will be the lead for renal services across the West Midlands.

Mick O'Donnell has been appointed as the Assistant Director for Specialised Children's Commissioning.

It was acknowledged that there are a number of advantages to the new arrangements which will come into effect on 1<sup>st</sup> June 07.

There was some discussion about expanding the boundaries of PiP. Some areas, like Hereford, have in the past expressed interest in subscribing to PiP and have been very supportive of the work.

### **Agreed:**

Mick O'Donnell to be invited to attend future Steering Group meetings to advise on commissioning specialised services.

### **Actions:**

A meeting between Mick O'Donnell, Steve Cropper, Jonathan Howell and Julia Greensall to be arranged. Julia to organise.

The boundaries of the PiP partnership area to be re-considered.

## **7 Annual report**

The theme, content and timetable for the annual report were discussed. Although further work needs to be undertaken by members of the 'core' team, it was agreed that this should be circulated by the end of July. The report should take stock of the position regarding the current projects, and identify work that PiP could move into.

## **8 Newsletter**

**Agreed:** Two newsletters a year should be circulated to members. A newsletter is currently being prepared which will be ready for distribution by the end of May; the second will be done for circulation at the beginning of December.

## **9 Website**

Work is ongoing to upload reports and other material onto the new website.

## **10 Surgery audit report**

Julia gave a presentation on the results from the second surgical audit, which has been undertaken at the request of WMSCG. The first audit was undertaken in 2003. There are two trusts that have not completed the audit, but it is hoped that they will do so in the near future.

Although further analysis is required, looking at the information received to date, it would appear that improvements have been made in the provision of services provided to children in hospital. The areas where the standards are not being met are the separate rotas for surgeons & anaesthetists for children, audit, number of RN – trained children's nurses available - particularly in theatre and recovery areas.

### **Actions:**

The two remaining trusts to be encouraged to complete the review.

A report will be completed to identify what has changed / show the improvements that have taken place since the first audit was undertaken.

A meeting to be arranged with Worxinfo (who developed the software) to complete the analysis. Meeting to involve Steve Cropper, Andy Spencer and Jonathan Howell.

Reports to be presented to WMSCG and paper developed for publication in a medical journal, for example the BMJ.

**11 Any Other Business**

No other business.

**12 DATE AND TIME OF NEXT MEETING**

The next meeting is on Thursday, 12<sup>th</sup> July 2007.

**Venue: Room 5 PGMC – Stafford General Hospital**

Minutes prepared by:  
Julia Greensall  
Network Development Manager – PiP  
Tel: 01676 530 285