

**PTS Programme Board Minutes
Part 1
Wednesday 15th November 2016
Friars Walk, Lewes, BN7 2PB**

In attendance:

Wendy Carberry (CB)	HWLH CCG, Chief Officer (Chair)
Alan Beasley (AB)	HWLH CCG, Chief Finance Officer
Maninder Dulku (MD)	HWLH CCG, PTS Programme Director
Derek Laird (DL)	HWLH CCG, PTS Advisor
Keith Hoare (KH)	HWLH CCG, Programme Manager
Graham Griffiths (GG)	H&R CCG/EHS CCG, Director of Performance & Delivery
Renee Padfield (RP)	B&H CCG, Head of Commissioning- Planned & Urgent Care
Geoff Lowry (GL)	Coastal West Sussex CCG, Head of Operations Transformation
David King (DK)	Crawley CCG & Mid-Sussex, Chief Operating Officer
Stacey Warren (SW)	SCAS, Business Manager PTS Hampshire
Melanie Saunders (MS)	SCAS, Director of Human Resources and Organisational Development
Paul Stevens (PS)	SCAS, Director of Commercial Services
Michael Clayton (MC)	Coperforma, CEO
Phil Smith (PS2)	Coperforma, HR Director
Mike Woodall (MW)	Coperforma, Assistant Director
Nick MacBeath (NM)	TIAA, Audit Manager
REDACTED (MB)	HWLH CCG, Programme Support Officer (Minutes)

Apologies:

Ian Thompson	Coperforma, Business Unit Manager (Sussex)
Dr Sarah Richards	HWLH CCG, Chief of Clinical Quality and Performance
John Child	B&H CCG, Chief Operating Officer
Kim Rickard	Crawley CCG & Mid-Sussex, Programme Manager

No.	Items	Action
1	Welcome and apologies <ul style="list-style-type: none"> Conflicts of Interest – none declared 	
	No conflicts of interest	
2	Minutes of the last meeting	
	The minutes of the last meeting were not reviewed, given the new focus for the board on transition of the service from Coperforma to SCAS.	
3	Action Log	
	The action log of the last meeting was not reviewed/updated. Given recent decision to transfer the service to SCAS the Board reviewed the purpose of the meeting going forward. All agreed that the purpose of the PTS Programme Board is to work through PTS project plan to make sure transition is implemented to schedule.	
4	Service update	

No.	Items	Action
	MC advised that he had not prepared an update on the current service as he was unaware this was required.	
5	Transition Planning	
	<p><u>Teams</u></p> <p>MC confirmed that the Coperforma transition team will be :</p> <ul style="list-style-type: none"> • Ian Thomson – programme management • Mike Woodall – operations • David Davis - communications • Phil Smith – HR <p>Coperforma recognise there may be a need for a part time IT Manager to support a smooth transition.</p> <p>PS confirmed that the SCAS transition team will be:</p> <ul style="list-style-type: none"> • Paul Stevens – programme management • Stacy Warren – operations • Joanne Williams – HR <p>WC confirmed that the CCG transition team will be:</p> <ul style="list-style-type: none"> • Maninder Dulku – programme director • Keith Hoare – programme manager • Derek Laird – PTS specialist adviser <p>ACTION - MB to create key contact list of key CCG, Coperforma and SCAS staff and distribute before next meeting</p> <p><u>Handover Plan</u></p> <p>Ian Thomson from Coperforma has produced a draft handover plan, ‘Sussex PTS Contract Handover’, which was shared with the Board.</p> <p>The draft details four phases of transition, ending by the end of March 2017.</p> <p>Phase 1. Transfer of selected patient transport journeys by ex-SECamb staff across Sussex as capacity allows (including Docklands and Thames staff)</p> <p>Phase 2. Transfer of all hospitals discharges/transfers patients to SCAS</p> <p>Phase 3. Hand over vehicle control, bookings management and on-site staff to SCAS</p> <p>Phase 4. Transfer of all remaining Coperforma staff to SCAS</p> <p>A more detailed plan is under development. The detailed plan identifies renal patients as a high risk group, and therefore they are recommended as one of the last patient groups to transfer to SCAS.</p>	MB
	The Board reviewed and discussed the ‘Sussex PTS Contract Handover’ and	

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	<p>there was general agreement that the proposed phasing appears sensible.</p> <p>AB identified four key areas that are a priority for progress within the transition plan from an economic perspective:</p> <ol style="list-style-type: none"> 1. DMS staff 2. London activity 3. Dedicated vehicles 4. Thames staff <p><u>Workforce & TUPE</u></p> <p>MS advised that she wants to gain a better understanding around the rationale for staff grouping vis a vis TUPE. Going forward there needs to be clarity of groupings to avoid negative impacts on any particular groups. For example, ex-SECamb staff transferred to SCAS from Docklands and Thames staff.</p> <p>MC updated the board that there is currently one staff group currently not working (Dockland's staff), however Coperforma have been able to maintain running of service by increasing work with other contractors, with an understanding that this workload will be moving to SCAS.</p> <p>MS confirmed that SCAS need to be clear re: obligations to other providers who are covering Dockland's staff workload (18 providers).</p> <p>The Board agreed that the priority is protecting ex-SECamb staffs who transferred under TUPE, and recognised the need to get DMS staff back to work as a priority work stream. DMS shut down their operation on the 14th September 2016 so the 12 week guideline is soon to become a highly relevant consideration.</p> <p>The potential risks that need to be evaluated and reported back to the board concern the following:</p> <ul style="list-style-type: none"> • that the extra staff brought in to cover for DMS staff currently not working may have accrued TUPE rights, while these DMS staff may be at risk of losing these rights given their inactivity (12 week guideline); • if the extra staff brought in do have TUPE rights there could be more staff than future roles with SCAS so this could have cost implications re: potential redundancies; • if we phase the transfer of staff with inactive DMS staff moving to SCAS first this could leave us open to challenge for unfair dismissal for those staff who are programmed to transfer if there are insufficient posts to transfer to. <p>In order to evaluate these risks SCAS need clarity from Coperforma on the following:</p> <ul style="list-style-type: none"> ○ Have staff with other sub-contractors who have picked up DMS work been working regularly/sufficiently? ○ How do staff identify themselves? Do they identify themselves as part of a defined service working to a specific contract? <p>MW advised that his quick response would be yes and yes to both queries.</p> <p>ACTION – MS (SCAS) and PS (Coperforma) to liaise in order to clarify HR</p>	<p>MS / PS</p>

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	<p>issues/risks in advance of transition planning workshop (see below)</p> <p>AB informed the Board that risks and management of risks are ultimately the responsibility of the CCGs. What the Board needs is clarity on these risks to determine the next steps.</p> <p>Also SCAS require details of the 80 members of DMS staff who are not working. As part of due diligence SCAS would request access to staff lists from Coperforma. AB also has records from the cohort of staff transferred to Docklands who were paid in October 2016 and there is the original TUPE data as well. Therefore the next step is for SCAS to triangulate this data to ascertain the DMS staff in scope.</p> <p>ACTION - AB to share CCG data with PS at Coperforma</p> <p>ACTION - PTS Transition Planning workshop 29/11/16 to create a draft mobilisation plan that will need to be informed by this evaluation of HR issues – the plan will also need a full risk register. The plan will be presented to the next board meeting for review and approval.</p> <p><u>Comms and Engagement</u></p> <p>The board agreed to have a co-ordinated, joint communication plan. WC proposed this could be led by HWLH CCG comms, with NHS England support, but that it would be useful to have support from the other CCGs.</p> <p>ACTION – CCG Board representatives to ask their comms team for additional support.</p>	<p>AB</p> <p>MD</p> <p>CCGs</p>
6	Any other business	
	<p><u>Patient representation</u></p> <p>The CCG has been engaging with patients through the monthly PTS Patient Forum meeting.</p> <p>ACTION - Penny Blackburn, patient forum rep, to be invited to future PTS Programme Board Meetings.</p> <p><u>Clinical quality input</u></p> <p>Dr Sarah Richards, HWLH CCG Clinical Quality Manager, is a current member of the PTS Programme Board but has sent her apologies. Debbie Mars from SCAS has made contact with Dr Sarah Richards.</p>	<p>MD</p>

Freedom of Information Act: Those present at the meeting should be aware that their names and designation will be listed in the minutes of this Meeting which may be released to members of the public on request.