

Please note: These minutes remain in draft form until the next meeting of the North East Lincolnshire Clinical Commissioning Group Governing Body on 13 June 2019

**NORTH EAST LINCOLNSHIRE CLINICAL COMMISSIONING GROUP GOVERNING BODY  
MINUTES OF THE MEETING HELD ON THURSDAY 28 MARCH 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
Jan Haxby	Director of Quality and Nursing
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
Stephen Pintus	Director of Public Health, NELC

**APOLOGIES:**

Dr Thomas Maliyil	GP Representative/ Chair Council of Members
Dr Rakesh Pathak	GP Representative
Dr Arun Nayyar	GP Representative

**IN ATTENDANCE:**

Joanne Hewson	Chief Operating Officer
Eddie McCabe	Assistant Director of Contracting & Performance
Dr Renju Mathews	GP Representative
Helen Askham	PA to Executive Office (Minutes Secretary)

**1. APOLOGIES**

Apologies were noted as above.

**2. CONFLICTS OF INTEREST**

No conflicts of interest were recorded.

**3. APPROVAL OF MINUTES**

The minutes of the Governing Body held 13<sup>th</sup> December, 2018 and Partnership Board meeting held 8<sup>th</sup> November 2018 were agreed to be a true and accurate record.

**4. MATTERS ARISING**

All matters arising were noted.

**5. CHANGES TO THE GOVERNING BODY MEMBERSHIP**

The following changes to the Governing Body were noted:

**Mark Webb** – contract has been extended to 31<sup>st</sup> March 2022, following a decision taken by Council of Members and the Remuneration Committee.

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**Philip Bond** – contract extended to 31<sup>st</sup> March 2021, a period of 2 years following guidance from the constitution, the Chair of COM and the Chair of Governing Body.

**Dr Rakesh Pathak** and **Dr Arun Nayyar's** contract has come to the end of the 3<sup>rd</sup> year term.

**Dr Sudhakar Allamsetty** and **Dr Renju Matthews** are taking on the new Governing Body GP representative roles, following an Expression of Interest process, enacted by the Local Medical Committee (LMC) in accordance with the process and requirements determined by the Council of Members.

**Dr Sudhakar Allamsetty** has been a GP in North East Lincolnshire for 10 years, and is a Partner at Scartho Medical Centre, Grimsby. He has a particular interest in Education, Cardio-vascular medicine, and is a GP Trainer for The GP Training Scheme in North East Lincolnshire and Foundation Doctor Trainer for HYMS. He has worked as the Prescribing Clinical lead, and Caldicott Guardian for NELCCG in the past. Sudhakar brings experience in working in different health care settings, including India and USA, and is passionate about the NHS and ensuring it provides high quality sustainable care to patients.

**Dr Mathews** has been a Full Time Principal GP for 10yrs at Dr Mathews surgery based in Stirling Medical & Cromwell PCC. His practice area covers a diverse range of Health inequalities. He has led positions of Clinical lead in Mental Health & Disability & continues to have GP lay member roles in sub committees within the CCG.

The following roles remain vacant:

**GP Representative / Chair of COM** – we are still to appoint for this role.

**Secondary Care Doctor** – will be advertised now that we have a new HR service in place at the CCG.

## **6. NEW MODEL CONSTITUTION REPORT**

A paper was presented to the Governing Body regarding the launch of the new model constitution for CCG's which reflects changes that have taken place since the introduction of the first CCG model constitution in 2012. One of the key objectives throughout the review process was to ensure that the new version supported CCG's in developing integrate or collaborative working arrangements.

Key changes were highlighted to the Governing Body, and although there is no set deadline for the adoption of the new model, the CCG are aiming to bring the updated constitution back to the Governing Body in six months' time. The Update constitution will take into consideration the developing partnership arrangements, and will be aligned with the refresh of the five year plan which is due to be published later in the year.

**Action: The updated Constitution will be brought back to the November meeting of the Governing Body.**

**The Governing Body approved the recommended proposals below:-**

- **North East Lincolnshire CCG during 2019-20 to replace the existing constitution with the new model constitution, this will reduce the amount of information in the constitution and therefore reduce the number of amendments required.**
- **Recommend to the Member practices to delegate the internal approval of changes, that are not material, to the Governing Body**

## **7. ANNUAL REVIEW OF GOVERNING BODY'S COMMITTEE'S TERMS OF REFERENCE**

A paper was presented to the Governing Body to formally ratify the terms of reference for the Governing Body committees, as set out in the constitution.

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Governing Body members were updated that further changes may be made to strengthen and shape the Integrated Governance & Audit committee. A piece of work is currently being carried out to understand the work of each committee, with a map of governance being produced which will be discussed at the next Governing Body meeting.

**Action: The map of Governance update will be provided at the next meeting of the Governing Body.**

**The Governing Body agreed and ratified the Committee's Terms of Reference.**

## **8. BOARD ASSURANCE FRAMEWORK**

A paper was presented to the Governing Body regarding the CCG Board Assurance Framework. The Framework acts as a high-level risk identification system and provides a structure and process that enable the CCG to focus on the principle risks to achieving its strategic objectives. The Board Assurance Framework highlight gaps in control, gaps in assurance processes and details of necessary action to be taken.

The Chair asked for clarification that when talking about risk, all involved are talking the same language. The Governing Body were assured that the Senior Leadership Team and service leads have extensive training and discussions take place to ensure there is a consistent approach.

The Governing Body discussed how risks are linked to public health outcomes, and where responsibilities sit in relation to the delivery of services. The Chair noted that this was the fundamental purpose of NEL CCG, and part of it's statutory responsibilities, ownership and oversight

The Governing Body were updated that a piece of work is currently being undertaken which maps the sub-committees of the Governing Body, along with the Governance and Accountability. This will be brought back to a future Governing Body workshop to discuss governance arrangements, in order to provide assurance to the Governing Body.

The Governing Body queried the risk, BAF 3005, and were informed that a process was put in place to provide assurance at the System Improvement Board, due to the Trust being in special measures.

**Action: The map of Governance update will be provided at the next meeting of the Governing Body.**

**The Governing Body noted the update provided; the review of the BAF and identified any gaps, and the level of assurance received by the CCG, in relation to its strategic risks and comment where appropriate.**

## **9. ALLIANCE AGREEMENT**

The Board were provided with a paper to update on the progress in relation to the development of the Alliance model and agreement that is being developed to support delivery of Integrated Urgent and Emergency Care for the population of North East Lincolnshire.

This report is not to provide assurance to the CCG as the strategic commissioner, as the Governing Body's Care Contracting Committee oversees the assurance process. The Care Contracting Committee are assured that sufficient progress is being made. The next submission is due at the end of March 2019.

In order to ensure that all partners, that will be involved in the delivery of integrated urgent care, are operating under the right governance arrangements the Alliance has developed a structure and process to facilitate joint working. The parties involved are currently considering what this means to them as providers. NLAG are holding informal conversations to remain part of the Alliance, which is seen by all involved as a positive step.

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The Governing Body discussed risks and contingency arrangements. Contracts with organisations in the Alliance are due to be in place by the end of the financial year 18/19, for a one-year period. Longer-term contracts are to be in place after the one year period. The contracts are signing up providers to the Alliance process, in order for providers to work together.

The Governing Body noted that a resource has been allocated to the Alliance. NEL CCG are currently acting as the “banker” but this will develop over time to become an organisational-led budget. Assurance regarding delivery against performance, and financial targets, will be provided at the Delivery Assurance Committee.

The Governing Body asked for assurance, through the Care Contracting Committee, in terms of potential challenges from other providers, and risks associated with service delivery and finances. It was agreed that the Alliance would be discussed further at a future Governing Body Workshop.

**Action: An update on the Alliance agreement will be held at the next Governing Body Workshop.**

**The Governing Body requested for further discussion regarding entering into an alliance agreement with the other partners for the delivery of Integrated Urgent and Emergency Care.**

## **10. EU EXIT PREPARATIONS**

A paper was presented to the Governing Body to provide an update of the current EU Exit planning work being undertaken by the CCG. The paper was taken as read.

NHS England have commenced with daily situation reporting, and have requested that the CCG also complete a separate assurance return by 25<sup>th</sup> March 2019.

**The Governing Body noted the contents of the Operational Guidance relating to EU Exit and accompanying action plan. The Governing Body notes and approves the risks identified and action taken detailed at Annex C of the report.**

## **11. OPERATIONAL PLAN**

A paper was presented to the Governing Body, and taken as read. The CCG’s Operational Plan is currently in draft form, further work is currently underway for the final submission scheduled for the 4<sup>th</sup> April 2019. The following points were highlighted to the Governing Body.

The Governing Body were updated regarding the In Hospital Medical Assessment Model and nationally mandated “zero tolerance” on ambulance handover delays.

It was noted that referral to treatment times are a key consideration for the CCG in the coming year. The CCG are looking to put in place a process to give anyone who is waiting 26 weeks for elective care a choice of an alternative provider. The CCG plan to set 40 weeks as our longest wait in 2019/20, but with an aspiration to get that down to a 26 weeks maximum wait by the end of the financial year. The Governing Body noted that these were significant pieces of work to undertake to improve services.

**Action: A joint session on Mental Health regarding support and correct responses at a local level to take place.**

**The Governing Body notes and approves the current position in relation to the Operational Plan for the CCG for 2019/20**

*Dr Mathews left the meeting.*

## **12. BUDGET 2019/20**

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A paper was presented to the Governing Body to discuss and approve the 2019/20 Budgets and to note the key risks. The following points were highlighted to the Governing Body.

The Governing Body discussed the CCG's compliance with NHS Business Rules. North East Lincolnshire Clinical Commissioning Group received an uplift of 5.04%, lower than the national average of 5.65%. Just under half 45% of the uplift is not new funding and relates to Provider Sustainability Funding and Agenda For Change pay award.

With regards to the delegation of Primary Care, the CCG uplift of 4.57% compares to a national average of 6.57%.

The Governing Body were informed that plans are underway to ensure that the CCG makes the required 20% savings to running costs by 20/21.

Adult Social Care budget allocation has been considered within the Council's budget planning programme.

The Governing Body noted that the CCG are waiting for further guidance linked to the impact of the top slice on the Primary Care Delegated Allocation. The regional CCG's have collectively raised concerns that this appears to have resulted in CCGs not having been provided with adequate resources to fund the planning requirements. The Chief Finance Officer is taking advice on how the CCG can challenge this decision.

A contract value with Northern Lincolnshire and Goole NHS Trust has been agreed, as outlined in the Commissioning and Contracting Report. It was noted that where contracts have yet to be signed the budgets relating to contracts are at the current contract offer position and are subject to change until contract sign off. It was noted a reserve has been set aside to cover any additional costs.

Work is being undertaken to identify schemes for the residual savings of £767k .

The Governing Body noted that in order to comply with the Mental Health Investment Standard the CCG needs to spend 5.7% more on mental health in 2019/20, than it did in 2018/19.

**Action: The Governing Body asked for an update to be provided regarding the position of contracts that are yet to be finalised.**

**The Chair agreed to take Chair's Action to formally approve the 2019/20 Budgets.**

### **13. INTEGRATED ASSURANCE AND QUALITY REPORT**

A paper was presented to the Governing Body, and taken as read. The following issues were highlighted to the Governing Body.

Regarding Maternal Smoking at delivery; North East Lincolnshire has significantly higher rates of smoking prevalence than other areas in the county and smoking rates at booking are the second to third worst in the UK. Due to the poor performance in this area, maternal smoking has now been added to the CCG risk register.

The Governing Body were informed that due to the way services are aligned and provided, North East Lincolnshire, performance data cannot be captured on the Mental Health Services data set submission therefore an accurate picture of performance in this area cannot be obtained. The CCG are working with NHSE to identify a solution to address this.

The Governing Body were informed that following the inspection of the local area to assess our effectiveness in implementing the SEND reforms, progress regarding the work being carried out will now be being reported at the Union Board meetings.

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*Rob Walsh left the meeting.*

The Governing Body were updated with Quality Escalations. Two providers across the North East Lincolnshire healthcare system are on an enhanced level of quality surveillance. A CQC inspection has taken place at Thames Ambulance Service Limited (TASL) and the service was rated inadequate. The CCG have mechanisms in place to enable contract challenge and oversight. The EMAS divisional performance against the ARP standards remains to not be satisfactory. Further information is required to assess the risk of this position and the local impact.

*Rob Walsh re-joined the meeting.*

The CCG have been give the quality oversight role for Bradley Complex Care Unit, following a number of concerns. Regular meetings have been arranged to ensure oversight.

**The Governing Body noted judgements made against the domains of the dashboards; further feedback on ways to improve the report; and the information on Women's and Children's update.**

#### **14. COMMISSIONING AND CONTRACTING REPORT**

A paper was presented to the Governing Body, and taken as read. The following issues were highlighted to the Governing Body.

The NHS 111 contract was awarded to Yorkshire Ambulance Service and is currently mobilised for a 1<sup>st</sup> April start. The NHS 111 has changes linked to the delivery of Urgent Care changes such as direct booking in to practice appointments for patients who have spoken to and been triaged by a doctor or nurse through NHS 111, this will be in place for in hours or out of hours. This development will evolve alongside changes to the GP contract and the development of the Urgent Treatment Centre, and will be closely monitored.

The contract for Supported Living has gone out under a framework contact arrangement.

The Musculoskeletal Framework contract had gone out to the market with the revised specification agreed by the Council of Members, the framework contract has been awarded to those providers outlined in the paper.

The CCG is working with NLAG and North Lincolnshire CCG to address issues of capacity and demand alongside a significant financial risk within the health system. A contract has been agreed for signature but there are still significant risks in the financial values, and deliverability of changes to patient pathways, and efficiency gains.

The Governing Body were updated that the contract with EMAS is in mediation and may go to arbitration. The fundamental principle is the financial growth the Trust want in order to deliver the Ambulance response targets which has not been met despite incentives last year. An update will be provided at the next meeting of the Governing Body.

The Governing Body were provided with an update of residential and Home care concerns.

**Action: Update regarding EMAS will be presented at the May Governing Body meeting.**

**The Governing Body noted the information within the report.**

#### **15. FINANCE UPDATE**

A paper was presented to the Governing Body to update on the financial position including the latest position with regard to QIPP and the financial risks that need to be managed in the remainder of the year. The paper was taken as read.

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The CCG is on track to achieve both its planned operating position [Health £nil (break-even) + ASC £nil (break-even)] and its NHSE Mandated Surplus (£8,147k), the main remaining risk that needs to be managed relates to Northern Lincolnshire & Goole FT Contract.

**The Governing Body noted the financial position as at January 2019 which has been discussed at Delivery Assurance committee and to note any material changes in the February 2019 position; the latest position with regard to QIPP; and the financial risks that need to be managed in the remainder of the year and the actions being taken to mitigate them.**

## **16. ITEMS FOR INFORMATION**

a) HASR Update

The HASR Update was noted.

b) Adult Services Review Update

The Adult Services Review Update was noted.

c) HCV STP Partnership Update

The HCV STP Partnership Update was noted.

## **17. DATE AND TIME OF NEXT MEETING**

To be confirmed.

The Board were updated that the North East Lincolnshire Clinical Commissioning Group and Council have been working with the North Lincolnshire Clinical Commissioning Group and Council over the last 12 weeks to develop a Memorandum of Understanding.

The MOU is a commitment to work together in delivering services to our regions. All organisations are committed to delivering services at place, but collectively all organisations will now work together for those services requiring delivery on a larger scale.