

**Minutes of the NHS Portsmouth Clinical Commissioning Group Governing Board meeting held on Wednesday 11 July 2018 at 3.00pm in the CCG Committee Room, NHS Portsmouth CCG Headquarters, 4<sup>th</sup> Floor 1 Guildhall Square, Portsmouth**

**Summary of Actions  
Governing Board held on Wednesday 11 July 2018**

<b>Agenda Item</b>	<b>Action</b>	<b>Who</b>	<b>By</b>
3a	<b>Minutes of Previous Meeting</b> - Amendment to minutes on page 5 to be made.	J Collis/G Love	Sep 18
3a	<b>Minutes of Previous Meeting, Actions</b> – Circulate final Operating Plan to Governing Board members.	M Spandley	Sep 18
3a	<b>Minutes of Previous Meeting, Actions</b> – Include names of revised membership of Health and Wellbeing Board within minutes of meeting.	I Richens/ J Collis	Jul 18
5a	<b>Performance Report</b> - Determine the best way to engage with Governing Board members on review and development of the Urgent Care Strategy vision.	I Richens	Sep 18
6	<b>STP System Reform</b> – Upload presentation to website.	J Collis	Sep 18
6	<b>STP System Reform</b> – Establish a timeline and key decisions points for STP System reform work programmes.	I Richens/ L Collie	Sep 18

**Present:**

- Dr Linda Collie - Chief Clinical Officer and Clinical Leader (GP)
- Dr Julie Cullen - Registered Nurse
- Dr Annie Eggins - Clinical Executive (GP)
- Ms Margaret Geary - Lay Members
- Dr Jason Horsley - Director of Public Health, Portsmouth City Council (from 3.45pm)
- Mr Graham Love - Lay Member (Chair)
- Dr Nick Moore - Clinical Executive (GP)
- Ms Jackie Powell - Lay Member
- Mr Innes Richens - Chief of Health and Care Portsmouth
- Mr David Scarborough - Practice Manager Representative
- Mrs Michelle Spandley - Chief Finance Officer
- Mr David Williams - Chief Executive, Portsmouth City Council (from 1.07pm)

**In Attendance**

- Mrs Jayne Collis - Business Development Manager
- Mrs Justina Jeffs - Head of Governance

**Apologies**

- Dr Elizabeth Fellows - Chair of Governing Board/Clinical Executive (GP)
- Dr Jonathan Lake - Clinical Executive (GP)
- Mr Andy Silvester - Lay Member
- Dr Tahwinder Upile - Secondary Care Specialist Doctor

## 1. Apologies and Welcome

Apologies received from Dr Elizabeth Fellows, Dr Jonathan Lake, Andy Silvester and Dr Tahwinder Upile.

Graham Love welcomed everyone to the NHS Portsmouth Clinical Commissioning Group (CCG) Governing Board meeting held in public and noted that he would be chairing the meeting in Dr Elizabeth Fellows absence. He reminded those present that although the meeting was being held in public it was not a public meeting and therefore during the CCGs formal business members of the audience would not be invited to participate.

## 2. Register and Declarations of Interest

The Committee Register of Interests was presented for noting. No further declarations were made.

**The Governing Board noted the Register and Declarations of Interest register.**

## 3. Minutes of Previous Meeting

The minutes of the Governing Board meeting held on Wednesday 16 May 2018 were approved as an accurate record subject to the following amendment:

Page 5, 1st paragraph, change “step down earlier that this due” to “step down earlier due”.

**Action: J Collis/G Love**

An update on actions from the previous meeting was provided as follows:

Agenda Item	Action	Who	By	Progress
3a	<b>Minutes of Previous Meeting</b> - Amendment to minutes on page 6 to be made.	J Collis/ E Fellows	Jul 18	Complete.
3a	<b>Minutes of Previous Meeting</b> - Tenure for David Scarborough, Practice Manager Representative to be checked (clarify if 2 or 3 years).	J Collis/ E Fellows	Jul 18	It was clarified that the tenure would be 3 years. Complete.
3b	<b>Minutes of Previous Meeting</b> – Share final Operating Plan along with any feedback from NHS England with Governing Board members.	I Richens/ M Spandley	Jul 18	Michelle Spandley confirmed there were no substantial changes and agreed to circulate the final version to Board members. <b>Action: M Spandley</b>
4	<b>Chief Clinical Officers Report</b> – Take forward recruitment of an independent nurse representative to replace Dr Julie Cullen on the Governing Board including scoping the possibility of expanding its remit to play a greater role in the system agenda.	E Fellows/ I Richens	Ongoing	It was reported that the recruitment pack was now ready and that the post would go out to advert shortly.

<b>Agenda Item</b>	<b>Action</b>	<b>Who</b>	<b>By</b>	<b>Progress</b>
4	<b>Chief Clinical Officers Report</b> – Clarify the number of incidents in radiology which have been judged to have caused significant harm (three or four).	L Collie/ I Richens	Jul 18	Dr Linda Collie confirmed the number of incidents in radiology was three.
5b	<b>Quality Update</b> – Innes Richens to discuss with Jackie Powell the Jubilee House Activity Input work outside of the meeting.	I Richens/ J Powell	Jul 18	Innes Richens and Jackie Powell agreed to discuss this further outside of the meeting.
5d	<b>Risk/Governing Board Assurance Framework Update</b> – Review risk rating on GBAF in respect of radiology given the latest position.	I Richens/ J Jeffs	Jul 18	On agenda as part of the GBAF.
7	<b>Portsmouth and South East Hampshire System Update</b> – Feedback support to working as a Portsmouth and South East Hampshire health and Care System and to provide feedback on the statement of intent as detailed.	E Fellows/ J Jeffs	Jul 18	Feedback received. On agenda.
8	<b>National Stakeholder Survey Report</b> – Consider using a commissioning evening opportunity for future Practice Members Forum instead of TARGET and ensure greater notification of the date and arrangements to invitees.	L Collie/ J Jeffs	Jul 18	Work in progress and will be discussed in upcoming practice visits.
8	<b>National Stakeholder Survey Report</b> – Get input from practice managers as to how they would want to engage with the CCG most effectively including via the Practice Members Forum.	D Scarborough	Jul 18	It was suggested that moving to evening meetings might gain better attendance.
9	<b>Verbal Report from Committee Chairs</b> - It was agreed that clarification would be obtained regarding future arrangements for Local Authority member involvement in the Health and Wellbeing Board following the outcome of the recent elections and council meetings.	J Horsley	Jul 18	It was agreed the names of the revised membership of the Health and Wellbeing Board would be included in the minutes. See below*

\* Membership of Health and Wellbeing Board:  
Dr Linda Collie, NHS Portsmouth Clinical Commissioning Group

Mark Cubbon, Portsmouth Hospitals NHS Trust  
Dr Elizabeth Fellows, NHS Portsmouth Clinical Commissioning Group  
Sue Harriman, Solent NHS Trust  
Dr Jason Horsley, Portsmouth City Council  
Alison Jeffery, Portsmouth City Council  
Dr Nick Moore, NHS Portsmouth Clinical Commissioning Group  
Innes Richens, NHS Portsmouth Clinical Commissioning Group/Portsmouth City Council  
Diane Sherlock, Voluntary & Community Sector Representative  
Andy Silvester, NHS Portsmouth Clinical Commissioning Group  
Councillor Luke Stubbs, Portsmouth City Council  
Councillor Gerald Vernon-Jackson CBE, Portsmouth City Council  
Ruth Williams, NHS England  
Councillor Matthew Winnington, Portsmouth City Council  
Councillor Rob Wood, Portsmouth City Council

#### **4. Chief Clinical Officer's Report**

Dr Linda Collie presented a paper which summarised the key decisions and actions undertaken by the Clinical Executive under her leadership. She highlighted the following areas:

##### NHS 70

As part of the NHS 70<sup>th</sup> Birthday celebrations on 5 July 2018 the Lord Mayor joined schoolchildren, members of the public and staff in Portsmouth Guildhall Square to mark 70 years of the NHS. Staff from the Council, Solent NHS Trust and the CCG took part in a "flash mob" mass exercise session. Feedback was captured from members of the public on one question "What do you think is the best thing about the NHS?" The majority of responses (89%) were positive. 6% gave a mixed response and only 4% a negative response. The most common response was about healthcare being provided free of charge with other recurring themes relating to NHS staff and the care provided.

Innes Richens commented that as part of the celebrations we should also acknowledge Social Care and we do not get good healthcare without social care.

##### GP Forward View Planning and Implementation

NHS England has recently met with the CCG to review the CCGs implementation of the GP Forward View deliverables during 2017/18 and to review the CCGs plans for 2018/19. NHS England concluded that the work and progress of the CCG is very positive and that they are assured overall that the CCG will deliver what is required.

Margaret Geary commented on the merger of NHS England and NHS Improvement. Dr Linda Collie commented that it is hoped this will align them more. Dr Julie Cullen commented that she had not really seen much public communication about it. Dr Linda Collie said that they are still working out what it means for teams but had recently held their first joint board meeting to take this forward.

#### **The Governing Board accepted the Chief Clinical Officer's Report.**

#### **5a. Performance Report**

Michelle Spandley presented the Performance part of the Integrated Performance & Quality Report and Governing Board Assurance Framework dated 11 July 2018, which provides a high level overview of the current financial position, summary of programmes

and projects supporting the CCGs strategic priorities and plans, and overall CCG performance that defines an effective commissioner. She highlighted the following:

Michelle Spandley commented that as we are in the early stages of the financial year the report will only take into account April performance for contracts. The CCG is currently reporting that it is on target to achieve a break-even position, on the assumption that the full efficiency saving requirement is met. If we do not achieve the full efficiency saving we may have to redirect the amount of investment and use monies set aside for transformation. The following areas were highlighted:

- A&E 4 hour wait – Combined Portsmouth Hospitals Trust (PHT) and St Marys Treatment Centre (SMTC). Significantly better than last year however a slight deterioration for the June figures at 86.9%.
- 12 Hour Trolley Waits – PHT reported zero breaches in April, 2 in May and 0 in June.
- South Central Ambulance Service (SCAS) continue to improve their ambulance response times and ambulance delays at the hospital have also improved.
- 111 calls answered within 60 seconds showing an improvement month on month.
- Referral to Treatment (RTT) monitoring this year is focussed on waiting list size and maintaining the same levels as at March 2018. During April there has been an increase and the report details some of the mitigating actions.
- Diagnostics – The CCG was slightly under target for April, May and June but has an improving trajectory.
- Cancer targets – Performance fluctuations month on month and unfortunately the CCG failed 3 of the 8 national cancer targets in April. PHT as a whole achieved 7 of the 8 targets failing the 62 day waits for first treatment following a screening referral.
- Adult Mental Health – The CCG continues to exceed the targets set.

Jackie Powell asked about the nursing workforce as mentioned on page 9 of the report. Innes Richens explained that recruitment and retention continues to be a challenge and this does have an impact on delivery of standards - the CCG is working with PHT on this issue, its management in the short term and plans to improve the recruitment and retention levels in the medium term.

Jackie Powell asked about plans for the development of the Urgent Care Centre. Michelle Spandley explained that there are ongoing conversations around the Urgent Care Centre regarding the right pathways and the CCG is working closely with PHT to ensure the model is right and fits with our strategy for 24/7 access to primary care. There are issues about making sure it is manned from a GP point of view. The extended access pilot is about ensuring patients arrive appropriately and they may be asked to go to an alternative setting to ensure a better service for patients.

Jackie Powell said that she struggled to see the ultimate vision. Dr Linda Collie explained that the pilot was halted as there were governance issues however these have since been resolved but the pilot has not yet started again. Jackie Powell said that she could not see the vision as it says there may be an urgent care treatment centre. Dr Nick Moore commented that it was about moving functions away from the A&E department. Margaret Geary said that any changes would need to be communicated in a clear way. Dr Nick Moore explained that was a pilot at present. Michelle Spandley commented that there was not enough resource to provide a full service and that is why they are running a pilot so that they can evaluate if it would be worthwhile. It is about trying to join up services. Dr Linda Collie commented that patients may not wish to be redirected once they arrive at the hospital.

Innes Richens said that it was important to undertake the pilot as it is about responding to feedback from the public. We need to check back in with the original vision for urgent care – what is best for the patient and most effective.

Graham Love commented that it would be good to revisit when the pilot has completed. Innes Richens said that this could be done via a Development Session or Governing Board meeting. He agreed to determine the best way to engage with Governing Board members on review and development of the Urgent Care Strategy vision.

**Action: I Richens**

**5b. Quality Update**

**5d. Risk/Governing Board Assurance Framework Update**

Innes Richens provided an update on Quality as detailed on page 9 of the report. Portsmouth Hospitals Trust received CQC inspections of urgent care on 28 February 2018 and 1 March 2018 and the report from these inspections was published on 4 May 2018. The majority of issues referenced in the report are known issues and the CCG is involved with the processes and plans in place to drive improvement. The nursing workforce remains a significant concern and there are capacity issues which is causing significant pressure. The situation has improved however over the last few days there has been an increase in those patients deemed as "fit for discharge".

The CCG is managing two risks relating to Residential & Domiciliary Care; the quality of care (risk score 12) and short notice closure of a service (risk score 12). A comprehensive plan is being developed to support the sector with the CCG offering direct support in some cases.

Solent NHS Trust – There is a new risk relating to risk of harm from prescribed oxygen use in the home and community settings (risk score 15). This is mainly related to lack of experience when using the equipment. There are mitigating actions in place to reduce the risk however this required multi-provider engagement which is currently at an early stage.

Millbrook Healthcare – Risk of harm to adults and children as a result of long waits for wheelchairs (risk score 12). No serious harm to patients has been identified. Solent and Millbrook are working together to address the issues. The current average waiting time in weeks for Portsmouth is 20.9 for adults and 13.6 for children. CCGs are meeting frequently to discuss the issues and an update will be provided at a future Board meeting. Jackie Powell asked about access points to the service. Dr Linda Collie explained that access was good if accessed via the recognised pathways.

Primary Care – It was noted that the Lake Road Practice received a Good rating from a recent CQC inspection.

Margaret Geary commented on the separation of Quality and Safeguarding and that she was not sure we are getting the assurance we need as a CCG on Safeguarding issues. Dr Julie Cullen said that she was sure that Tina Scarborough would be dealing with any issues as Deputy Director of Quality and Safeguarding. Margaret Geary said she felt we were doing well on assurance but that she was not so sure about safeguarding.

Dr Linda Collie suggested Tina Scarborough could come and speak to the Board and Margaret Geary agreed to discuss this further with Dr Collie. It was agreed that the information flows re safeguarding from the Quality and Safeguarding Executive Group (QSEG) to the Governing Board in the quality report and/or via a specific scrutiny item would be reviewed.

**Action: M Geary/I Richens**

Jackie Powell commented on the wheelchairs service and the longest wait of 52 weeks and asked if we know what happens to the patient in the interim whilst they are waiting. Innes Richens explained that generally it is not a case of the patient having nothing but they may

be waiting for adaptation of existing equipment or updates. Patients would still be in touch with their healthcare teams for care and support as required.

## **5c. Finance Report**

Jackie Powell commented on the summary detailed on page 7 of the report noting the red rating for Creditors. Michelle Spandley explained that it is likely to be related to the year end period. Michelle agreed to continue to monitor the situation to ensure it improves and agreed to report back at the next meeting.

Graham Love commented on the figure relating to unidentified saving schemes of just under £2m. Michelle Spandley explained that the CCG still needs to find this amount and will need to take a decision at month 6 as to whether we need to use reserves to cover any unidentified value.

**The Governing Board accepted the contents of the Integrated Performance & Quality Report and Governing Board Assurance Framework.**

## **6. STP System Reform**

Innes Richens gave a presentation which provided an update on the Hampshire and Isle of Wight System Reform programme. He highlighted the work of the task and finish group and identified key issues, drawing attention in particular to the next steps slide. It was agreed a copy of the slides would be uploaded to the CCG website in due course.

**Action: J Collis**

Jackie Powell commented that she was pleased to hear about a care system on the Portsmouth City footprint as in previous iterations there was no mention of a city-wide approach. Innes Richens commented that it is good that Local Authorities are taking a lead on what this will look like.

Margaret Geary asked about timescales and who determines what happens by when. Dr Linda Collie responded that the timeline needed to be identified but would require approval by individual organisations through their individual schemes of delegation. Linda recognised that it was in our interest to develop and drive new ways of working quickly to avoid uncertainty locally and imposition of solutions from above.

Margaret Geary raised concerns around social care and that they seem to be the poor relation. Margaret went on to comment that the terminology and issues within the work programmes don't necessarily reflect the priorities for social care. With regards to the person centred work approach she is not sure it has been looked at what this means for the system.

Dr Linda Collie commented that it was acknowledged at the STP Executive Delivery Group that it is health care centred although local authorities are invited to be part of the work it is not always directly relevant. It was recognised more should be done regarding the wider health and care agenda including our focus on prevention.

David Williams said that he thinks we do have a good sporting chance to make a difference and the work around tiers and systems concentrating on the responsibilities of each is encouraging.

David Scarborough commented on a primary care perspective on the last point on the next steps slide and said that personally he thinks it is a work in progress and he is interested in what difference it will make in primary care and specifically GP practices. When is it going to make sense and be visible at the front line primary and community care level. Innes

Richens said that we have to carry on what we are doing in Portsmouth as the more we continue to deliver our strategies and plans for the City the stronger we become to influence others.

Jackie Powell commented that two levels at scale make sense to her but we need to manage the scrutiny we get at each so it is appropriate and not duplicative. Dr Linda Collie said that we still need to define how much stays local and how much is undertaken on a bigger footprint.

David Williams said that we need to start off at the lowest level. We have developed the foundations for a good local care partnership so there shouldn't be much for a H&IOW partnership to do. Dr Linda Collie said that it is about being self-regulated and not needing assurance from others.

Graham Love said that it is work in progress, and there were some valuable points in the discussion, some areas we are leading on which is good and it is important we are part of it to help shape developments.

It was agreed that a timeline and key decisions points for STP System reform work programmes would be established.

**Action: I Richens/L Collie**

## **7. Portsmouth and South East Hampshire System Update**

Dr Linda Collie provided an update on the Portsmouth and South East Hampshire System. She explained that the minutes from the System Board meeting allows members to see the work being undertaken which is focused on the system reform work. The group are now looking at the system reform output and strengthening this and stating this in a memorandum of understanding. A copy of the Chair's Report from the June meeting is also attached for information.

**The Governing Board noted the minutes and Chairs report.**

## **8. Verbal Report from Committee Chairs**

- **Audit Committee**

Jackie Powell, on behalf of Andy Silvester, provided a brief update. Delivery of the internal and external audit programmes are on track. An update from the local counter fraud specialist was received at the last meeting. It was also reported that we were exceeding the target for conflicts of interest training at 93% completed. Briefings from internal and external audit were received. The Corporate Risk register was presented. Overall the Audit Committee was satisfied that processes were in place for any issues raised. Justina Jeffs commented that the Committee had signed off the Annual Report and Accounts prior to their submission.

- **Health and Wellbeing Board**

Dr Linda Collie noted that the meeting held on the 20 June 2018 had welcomed new members of the Council.

Dr Linda Collie added that she had forgotten to mention in her report earlier that local partners (PCC, PHT, 3 CCGs, Solent and Southern) had won a Healthcare Transformation Award for joint partnership working. David Williams asked if a press release had been produced and it was confirmed that a media release was being worked on.



## 9. Minutes of Other Meetings

The minutes of the following meetings were presented for acceptance by the Board:

- Minutes of the Audit Committee meeting held on 7 March 2018.
- Minutes of the Health and Wellbeing Board meeting held on 21 February 2018.
- Minutes of the Primary Care Commissioning Committee meeting held on 21 March 2018.

**The Governing Board accepted the minutes.**

## 10. Date and Time of Next Meeting in Public

The next Governing Board meeting to be held in public will take place on Wednesday 19 September 2018 at 3.00pm – 5.00pm in Conference Room B, 2<sup>nd</sup> Floor, Civic Offices, Portsmouth.

Jayne Collis  
26 July 2018

### Governing Board - Attendance Log

Member Name	May 18	Jul 18	Sep 18	Nov 18	Jan 19	Mar 19
Dr Linda Collie	✓	✓				
Dr Julie Cullen	A	✓				
Dr Annie Eggins	✓	✓				
Dr Elizabeth Fellows	✓	A				
Ms Margaret Geary	✓	✓				
Dr Jason Horsley	✓	✓				
Dr Jonathan Lake	✓	A				
Mr Graham Love	✓	✓				
Dr Nick Moore	✓	✓				
Ms Jackie Powell	✓	✓				
Mr Innes Richens	✓	✓				
Mr David Scarborough	✓	✓				
Mr Andy Silvester	✓	A				
Mrs Michelle Spandley	✓	✓				
Dr Tahwinder Upile	✓	A				
Mr David Williams	A	✓				

Key: ✓ - Present  
A - Absent