

**NHS NORTH CUMBRIA CLINICAL COMMISSIONING GROUP
MINUTES OF THE IMPLEMENTATION REFERENCE GROUP
6 December 2017, 09:30 am
Encompass Room, Energus, Workington, CA14 4JW**

Present: Kevin Windebank Lay Member Secondary Doctor (**Chair**) (KW)
Denise Leslie Lay Member for Public Engagement (DL)
Carolyn Otley Third Sector Representative (CO)
Dr David Rogers Medical Director / Interim Accountable Officer (DR)
Peter Rooney Chief Operating Officer (PR)
Sue Stevenson Healthwatch Cumbria (SS)
Celia Heasman ICC GP Lead (CH)

In Attendance: Craig Melrose Associate Medical Director, CPFT (CM)
Emma Russell Urgent Care Lead North, CPFT (ER)
Amanda Boardman GP Lead (AB)
Jennifer Lawson General Manager (JL)
Pauline Berry Business Support Assistant (PB)

IMP Ref/ **AGENDA ITEM 01: Welcome and Apologies**
07/17

The Chair welcomed everyone to the meeting and introductions were made. Apologies were received from Eve Miles.

IMP Ref/ **AGENDA ITEM 02: Declaration of Interests**
08/17

There were no Declarations of Interest.

IMP Ref/ **AGENDA ITEM 03: Minutes of the meeting held 17 November 2017**
09/17

The minutes of the meeting held 17 November 2017 were agreed as an accurate record.

IMP Ref/
10/17

AGENDA ITEM 04: Terms of Reference

The Terms of Reference had been amended as per previous meeting. There was a discussion around members who needed to be present to be quorate. It was agreed to amend the wording at Item 4 Quorum to read:

Quorum for the meeting will be a minimum of four including:

3 members from the following group:

- Either the Chair or Governing Body Lay Member for Public and Patient Engagement
- Either the ICC GP Lead or the Medical Director
- Chief Operating Officer

And

1 member from the following group:

- Either the Healthwatch Cumbria Representative or the Third Sector Representative

Action: PB to amend Terms of Reference as above.

Resolved: The Terms of Reference be agreed subject to the above amendments

IMP Ref/
11/17

AGENDA ITEM 05: Framework for Assurance

PR explained the Framework for Assurance, how it had been put together from the Terms of Reference and how it would be used. The Framework was discussed and it was agreed that 2 more sections would be added to the template. One to give details on a broader context and one for the integrity of the Consultation. All agreed this was a useful tool to use.

Action: PR will add 2 more boxes into the document as detailed above.

IMP Ref/
12/17

AGENDA ITEM 06: Community Hospital Proposals

Craig Melrose and Emma Russell joined the meeting. Craig presented the proposals for Alston, Maryport and Wigton giving an individual overview of each area. Questions were asked after each proposal.

Alston Proposal

In relation to Alston, due to staffing levels, the beds are all closed on a temporary basis therefore they are, in effect, already providing the new model. The use of 2

beds in Grizedale Nursing Home was discussed. CM gave assurance that these beds would predominantly be for Alston patients and would not be used for any Delayed Transfers Of Care (DTC) from North Cumbria University Hospitals (NCUH) for Carlisle residents. The extended Community Nursing Team in Alston would provide the nursing care to the 2 beds in Grizedale. ER gave assurance that the staff at Alston are very supportive of this new model of care. Good feedback has also been received during the Community Alliance engagement event held 2 weeks ago in Alston. ER gave assurance that since the beds have closed at Alston there is no evidence of patient harm or serious incidents. There is evidence of a quality gain. ER confirmed that there were positive discussions with the Alston GP Practice regarding a revised SLA. A training skills analysis has been completed by CLIC to ensure a level of skills set across the entire health economy in Alston and staff are expanding their skills as needed. This will link in with the ICC training in the future. Cost savings and budget splits were discussed. Savings will be made from staffing levels, estate costs and running costs.

Wigton Proposal

The proposal for Wigton was discussed. It was noted that there had been less engagement with the Community in Wigton. CM advised that 19 beds would close and 6 beds would be available at Inglewood Nursing Home. How this impacts on GP's will be worked through at a later stage. CPFT Mental Health Services are completing a piece of work as to how they link into ICC's but this is not part of these proposals at the moment. ER explained that although the building is not suitable for inpatients it is still a usable space for offices and clinics. PR gave an overview of the financial situation explaining about the £900k as outlined by the Pre Consultation Business Case (PCBC). PR will meet with CM and ER to work further on the finances focusing on the reinvestment plans and how to deliver best value with the resources available.

Action: PR, CM and ER to work together on finances.

Maryport Proposal

The proposal for Maryport was discussed. CM advised that the inpatient beds would be closed and services at the hospital would be expanded to remove the need for patients to travel for treatments. Extra consideration has been given as in this area there is poor public transport links and low car ownership. Patients will be looked after at home and if a Community bed is needed this will be provided at Workington or Cockermouth. Beds will also be available in Parkside Nursing Home. ER advised that GP's are actively involved in this model.

Overview and Alliance Plans

As discussed above. ER asked for a recommendation to start the process of change. PR advised that he will write to CPFT as soon as possible.

Community Hospital Business Case and Co-Production Report

ER presented the Business Case and Co-Production Report. A modernisation programme is required for the Community Hospitals and to enable this to happen wards will need to be closed. Various ideas were discussed including a decant ward or a virtual ward but it was agreed that this will require further discussions.

PR thanked CM and ER for the excellent presentation and for all of the work they have done in leading the development of the Implementation Plans in partnership with the local communities.

CM and ER left the meeting.

There was a discussion on the way forward. It was agreed PR will write to CPFT detailing the range of issues where greater clarification or assurance is required to enable the Group to make a positive recommendation to the Governing Body. This letter will include questions around Estates, Finance, Work Force and Access to Residential Beds.

Action: PR to write to CPFT as detailed above.

IMP Ref/ **AGENDA ITEM 07: Any other business**
13/17

Nothing discussed.

AGENDA ITEM 08: Date and Time of Next Meeting

Wednesday 24 January 2018 9 am to 12 noon Conference Room, Rosehill, Carlisle
CA1 2SE
