# NHS Plymouth and Plymouth City Council

# Plymouth Dementia Joint Strategic Commissioning Group

### **Terms of Reference**

### 1. ROLE

- 1.1. The Plymouth Dementia Strategy Joint Strategic Commissioning Group (PD JSCG) will ensure that this strategy will be delivered in accordance with national and local policy frameworks such as: Transforming Community Services, New Horizons, Living Well with Dementia (National Strategy) and the South West SHA Dementia Review and Plymouth Joint Dementia Commissioning Strategy.
- 1.2. The Group will ensure that services commissioned in Plymouth meet the needs of the local population, anticipate future demand, and are flexible and accessible to all.
- 1.3. The Group will work towards the achievement of the five strategic Dementia priorities identified in the Plymouth Dementia Strategy:
  - · Increasing and improving awareness
  - Early diagnosis and intervention
  - Support for service users and cares
  - Improved quality of care
  - Improved dementia pathway
- 1.4. The Group will review and update the Plymouth Dementia Strategy as necessary so that it reflects the objectives of NHS Plymouth and Plymouth City Council.
- 1.5. The Group will ensure that the health and social care community responds to national dementia guidance in a coherent and integrated manner by reviewing new guidance whenever it is published and incorporating changes into the Plymouth Dementia Strategy.

# 2. MEMBERSHIP

# 2.1. Core Group

Chair – (to be appointed)

NHS Plymouth Commissioner

Head of Strategic Commissioning Plymouth City Council

- 1 Head of Continuing Care Commissioning
- 1 Plymouth Community Healthcare Executive
- 1 Plymouth Hospitals NHS Trust Executive

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1 representative from Adult Social Care provider

1 Representative of independent and voluntary sector providers

Expert advisors;

Clinical Psychology

Consultant Psychiatrist

General Practitioner

Academia

Public Health

LINK representation

Administrative support to be provided by NHS Plymouth

Other providers and commissioners will be co opted as required e.g. those who have responsibility for community physical care and acute inpatient liaison.

# 3. QUORUM

3.1 Meetings will be quadrate when attended by the Chair PCT Commissioner/PCC Head of Strategic Commissioning /Head of CHC Commissioning.

### 4. WORK STREAMS

The PD JSCG will identify the respective works stream in accordance with the available Work/Action plan nominating the respective leads and timescales for deliver. It is important to note that compliance with this way of working will ensure speedy improvement in dementia services and ultimately be of benefit to the user, carer and member of staff working in this area

#### 5. ACCOUNTABILITY

- 5.1 The Joint Strategic Commissioning Group reports to the Sentinel Clinical Commissioning Executive and is accountable to NHS Plymouth and Plymouth City Council through the Trust Board and Cabinet.
- 5.2 The Group will provide regular reports to the Sentinel Clinical Commissioning Executive on the progress of the strategy and will escalate any unresolved issues or blockages to them.
- 5.3 NHS Plymouth will ensure that minutes of the meetings are kept and ensure that minutes, and agendas are issued within 14 days of the meeting.
- 5.4 Safety and risk issues will be reported to the respective Commissioning Governance Committees

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- 5.5 Members of the PDJCSG will have a duty to :-
- 5.6 Contribute to the development of the respective works streams
- 5.7 Communicate the key priorities and recommendations arising from the PDJSCG to their PCT Directorate or partner organisation
- 5.8 Communicate the views of their PCT Directorate or partner organisations to the PDJSCG
- 5.9 Commit their PCT Directorate or partner organisation to deliver their part of the agreed development plan
- 5.10 Take action to improve performance where necessary

# **6.0 STAKEHOLDER ENGAGEMENT**

6.1 To date there has been significant stakeholder involvement however this will continue using the recognised process available i.e. contracted groups and Local Involvement Networks (LINKS,) workshops and respective websites. A dementia nework will be established to ensure that there is a conduit to the dementia commissioning group

# 7.0 TRAINING AND DEVELOPMENT

7.1 Those with identified needs for training/development will be offered and supported with such. Existing mechanisms will be used

# 8.0 REVIEW

8.1 The above Terms of Reference, membership and length of term will be reviewed on a 6 monthly basis.

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