

# NHS CUMBRIA CLINICAL COMMISSIONING GROUP MINUTES OF GOVERNING BODY MEETING Wednesday 3 February 2016, 13:30 The Lloyd Motor Group Lawn Suite 1, Carlisle Racescourse, Durdar Road, Carlisle. CA2 4TS

Present: Ruth Gildert Registered Nurse (RG)

Geoff Jolliffe Interim Clinical Chair (Chair) (JG)

Les Hanley Lay Member (Health Improvement) (LH)

Rachel Preston Lead GP Representing the North of the County (RP)

Hugh Reeve Interim Chief Clinical Officer (HR)

David Rogers Medical Director (DR)

Jon Rush Lay Member – Public Engagement (JR)

Peter Scott Lay Member – Finance & Governance (Chair) (PS)

Charles Welbourn Chief Finance Officer (CW)

Observers: Sue Stevenson Healthwatch Cumbria (SS)

In Attendance: Julie Clayton Head of Communications (JC)

Paul Day Communications & Engagement Officer (PD)

Christine Harrison Engagement & Equality Officer (CH)
Peter Rooney Interim Chief Operating Officer (PR)
Brenda Thomas Governing Body Support Officer (BT)

Item 9 only: Louise Mason-Lodge Designated Nurse for Safeguarding (LML)
Item 10 only: Janice Horrocks Deputy Director - MH & LD Commissioning

GB 1/16 AGENDA ITEM 01: Chairs Welcome and Apologies

The Chair welcomed everyone to the meeting. Apologies were received Anthony

Woodyer, Consultant Member.

GB 2/16 AGENDA ITEM 02: Declarations of Interest

There were no declaration of interest.

GB 3/16 AGENDA ITEM 03: Minutes of the Governing Body Meeting held on 2 December &

**Action Log** 

**Resolved:** The minutes of the meeting be approved as a true record subject to the

inclusion of the Evelyn Bitcom's questions in Appendix 1 of the minutes.

Action: The questions mentioned above be included in Appendix 1 and the minutes

be placed on the CCG's website by 5 pm on Thursday 4 February.

# GB 4/16 AGENDA ITEM 04: Questions from members of the public present

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

# GB 5/16 AGENDA ITEM 05: Interim Clinical Chair & Interim Chief Clinical Officer's Report

HR presented the report highlighting the key issues contained in the document.

# Floods & Weather

HR praised the response of all the emergency services and the Cumbrian communities for working so effectively together to deal with the significant disruption caused by storm Desmond.

## Changes at North Cumbria University Hospitals Trust (NCUHT)

HR advised that Ann Farrar had left NCUHT to take up a new challenge in the north east. He thanked Ann for her contribution over the last three year and wished her well for the future.

**Resolved:** The update be noted.

#### GB 6/16 AGENDA ITEM 06: Draft Health & Wellbeing Board Delivery Plan

The Chair presented the report detailing the process undertaken to produce the plan.

RP advised that the Clinical Leads Group had considered the plan in detail and had requested some amendments which had been factored into the plan.

In response to a question from JR, PR confirmed that the plan does have connectivity into the CCG's four strategic priorities.

**Resolved:** The report be noted.

**Action:** It was noted that there was a significant typing error in the data on page 2, appertaining to Promoting Breast Cancer. It was agreed this would be fedback to Colin Cox.

# GB 7/16 AGENDA ITEM 07: Commissioner Requested Services (CRS)

PR presented the report advising that all CCG's were responsible for identifying the services that would need to be continued if any individual Foundation Trust (FT) provider was at risk of failing financially. This only applied to Trusts which had achieved FT status. Therefore a CRS plan needed to be agreed for the University Hospitals Morecambe Bay NHS Foundation Trust (UHMB) and Cumbria Partnership Foundation Trust (CPFT).

Discussion ensued around the services proposed and PR confirmed that this process did need to be undertaken annually.

Proposed by Les Hanley; seconded by Peter Scott;

**Resolved:** All services at UHMB and CPFT be designated as Commissioner Requested Services for 2016/17.

## GB 8/16 **AGENDA ITEM 08: Auditor Panel**

CW presented the report detailing the requirement for all CCG's to appoint an Auditor Panel to provide advice on the appointment of their external auditors.

Proposed by Jon Rush; seconded by Hugh Reeve;

**Resolved:** The establishment of the Auditor Panel consisting of the Lay Members for Finance & Governance, Public Engagement and Health Improvement be approved.

Items 9 and 10 were deferred pending the arrival of the presenting officers

# GB 9/16 **AGENDA ITEM 11: Equality Report**

CH presented the report detailing how the CCG was meeting the requirements of the Public Sector equality duty and how equality and diversity was embedded into the organisation.

In response to a question from LH, CH confirmed that the report was a retrospective report.

**Resolved:** The report be received.

## GB 10/16 AGENDA ITEM 12: Better Care Together Overview Report

HR provided an overview of the progress made in delivering the Better Care Together strategy in Morecambe Bay (as detailed in the report). He emphasized that the scale of the clinical and financial challenge facing the health and social care community in the coming 12 months would be crucial for making sustained and transformational improvements in new care models and ways of working.

Discussion ensued regarding the reporting mechanisms in place, leadership and how the public were being engaged in a proactive and meaningful way.

**Resolved:** The report be noted.

## GB 11/16 AGENDA ITEM 09: Children Looked After

#### **Update Report**

LML presented the report highlighting the key issues contained in the report. She advised that out of the 15 priorities detailed in the Annual Report (presented to the Governing Body in October 2015) three had been completed, four were on track and six were ongoing. However it was acknowledged that there was still a lot of work to be done and there were some significant challenges ahead.

General discussion ensued and in response to a question from JR, LML confirmed that there was more than one IT system involved in accessing patient's records. She

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also confirmed that she was confident that most of the targets would be achieved within the specified timescales.

HR acknowledged the achieved improvements to date and emphasized the importance of joint working with partner organisations. He thanked everyone involved for all their hard work.

**Resolved:** The update be noted

#### **Children's Promise**

LML requested that the Governing Body Members sign up to the Cumbria Promise which would demonstrate a commitment to consider looked after children in everything they did.

LML circulated the promise cards and asked Members to complete them and return them to her via Brenda Thomas.

# GB 12/16 AGENDA ITEM 10: Mental Health Update

JH introduced herself and provided an overview of the contents of the report and detailed work undertaken to date.

General discussion ensued and concerns were expressed around the delay in the production of the Mental Health Strategy and ensuring that the development of the Strategy was undertaken in alignment with the Success Regime and Better Care Together programmes. JH confirmed that the Mental Health Strategy would be linked in to both programmes.

Discussion then took place around the requirement for public engagement/consultation. This would be dependent on the nature of any proposed changes to services which may be included in the Strategy. In response to a question from RP, JH advised that the timescales for this were yet to be determined.

In response to a question from JR, JM confirmed that there was a transferring care group overseeing the development of a Learning Disability (LD) Strategy and an update on LD would be presented to the Governing Body at a future meeting.

**Resolved:** The report be received and the direction of travel detailed in the report be agreed.

# GB 13/16 AGENDA ITEM 13: Quality Report

DR presented the report advising that the format of the report had been amended to reflect the Success Regime in the north, Better Care Together in the south and then a County wide section.

DR also outlined the draft outcomes from the review of transfers between West Cumberland Hospital (WCH) and Cumberland Infirmary, Carlisle (CIC). 10% of transfers over a six month period had been reviewed and initial findings had demonstrated that 80% of transfers were as a result of agreed clinical pathways.

JR confirmed that the Quality Report was discussed in detail at the Outcomes & Quality Assurance Committee and comparisons were made between Cumbria data available and National data. This helped the CCG to identify areas where services need to be addressed.

**Resolved:** The report be noted.

# GB 14/16 AGENDA ITEM 14: Performance Report

PR presented the report highlighting the key areas as follows:

- Improvement in 6 week referrals at North Cumbria University Hospitals Trust (NCUHT) – very close to achieving target;
- Colin Patterson supporting NCUHT cancer standards;
- It is anticipated that there may be a fall in standards in the next report due to the fire issue and floods; and
- A&E standards very testing across the County a lot of work being undertaken in both systems to address these.

**Resolved:** The report be noted.

# GB 15/16 AGENDA ITEM 15: Finance Report

#### In year Financial Position

CW presented the report advising that there was significant financial risk to the CCG if no action was taken, although the position had improved considerably since the October meeting. He stated that the CCG had established a financial recovery group to identify potential mitigating actions to address the financial risk. However a number of the schemes identified for 2015/16 were of a non-recurring nature and therefore were not going to be generate savings for 2016/17.

#### **UHMB Tariff Modification**

CW advised that both Cumbria CCG and Lancashire North CCG had continued to work with NHS England to identify potential ways forward that will be considered by all stakeholders in February.

#### **Financial Planning**

CW outlined the process involved to develop the Financial Plan for 2016/17.

**Resolved:** The report be noted.

#### GB 16/16 **AGENDA ITEM 16: Minutes of:**

Clinical Leads Group

- 17 September 2015
- 19 November 2015

**Locality Executives:** 

#### Allerdale:

12 November 2015

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• 10 December 2015

## Carlisle:

• 25 November 2015

# Copeland:

• 22 October 2015

## Eden:

• 29 October 2015

# Furness:

- 09 January 2015
- 10 April 2015
- 11 September 2015

# South Lakes:

• 10 December 2015

**Resolved:** The minutes be received for information.

GB 17/16	Agenda Item 17: Any other urgent items of business			
	There were no urgent items of business.			
GB 18/16	Agenda Item 18: Questions from members of the public present			
	Questions from members of the public and the answers are contained in Appendix 2.			
GB 19/16	Agenda Item 19: Date and time of next meeting approved:			
	The next meeting will be held on Wednesday 6 April 2016 commencing at 13:00 on Wednesday at J36 Rural Auction Centre, Crooklands, Milnthorpe, Cumbria. LA7 7NU			

The meeting closed at 16:30

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

# Sue Gallagher - Lay representative for Allerdale Locality

# <u>Ambulance Response Times in Performance</u>

Can we have more detail on Cumbria – we are commissioning the service after all?

PR confirmed that the data of ambulance response times was provided on a Cumbria basis. The Cumbrian response times were poorer than other areas in the North due to the geographic nature of Cumbria and workforce challenges. However the Cumbrian data was not broken down into specific areas in Cumbria.

# SIRMS page 29, 1.9 of the Quality Report

93% Practices signed up, 63.8% live and reporting; Is this a statutory duty and what time scale is there to get 100% implementation?

DR advised that this was not a statutory requirement although all practices were being encouraged to participate.

RP advised there was a need to improve usage and that the CCG was driving this.

## Public Engagement Meetings – Success Regime

Please could we have <u>more notice</u> of these meetings?

HR advised that the Success Regime programme was evolving and details of public engagement meetings would be advertised as soon as possible.

Appendix 2

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

# **Evelyn Bitcon**

## Agenda Items 9, 10 and 11 - Public Engagement

Evelyn Bitcon expressed concern over public engagement. She advised that the decision makers in the localities need to:

- understand what Co-production means
- needs to understand what 'Parity of Esteem' means
- what ABCD Community Cohesion means
- learn lessons about long term deprivation
- learn lessons from high suicide rates

What are we going to do to get Communities together?

JR acknowledged that there needed to be a joined up approach on engagement especially around the four main programmes of work in the County.

EB then asked how, where there are examples of good practice in services around the County, would these be rolled out?

RP advised that Colin Cox, Director for Public Health, Cumbria County Council was committed to asset based working and the CCG was fully committed to supporting this.

# **Margaret Jones**

# <u>Agenda Item 6 – Draft Health & Wellbeing Delivery Plan 2016/17</u>

Advised that she would like to raise awareness that in the CPFT there is a group called the 'Patient Experience Team' which is compiled of patients and carers who would be willing to be a focus group to support the above plan.

Governing Body Action Log June 2015 to March 2016								
ACTION REFERENCE	MINUTE REFERENCE	ACTION	OWNER	FURTHER COMMENTS	TARGET DATE	STATUS		
01/16	03/16	3 February 2016 - Agenda Item 3: Minutes of the Governing Body Meeting held on 2 December & Action Log:  Insert Evelyn Bitcon's questions and responses into the minutes of the meeting and ensure on CCG website by 5 pm on Thursday 4 February 2016.	Brenda Thomas		5 pm 04/02/16			
02/16	06/16	3 February 2016 - Agenda Item 6: Health & Wellbeing Board Develivery Plan  Details of typing error in the data on page 2 appertaining to Promoting Breast Cancer to be fed back to Colin Cox.	Geoff Jolliffe/Brenda		ASAP			