

**MINUTES OF THE MEETING OF THE
SOUTH LAKES LOCALITY EXECUTIVE
Thursday 6 November 2014 at 14:00
Conference Room, Enterprise House, Kendal**

Present:	Dr Jim Hacking	GP Lead (Chair) (JH)
	Dr Louise Morgan	Exec GP (LM)
	Dr Julia Smith	Exec GP (JS)
	Dr Judith Neaves	Exec GP (JN)
	Helen Bailey	Senior Commissioning Manager (HB)
	Hazel Smith	Primary Care Development Lead, South Cumbria (HS)
	Jim Lawson	Lay Representative (JL)
	John Keen	Business/Performance Manager, South Cumbria (JK)
	Mike Eddy	Practice Manager Representative (ME)
	William Lumb	Exec GP (WL)
In Attendance:		
	Helen Coffey	Communications Officer, Cumbria CCG (HC)
	Val Ferriman	Administrator (VF)

AGENDA ITEM 1: Apologies for Absence

Action

1. Apologies for Absence were received from:
Liz Dover, Dr Alistair McKenzie, Dr William Lumb

AGENDA ITEM 2 : Declarations of Interest

2. There were no Declarations of Interest made.

AGENDA ITEM 3: Lay Rep Introduction

3. HB introduced Jim Lawson, the new Lay Representative who was appointed recently following short listing and interview. His role will be developed to provide a non-NHS perspective in Executive discussions and support the engagement of community stakeholders.

AGENDA ITEM 4: Minutes of Previous Meeting Thursday 4th September 2014

4. The minutes of the meeting held on 4 September were approved as a correct record.

AGENDA ITEM 5 : Locality Investment Plan

5. JK presented the finance report and briefly outlined the sources of the current financial pressures faced by the CCG in managing within its resource allocation

in 2014/15. A decision had been taken at governing body level not to permit any 'one off' expenditures from the slippage that will inevitably arise from the investment monies committed in the current year to schemes that will have a full year effect in 2015/16.

It was outlined that for all schemes to continue beyond March 2016, a review will have to have been undertaken that has demonstrated that each scheme is significantly contributing to a reduction in acute scheme expenditure (at least 2:1 benefit delivered through community based provision). Hence providers had assurance with regard to the funding only until that date. The desired and ideal intention would be for the schemes to deliver financial and service change in line with targets and thereby prevent any disinvestment from being necessary. There is however no current commitment to fund schemes beyond the 2015/16 financial year at this time.

A table of the schemes was provided. Slippage of around £700k was available to transfer back to CCG reserves as a contribution towards in year pressures faced by the organization.

AGENDA ITEM 6 : Primary Care Communities Plan & Progress

Next steps in development of Primary Care Communities (PCC) outlined by HB. Lead GPs for each PCC and 2 meetings to be arranged before Christmas involving CPFT and Adult Social Care, attended by the senior commissioner (HB & CR) and head of Primary Care Development (HS), developing the role of the Care Navigator and Case Manager.

6.

JN noted that for DN managers a change of culture and a breaking down of barriers is required to empower the district nurses to work differently.

JL said that case scenarios would be useful to illustrate the changes.

ACTION: PCC stakeholder map needs to be developed by each PCC.

HB

AGENDA ITEM 7: Early Supported Discharge

South Lakes and Furness have both allocated funding for the commissioning of stroke early supported discharge; the draft service specification was received at September's meeting. The pilot is due to start on 1 December, improved outcomes for patients and system cost savings to be evaluated in 12 month's time. Business case to be circulated for nay comments prior to it going to Furness Executive on 14th November and South Lakes on 4th December.

7.

ACTION: Any comments to HS

ALL

AGENDA ITEM 8: IT Plan

8.

Deferred, WL not in attendance.

AGENDA ITEM 9 : Succession Planning

Following AM's decision to stand down from the SL Executive in March 2015, there is now the opportunity to review the role of Members and organize elections to the Executive.

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- Following discussion of the Proposal paper it was agreed that GPs should be elected to the Executive to represent and help develop their PCC, through a process of managed change (Option 2) and that the Chair be elected as now by the Executive (option 1). One member would need to be elected for Kendal and Grange & Lakes plus a co-opted member for Kendal. There are currently 3 members from the East PCC, it was agreed that JS (Medicines Management) and LM (Bentham) should remain.
- 9.

It was also agreed that consideration should be given to supporting key disease areas. Dementia was noted as a key area which currently has no specific focus within the locality.

ME noted that the election of the next Practice Manager Forum chair is due in March.

ACTION: Advice from the LMC to be sought as to the voting format and how Dalton + Ulverston will work. Members to let HB know if they wish to be put forward as Chair.

HB

AGENDA ITEM 10: South Lakes Mind – Application for Interim Funding

SL MIND has approached the SL Locality for urgent funding of their much valued person centered counselling service due to a number of factors including growth of the service and the reduction in grant funding.

JS said that the SL MIND service was not well publicised to GP practices outside of Kendal.

ACTION: Add link to next Locality Newsletter which is circulated to all GP practices.

HC

10. JN asked why the NHS funded First Step service did not provide a sufficient service, JH said that in the recent past staffing had been a problem but that the service was now performing better and that it was patient choice to use the SL MIND service.

JH reassured JL that as part of the new Mental Health Strategy guidance, criteria for outcomes would be required to be demonstrated when charities bid for funding in the next financial year.

HB noted that other charities including Age UK's funding bid manager were offering short term support.

RESOLUTION: Interim funding to SL MIND approved.

AGENDA ITEM 11: Co-Commissioning

The CCG and NHS England are working together to agree the next steps in co-commissioning – greater CCG involvement in NHS England decision making/ joint decision making/ CCG taking on delegated responsibilities from NHS England (such as GMS & NPMS contracts, GP & Pharmacy DES and LES, QoF). A

11. discussion will take place at the next Council of Members meeting (date to be arranged) and views are sought on the three options outlined in the accompanying paper. Proposals will need to be submitted by the CCG to NHS England on 1 June 2015 in readiness for implementation April 2016.

JH confirmed that capacity issues and a perceived conflict of interest will be addressed at the Members meeting.

AGENDA ITEM 12: Risk Register

There is a CCG Corporate Risk Register significant to the whole organization and

12. localities are now required to keep a locality Risk Register of which this is the first draft received for information.

ACTION: Feedback and comments to HB please

ALL

AGENDA ITEM 13: Programme Plan Update

13. Locality Network Out of Hours and Planned Care update sheets received for information, also shared with Furness.

ACTION: Comments to HB please

ALL

AGENDA ITEM 14: NHS Five Year Forward View

14. Received for information.
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Any Other Business

Next meeting 4 December: HB to invite a representative from one of the following to the meeting:

15.
 - Childrens Team
 - Mental Health (new Strategy)

ACTION: Extra meeting with Furness Locality, to meet Colin Cox, the new director of Public Health, to discuss items including Stop Smoking, Health & Well Being.

HB

DATE AND TIME OF NEXT MEETING:

16. **Thursday 4th December 2014, 2pm, Conference Room, Enterprise House, Shap Road Kendal**
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