

**MINUTES OF A MEETING OF THE  
EXECUTIVE COMMITTEE  
Tuesday, 12 November 2019 at 2.00pm  
Silk Room, Moor Lane Mills, Lancaster**

**PRESENT:**

Dr Sarah Arun	GP Clinical Executive
Dr Lauren Dixon	GP Clinical Executive
Hilary Fordham	Chief Operating Officer
Anthony Gardner	Director of Planning and Performance
Dr Jim Hacking	GP Clinical Executive
Gareth James	Chief Finance Officer/Director of Governance
Dr Geoff Jolliffe	Clinical Chair
Dr Rahul Keith	GP Clinical Executive
Margaret Williams	Chief Nurse

**Action**

**267/19 APOLOGIES FOR ABSENCE**

Apologies for absence were received from Jerry Hawker, Chief Officer and Dr Andy Knox, GP Clinical Executive.

**268/19 DECLARATIONS OF INTEREST**

There were no declarations of interest made specific to this meeting. 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.

**269/19 MINUTES OF THE MEETING OF HELD ON 22 OCTOBER 2019**

Minutes of the meeting held on 22 October 2019 were agreed as an accurate record.

**270/19 MATTERS ARISING INCLUDING REVIEW OF THE ACTION SHEET**

**Action Sheet**

225/19 – this has now been completed. Geoff Jolliffe would write to Aaron Cummins, as the Chair of A/E Delivery Board and it would be picked up again at the Leadership Team. Action closed.

254/19 – Gareth confirmed that he had discussed this issue with

Hilary and obtained an update and was now in the process of discussing it further with the finance and BI teams and would bring back a proposal shortly.

255/19 – on the agenda and can be closed after this meeting.

257/19 – Margaret Williams gave an update with regard to the safeguarding clinical leadership position which she had discussed with the Clinical Executive and agreed a way forward, which was to look for additional sessions from existing Doctors. The item needed to remain open as the changes still needed to be communicated to staff.

258/19 – would come to the next meeting

259/19 - would come to the next meeting

## 271/19 **FINANCE/QIPP**

Gareth James updated on the current position for 2019/20. He updated the Executive of the position that was being reported as a risk to NHS England currently which was that the CCG was likely to record a £2.5m deficit at the end of the year. The CCG continued to work to reduce that. A recovery plan for the System was required for submission tomorrow and he updated the Executive that the System position remained forecast for £5.5m deficit over and above the control total; this included the CCG deficit and the Trust deficit of £3m.

He then went on to say that there were a number of risks in the system that he wished to highlight:

- 1) **Prescribing** – the CCG had received month 4 figures and these suggested a significant overspend at the end of the year if the spending continued in the same direction. There were a number of mitigating actions that were being put in place to reduce and try and address this issue.
- 2) **CHC & High Cost Packages** – although the number of packages had not increased the average cost seems to have gone up by circa. £1,000 per month and this was leading to a forecast deficit of £2m at the end of the year. Again there was work to be undertaken; looking at CHC in detail, but there was also a request to look at wider High Cost Packages.
- 3) **Contract with UHMBFT** – at present this was very slightly underspent but there were concerns as we head into winter as to whether this would also become a pressure area.

Gareth then went on to talk about the current planning round, which was focused on the long term plan and achievements of the finance trajectories that had been provided to all organisations.

The CCG was planning to achieve its trajectory by 2023/24 although it was felt that the first two years of this would be particularly difficult given the way in which the trajectory had been balanced and the CCG was looking for support on that as it did not believe that it would break even during 2020/21. This position had been submitted and the CCG was awaiting feedback on that position.

As a System the position was increasingly difficult as the Trust was reporting a distance from its trajectories in common with most of the rest of the providers across Lancashire and South Cumbria.

Gareth and Gary O'Neill then went on to describe the work that was being undertaken to develop a QIPP programme now for 2020/21. It was believed that the CCG currently had plans for about half the QIPP that was required which placed it in a good position in this year for delivery in 2020/21.

## 272/19 **ALL AGE EATING DISORDER SERVICE**

Julia Westaway attended for this item. Julia presented the paper and set out the background. A paper had been received at the previous Executive meeting and a number of areas had been highlighted for clarification. These were the service specification that was being put in place and confirmation that the £25,000 that should have been within the LSCFT budget was actually to be available.

Julia went through the detail of the service specification, setting out that there was to be work undertaken to look at a single service specification across Lancashire and South Cumbria ICS so at the present time Morecambe Bay would not be developing its own service specification, it would be utilising the adult and children's service specifications which were currently available and adding an addendum to them setting out the areas that it wished to see changed within those, particularly to include those children and adults for patients registered with GPs in South Cumbria.

She then went on to describe the work that had been undertaken on the Standard Operating Procedure and a number of issues were raised particularly relating to physical health checks on people who were being monitored by the service. She would pick these up specifically with LSCFT.

She then went on to describe the work that had been undertaken to identify the funding that had previously been available for the Children's Eating Disorder Service within Lancashire North and confirmed that the reset of the budget lines for LSCFT had identified that there was sufficient money within the budget line to ensure that no additional funding was required from the Mental Health Investment Standard.

The Executive then went onto approve the Service Specification and

the recommendations that were being made with regard to changes to the document and approved the investment of the £280,000 from the Mental Health Investment Standard now that the £25,000 had been identified within the LSCFT budget.

273/19 **MSK CASE FOR CHANGE**

Gary O'Neill attended for this item. Anthony Gardner introduced the item by saying that the model that was being proposed had been discussed a number of times at previous Executive meetings for the rollout of the referral assessment service to all referrals that were being made to non UHMBFT providers. This was on the back of the success of the service for UHMBFT referrals which was currently showing a deflection rate of 59%.

There was some discussion regarding impact on other services for example first contact physiotherapists and it was agreed that the model in totality needed to work together to make sure that the flow of patients was appropriate.

There was then some discussion regarding practical considerations which were noted for agreement and discussion by the Project Steering Group.

After some discussion and consideration of the paper the Executive agreed the additional funding that was required to extend the service and ensure that the iMSK service could take referrals that were heading for non-UHMBFT sources.

274/19 **DESIGNATED CLINICAL OFFICER: SOUTH CUMBRIA**

Hilary introduced this item by reminding the Executive that a previous paper and one that had gone to the Governing Body had highlighted the fact that the team would be coming back to look for additional funding for designated clinical officer time within South Cumbria as a result of the SEND inspection.

Julia Westaway then explained the detail related to the need to improve the service within South Cumbria and to align it from an equity point of view with the service that was provided within Lancashire North and the rest of Lancashire.

After some discussion the Executive agreed the additional £7,500 that was required.

275/19 **CHILD BE REPORT**

Margaret Williams introduced this item by saying that this was a summary report related to the Serious Case Review findings and the learning that had been taken from the very unfortunate incident and how the named GP for Safeguarding Children, Amy Lee had taken the work forward, particularly with Primary Care.

The Executive discussed the paper and noted its content and thanked Amy and the team for the work that they had undertaken.

## 276/19 **STANDING ITEMS**

### a) **Quality and Safeguarding - Key Messages and Exceptions**

Margaret Williams introduced the quality and safeguarding report. She highlighted a number of areas including:

- 0-19 Service in Lancashire North and the changes to sharing of records that had occurred as a result of the tender process which Lancashire County Council had undertaken. This had been escalated both within the CCG and was now also being escalated to LCC and Virgin Health Care.
- The temporary closure of beds at the Ramsey Unit
- The achievement of the CHC target for undertaking DSTs outside of an acute setting that had been achieved in October for the first time in several months.
- UHMBFT Urology investigation and the point that had reached.
- The guidance that had been received relating to out of area placements for LD patients. A report would come back to a future Executive meeting.

### b) **ICP Development**

It was noted that the ICP development event had taken place the previous Wednesday. A number of next steps had been agreed. Particularly the write up of the outputs by the PMO and follow up discussion between Lead Executives and the facilitators to take the outputs forward.

### c) **ICS Update**

Geoff updated the group that he and Jerry had attended an Accountable Officer and Chair's development session the previous Friday. Again a number of actions had been agreed and there would be a write up which would be presented back to the necessary forum within the CCG and ICP.

### d) **Mental Health Update**

Anthony updated the Executive that we were now 6 weeks post the transfer of mental health services to LSCFT. It appeared that some relatively good progress was being made and the services were relatively stable.

He did identify again the temporary closure of some beds at the Ramsey Unit although this was not felt to be related to

LSCFT having taken over the unit, it was felt more to be LSCFT identifying issues which had not been dealt with prior to the transfer.

He confirmed that the Cumbria Mental Health Board (CMHB) had met for the final time and handed over its work now to the SC Cumbria Mobilisation Group. At the meeting the CMHB had acknowledged the clearness and clarity of the commissioning intentions issued in 2017 and how these assisted the ultimate achievement of the transfer.

The SC Cumbria Mobilisation Board will continue to work/meet until at least April 2020 to ensure that services continue to move forward. It was acknowledged that already the progress on the development of the eating disorder service had been facilitated by the transfer of mental health services to a single organisation.

**277/19 ITEMS FOR THE NEXT AGENDA**

There were no agenda items put forward.

**278/19 ANY OTHER BUSINESS**

Margaret Williams updated the Executive that one of the Primary Care Practices had had a recent CQC report and been found to be inadequate. An action plan was being put in place and the primary care team and the quality team were working together to address the issues that had been raised with the Practice.

**279/19 DATE AND TIME OF NEXT MEETING**

The next Executive Committee is at 2.00 pm on 26 November 2019 in the Silk Room, Moor Lane Mills, Lancaster