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

**MINUTES OF THE MEETING HELD ON THURSDAY 13 SEPTEMBER 2018 AT 2.00PM**

**HUMBER ROYAL HOTEL, 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

Jan Haxby Director of Quality and Nursing

Helen Kenyon Deputy Chief Executive

Dr Thomas Maliyil GP Representative/ Chair Council of Members

Joe Warner Managing Director – Focus independent adult social care work

Rob Walsh Joint Chief Executive

Dr Rakesh Pathak GP Representative

Dr Arun Nayyar GP Representative

Dr Ekta Elston Medical Director

**APOLOGIES:**

Laura Whitton                                       Chief Financial Officer

Stephen Pintus Director of Public Health, NELC

**IN ATTENDANCE:**

Helen Askham PA to Executive Office (Minutes Secretary)

1. **APOLOGIES**

Apologies were noted as above.

1. **CONFLICTS OF INTEREST**

No conflicts of interest were recorded.

1. **APPROVAL OF MINUTES**

The minutes of the Partnership Board meeting held March 2018 were agreed to be a true and accurate record.

1. **A LOOK BACK ON THE PREVOUS YEAR: OUR VISION, A LOOK FORWARD**

The Chair welcomed all to the meeting, and congratulated the NHS on its 70th anniversary. The Chair noted the many achievements in healthcare and medical advances over the last 70 years. There are many challenges facing the NHS today which are similar to those that the NHS faced at its establishment. North East Lincolnshire Clinical Commissioning Group and North East Lincolnshire Council are addressing these issues differently, by working with partners to provide services across our region.

The Governing Body were informed that the NEL CCG have been assessed as Good under the CCG Improvement and Assessment Framework.

An update regarding Quality was provided, with the following highlighted to the Governing Body. With regards to Safety; Work has been undertaken regarding the triangulation of CCG intelligence, listening and responding to concerns raised across the system (NITS) with a focus on clinical hard from excessive waiting and infection prevention and control. With regard to Effectiveness; Mortality and Learning Disabilities Mortality reviews are being undertaken to improve clinical care, visits have taken place to seek assurances, and the alignment of clinical policies across the Humber CCG’s are taking place. Positive experiences of patient stories and people’s experiences of services are being listened to.

As the Quality team look forward to 2018/19, the team aim; to continue to improve the systems and processes, data and reporting in respect of the 3 areas of quality and clinical governance, and closer working with the Council in these areas; to address the challenging targets in respect of infection prevention and control; to focus on areas of concern; lead development with all providers to improve quality and focus on professional nursing issues.

An update regarding Financial Performance was provided, with the following highlighted to the Governing Body. It was reported the that CCG; achieved all of its statutory duties; delivered a NHS required surplus of £8.1m; delivered a break even position on Adult Social Care; managed cash within notified Cash Limit; delivered running costs expenditure within target; paid 95% of supplier invoices within target; and delivered savings across Health and Social Care of £6.1m in the financial year.

An update regarding Performance was provided. Notable successes include an 18% reduction of delayed transfers of care year on year; 87.1% of adults and older clients receiving a review; permanent admissions to residential and nursing care both achieved target; and the proportion of adults and Carers who received self-directed support both achieved target. The Governing Body noted the integrated approach from providers and congratulated all involved for the joint working. The CCG reported that care plans, and the right support systems for patients being discharged from hospital are being put in place. However, improvements still need to be made regarding discharge documentation.

Notable successes for Mental Health were also noted, with increased diagnosis rates for people with dementia, and targets being achieved for IAPT. All 2 week and 31 day waiting times targets have been achieved. There has been a sustained reduction in antibiotics and broad spectrum antibiotics prescribed in Primary Care.

The challenges regarding performance are the IAPT recovery rate, in Mental Health and the GP referral target for Cancer, however the CCG are expecting the purchasing of new equipment to make a difference to patient care. A&E waiting times continue to be an area of concern, along with Consultant-led referral to treatment waiting times. The CCG are working closely with the Trust and providers to address these concerns.

The Chair thanked members of the Governing Body, noting that despite the complex and detailed issues that the CCG staff are concerned with, no one has shrunk from their responsibilities to address these issues. The Chair thanked all staff for their continued efforts and consistent support, noting that the team are dedicated and committed to their work.

1. **PUBLIC DISCUSSION – QUESTIONS WELCOME**

A member of the public asked about savings that the CCG make. The CCG responded that savings are made where possible; be it in prescribing; support to care homes, QIPP savings; any savings made are a saving to the whole community.

A member of the public asked if patients were allowed a choice of care, be it residential care, or to stay at home and receive care at home. The CCG responded that they support very expensive packages of care, and that the CCG try to work with individuals to understand how patients can be supported most effectively.

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

13th December, 3.30 – 4.00pm, Social Enterprise Centre, 84 Wellington Street, Grimsby.