

**MINUTES OF A MEETING OF THE  
EXECUTIVE COMMITTEE  
Tuesday, 22 October 2019 at 2.00pm  
Silk Room, Moor Lane Mills, Lancaster**

**PRESENT:**

|                   |                             |
|-------------------|-----------------------------|
| Dr Sarah Arun     | GP Executive Lead           |
| Hilary Fordham    | Chief Operating Officer     |
| Jerry Hawker      | Chief Officer               |
| Dr Geoff Jolliffe | Clinical Chair              |
| Dr Rahul Keith    | GP Executive Lead - Quality |
| Margaret Williams | Chief Nurse                 |

**Action**

250/19 **APOLOGIES FOR ABSENCE**

Apologies for absence were received from Dr Lauren Dixon, Anthony Gardner, Dr Jim Hacking, Gareth James and Dr Andy Knox.

251/19 **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.

252/19 **MINUTES OF THE MEETING OF HELD ON 8 OCTOBER 2019**

Minutes of the meeting held on the 8 October 2019 were agreed as a correct record.

253/19 **MATTERS ARISING INCLUDING REVIEW OF THE ACTION SHEET**

**Action Sheet**

225/19 - the letter had not been written yet to the A&E Delivery Board although the action itself had been discussed as part of the ICP Leadership Team. It was agreed that Hilary Fordham would attend the next Clinical Leadership Team if she was available and take the names of the leads to relate to each particular priority.

245/19 - the finance report was on the agenda. Complete.

248/19 b) - Any Other Business was on the agenda. Complete.

254/19 **RESOURCE UTILISATION**

Helen McConville and Kate Hudson attended for this item. Hilary explained the background that the Executive Committee had received a previous version of this data for 2017/18. The background to the piece of work was that the CCG wished to start work with ICCs/PCNs on understanding the finance utilisation for their populations against activity with a view towards moving towards indicative budgets for ICCs and PCNs but this could not be undertaken without a detailed understanding and support from CCG finance and BI staff.

This presentation was being given today to the Executive Committee for discussion on how it was being presented and the wider context issues that might need to be considered pending a larger presentation to ICC and PCN leads towards the end of November/ beginning December.

Helen and Kate went through the presentation. A raft of useful discussion was undertaken and comments were made on the presentation. One area that required further consideration was the finance framework which would support this work – if ICCs / PCNs were to undertake work and change patterns of behaviour as a result, how would the financial framework support the change in funding patterns needed as a result. This would be picked up with Gareth James for discussion at Directors.

**GTJ**

It was agreed the next steps would be as Hilary Fordham had described in the introduction.

255/19 **ALL AGE EATING DISORDER SERVICE**

Liz Dover attending for this item. She explained the background; that historically commissioning and provision of eating disorder services across the Bay had been fragmented with a number of different pathways and providers of the service. The transfer of mental health services on the 1 October had given the opportunity to look at a single service for the Bay providing all age support in an appropriate manner. Work had been undertaken with LSCFT to describe the future model. A number of options had been put forward. Option 3 the provision of a full service across the Bay was the preferred option.

Liz then went on to explain that the funding arrangements enabled the service to commence if the Executive Committee could confirm their agreement that the funding set aside in the mental health investment standard for 2019/20; £280k could be utilised for this purpose. The Executive Committee was alerted to a small gap in funding provision which had been highlighted due to changes with the Garstang provision. This gap was highlighted as £25k. Discussions were underway with LSCFT and Fylde and Wyre CCG to try to

resolve this. The Executive Committee agreed however that if this could not be resolved the service would need to be cut accordingly to take account of the lower level of funding that was available.

The Executive Committee then went on to discuss whether a service specification should be brought back to the Executive Committee to be signed off. It was agreed that that should happen.

Actions agreed were that:

- Discussions with the Trust could continue on the basis that the mental health investment standard funding was available.
- The funding in the MHIS should be confirmed by Liz Dover
- The gap of £25k should be negotiated with LSCFT and managed through that process otherwise the funding would need to be reduced accordingly.
- The service specification should be brought back to the Executive Committee at its next meeting on the 12 November 2019.

HF

#### 256/19 **PODIATRY SERVICE - ENGAGEMENT**

Withdrawn the previous week.

#### 257/19 **CLINICAL LEADERSHIP IN THE CCG**

Jerry Hawker presented this item and outlined the discussions that he had undertaken with Dr Jim Hacking, Dr Rahul Keith and Dr Sarah Arun regarding roles and responsibilities and the documentation that had been produced as a result.

The documentation set out lead Executive roles and where there was a clinical lead who that person would feed into in terms of the Executive lead. This left a number of gaps that needed to be filled most notably relating to the provision of IPA services. It was agreed that post should be appointed to.

Margaret Williams updated the group that the Quality and Safeguarding Lead Dr Charlotte Hutchinson had this week handed in her notice and so that gave her an opportunity to look more broadly at a post which might have an IPA and Quality and Safeguarding role. She was encouraged to undertake that discussion with the Clinical Executive. It was agreed that in the meantime once Dr Cliff Elley retired at the end of November that Dr Sarah Arun would provide cover from a panel perspective.

The Executive Committee then went on to discuss the further proposal that was being put forward that Dr Lauren Dixon and Dr Andy Knox would no longer attend Executive Committee meetings within the CCG. Their roles would be become more focused on the system. They would however still need to attend Governing Body and Membership Council meetings. The Executive Committee agreed that would be a sensible way forward to enable them to have

more time to deliver the system wide work that they were being asked to do.

There was then a discussion about how the change would be explained to staff working in the CCG; that they still retained their CCG responsibilities even though they were not attending Executive Committee meetings. Jerry Hawker agreed that once the process had been formalised he would communicate the changes to staff.

**JEH**

258/19 **CCG QUALITY, ASSURANCE AND ACCOUNTABILITY FRAMEWORK**

Margaret Williams introduced this item setting out that this framework had been updated and presented to the Governing Body in February 2019 but further work had been undertaken on it to include the quality improvement approach that the CCG was looking to undertake.

There was then a discussion regarding the documentation particularly the language that was used and there was some concern raised in terms of the mixed language through the document. There was also a reference to Gareth James taking on the role and responsibility of the lead for the assurance frameworks in future and it was agreed that there should be a meeting between Jerry Hawker, Margaret Williams and Gareth James to take forward how this framework would be developed in the future.

**JH/MW  
& GTJ**

259/19 **RISK MANAGEMENT STRATEGY AND POLICY**

This document was presented by Margaret Williams as a draft Risk Management Strategy and Policy. After some discussion it was again agreed that this would be discussed as part of the meeting agreed in the previous item.

**JH/MW  
& GTJ**

260/19 **ASSURANCE FRAMEWORK AND RED RISK OCTOBER UPDATE**

Margaret Williams introduced this item as the assurance framework update that would go to the Governing Body in November. She highlighted the fact that one risk had been increased in its risk rating; the ability to deliver NHS constitutional standards. This would be reported to the Governing Body. It was highlighted that one of the things that perhaps still needed to be included in the report was the risk tolerance level but the report was agreed to go to the Governing Body in November.

261/19 **IPA OVERDUE REVIEWS PROJECT**

Margaret Williams presented this item with the support of Jerry Hawker setting out the work that had been undertaken by the ICS wide project on CHC to understand the breakdown of overdue reviews for CHC fast track and FNC patients. The overdue reviews for Morecambe Bay were about a quarter of the total although the majority for Morecambe Bay were FNC reviews rather than CHC.

The paper set out the requirement for the CCG to invest in supporting a team from CHS Health Care Limited to undertake a programme of reviews over the next 18 months. Their funding would be spread across the remainder of this financial year and into 2020/21.

Concern was raised given the level of reviews that were required and the fact that this process of 'catching up on reviews' has been undertaken several times before, but we have returned to the same position; what is the process for preventing the situation from arising again. Jerry Hawker and Margaret Williams assured the Executive Committee that the wider piece of work of work to re-design the model for CHC provision should address the issues and prevent the problem from happening again. Although it was acknowledged that additional investment in how CHC is managed would need to result in order to make that prevention.

A question was also raised regarding confirmation on the figures and whether these were felt to be accurate or whether the numbers would rise further given the concerns that had been raised previously about the information system used in the CSU. Again assurance was given that the numbers were accurate at a point in time. They would obviously rise and fall with demand.

A further question was raised regarding the ability to recruit staff to undertake this work and again the Executive Committee were assured that CHS Limited had been commissioned to undertake this work and they would be responsible for sourcing the staff. There would also be phasing of the work starting firstly with CHC patients across the patch based on the pilots of the work that had been undertaken in Morecambe Bay previously and a pilot of FNC would be undertaken again in Morecambe Bay to test out the probable impact and the way in which the process should be undertaken.

Following discussion of these particular items the Executive Committee agreed the funding and also agreed that the funding for 2020/21 should be put on the investment/pressures list.

#### 262/19 **QIPP UPDATE**

Jerry Hawker gave a very brief introduction to the paper which had been produced by Gary O'Neill. This was received and noted by the Executive Committee.

#### 263/19 **STANDING ITEMS**

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

Margaret Williams gave an update on the situation with regard to urology services and the independent review that was being undertaken.

**b) ICP Development**

Jerry Hawker reminded the Executive Committee of the workshop which was to take place on the 30 October supporting the Boards of the various organisations to discuss future arrangements for the ICP.

**c) ICS Update**

Jerry Hawker updated the Executive Committee on a workshop he had attended on governance and decision making for the ICS. It had proved to be a very good workshop and had helped locally to design the workshop that would be undertaken in Morecambe Bay on the 30 October.

He also updated the Executive Committee that he had attended a Task and Finish Group with regards to the current ICS governance where a number of recommendations had been made to improve those arrangements and to make them more robust.

**d) Mental Health Update**

No further updates at this meeting.

**264/19 ITEMS FOR THE NEXT AGENDA**

No items were raised for the next agenda other than the All Age Eating Disorder Service specification being returned.

**265/19 ANY OTHER BUSINESS**

There were no items of any other business.

**266/19 DATE AND TIME OF NEXT MEETING**

The next Executive Committee is at 2.00 pm on 12 November 2019 in the Silk Room, Moor Lane Mills, Lancaster