

NHS NORTH CUMBRIA CLINICAL COMMISSIONING GROUP
MINUTES OF GOVERNING BODY MEETING
Wednesday 7 February 2018
Botcherby Community Centre, Victoria Road, Carlisle, CA1 2UE

Present:	Jon Rush	Lay Chair (Chair) (JR)
	Amanda Boardman	Lead GP – Lead GP Children and Adult Safeguarding (AB)
	Ruth Gildert	Registered Nurse (RG)
	Les Hanley	Lay Member – Health Improvement (LH)
	Colin Patterson	Lead GP – Primary Care (CP)
	David Rogers	Interim Accountable Officer/Medical Director (DR)
	Peter Rooney	Chief Operating Officer (PR)
	Charles Welbourn	Chief Finance Officer (CW)
	Kevin Windebank	Secondary Care Doctor (KW)
Observers:	Sue Stevenson	Healthwatch Cumbria (SS)
In Attendance:	Stephen Childs	Chief Executive (SC)
	Julie Clayton	Head of Communications (JC)
	Eleanor Hodgson	Director of Children’s Integration (EH)
	Brenda Thomas	Governing Body Support Officer (BT)
Agenda Items: 9 & 14b	Louise Mason Lodge	Deputy Director of Nursing & Quality/Designated Nurse Safeguarding (LML)
10	William Lumb	GP Lead IM&T (WL)

GB 1/18 **AGENDA ITEM 01: Chairs Welcome and Apologies**

The Chair welcomed everyone to the meeting. Apologies were received from Denise Leslie – Lay Member for Public Engagement and Peter Scott – Lay Member for Finance & Governance.

GB 2/18 **AGENDA ITEM 02: Declarations of Interest**

There were no declarations of interest.

GB 3/18 **AGENDA ITEM 03: Minutes of the Governing Body Meeting held on 6 December 2017 & Action Log**

Resolved: The minutes of the meeting were agreed as a true record.

The action log was reviewed and updated accordingly.

GB 4/18

AGENDA ITEM 04: Questions from members of the public present

Questions and answers from members of the public are contained in Appendix 1.

GB 5/18

AGENDA ITEM 05: Chair & Chief Executive Report

SC presented the report highlighting that Trusts and Primary Care Teams (including the CCG) in North Cumbria had the best take up of flu vaccinations in the region. This was thanks to all involved really pushing to ensure staff and vulnerable and eligible patient groups took the opportunity to protect themselves this winter.

SS advised that Healthwatch Cumbria had carried out a short survey to explore the effectiveness of the provision of flu vaccines. She said the report would be circulated once it was finalised.

SC also highlighted NHS England's (NHSE) Accountable Care Contract Consultations and Judicial Reviews against NHSE as detailed in the report.

In response to a question from AB, SC confirmed that North Cumbria had a lot of work to do across the system, including contracting arrangements before it was in a position to develop an Accountable Care Contract.

Resolved: The report be noted.

It was agreed that Agenda Items 13 and 16 be brought forward to enable CW to leave to attend a meeting with NHSE appertaining to the Planning Guidance.

GB 6/18

AGENDA ITEM 13: Appointment of External Auditors

CW outlined the recommendation of the Governing Body's Auditor Panel detailed in the report.

Proposed by Les Hanley, seconded by Ruth Gildert;

Resolved: Grant Thornton be appointed as the CCG's external auditor for the financial years 2018/19 and 2019/20.

GB 7/18

AGENDA ITEM 16: Finance Report

CW presented the report advising that the CCG, as of December 2017, was still on target to meet its planned £3.1 million deficit for the year. He also advised that discussions were ongoing in relation to allocations between the CCG, Morecambe Bay CCG and NHSE as a result of the boundary change.

Discussion ensued around the additional funding announced in the budget which had also been raised by SC during the Chair and Chief Executive's report (Agenda Item 5). It was confirmed that it was still unclear how this additional funding was to be allocated. However further discussions with NHSE and partners across the system were continuing. Regular updates would be continued to be provided to the Governing Body's Finance & Performance Committee and the Governing Body as appropriate.

Resolved: The update be noted.

Charles Welbourn left the meeting.

GB 8/18

AGENDA ITEM 06: Integrated Health & Social Care

Integrated Health & Social Care Submission Update Report

SC presented the report confirming that North Cumbria CCG, with its health and Social Care partners, was committed to developing an integrated health and social care system and that the attached expression of interest in becoming an accountable care system pilot had received high level support.

SS observed that integration was about people. Currently people were not being involved and engaged as much as she believed was possible and therefore this needed to be addressed. In response the Chair confirmed that there was a lot of work ongoing to engage and support the public and ensure that there was a clear vision of engagement throughout the development of any integrated care systems.

In response to LH seeking confirmation that employers across North Cumbria were also being engaged, SC confirmed that meetings had commenced with employers and, whilst at an early stage, the CCG was committed to including employers within its co-production of an integrated care system.

Resolved: The update be noted.

Healthcare for the Future Update Report on Recommendations

DR reminded Members that at its December 2017 meeting the Governing Body requested a report which would enable it to take a decision on when the 12 months implementation of Option 1 for Maternity Services would begin. He also outlined (detailed in page 4 of the report) the work already undertaken to support the 12 month period to be commenced. DR also impressed upon Members that it was important to note that Option 1 was not the current status quo.

Challenging discussions ensued and concerns were expressed around both options. In particular, commencing the 12 month period from the 1 April 18 (Proposal A) posed concerns for the community because it provided less time for the recruitment issues to be addressed. Whilst Option B would be perceived as giving more opportunity for Option 1 to succeed it carried significant risk to the current services being safely sustained. In addition it also posed uncertainty for staff.

In response to the above discussions Members were reminded of the decisions originally taken by the Governing Body on 8 March 2017 which were as follows:

The following Maternity Services recommendations were approved:

Recommendation 2.1 to test the viability of Option 1 (as detailed in the Healthcare for the Future in West, North and East Cumbria Public Consultation Document pages 20 – 23 inclusive) over a 12 month period. The twelve month period would not begin immediately. The start date of the twelve month period will be agreed by the

Governing Body with input from the Co-production Steering Committee. The Governing Body will receive a report for consideration following the twelve month period.

Both DR and JC outlined how the potential proposals had been raised with the Co-Production Steering Committee (now known as Working Together Steering Group) prior to this report being prepared.

Members were also further advised that:

- if a start date of 1 April 2018 was approved it would be nearly 13 months from the date the decision was taken. A lot of work had already been undertaken to support the implementation of Option 1 and this work would continue at pace;
- discussions had taken place around the 12 month period in co-production meetings;
- every effort would be made to achieve Option 1 as the CCG had always been, and remained, committed to delivering consultant led maternity services at the West Cumberland Hospital if it could be done in a safe and sustainable way;
- that whilst the timeline was being recommended to commence from the 1 April 18, if significant progress was being achieved in delivering Option 1 in a safe and sustainable manner within that 12 month timeline, then that work would continue past 31 March 19;
- work would continue in Co-production with our communities to achieve Option 1 if at all possible;
- the Independent Review Group and the Implementation Reference Group had been established to scrutinise the findings and feasibilities of any recommendations around maternity services;
- the Governing Body would receive a full report, including recommendations, from the above groups at an appropriate juncture to determine whether or not Option 1 was viable.

Notwithstanding the above it was also noted that if services became unsafe and not sustainable at any point during the 12 month period there may be a requirement to reconsider the viability of Option 1 before 31 March 2019 and implement decisions previously made on the 8 March 2017.

Proposed by David Rogers; seconded by Kevin Windebank;

Resolved: The 12 month period to test the viability of Option 1 of Maternity Services (as approved by the Governing Body on 8 March 2017) be approved to commence from 1 April 2018 with Option 1 being progressed to as soon as an agreed implementation plan can be safely put in place.

SC commended the work which had been undertaken to produce alternative proposals for Community Hospitals. KW, the Chair of the Implementation Reference Group, confirmed that the proposals were progressing well but there were a number of outstanding questions which were raised by the Implementation Reference Group

and once answered there would be a full report presented for consideration by the Governing Body.

GB 9/18

AGENDA ITEM 07: NHS North Cumbria CCG Strategic Objectives 2018/19

EH presented the report advising that a review of the above had been undertaken and had been discussed with the Governing Body at its Development Session in January 18. In addition it had also been discussed with the Staff Engagement Group. The proposed changes were highlighted in red in Appendix 1 of the report. EH also advised that as the development of an integrated care system in North Cumbria progressed the CCG would need to review and update its objectives.

Proposed by Amanda Boardman, seconded by Peter Rooney;

Resolved: The CCG's Strategic Objectives for 2018/2019 as contained in Appendix 1 of the report be approved.

GB 10/18

AGENDA ITEM 8: Strategic Agreement with West North East (WNE) Cumbria and the University of Central Lancashire (UCLan)

DR presented the report confirming that North Cumbria University Hospitals Trust (NCUHT) and Cumbria Partnership Foundation Trust (CPFT) had both agreed to enter into the agreement (as appended to the report with UCLan). He advised that UCLan were keen to have this agreement in place but it would not mean that the CCG and partners could not enter into other agreements. DR stated that there was a lot of positive work being undertaken by UCLan which supported the aims across North Cumbria in terms of bringing trainee doctors into the system. AB supported the agreement but advised that she would also like to see it incorporate nurse trainees as well. LH also commended the work UCLan had done.

In response to a question from the Chair, DR confirmed if approved by the Governing Body he would sign the agreement as the Accountable Officer for the CCG.

Proposed by Les Hanley, seconded by Peter Rooney;

Resolved: The UCLan Strategic Alliance Agreement Framework as appended to the report be approved.

GB 11/18

AGENDA ITEM 09: Cumbria Local Safeguarding Childrens Board (LSCB) Annual Report 2016/17

LML presented the report advising that it provided a detailed description of the significant work undertaken in 2016/17. In addition it also gave an assessment of the state of safeguarding for children and young people in Cumbria. LML confirmed that there was still a lot of work to be undertaken and the CCG's Safeguarding Strategy was in the process of being updated for 2018/19 and would be presented to the Governing Body in due course.

LML also advised that the CCG had signed two 'Memoranda of Understanding'; one with NHSE to take on responsibility to act on its behalf on the LSCB: the second jointly with the LSCB to ensure a direct link into, and feedback from the regional

Quality and Safety Group (QSG).

AB emphasised that this report related to 2016/17 and subsequently a lot of work had been undertaken to improve services, resulting in being moved out of the inadequate rating at the last inspection.

Resolved: The LSCB Annual Report 2016/17 attached to the report be received for information.

GB 12/18

AGENDA ITEM 10: Implementation of Digital Road Map Update

WL presented the report highlighting the achievement against the required standards and the subtle changes which had been made from the report presented in October 17.

In response to the previous questions raised by a member of the public, Sue Gallagher (SG), WL advised that the 10% target for patients to access their GP records had now been increased to 20%. However, achieving these targets would be difficult because of patients wanting to access their records in this way and because of variations in GP Practice processes. Another issue was that not everyone had the speed of connection for the systems to work effectively. Further work would be undertaken over the next 12 months but this 20% would be a challenge.

In response to SG's second question WL advised that NCUHT had made substantial progress in achieving compliance against the National Standard for documents standards. In addition they had also made significant progress from six views to 1200 views per month on the end of life/clear view system. However, it was acknowledged that further work was required.

In response to a question from DR, WL confirmed that there were speed issues with GP systems across North Cumbria with the new British Telecom (BT) Multi-Protocol Label Switching (MPLS) network. BT had initially denied there was a problem with the system but had now acknowledged a problem existed and were working to resolve the issues.

Resolved: The update be noted.

The Chair thanked WL for all the work he had undertaken for the CCG and wished him well in his new role with Morecambe Bay CCG.

GB 13/18

AGENDA ITEM 11: Cumbria Learning and Improvement Collaborative (CLIC) 6 Month Update Report

SC presented the report praising the invaluable work that CLIC had undertaken ensuring that continuous improvement tools had been embedded across the system.

Resolved: The update be noted.

GB 14/18

AGENDA ITEM 12: Organisational Development Strategy Action Plan

EH presented the report outlining the key pieces of work which had been undertaken. She also advised that the NHS Staff Survey outcomes were due to be

released on 6 March 2018 but early indicators had shown that there was improvement on the previous year.

The Chair also confirmed that the above included the work done on the Governing Body Development action plan.

It was acknowledged that a lot of work had gone into both the development and delivery of the plans.

Resolved: The update be noted.

GB 15/18

AGENDA ITEM 14: Quality Report

Outcomes & Quality Assurance Committee (OQAC)

LH advised that Members of the above Committee had wanted to ensure that it remained fit for purpose and provided the most effective assurance to the Governing Body, hence undertaking this review. He then presented the key highlights detailed in the report.

It was confirmed that the new Director of Nursing and Quality, Anna Stabler, would commence her post with the CCG on 12 February 2018 and would be supporting the development of a Quality Strategy for 2018/19 and a delivery plan. This would then enable the Committee to ensure it focuses on ensuring the CCG delivers against the plan and improves the quality and safety of the services it commissions. Progress reports would be brought to future meetings.

Resolved: The direction of travel in relation to reviewing quality governance by the OQAC be approved.

Quality Report

LML presented the Quality Report and advised that as the above framework and strategy was implemented, Members would see this reflected in a revised and updated reporting format. LML highlighted 3.5 in relation to the NCUHT Quality Risk Profile advising that, following the first Quality Improvement Board meeting with the Trust commissioners and regulators, it agreed to a more aligned system wide approach to quality across the CCG's two main providers. Work was underway to ensure that commissioners continued to meet all their regulatory requirements.

The Chair also advised that there was insufficient data being received in terms of the Friends and Family system and work was ongoing to improve this with both Trusts.

Resolved: The report be noted

GB 16/18

AGENDA ITEM 15: Performance Report

PR presented the report.

Resolved: The report be noted

GB 17/18

AGENDA ITEM 17: Minutes of:

Executive Committee:

- 21 September 2017
- 19 October 2017
- 23 November 2017

LH advised that in terms of the resolved items on the Executive Committee he was not clear what had been agreed or whether any further actions would be required. DR, as Chair of the Executive Committee, advised that the wording of minutes was in the process of being reviewed and would be clearer in the future. He also advised that the minutes of 23 November 2017 were not the final version – the amended version would be presented at the next Governing Body for completeness.

Finance & Performance Committee:

- 22 November 2017
- 20 December 2017

Implementation Reference Group

- 17 November 2017
- 06 December 2017

KW as Chair of the above group sought clarification on whether the Independent Review Group minutes would be presented to the Governing Body. PR confirmed that the Group was not a committee of the Governing Body and advised that those minutes would be presented to the Implementation Reference Group.

Primary Care Committee:

- 09 November 2017

Outcomes & Quality Assurance Committee:

- 5 October 2017

Resolved: The minutes be received for information.

GB 18/18

AGENDA ITEM 18: Wider System Meeting Minutes

System Leadership Board Meeting:

- 12 October 2017
- 09 November 2017

Joint CCG Committee for Cumbria and the North East

- 5 October 2017

JR as Chair of the above committee advised that the revised Terms of Reference for this Committee would be presented to the Governing Body at the April 2018 meeting.

GB 19/18

AGENDA ITEM 19: Any other urgent items of business

Improvements to the A595

LH asked if the CCG supported Cumbria County Council (CCC) in lobbying for improvements to the A595 which would improve travel times from Whitehaven to Carlisle.

Action: It was agreed that the CCG would link in with CCC to see what support could be offered.

The Chair then advised that this was Stephen Child's last meeting as Chief Executive of the CCG as his secondment role ended on 31 March 2018 at which time he would return full time to Chief Executive for the North of England Commissioning Support Unit (NECS). He was thanked for all the work he had undertaken to help support the CCG whilst in directions especially in relation to the connectivity he provided to partner organisations both in North Cumbria and the North East.

GB 20/18

AGENDA ITEM 20: Questions from members of the public present

Questions from members of the public and the answers are contained in Appendix 2.

GB 21/18

AGENDA ITEM 21: Date and time of next meeting approved:

Wednesday 4 April 2018 commencing at 13:00 in The Oval Centre, Salterbeck Drive, Salterbeck, Workington, Cumbria. CA14 5HA

The meeting closed at 16:10

Questions & Answers from Members of the Public - Agenda Item 4

Sue Gallagher

Agenda Item 10 – Implementation of Digital Road Map Update Report

Page 2 of the report – Patient access to their GP records – GP practices enabled but some not reaching the 10% target.

Answered and contained in the minutes of the relevant item.

Page 3 of the report – Social Care receive timely electronic admission, discharge and withdrawal notices from secondary care.

Answered and contained in the minutes of the relevant item.

Neil Hughes

Agenda Item 6b – Healthcare for the Future Update Report on Recommendations

With the UK Government having no immediate plans to upgrade the A595 between Carlisle and West Cumbria despite Cumbria County Council lobbying on this, does the Governing Body feel that any maternity proposal other than Option 1 is Feasible?

PR advised that whilst the North Cumbria Health System would have liked to have seen improvements to the A595, at the time the Governing Body made its decision on 8 March 2017 around Maternity Services there were no plans for improvements to that road.

If the Governing Body selects Proposal A (Page 6 of said report) today, how will it convince Cumbria Health Scrutiny Committee that this is not a substantial variation from the decision taken by Cumbria CCG on 8 March 2017?

The Chair advised that the answer to this question could not be given prior to the decision being taken under Agenda Item 6b. NH requested that a written response be sent to him after the decision had been taken. NH was later invited to attend a meeting with the chair and Julie Clayton at the CCG office, where all the relevant issues and processes were discussed in detail. NH was satisfied with this approach.

Rebecca Hanson

Agenda Item 6b – Healthcare for the Future Update Report on Recommendations

During the above agenda item Members will be asked to decide between two proposals for the start date for the 12 month trial of option 1. Some pros and cons of each option are laid out but I feel the most important concerns about starting the trial of option 1 before it is implemented have been omitted. Please can the governors tell me which factors they have considered in addition to the ones laid out and please may I then be given the chance to respond in order to briefly to outline any important issues they have not then covered if there are any?

The Chair advised that these would be answered during the discussions of Agenda Item 6b.

Questions & Answers from Members of the Public - Agenda Item 17

Sue Gallagher – Agenda Item 15 – Performance Report

Page 14 of the report, Performance in Primary Care, could you please explain what the colour coding represents in the chart at the top left of the page?

PR advised that this was a new indicator in this report. It represented two types of care, planned (elective) and unplanned (non-elective). Amber represents the average, green indicates that activity was lower and red indicates it was higher. PR advised that this was a very basic chart but further development of it was ongoing.