

Minutes ratified on
11 July 2017

**MINUTES OF A MEETING OF THE
EXECUTIVE COMMITTEE
Tuesday 27 June 2017 at 2.00pm
Silk Room, MLMs**

PRESENT:

Andrew Bennett	Chief Officer
Lauren Dixon	GP Executive Lead – Women and Children
Dr Cliff Elley	GP Executive Lead – Commissioning
Hilary Fordham	Chief Operating Officer
Anthony Gardner	Director of Planning & Performance
Dr Alex Gaw	Clinical Chair (Chair)
Dr Jim Hacking	GP Executive Lead – Urgent Care and Mental Health
Kevin Parkinson	Chief Finance Officer/Director of Governance
Margaret Williams	Chief Nurse

Action

99/17 APOLOGIES FOR ABSENCE

Apologies of absence were received from Dr Geoff Jolliffe, Vice Clinical Chair, Dr Andy Knox, GP Executive Lead - Health and Wellbeing and Dr Andy Maddox, GP Executive Lead - Contracting, Finance and Quality

100/17 DECLARATIONS OF INTEREST

Declarations of interest were made by Clinical Executives relating to item 102/17a) GP 5YFV £3 per head, 105/17 – Enhanced Primary Care/QIS Contract Replacement, 106/17 – Primary Care Estates Strategy and 107/17 – Extended Hours (8-8) update, on the Executive Committee agenda.

Declarations declared by members of the Executive Committee are listed in the CCG's Register of Interests. The Register is available on the CCG's website.

101/17 MINUTES OF THE MEETING OF HELD ON 13 JUNE 2017

The notes of the meeting held on the 13 June 2017 were agreed as a correct record with one amendment. Item 85/17 second paragraph, page 4 which began 'Andrew updated the group that the CCB'. He wished it to say that 'Chief Officers felt they had been surprised regarding this piece of work'.

102/17 **MATTERS ARISING INCLUDING REVIEW OF THE ACTION SHEET**

- a) **GP 5YFV £3 per head** - Kevin updated the group that he had written to the two Federations and to the LMC regarding the £3 per head allocation and to receive some feedback to inform how the CCG would utilise the funding.

Action Sheet

The action sheet was reviewed and updated as follows:-

60/17b – **Better Care Together** – Action complete

63/17 – **Future of Commissioning** – on-going

88/17 – **Enhanced Primary Care Scheme 2017-18** – first action complete. Second action for Cliff Elley had also been complete and he noted that the LMC has also been notified.

89/19 – **Enhanced Primary Care/QIS 2018-19** – this item was on today's agenda for discussion.

91/17 – **GP 5YFV Investment** - this item was on today's agenda for discussion.

103/17 **STANDING ITEMS**

a) **Quality update**

Margaret Williams talked to the paper that had been circulated. She updated the group that good progress was being made with the three care homes that had been under scrutiny by CQC and she felt that they would soon be in a much more positive position. She noted that the issues regarding CQCs requests on mental capacity and DNA CPR documentation would be taken to the Lancashire Quality Surveillance Group.

The group were informed regarding the backlog of DOLS applications particularly in the Cumbria area and the impact that this was having on Care Homes. CQC had advised that as long as the application had been made and that homes could evidence that the application had been made the backlog in Cumbria County Council would not have an impact on their CQC ratings. Hilary Fordham asked who was raising these issues with Cumbria County Council and whether the CQC was doing that directly. Margaret Williams believed that they were.

Margaret Williams (MW) raised the issue of an extended 12 hour breach for a 79 year old mental health patient in A&E in recent weeks and the concerns that this had raised. A full 'route course analysis' was being undertaken and the outputs would be reported back in a future quality report.

MW also raised the issue of workforce concerns across the Bay and there was discussion regarding the need to consider how this would be mitigated should a service that was vital to the area become at risk of failing. A senior nurse forum was being set up in order to consider plans for this.

b) STP & Better Care Together

Andrew Bennett said that he would take these two items together. He talked through a presentation which Amanda Doyle, as the lead for the STP, had recently given regarding a number of items:

- The NHSE and NHSI Memorandum of Understanding which the STP was currently considering.
- The proposed changes to the STP Governance arrangements
- The initial STP aims and objectives.

As Andrew discussed the presentation which had been given a number of issues were discussed. These included:

- The relationship between local LDPs and STP.
- How shared decision making would be undertaken across an STP footprint; the joint committee of CCGs provided this for CCGs to make joint decisions but how would that be shared with Acute Providers and Local Authorities.
- The functionality of the Joint Committee of CCGs.

Andrew acknowledged that there would need to be a discussion at the July Governing Body regarding a number of areas that had been raised.

The progress on BCT was then discussed and Andrew described a workshop which had taken place the previous week with the ACS Leadership Team considering what the ACS structure should look like by April 2018. A number of issues were again discussed including how the proposed shift to community focused services would be achieved and the situation of primary care within the Accountable Care System and how this would be managed and come to fruition.

104/17 FINANCE

Kevin Parkinson updated the Executive Committee on a number of issues and outlined the issues within the paper which had been circulated regarding the current financial position to the 31 May 2017. The areas covered included, the QIPP process and the support from the national team; the CEP and its progress; the work of PWC and the Bay Sustainability Board and issues related to a number of investments which the CCG had put aside for use during this financial year and whether or not these should be continued given the financial position of the CCG.

These were all discussed at some length and the Executive Committee asked the Directors to consider a number of areas and come back with some proposals regarding further savings and issues related to the investments which had been originally identified.

ALL

105/17 ENHANCED PRIMARY CARE/QIS CONTRACT REPLACEMENT

Kevin Parkinson had developed a short paper setting out the proposed approach to developing a replacement to the Enhanced Primary Care and QIS Contract for 18-19. This was agreed as a way forward with the exception that Jim Hacking had been identified as GP from the South Lakes Locality, not Cliff Elley.

106/17 PRIMARY CARE ESTATES STRATEGY

Kevin Parkinson outlined a number of issues which had arisen with regards to Estate across the patch, most of these related to Primary Care but it was also believed there may be issues related to estate for community services in the South Cumbria area which were at this present time unknown to Morecambe Bay Executive members.

It was agreed that Kevin Parkinson & Hilary Fordham would commence a discussion regarding an Estates Strategy for the South Cumbria area.

KP/HF

107/17 EXTENDED HOURS (8-8) UPDATE

Kevin Parkinson gave an update on the position with regard to the 8-8 services. Lancaster and Morecambe PDS as the lead provider had been asked to give an update on the position with regard to service development and this was awaited. In South Cumbria a small group was being developed to provide a bit more formality to the development of the services and a paper had been issued to Practices by the Federation setting out some possible options for the delivery of extended access. By mid-July Kevin hoped there would be a summary of the position to come back to the Executive.

108/17 OUT OF HOSPITAL – LEADERSHIP PROPOSALS UPDATE

Alex Gaw updated the Executive on the paper that had been written with regard to integrated services management for when community services are transferred from CPFT to be hosted by UHMBFT. It was explained that a meeting had taken place the previous Thursday with a number of Chief Executives and the paper would be slightly updated following this. Generally ICCs had been happy with the concept, it was also agreed that once the paper was updated Alex would re-circulate and include the LMC in that circulation list.

AG

109/17 CLINICAL LEADS UPDATE

This had been circulated following its deferment from the last meeting. Most of the positions had now been filled; there was still work on going

regarding the Quality and Safeguarding role. Discussion took place regarding whether or not given the CCG's financial position the two areas of End of Life and Health and Well Being that were outstanding, could be covered in alternative ways. It was agreed that they probably could and these would be explored by Hilary Fordham and Anthony Gardner over the next few weeks.

HF/AGd

Cliff Elley raised an issue regarding the Cancer Lead who had been concerned at the move of responsibility from one senior manager to another and also the amount of time that would be available for the Lancaster and Morecambe Clinical Lead once the MacMillan funding finished in October. These issues would be picked up directly with the individuals concerned.

110/17 **BETTER CARE TOGETHER MENTAL HEALTH INTEGRATION**

Jim Hacking gave an update on the work that was progressing with regards to mental health integration and described the model that was being proposed. A workshop was being planned for September to bring ICC Leads together with a number of providers of mental health services to discuss how the integration model would work. Kendal ICC had also agreed to continue their involvement with piloting the model and moving the work forward. It was agreed that the model would be presented to the two ICC Lead Groups and also to the ICC Steering Group.

111/17 **REFUGEES**

Alex Gaw raised a number of issues regarding refugees and their allocation to the area. Hilary outlined that the CCG had not had any say in the allocation of refugees to the area and when they had asked for some alterations based on clinical need this had been turned down. It was asked if each of the refugees could have a mental health assessment when they arrived as it was felt that this would be helpful to the GPs who would be taking this on. Hilary outlined that there would be a paper coming to the next Executive meeting on refugees to fully outline the position and also in preparation for it to go the Governing Body.

112/17 **DRUG FUNDING**

Alex Gaw raised an issue concerning rebates and sponsorship regarding drug funding. It was confirmed that the CCG has a Policy in place which covers issues of sponsorship.

113/17 **WHISTLEBLOWING POLICY**

Kevin Parkinson presented this item. It was a new policy for Morecambe Bay CCG. The Executive recommended that it go forward to the Governing Body for approval.

114/17 DRAFT GOVERNING BODY AGENDA – 18 JULY 2017

One additional item was added, Commissioning Policies for approval. The integrated mental health proposal which Jim had presented earlier was also agreed to be put on the agenda. There would be no further items added to the Governing Body agenda.

115/17 ANY OTHER BUSINESS

a) Out of area GP registrations

Alex Gaw confirmed the information requested had been provided to the GP who had raised the query.

116/17 DATE AND TIME OF NEXT MEETING

Tuesday, 11 July 2017 at 2.00pm in the Silk Room, Moor Lane Mills, Lancaster.