**NORTH EAST LINCOLNSHIRE CLINICAL COMMISSIONING GROUP GOVERNING BODY**

**MINUTES OF THE MEETING HELD ON THURSDAY 13 JUNE 2019 AT 2.30PM**

**TOWN HALL, GRIMSBY**

**PRESENT:**

Mark Webb NEL CCG Chair

Tim Render Lay Member Governance and Audit

Dr Peter Melton Chief Clinical Officer

Philip Bond Lay Member Public Involvement

Helen Kenyon Deputy Chief Executive

Joe Warner Managing Director – Focus independent adult social care work

Rob Walsh Joint Chief Executive

Dr Ekta Elston Medical Director

Laura Whitton                                       Chief Financial Officer

Dr Sudhakar Allamsetty GP Representative

**APOLOGIES:**

Dr Renju Mathews GP Representative

Jan Haxby Director of Quality and Nursing

Stephen Pintus Director of Public Health, NELC

**IN ATTENDANCE:**

Eddie McCabe Assistant Director of Contracting & Performance

Helen Askham PA to Executive Office (Minutes Secretary)

1. **APOLOGIES**

Apologies were noted as above.

1. **CONFLICTS OF INTEREST**

Dr Peter Melton and Dr Ekta Elston notified the Chair of their conflict regarding PCN’s as they are partners in a GP practice.

1. **APPROVAL OF MINUTES**

The minutes of the Governing Body held 28th March 2019 were agreed to be a true and accurate record.

1. **MATTERS ARISING**

All matters arising were noted.

1. **CORPORATE BUSINESS PLAN**

The Governing Body were presented with a report regarding the items for action in the NELCCG’s Corporate Business Plan for 2019/20.

The Corporate Business Plan has been developed with the engagement of all service leads, building on work undertaken in previous years to delivery key strategic aims. The Corporate Business Plan will also form the basis of the refresh to the CCG’s Five year Strategic Plan which will be developed in conjunction with North East Lincolnshire Council and the Union Five Year Plan.

The Governing Body were updated that following advice, the CCG have carefully considered the available commissioning capacity in order to ensure the actions identified are reasonably achievable within the timeframe available. The Plan also outlines collaborative working with North Lincolnshire CCG, commenting that they may take a lead on a service area, with NEL CCG taking a lead on others.

Work has already commenced to deliver the actions identified in the plan, and monitoring mechanisms are in place with the CCG Senior Leadership Team, and the Delivery Assurance Committee.

The Governing Body discussed the Adult Services Review, and it was reported that this item will in future be on the Union Board agenda.

PM noted that member practices and the ccg should be aligning businesses and PCN plans as part of the planning process. The information has been sent to PCN’s to inform their plans, link our corporate plans to their’s as we have done with the STP.

**Action: HK to update QUIPP / NL&G information on the Corporate Business Plan.**

***The Governing Body ratified the NELCCG Corporate Business Plan for 2019/20.***

1. **LONG TERM PLAN**

The Governing Body were presented with a report which outlined the key focus of the NHS Long Term Plan.

The Long Term Plan sets out the vision for the NHS or the next ten years. The Governing Body were assured that the CCG has the right processes and plans in place to respond to the ambitions set out in the Long Term Plan at each stage, collaborating with local and regional stakeholders to deliver against the timelines articulated. The plan sets out the NHS national ambitions to improve care for patients; Making sure everyone gets the best start in life; Delivering World Class care for major health problems; and Supporting people to age well.

NELCCG has reviewed its position against all of the ambitions set out in the Long Term Plan and reflected this in its Corporate Business Plan for 2019/20. This will be incorporated into the Five Year Plan that is being produced for the Union priorities. Areas for emphasis that the CCG will be picking up in the short term include Development of the Primary Care Networks; Improving access to diagnostics; Actions arising from the Adult Social Care Review; Urgent Treatment Centre implementation.

The next step is to create a renewed CCG strategy for 2019-2024 to align this with work and service configuration across Humber Cross and Vale. This work will be completed by September 2019 and the five year strategic plan for Humber Cast and Vale and will be brought back to the Governing Body after October 2019.

The Chair endorsed the work around the Long Term Plan, and the continued focus on place in all of the CCG’s forward planning.

**Action: The Five Year Strategic Plan for HCV will be brought back to the Governing Body.**

***The Governing Body noted the content of this report.***

1. **NORTHERN LINCOLNSHIRE SYSTEM PLAN 2019/20**

The Governing Body were presented with a paper regarding the Northern Lincolnshire System Plan 2019/20, which was agreed at a meeting where the level of financial and delivery risk within the system for 2019/20, and the steps take to address these challenges during the year was discussed.

The 2019/20 plans submitted by the members of the Northern Lincolnshire system in April 2019 presented a £12.5 million system planning gap from the aggregate system Control Total requirement. Following the meeting an offer was made to close the gap, it was agreed that the total spend be reduced by £2m and that performance trajectories outlined in the report would be adhered to. This is a system wide response to financial and delivery risk. Work is currently being carried out to understand the detail of what this means for each system, and how we can work together to achieve savings results. Weekly meetings are also being held with the operational team, and not just finance staff. The Governing Body noted the potential increase risk for the CCG.

Chair’s action was taken to agree to the offer due to the tight timescales involved. The Accountable Officer noted that this was a difficult decision to take, but took the view to agree and act as a cohesive credible leadership team. The regulators financial offer was something that has not been offered to other CCG’s.

**Action: The Chair noted the need for reporting to provide assurance to the Governing Body, and ongoing updates will be provided at future meetings.**

***The Governing Body noted the report regarding the Northern Lincolnshire System Plan 2019/20.***

1. **ALERT BOARD TO CHAIR’S ACTIONS IN RELATION TO RATIFICATION OF ANNUAL REPORT / FINAL ACCOUNTS**

The Governing Body were informed that Chair’s Action had been taken to approve the final accounts, which were submitted on the 24th May 2019. A link to the Annual Report / Accounts will be circulated to the Governing Body members. Staff were congratulated on finalising the accounts, and completing a large amount of work on tight deadlines

**Action: Thanks are to be passed on to the team for their hard work.**

**Action: A link to the Annual Report / Accounts will be circulated to the Governing Body.**

***The Governing Body noted the Chair’s action taken.***

1. **WORKFORCE UPDATE**

The Chief Executive, Rob Walsh, noted that the Governing Body have not had an opportunity to discuss their priorities regarding priorities for Work force challenges; from issues of recruitment; opportunities; how to attract people to the area; discuss what we need to focus on for the local are etc.,

**Action: A Governing Body Workshop will be held to discuss Workforce concerns.**

***The Governing Body noted the Update regarding Workforce concerns.***

1. **BOARD ASSURANCE INCORPORATING IG AND AUDIT COMMITTEE ANNUAL ASSURANCE REPORT**

It was noted that the CCG Constitution requires that an annual report be produced by the Integrated Governance and Audit Committee, for consideration by the Governing Body. A report has been circulated which outlines that the National Auditors Office Assurance Committee Effectiveness Checklist has been used to assess and provide assurance to the Governing Body of the effectiveness of the committee over the past 12 months to March 2018.

**The Governing Body considered and noted the annual report.**

1. **ALLIANCE UPDATE**

The Governing Body were presented with a paper to provide them with an update in relation to the development of an Alliance model to support delivery of Integrated Urgent and Emergency Care for the population of North East Lincolnshire.

The Governing Body noted that the CCG are in a clearer position of where we are in the process to establish an Alliance agreement. The first phase of delivery was to commence in June 2019 with the implementation of an Urgent Treatment Centre. The original proposal was to have all partners formally sign the alliance agreement by the end of June 2019. However, with the announcement of the national requirement for GP practices to come together to form Primary Care Networks (PCN’s) covering population of between 30-50 thousand people, the focus of General Practice has moved to the establishment of the PCN’S, to be formally established with effect from 1st July.

NELCCG need to continue conversations with the Federations to agree the most appropriate vehicle for Primary Care.

It was noted that whilst a short delay in getting the alliance agreement signed, there would be no delay to the implementation of the 1st element of the Integrated Urgent Care specification – the Urgent Treatment Centre, which should become operational by the end of June.

NELCCG will ask IG&A for a view of the final document before a final sign off.

**The Governing Body noted the work that has been undertaken in relation to the establishment of the Integrated Urgent Care Alliance, and agreed to extend the timing for the formal sign off of the agreement by all partners to the end of July 2019, to allow PCN’s to complete the work they need to do to become established and hopefully re-engage with the Alliance.**

1. **QUALITY REPORT**

The Governing Body were presented with a report, which was taken as read. The purpose of the report is to share the quality oversight and assessments of assurance, non-specific to providers, with the CCG Governing Body.

*Laura Whitton left the meeting.*

NELCCG reported that all three subgroups of the Clinical Governance Committee meeting met for the first time after the close of 2018/19 Quarter four. The three subgroups have been set up to oversee the safety, effectiveness and experience work streams of the CCG and to report to the Clinical Governance Committee on this.

The Governing Body noted that Provider profiles have been developed which will be utilised at each of the review groups to enable scrutiny and oversight of our largest activity providers in terms of quality.

*Laura Whitton re-joined the meeting.*

The Looked After Children Safeguarding Report noted a significant rise in numbers of Looked After Children, and the impact of this on the ability of the Health LAC team to meet the health performance standard for LAC. This is a complex issue with a number of reasons for the increase. The Governing Body noted that the Union Board are monitoring the amount of work being carried out to improve services.

**The Governing Body noted the contents of the report.**

1. **COMMISSIONING, CONTRACTING AND INTEGRATED ASSURANCE REPORT**

The Governing Body were presented with a report, which was taken as read. A new report style has been introduced which follows on from ensuring that we are providing all the information to the Governing Body, to provide assurance that we have robust contracts in place. The report focuses on major providers, and key service, finance and performance issues for major contracts to highlight work going on to address key risks and developments.

The Governing body were updated that NL&G are to instigate a radical change to the process for Out Patient appointments across seven defined specialities, with the aim of a significant reduction in not necessary appointments. The Trust and CCG’s will operate a joint programme to include consultation, planning, implementation with all stakeholders. The aim is to reduce the level of follow up appointments that are not clinically necessary, freeing up capacity for patients who need to be seen for ongoing treatment or for first outpatient appointments.

The Trust and CCG’s have agreed a programme to review High cost drugs to ensure that local practice is in line with national changes. The Trust will follow a national purchasing rules and look at a move to biosimilar to save costs to the Trust and to the CCG’s.

The signed contract value for NEL CCG remains at £113m.

The Governing Body noted the performance as set out in the report.

The Governing Body were updated regarding the EMAS contract and Ambulance Response Targets. EMAS are not able to deliver on their targets until the end of the financial year. Meetings are being arranged to discuss and understand the performance trajectory. It was noted that some improvements have been made, but there is still improvements required in certain areas. The Governing Body discussed how other providers compare to EMAS, the Governing Body were assured that NELCCG will look at any potential benefit to contract changes.

NEL CCG are working with Navigo over the next year regarding Mental Health planning targets, ensuring that placements and finances are managed with regard to what has been outlined in the Mental Health Five Year Plan.

**The Governing Body noted and accepted the issue within the report and the associated risks and developments identified.**

1. **FINANCE REPORT**

A paper was presented to the Governing Body to update on the financial position including the final year end position, including the outturn on QIPP and the financial risks that need to be managed in the remainder of the year. The paper was taken as read, with the following highlighted to the Governing Body.

The Governing Body noted that the CCG have applied a consistent approach to that used all year in calculating our assessment of the outturn. With regards to Adult Social Care, the CCG had to draw down £578k from non-recurrent reserves held at NELC in order to break even in 2018/19. Savings achieved for QIPP is £71k higher that the target.

The key points of the 2019/20 budget were noted. The EMAS contract value is expected between £6.3m – £6.4m, £500k above the value quoted in the March board report. The level of unidentified QIPP has reduced to £17k and the report summaries each of the key areas.

**The Governing Body noted the financial position as at March 2019 including the year end QIPP position; the latest 2019/20 budget position, in particular in relation to any changes resulting from the agreement of contracts for the year and an update on the QIPP schemed.**

1. **UPDATES**

**STRATEGIC ISSUES UPDATE**

The Governing Body were updated further with regards to PCN’s, noting that there are 29 PCN’s across the Humber, Coast and Vale footprint. NELCCG are proposing to apply to a national accelerator scheme for PCN’s.

**COMMUNITY FORUM**

The Community Forum have recently held discussions on the PCN’s, and their potential impact.

The Governing Body discussed and agreed the recommendation for a Vice Chair, due to the demands on our volunteer’s time. An election will be held at the next meeting in July, and the information will be brought back to the Governing Body.

**COUNCIL OF MEMBERS**

The Governing Body were informed that the Chair of Council of Members should be appointed in July, following an election process, and that the format of the meeting has changed slightly to quarterly formal meetings, with informal workshops in-between.

**JCC / ICP / STP UPDATE**

The Governing Body were informed that a Director of Acute Collaborative Commissioning has been appointed.

1. **ITEMS FOR INFORMATION**
2. Union Board meeting minutes 280119

The Union Board meeting minutes 280119 were noted.

1. Humber JCC Annual Report

The Humber JCC Annual Report was noted.

1. HCV STP Partnership Update

The HCV STP Partnership Update was noted.

1. Primary Care Commissioning Committee meeting minutes 041218

The Primary Care Commissioning Committee meeting minutes 041218 was noted.

1. Primary Care Commissioning Committee meeting minutes 290119

The Primary Care Commissioning Committee meeting minutes 290119 was noted.

1. Primary Care Commissioning Committee meeting minutes 260319

The Primary Care Commissioning Committee meeting minutes 260319 was noted.

1. Care Contracting Commissioning Committee meeting minutes 130319

The Care Contracting Commissioning Committee meeting minutes 130319 was noted.

1. Care Contracting Commissioning Committee meeting minutes 200319

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1. Care Contracting Commissioning Committee meeting minutes 080519

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1. IG&A Committee meeting minutes 141218

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1. Delivery Assurance Committee meeting minutes 121218

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1. Delivery Assurance Committee meeting minutes 270219

The Delivery Assurance Committee meeting minutes 270219 was noted.

1. **QUESTIONS FROM THE PUBLIC**

*As a consequence of the NHS Long Term Plan expectation that streamlined commissioning arrangements “will typically involve a single CCG for each Integrated Care System area”:*

* *Has consideration yet been given by the Humber, Coast and Vale Health and Care Partnership to the potential amalgamation of CCGs?*
* *Would the CCG be mindful to support or resist the formation of a single HCV CCG?*
* *Would the local legacy of effective integrated place based commissioning and the existence of the Union be sufficient to guarantee that the specific health and care needs of North East Lincolnshire residents are appropriately prioritised by any such mega CCG?*

Dr Melton responded that he felt the four CCG’s in the Humber area had good working relationships with the Local Authorities, and NELCCG also have the Union, to ensure the CCG are being sensible and pragmatic in identifying services which can be achieved at Place, or on a larger scale.

The feedback Dr Melton is hearing is that people accept and recognise the challenge of when you are too small to do something on your own, and where required, will work with partners at a Humber, STP or broader scale. NELCCG are responding to the challenge and working with the STP. There are also things that North/North East Lincolnshire can work together on.

Dr Melton commented that we must protect the place; the political situation is currently unknown but at the moment place based commissioning within the Humber geography makes the most sense.

The Chair commented that if collaboration is good for the community, that would be the main consideration.

1. **DATE AND TIME OF NEXT MEETING**

Thursday 12th September, 2019, at Humber Royal Hotel, Grimsby