

**ALLIANCE HOUSE AND NHS-BSA MEETING 10:00-11:00 FRIDAY 31 MARCH –
RH MR5
Note of meeting**

Attendees

██████████ (HPT)

██████████ (HPT)

██████████ (Patient Services Manager, NHS-BSA)

██████████ (Head of Service, NHS-BSA)

██████████ (Services Delivery Manager, NHS-BSA)

Jan Barlow (JB) (Chief exec, Caxton & Macfarlane)

Chris Pond (CP) (Chair, Caxton Foundation)

Peter Stevens (PS) (Chair of Eileen Trust, Director of MFET and Skipton)

Alistair Murray (AM) (Chair of Macfarlane Trust, Director of MFET)

AIM: The aim of this meeting was to discuss the transition from Alliance House bodies to the NHS-BSA as the new scheme administrator. This meeting provided an opportunity for both the Chairs of the Alliance house Bodies and colleagues from NHS-BSA to highlight any concerns or questions they had regarding the move intended to take place by October 2017.

JB: The main information needed in order to make the next steps is the **transfer dates** and the **location**. It is important to understand who is driving this move and giving direction – is it NHS BSA or DH?

██████: The DH owns the policy so we run the time scales of this operation, the DH is driving the direction of this transition which is all working in parallel with the SCM, the JR and pushing for the one scheme administrator to be implemented in October 2017.

JB: Expressed an awareness of the legal requirements involved for both parties which needs to be met, therefore a commitment to the transfer dates and locations is really needed to push forward.

ACTION: ██████ to send a letter out detailing the agreed location and transfer dates in October 2017 to Chairs of the Alliance house group.

██████: No plans will be made without discussion of scheme models with DH and discussion as to whether NHS BSA are to be the accountable body is yet to be decided. If DH or NHS BSA is to be the accountable body, NHS BSA would share monthly service report with DH and are willing to have monthly accountable meetings put in place to maintain transparency and communication on

progress. NHS BSA is equipped to operate on different models in line with the needs of the beneficiaries.

CP: Raised concerns that in the meeting with Lord O'Shaughnessy a few weeks ago, Lord O'Shaughnessy expressed his concern over making the transition as smooth as possible and retaining the workforce as they are. If NHS BSA were to act as the host, he hopes that NHS BSA will be able to keep things as they are (i.e. – retaining the geographical location of the workforce here in London)

CP & other Chairs also raised the point of this transition also being a political move and likely to be under scrutiny by the APPG. Each member of the APPG has a constituent, and if a reduction in the quality level of service was raised, this would be picked up on by the APPG and likely to cause problems.

CP also commented that he felt more at ease knowing that NHS BSA could operate on different models according to the needs of the beneficiaries.

JB: Raised her concerns regarding the staff retention to maintain the beneficiaries experience of support and care when needed. Would like to retain the group of dedicated professionals, and in terms of geography, moving the team to Newcastle would make this more difficult.

██████████ mentioned that they already have a dedicated team with a six day service with access until 6pm in the evening in place for customers in Newcastle. This exists for current business needs which could be extended for this transition, (subject to DH funding) which could also be extended to a 24 hour service according to business needs and the model put in place for this move.

██████████ also reiterated that he would like to establish a good working relationship with the Alliance House Chairs in order to make sure the transition was as smooth as possible, and to retain the level of service provided by the current schemes. This was unanimously met with positive feedback from the Chairs who agreed with ██████████.