

Minutes of the NHS Portsmouth Clinical Commissioning Group Extraordinary Governing Board Meeting held on Wednesday 21 October 2020 at 1.00pm via Microsoft Teams (streamed online)

**Summary of Actions
Extraordinary Governing Board Meeting held on Wednesday 21 October 2020**

Agenda Item	Action	Who	By
3	Health & Care Portsmouth Commissioning Operating Model – Chair of Governing Board to write to NHS England to seek clarification as to why our original proposal and preference for a shared Accountable Officer between the NHS Portsmouth CCG and Portsmouth City Council was deemed unacceptable.	E Fellows	ASAP

Present:

- Dr Elizabeth Fellows - Chair of Governing Board/Clinical Executive (GP)
- Helen Atkinson - Director of Public Health, Portsmouth City Council
- Karen Atkinson - Registered Nurse
- Dr Linda Collie - Chief Clinical Officer and Clinical Leader (GP)
- Margaret Geary - Lay Member
- Alison Jeffery - Director of Children’s Services, Portsmouth City Council – from 1.10pm
- Dr Carsten Lesshafft - Clinical Executive (GP)
- Graham Love - Lay Member
- Jackie Powell - Lay Member
- Innes Richens - Chief of Health and Care Portsmouth
- David Scarborough - Practice Manager Representative
- Andy Silvester - Lay Member
- Dr Simon Simonian - Clinical Executive (GP)
- Michelle Spandley - Chief Finance Officer
- Dr Tahwinder Upile - Secondary Care Specialist Doctor
- David Williams - Chief Executive, Portsmouth City Council – from 1.10pm

In Attendance

- Jayne Collis - Business Development Manager
- Justina Jeffs - Head of Governance
- Tracy Sanders - Managing Director

Apologies

- Dr Nick Moore - Clinical Executive (GP)

1. Apologies and Welcome

Apologies were received from Dr Nick Moore.

Dr Elizabeth Fellows welcomed everyone to the meeting via Microsoft Teams. She noted that the Governing Board were meeting virtually in response to the limitations placed on governance by the Covid-19 pandemic. Members of the public had been invited to view the meeting via a link available from the CCG website. The meeting was also being recorded so that in the event of a failure of technology it could continue and then be uploaded to the CCG website.

2. Register and Declarations of Interest

It was noted that all Board members had an interest in Item 3, Health and Care Portsmouth Commissioning Operating Model particularly Dr Linda Collie and David Williams whose roles were specified within the paper. Dr Elizabeth Fellows as Chair of the Governing Board agreed that both Dr Linda Collie and David Williams could participate in the discussion of this item, but would not be able to vote on any decision, if a vote was called.

The Governing Board noted the Register of Interests.

3. Health & Care Portsmouth Commissioning Operating Model

Innes Richens presented a paper which set out proposed amendments to the Health and Care Portsmouth (HCP) operating model in light of national and regional expectations. This also considered to the development of Integrated Care System (ICS) and work undertaken locally across Hampshire and the Isle of Wight (HIOW) commissioning landscape, to develop future ways of working. A previous proposal had been brought to the Governing Board. Innes Richens provided a background to the paper and gave examples of how the CCG and Portsmouth City Council along with other organisations have joined-up operations further, particularly during the Covid-19 response.

Alison Jeffery and David Williams joined the meeting.

Innes Richens said that NHS Portsmouth CCG (PCCG) and Portsmouth City Council (PCC) had a long history of integrated commissioning arrangements. The advantage of these arrangements, along with their contribution to the broader city partnership (Health & Care Portsmouth, HCP) had been widely acknowledged as providing improvements and benefits for our local residents. There was a strong commitment to continue the HCP approach into the future. As the integration between PCCG and PCC is strengthened further consideration has been given in working across the local Portsmouth and South East Hampshire (PSEH) system; HIOW and in particular the developing ICS.

Tracy Sanders explained that the CCG had been working with colleagues in HIOW to development our future ways of working. As part of this work three core elements of the future commissioning model for HIOW had been agreed and the CCG had jointly developed an outline of the proposed roles and responsibilities for each of the core elements which was summarised in the paper.

It is envisaged that there would be six local teams leading integrated health & care commissioning at the heart of the future model. Local integrated health & care teams will work with providers of both health and care to transform delivery and care pathways. This would involve some shared roles and joint approaches in order to ensure consistent commissioning leadership and support to the local system.

Key features of the future model for commissioning in HIOW include:

- Current proposals lead to two CCGs in HIOW: 1) Portsmouth and 2) Southampton, IOW & Hampshire.
- The two CCGs would share an AO.

- Portsmouth CCG would delegate CCG functions to HCP under the executive leadership of the Chief Executive of PCC supported by an integrated executive.
- Southampton, IOW and Hampshire CCG would have a management structure enabling budgets and decision making authority to be delegated to five local teams.
- There would be locally designed arrangements to integrate with local authorities. Local budgets would be based on pre-merger CCG allocations in 2021/22.
- It is anticipated that NHS funding and resource allocations decisions would flow via the ICS from April 2022.

Tracy Sanders explained that the most significant change in the proposal was the delivery of the Accountable Officer function. The paper proposed a variation to the previously approved HCP operating model of the move of the Accountable Officer (AO) function from the Chief Executive of Portsmouth City Council, to the AO role shared across commissioners in HIOW. This AO role was also the Chief Officer of the Integrated Care System (ICS). It is felt this would enable strategic working across HIOW whilst continuing to drive forward Health and Care Portsmouth.

Tracy Sanders referred to Section 4 of the paper, highlighting the need to amend the CCG's Constitution if the proposal was approved.

Consultation and engagement on the proposed changes had taken place during the summer with member practices and Primary Care Networks (PCNs), staff, city partners and wider Hampshire and Isle of Wight stakeholders. The appendices of the document detailed the full responses received.

Governing Board members discussed the proposed model and a number of comments were made as follows:

Jackie Powell said that she supported the proposal as being pragmatic and agreed that localism was best. She raised the need for cross party representation within the leadership. She noted that a number of organisations had asked for further discussion on the AO role. Tracy Sanders explained that there had been a number of questions around clarity of arrangements which would be addressed moving forwards.

Andy Silvester stated his agreement with the proposal and highlighted his concern regarding finance to progress priority areas within the city, rather than being diverted across other areas of Hampshire.

Tracy Sanders confirmed the CCG was remaining as a statutory organisation and would continue to manage its allocated finances directly.

David Williams commented that some partners had used the proposal as an opportunity to feedback on other parts of the HIOW arrangements including the proposed merger of the six other CCGs in HIOW. David stated that we needed to ensure that we worked within the HIOW geography, the focus should remain on the residents of Portsmouth and how best to meet their needs. Tracy Sanders said that the model that colleagues in Southampton, Hampshire and IOW have developed had a strong local team element – localism is key.

Graham Love said that there were many examples of effective partnership working, both locally and in other parts of HIOW and stressed the need to work in partnership across the ICS but also maintain the local delivery through H&CP as a priority.

Alison Jeffery stated her support of the proposal but advised clarity was required to prevent confusion over what was required at each level. Furthermore, the CCG needed to consider how it was able to influence decision-making across these levels.

Dr Elizabeth Fellows, speaking as a GP and Portsmouth resident, not as the CCG Chair, expressed her disappointment that the original proposal was not accepted by NHS England, particularly as there were other areas across the country with similar proposals, who had been given approval.

David Williams said he felt obliged to put on record that PCC is also disappointed as to why a model that was acceptable elsewhere was not acceptable here and reflected Dr Fellow's disappointment.

Margaret Geary highlighted her concern regarding the conflict of interest of the Chief Executive of the ICS also being the Accountable Officer of the merged CCGs. She also queried the responsibility in section 3 and governance arrangements in section 4 of the paper. Tracy Sanders explained that we expected NHS England to approve the arrangements set out in section 4 and confirmed that section 3.6 set out the local teams approach.

David Williams suggested that, due to the importance of this decision, the Governing Board ask for a clear statement as to why the preferred model (original model) was not acceptable, in light of recent examples elsewhere in the country having been approved.

Several Governing Board members supported the view expressed by David Williams and went on to discuss the impact of such a request on both the timing and the approval of other inter-dependent recommendations detailed within the paper - should the recommendation be revised.

It was proposed, and the Governing Board agreed, that the recommendations should be amended.

It was recommended to suspend making a decision on two of the recommendations:

- Approve the proposed amendment to the CCG constitution to move to a managerial AO – a post to be shared with other CCG(s) in HIOW who will also be the chief executive officer of the HIOW ICS.
- Approve the revised composition of the Governing Board with effect from April 2021.

A new recommendation was proposed as follows:

- The Chair of the Governing Board to write to NHS England to seek clarification as to why the original proposal and preference for a shared AO with the City Council was deemed unacceptable in light of recent evolving configuration of CCGs and ICS that have resulted in such shared roles elsewhere.

The Governing Board agreed the suspension of the two recommendations and the proposed new recommendation.

In summary the Governing Board made the following decisions regarding the recommendations and next steps.

The Governing Board:

- **Reconfirmed it remains strongly committed to further integrated working with Portsmouth City Council under the executive leadership of the PCC Chief Executive, clinical leadership of the CCG and elected leadership of the Council.**
- **Reconfirmed the retention of NHS Portsmouth CCG as a legal entity.**

- Reconfirmed the delegation of CCG functions to the PCC chief executive officer to lead and continue delivery and development of Health & Care Portsmouth, including the further integration of executive roles across PCCG and PCC.

The Governing Board also agreed to suspend decision making on the recommendations regarding moving to a managerial Accountable Officer role and the approval of a revised composition of the Governing Board.

The Governing Board agreed to seek clarification from NHS England as to why our original proposal and preference for a shared Accountable Officer between the NHS Portsmouth CCG and Portsmouth City Council was deemed unacceptable.

Action: E Fellows

Tracy Sanders outlined the actions to be taken in light of these changes. A call with NHS England was previously scheduled for the day after the Governing Board meeting whereby Tracy Sanders would inform them of the decision of the Governing Board including the suspension of the two recommendations related to the AO role and that the Governing Board would be seeking further information.

It was noted that the Constitutional change could not be actioned until the AO arrangements were confirmed and approved.

4. Date and Time of Next Meeting in Public

The next Governing Board meeting to be held in public will take place on Wednesday 18 November 2020 at 1.00pm and will be streamed via Microsoft Teams.

Jayne Collis
29 October 2020

Governing Board - Attendance Log

Member Name	May 20	Jul 20	Sep 20	Extra Oct 20	Nov 20	Jan 21	Mar 21
Helen Atkinson	✓	✓	✓	✓			
Karen Atkinson	✓	✓	✓	✓			
Dr Linda Collie	✓	✓	✓	✓			
Dr Elizabeth Fellows	✓	✓	✓	✓			
Margaret Geary	✓	✓	A	✓			
Alison Jeffery	A	✓	A	✓			
Dr Carsten Lesshafft	✓	✓	✓	✓			
Graham Love	✓	✓	✓	✓			
Dr Nick Moore	✓	✓	✓	A			
Jackie Powell	✓	✓	✓	✓			
Innes Richens	✓	A	✓	✓			
David Scarborough	✓	✓	A	✓			
Andy Silvester	✓	✓	✓	✓			
Dr Simon Simonian	✓	✓	✓	✓			
Michelle Spandley	✓	✓	✓	✓			
Dr Tahwinder Upile	A	✓	✓	✓			
David Williams	A	A	✓	✓			

Key: ✓ - Present
A - Absent