



# Governing Body (held in public)

Tuesday 25 July 2017 09:30 – 12:30

22 St Owens Chambers, St Owen Street, Hereford, HR1 2PL

## Minutes

	<b>Members (voting)</b>	
<b>IT</b>	Dr Ian Tait (Chair)	Chair & Clinical Lead
<b>SH</b>	Simon Hairsnape	Accountable Officer
<b>DH</b>	Dr Dominic Horne	Clinical Vice Chair
<b>DJ</b>	Diane Jones MBE	Lay Member for Patient & Public Involvement
<b>LR</b>	Lynne Renton	Acting Chief Nursing Officer
<b>JS</b>	Jill Sinclair	Chief Finance Officer
<b>FN</b>	Fiona Nikitik	Practice Manager Lead
<b>TT</b>	Prof Tamar Thompson OBE	Lay Member for Primary Care
<b>GH</b>	Graham Hotchen	Lay Member for Audit and Assurance
<b>JN</b>	Jyothi Nippani	Secondary Care Lead
	<b>Members (non-voting)</b>	
<b>RT</b>	Prof Rod Thomson	Director of Public Health
<b>HB</b>	Hazel Braund	Director of Operations
<b>LW</b>	Lesley Woakes	Director of Primary Care
<b>ME</b>	Mike Emery	Director of Corporate Development
<b>ATS</b>	Dr Alison Talbot-Smith	Director of Transformation One Herefordshire
	<b>In attendance (non-voting)</b>	
<b>GP</b>	Gillian Pearson (minutes)	Senior Business Support Officer
<b>KT</b>	Kerry Thompson	Communications & Involvement

### Meeting Quoracy

Meetings of the Governing Body will be quorate when there are six voting members present, of whom there will be:

- a) The chair or deputy chair, and
- b) Two GPs from the membership, and
- c) One of either the chief officer or the chief financial officer, and
- d) Two of the following
  - i) lay members
  - ii) secondary care specialist doctor
  - iii) registered lead nurse
  - iv) practice manager representative

## Agenda Item

### 1. Welcome and Introductions

The Chair welcomed the Public and Governing Body members to the meeting.

### 2. Apologies

Dr Sarah Newey

Dr Ian Roper

### 3. Declaration of Interests

The Chair reminded Governing Body members of their obligation to declare any interest they may have on any issues arising at committee meetings which might conflict with the business of HCCG.

Declarations made by members of the Governing Body are listed in the CCG's Register of Interests. The Register is available either via the Senior Business Support Officer or the CCG's website at the following link: <https://www.herefordshireccg.nhs.uk/library/declaration-of-interests>

All GPs and FN present declared a standing interest in relation to Primary Care and Taurus.

IT declared an interest in WVT due to his role at Bromyard Community Hospital and GP Practice is in contract with the RAAC scheme.

HB declared an interest in 2gether NHS Foundation Trust due to her role as commissioner representative on the Council of Governors for 2gether NHS Foundation Trust.

JN declared a standing interest in WVT due to her role as Associate Medical Director at South Warwickshire Foundation Trust which is a buddy to Wye Valley Trust.

ATS declared a standing interest in Wye Valley NHS Trust

### 4. Minutes of the last meeting

- March 2017

The minutes of the March meeting were approved as an accurate representation of the meeting.

- 15<sup>th</sup> June 2017

The minutes of the June meeting were approved as an accurate representation of the meeting.

### 5. Actions

*(to update the Governing Body on progress against agreed actions from previous meetings and to confirm completion of any actions since the last meeting)*

## Patient and Public Involvement

### 6a Patient Story

The Chair welcomed the patient to Governing Body to share her story of her experience at Wye Valley NHS Trust (WVT).

IT thanked the patient for informing the Governing Body of her experience with Wye Valley NHS Trust (WVT). He noted the importance of listening to the patient and open communication. The experience will be followed up to ensure the WVT learns from the patient's experience. LR will ensure that this takes place. It was proposed that this experience is presented at WVT Board to ensure that this experience is noted at the highest level. LR also advised that a formal complaint will be raised through PALS with WVT.

**6b Public Questions**

*(to receive and respond to any public questions submitted to the Governing Body)*

SH declared an interest in this question as the member of the public asking the question is a neighbour and fellow Parish Councillor.

**Question:** The Leominster Meeting Centre was set up as a joint project between Herefordshire Council and University of Worcester in order to evaluate the benefits of Meeting Centres for those affected by Dementia. That funding will shortly come to an end raising very uncertain times for those who regularly attend the Centre. The benefits that are brought to both members and their carers through information, addressing social exclusion, and the ability to continue living well with dementia is immense. However too often we find that health professionals and particularly GP surgeries fail to signpost or even know about the Leominster Meeting Centre. Yet the savings on time and resources to the NHS are easily quantifiable.

We propose to continue with the Centre if at all possible, through a mixture of volunteers, carers and a minimal number of paid Staff. So far we have attracted some community funding through various events, but are now looking to the relevant organisations to provide some funding to enable the service to continue. I would therefore ask that you consider this at your next meeting.

**Answer:** HB advised that this is part of an important piece of international research that the University of Worcestershire is leading. She confirmed that the CCG has been involved through the Mental Health lead, Jade Brooks (Deputy Director of Operations). The project is part of the wider community based initiatives to enables communities to be able to help themselves. HB proposed that the Joint Commissioning Board should be asked to review the project, and should consider the Leominster Meeting Centre alongside the similar project in Ross-on- Wye. Long term sustainability needs to be considered and how this can be supported through linkages to other services and community initiatives. An update can be brought back to Governing Body through the JCB. DJ asked that this group is linked in with HVOSS as they can access support funds from different charities. The Governing Body agreed with this proposal.

**Action –** to be added to JCB agenda and an update to be brought back to Governing Body.

There were no further questions from members of the public.

**Main Agenda**

**7 Accountable Officer Report**

*(to update the Governing Body on any key issues and decisions that have occurred since the last meeting)*

**Purpose of the Report:**

The purpose of this report is to brief the Clinical Executive on a range of issues which fall into the following categories:

- Decisions taken during the previous month
- Updates on key issues

Further information is available on all of the issues included in this paper, with lead responsibilities and monitoring sub-committees indicated for each item.

**The following key points were highlighted:**

- The Constitution had been updated.
- NHS England assurance process had finished with the CCG receiving a rating of ‘good’. This will almost certainly mean that the directions will be lifted imminently. This reflects all of the hard work undertaken by the CCG and CSU.
- Final Sustainability and Transformation Plan is ready for approval.

- Community engagement exercise had commenced. Ledbury's event is taking place this afternoon.
- The Walk in Centre function closes Friday evening. Communications are in place to ensure the public are signposted to appropriate care.
- New national guidance had been received from NHSE regarding conflicts of interest. The policy had been updated to reflect these changes.
- SH advised that the job specification had been updated for the Practice Manager Lead role and Practice Managers are to be worked with to appoint to this post. It was confirmed that FN's role will be extended whilst this process is being completed.
- SH advised that the three Worcestershire CCG's appointed Simon Trickett as their Accountable Officer.
- DJ thanked staff at the Walk in Centre for their professionalism maintaining their high standards during the last few months.
- LW advised that a phone is being added to the walk in centre building so anyone arriving is able to call NHS111 for advice and signposting. Work is being undertaken with the new providers who are moving into the sight. Refurbishment is ready to commence the first week of August. The dental access centre remains in place with services unaffected. There are press releases going into the Hereford Times to ensure that Herefordshire residents are aware of the situation.
- LW advised that the CCG will measure the impact of changing the use of the Walk in Centre. This will be reported to the Primary Care Committee. A&E Delivery Board will also be monitoring the impact to A&E.

**Recommendations to the Governing Body:**

**For Information**  **Decision**

For the Governing Body

The Committee is asked to note and comment on the items included in this report.

**The Governing Body agreed the following:**

The Governing Body noted the report.

**8 Sustainability and Transformation Plan**  
(to receive for approval the final version of the STP report)

**Purpose of the Report:**

The Governing Body is asked to:

- Approve the refreshed Sustainability and Transformation Plan (STP) for publication dated the 5<sup>th</sup> of July 2017 and agree to review the plan at least annually.
- Note that STP delivery plans will now be developed to underpin delivery of the plan as published and that it is expected these plans will be coordinated through the STP Programme Office.

Over the coming months, consider the how the role of the CCG will need to evolve in the light of the emerging Accountable Care environment that is being encouraged through national policy formulation.

**The following key points were highlighted:**

- The Governing Body were presented with the final version of the STP.
- This had been taken to a joint meeting of the Health & Wellbeing Boards.
- This document had been through a robust engagement process.
- IT advised that we are acknowledging that mental health and parity of esteem is being built into

the STP going forwards and is important to the CCG.

**Recommendations to the Governing Body:**

**Decision**

To approve the refreshed Sustainability and Transformation Plan (STP) for publication as a final document.

**The Governing Body agreed the following:**

The Governing Body approved the refreshed STP on the understanding that an update on the funding is presented to the Governing Body in three months.

9

**Financial Plan**

*(to update the Governing Body on current medium term financial plan)*

**Purpose of the Report:**

This report provides an update to the Governing Body on the revised CCG budget for 2017/18 and any other financial issues.

**The following key points were highlighted:**

- RTT target was a challenge to the health economy. Additional resource had been received to achieve better outcomes and delivery for the population. £2.9m additional deficit had been agreed by NHSE to address this. This will need to be repaid in future years. Improved trajectory has to be seen through a Memorandum of Understanding via a block agreement with WVT.
- GH queried the impact on future years? JS advised that CCG is revisiting the medium term financial plan. Further work is required in the STP financial modelling to including the amended deficit control total. All projects within the STP document need to become live and deliver this year.
- HB stressed how positive this additional £2,9m deficit to address RTT issues is for Herefordshire residents.
- IT thanked JS and her team for their hard work and everyone who contributed to this.

**Recommendations to the Governing Body:**

1. The Governing Body is asked to approve the revised budget for 2017/18, noting the significant risks to the delivery of the plan.
2. Budget managers have signed off their budget sheets by 31<sup>st</sup> March 2017.

**The Governing Body agreed the following:**

The Governing Body noted the recommendations.

10

**Learning Disabilities Mortality Review (LeDeR)**

*(to receive an update on the LeDeR programme)*

**Purpose of the Report:**

This report is to inform the Governing Body of the LeDeR programme, its aims and the actions that are being taken for local implementation

**The following key points were highlighted:**

- The CCG already supports system-wide mortality reviews.
- The LeDeR programme is an in depth focus on learning disability mortality. This is because the expected life expectancy of someone with a learning difficulty can be 20 years less than the average age.
- The LeDeR programme is a national programme. A steering group had been established with

governance arrangements in place.

- Learning, themes and trends will be taken to the Quality and Patient Safety Committee and then through to Governing Body to ensure premature mortality can be avoided.
- Practices' have a learning disability register as part of their enhanced services. Training is required to ensure that practitioners are up to date on best practice. LR advised that when Primary Care Commissioning came in to to the CCG, the CCG became aware that this training hadn't taken place for the last three years. Training had now been arranged and links had been made with the Local Authority to ensure that registers are up to date.

**Recommendations to the Governing Body:**

**For Information** ☒

The Governing Body is asked to NOTE the contents of this paper and actions that are being taken to implement the programme in Herefordshire

**The Governing Body agreed the following:**

The Governing Body noted the recommendations.

11

**Health Commission with Kington Town Council**

**Purpose of the Report:**

1. To seek approval for an Independent Health Commission to oversee the redesign of Adult Community Services in Kington and its surrounding area.
2. To seek ratification of the Terms of Reference for the Health Commission.

**The following key points were highlighted:**

- Town and Parish Council to work with the CCG as critical friends.
- The draft terms of reference were highlighted to the Governing Body.
- The first meeting is to take place on Thursday.
- Parish Councils had been engaged with.
- View from Town Councillors is that the voting and non-voting membership is removed.
- Town Councils had been written to regarding the community services engagement asking how they would like to be involved. Parish Councils are included in this.
- There is no substantive representation of Primary Care within this group. ATS advised that membership had been discussed with the Town Council and had agreed that Primary Care will be included under subject matter experts and are to be invited when relevant.
- ATS advised that the timeframe will dovetail with the CCG community services engagement work.
- ATS advised that providers had been contacted by the CCG and/or the Mayor of Kington. Providers will be engaged with the CCG engagement work.

**Recommendations to the Governing Body:**

**Decision** ☒

1. To approve the establishment of an Independent Health Commission for Kington through the Town Council, with additional involvement of the surrounding Parish Councils.
2. To ratify the Terms of Reference.

**The Governing Body agreed the following:**

The Governing Body approved the recommendations.

**Break -11:10**

## 12 Performance & Assurance Reports

### a) Quality Update

#### **Purpose of the Report:**

To outline the major quality issues for the CCG, presenting a range of services and details current actions and next steps for areas of concern

#### **The following key points were highlighted:**

- It will be challenging to meet the new national targets for E-coli blood stream infections. A backward view had been undertaken and a system wide improvement programme plan developed. This will include frail elderly people and looking at the hydration campaign.
- Looked after children – Herefordshire are an outlier nationally. The CCG is responsible for the healthcare of these looked after children; a number of which are placed out of county. A national agreement is now in place to ensure that each area provide healthcare for looked after children with the expectation that the parent CCG will fund the healthcare.
- Child protection information sharing process had been developed by NHSE. Working with the LA, 2g and WVT to implement a national system to ensure staff are notified if a child has a child protection plan or are in the looked after system. This is only applicable to children in England. LR advised that discussions are taking place with Powys regarding information sharing. LR confirmed that the GDPR will not impact on these changes.
- Wound management and healing concerns had been raised by Primary Care. WVT had been met with and a system wide wound management service is being developed. A joint CCG, WVT and Primary Care formulary is in place and clinics are now being looked at.
- Working closely with Admiral Nursing Service to employ nurses who have specialist expertise in dementia to support families and carers to support people living with dementia. The Alzheimer's Society is involved in this process.
- LR advised that the CCG encourages it's Trusts to report serious incidents to ensure that learning can be taken from these and improvements made. Benchmarking takes place against incidents and not numbers to ensure that good reporting continues. The most frequently reported incidents reported are pressure ulcers and information governance breaches.

#### **Recommendations to the Governing Body:**

##### **For Information** ☒

The Governing Body is asked to note the contents of this paper

#### **The Governing Body agreed the following:**

The Governing Body noted the report.

### b) Month 3 Finance Report & QIPP Update

#### **Purpose of the Report:**

This report covers the financial position for Herefordshire Clinical Commissioning Group for the period April to June 2017.

#### **The following key points were highlighted:**

- £4.5m deficit control total is on track to deliver.
- Slightly ahead of the QIPP savings to date.
- Underlying positions remains at a surplus for this year.

- Achieving financial balance piece of work is being undertaken to ensure the CCG meets its control total in year, identify risks and mitigate these.
- JS advised that plans are based on the outrun position with an element of growth built in.

**Recommendations to the Governing Body:**

1. The Governing Body notes the month 3 position and associated risks as detailed in the report together with the mitigating actions that are underway.
2. The Governing Body is requested to advise of any further actions that the Finance team should be taking to enable the 17/18 control total to be met.

**The Governing Body agreed the following:**

The Governing Body noted the report.

**c) Performance & Assurance Report**

**Purpose of the Report:**

To provide the HCCG Governing Body with the latest available performance information and associated actions on the key risk areas.

**The following key points were highlighted:**

- Conversations are taking place with WVT to determine how the £2.9m is to be invested to improve the RTT targets. WVT will be performing below trajectory for the first few months as this investment had only just been received.
- Front door primary care screening process is being worked through to be in place from September.
- There is a lot of work taking place currently regarding delayed transfers of care.
- Cancer performance is good in April and sustained in May. The 62 day wait was not delivered to the CCG but was for WVT. This is due to issues regarding reporting at Gloucestershire which is resulting in delays in waiting times. The CCG is to formerly write to Gloucester asking for full information to be released on cancer and non-cancer. The priority will be around cancer patients and long waiters. During the performance meeting with NHSE this issue will be raised asking them to link with their colleagues in the South.
- Work on stroke continues.
- Working with the IST who are in the process of providing the CCG with support.
- Performance is improving regarding the dementia target.
- HB advised that schedule 6 of the contract includes the data set that is required from the Trust. The Trust is fully engaged with reporting. Schedule 6 is being received in full.

**Recommendations to the Governing Body:**

**Decision** ☒

The Committee is asked to note the report and make any recommendations for further actions to mitigate risk.

**The Governing Body agreed the following:**

The Governing Body noted the report.

**d) Corporate Risk Register & Governing Body Assurance Framework**

**Purpose of the Report:**

The purpose of this report is to provide the Governing Body with an update on the Corporate Risk

Register and Governing Body Assurance Framework.

**The following key points were highlighted:**

- Issues at Gloucester need to be recorded on the risk register.
- Cyber-attacks had been recorded on the risk register and potential impacts that this may cause.
- Assurance Framework – audit review on risks registers had taken place.

**Recommendations to the Governing Body:**

**Assurance/review** ☒

The Committee is asked to note and comment on the Corporate Risk Register and Governing Body Assurance Framework

**The Governing Body agreed the following:**

The Governing Body noted the reports.

### Items for Information

**13 Governing Body Committee** (updates and minutes)

- FPR Committee (March, April, May, June)
- QPS Committee (March, April, May, June)
- Clinical Executive (March, May, June)
- Joint Primary Care Commissioning Board (March)
- Primary Care Committee (June)

Primary Care Committee papers are included for April and June. Choice agenda had been reviewed and are required to nominate a Governing Body lead for Patient Choice. The Governing Body agreed that this role should be fulfilled by the Lay Member for Patient & Public Involvement.

- Communications & Involvement Committee (March, July)

A task and finish group is required to widen the remit and membership of PPG events.

- Audit Committee (March, April, May)

The Governing Body noted these Committee updates.

**14 Multi-agency Groups** (updates and minutes)

- Joint Commissioning Board (March, April, May, June)
- Health & Well Being Board (March, May, June)

The Governing Body noted these Committee updates.

### Other

**15 Any Other Business**

There were no further items for discussion.

The Chair closed the meeting.

*To resolve that representatives of the press and members of the public be excluded from the remainder of the meeting having regard to the confidential nature of the business to be transacted, publicity on which would be prejudicial to the public interest. (Section 1 [2] Public Bodies [Admission to Meetings] Act 1960)*

### Dates of Future Meetings:

Date	Time	Venue
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26 <sup>th</sup> September 2017	09:30	Russet Room, St. Owen's Chambers, 22 St. Owen Street, Hereford
28 <sup>th</sup> November 2017	09:30	Russet Room, St. Owen's Chambers, 22 St. Owen Street, Hereford
23 <sup>rd</sup> January 2018	09:30	Russet Room, St. Owen's Chambers, 22 St. Owen Street, Hereford
27 <sup>th</sup> March 2018	09:30	Russet Room, St. Owen's Chambers, 22 St. Owen Street, Hereford