

**NHS CUMBRIA CLINICAL COMMISSIONING GROUP
MINUTES OF ANNUAL GENERAL MEETING
Wednesday 6 August 2014, 16:30
Forum 28, Duke Street, Barrow-in-Furness, LA14 1HH**

Present:

Members of the Governing Body

Hugh Reeve	Clinical Chair (Chair)
Ruth Gildert	Nurse Member
Les Hanley	Lay Member (Health Improvement)
Geoff Jolliffe	Locality Lead GP for the South of the County
Nigel Maguire	Chief Officer
Rachel Preston	Locality Lead GP for the North of the County
David Rogers	Medical Director (DR)
Jon Rush	Lay Member (Patient Engagement)
Charles Welbourn	Chief Finance Officer
Anthony Woodyer	Consultant Member

Observer of the Governing Body

Sue Stevenson	Healthwatch Cumbria (SS)
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CCG Officers

Kieron Bradshaw	CCG Administrator
Jen Lawson	General Manager
Mark McAdam	Communications Manager
Karen Morley-Chesworth	Communications Officer
Shirley Ratcliffe	PA to the Chair & Chief Officer
Peter Rooney	Director of Planning & Performance
Brenda Thomas	Governing Body Support Officer (BT)

Members of the Public

Evelyn Bitcom
Michael Cassells
Liz Clegg
Winifred Hoffman
Ian Reed

AGENDA ITEM 01: Chairs Welcome

Everyone was welcomed to the first Annual General Meeting of NHS Cumbria CCG and introductions were made as follows:

- Dr Hugh Reeve - Chair of the CCG

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- Nigel Maguire - Chief Officer
 - Charles Welbourn - Chief Finance Officer
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AGENDA ITEM 2: The Annual Report 2013/14 and The Annual Accounts 2014/15

The Chair presented an overview of what the CCG was trying to achieve. These included:

- A Membership Organisation consisting of 82 Member Practices in Cumbrian and one in North Yorkshire
- Six Localities across the County: Allerdale, Carlisle, Copeland, Eden, Furness and South Lakes
- Budget of £672m – serving half a million people
- Commissioning majority of services to meet Cumbria patients' health needs

The Chair outlined the CCG Vision as:

- To make a difference to people's lives
- Doing the right things for our patients, service users and populations
- Putting ourselves in your shoes – is this the care we would want for ourselves or our families?
- The right healthcare, in the right place, right when you need it
- The Cumbrian health pound is finite and can only be spent once

The first year was described as “A Challenging Year” with the following issues being faced across the Cumbrian Health economy:

- Serious Quality issues – which has resulted in national intervention
- Significant financial problems
- Major recruitment issues – difficulty in sustaining some services

In response to these issues, the CCG has introduced a step change in partnership working by:

- Establishing a Cumbria Health and Care Alliance
- Supplied funding to establish the Cumbria Learning and Improvement Collaborative (CLIC)
- Introduced two major programmes of work
 - Better care together
 - Together for a healthier future

All of which were underpinned by the CCG's Five Year Strategic Plan.

The following performance challenges were highlighted:

- NHS Constitution Rights and Pledges
- By March 2014 – 16 of the 24 targets we had set ourselves had been achieved
- Plans were in place to ensure further significant improvements during 2014/15
- Improvements need to be achieved on the following pathways:
 - Cancer Care
 - Urgent and emergency care

- Elective Care

There have been major quality issues with all the main Providers, leading to a loss of confidence in many services and new quality assurance systems were implemented. These included:

- Information from Providers being cross checked against the CCG's own intelligence systems
- Providers being held to account at Monthly Quality Review Groups led by GP Clinical Leads
- Early warning systems have been introduced across nursing homes
- Patient experience is being measured through the "I want great care" software system
- Services for Looked After Children were reviewed and have showed significant improvements

The five year strategic plan has also been developed and the CCG has outlined within the plan that it will endeavor to:

- Support more people to stay well
- Provide care closer to where people live
- Join up health and social care
- Invest in community based services with more streamlined and efficient hospital services

Charles Welbourn gave a presentation on the Accounts & Financial Review for 2013/14 highlighting the following key points:

- The CCG received an Unqualified Audit report which detailed that its accounts showed a true and fair view of the CCG's finances for 2014/15
 - The following financial targets were achieved:
 - The Revenue Resource used did not exceed the amount specified in Directions – "the CCG balanced its books" and achieved a surplus of £8.485 million on budget of £680 million
 - Administration resource did not to exceed the amount specified in Directions - The CCG spent £900k less than £12.8 million (1.7%) allowance on running costs
 - Capital Resource use did not exceed amount specified in Directions – The CCG did not spend any capital and has no fixed assets
 - Better Payments Practice Code – 99% of all the CCG's invoices were paid on time
 - What the CCG spent its money on:
 - GP Prescribing 14%
 - Hospital Services 50%
 - Mental Health & Learning Disabilities 11%
 - Community Services 12%
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- Ambulance & GP Out of Hours 5%
 - Other 5%
 - Running Cost Allowance 2%

The big financial challenges and issues for the CCG in 2013/14 included:

- New funding arrangements for Specialised Commissioning – the opening allocations needed to be corrected (£90 million for Cumbria) and 1% of the “top-slice” was used to manage this
- The impact of Legacy issues from Cumbria PCT
- Hospital Activity, both in terms of emergency admissions and waiting list activity was significantly greater than expected so needed to reduce planned spending in other areas
- New investments - Supporting new developments including Children’s services £2 million and Primary Care IM&T
- New health facilities opened in Cockermouth, Cleator Moor, Carlisle and Grange

Questions from Members of the Public present

Various discussions took place based on questions raised by members of the public these included:

- Poor quality of care received and how the CCG will ensure lessons are learned from never events
- The alliance set up and the establishment of CLIC

The meeting closed at 17:40