

Appendix 1

Chair's Report

Name of the meeting being reported on:	West Yorkshire Mental Health Services Collaborative Committees in Common (WYMHSC C-In-C)
Date your meeting took place:	28 June 2019
Name of meeting reporting to:	<Board of Directors>
Key discussion points and matters to be escalated:	
<p>This paper provides an update from the WYMHSC C-In-C on 28 June of which members of the four trusts were present. The full action notes are attached with the key decisions and actions highlighted below:</p> <ul style="list-style-type: none"> • The WYMHSC Joint Governor and Non-Executive Director's event held 24 June was discussed with members noting: <ul style="list-style-type: none"> ○ The need for feedback to be incorporated into future events including format, agenda content and meeting logistics. ○ A Dementia paper to be prepared for consideration at the System Leadership Executive Group by Yorkshire & Humber Dementia & Older People's Mental Health Clinical Networks to establish the learning and future positioning of the Dementia pilot work after March 2020. ○ Communication to Governors and NEDs to highlight the release of the Long Term Plan Implementation Framework and further opportunity to engage in the draft 5-year strategy before September. ○ Questions raised on the new Tier 4 CAMHS build. ○ Branding of the Mental Health, Learning Disabilities & Autism (MH, LD & A) programme to be discussed with the core Integrated Care System (ICS) comms team. ○ The actions and presentation slides from the event itself. • Members noted the Transforming Care Partnerships (TCPs) update from Brent Kilmurray and agreed to start looking at the longer term model from a provider point of view; coming forward with an offer to present to NHSE/I. ICS MH, LD & Autism 5-year strategy work will help realise realistic programme priorities. • NHSE Specialised Commissioning New Care Model (NCM) developments were discussed with three separate bids for CAMHS, Adult Eating Disorder and Forensic Services pilots to be submitted with an overarching ICS narrative. • Assessment and Treatment Units (ATU) update provided with expectations that the final business case will come back to the C-In-C meeting on 3 October. • Members provided feedback to be incorporated into the Forensics New Care Model, Provider Collaborative Application and acknowledged that the Mental Health Secure Care Specialist Community Forensic Team (SCFT) Trial Site Application (Wave 2) bid had been submitted. • Additional bids have also been prepared for submission: <ul style="list-style-type: none"> ○ Investment in Crisis and Home treatment services – shared model for WY&H for investment in community mental health services over existing investment. ○ Early intervention for psychosis – establishing a service targeted at the cohort of people transitioning from children to adult services. • Members noted that capturing a shared view of the benefits of working collaboratively is essential and will be worked through as part of the programme review process. 	
Report completed by:	Name of Chair and date:

