

NHS Devon Governing Body Meeting held in Public –APPROVEDMinutes

Date: 23 May 2019

Time: 14:00

Location: Rooms, a,b,c, Pomona House, Oak View Close, Torquay, TQ2 7FF

Item	Discussion	Action
1	Welcome and apologies: PJ, Chair welcomed everyone to the meeting and introduced James Peskett from PA consulting who are undertaking a review of the system leadership in Devon. The following apologies were noted: LCB – Lorraine Webber deputy VP – Tracey Polak, deputy DG – Dr Matt Fox, deputy AM – Piers Tetley, deputy JH and CD	
2	Patient Experience – Charlotte’s Story CB Non-Executive/ Lay Member with an interest in patient and public involvement has agreed to lead and keep a focus on our patient experience stories that are shared at our Governing Body meetings. CB introduced ‘Charlotte’s Story’ whereby she shared her experiences of being involved in the Better Births in Devon engagement project for maternity services in Devon. CB explained the engagement that was undertaken with mums and dads which included going out and about to visit them in the community. CB detailed her involvement with the Local Maternity Service (LMS) who are working with the Maternity Voice Partnership (MVP) to help with our learning on how we engage with our population and listen to their experiences. The MVP is independent to the CCG and is chaired by a service user and comprises of representatives from service users, midwives and health professionals. Engagement is continuing including launch events to assist in the co-production of service models and MF suggested that an update on LMS and MVP should be included in a future GP update. ACTION 1: NC to liaise with the communications team to include an update on LMS and MVP in the next GP update. Post meeting update action completed and recommended for closure. The Governing Body welcomed the opportunity to listen to ‘Charlotte’s Story’ and how these experiences can help with our engagement with the public.	

3	Register of Interest PJ directed the members to register of interest and it was noted that there some adjustments to be made including the formatting and inaccuracies to several declarations. The Governing Body were reminded of their proactive duty to inform the governance team of any changes to their conflicts of interests. The Governing Body received and noted the register of interest.	
4	Minutes and action log Subject to minor amendment to page 14 and page 16 the minutes of the last meeting held on 25 April were agreed as a true and accurate record of the meeting.	
5	Chairs Report PJ introduced this report and did not propose to go through in detail, however he did draw attention to the place based Non-Executive/ Lay Member and Executive Directors that have now been agreed and assigned to our four localities. The Governing Body received and noted the Chair's Report.	
6	Interim Accountable Officers Report ST referred to the review of the Devon Health and Social Care System led by PA consulting which is in its final stages. The final report is awaited but emerging themes include: • Key lines of enquiry (KLOEs) – these will be further detailed in the final report • Improvements to consider: ○ Credibility ○ Clearer design working arrangements ○ Implementation value • Positive points: ○ Triumvirate – Executive Directors/ Leads ○ CCG launch day and values positively received ○ Examples of leadership • System Wide ○ How we have different conversations to enable a clearer vision ○ Accountable Officer and STP Senior Responsible Officer (SRO) – roles will be brought together in future The final report including an action plan will be presented to the Governing Body in June. Feedback around the table: • Primary Care Networks – do we need to increase our engagement. Executive response agreed that we will develop an action plan to support Primary Care Networks including CCG visibility and acknowledged that this will be adapted for different stakeholders. • PJ suggested using Patient Participation Groups (PPGs) and the strength of using this network to engage with our public, and BM echoed this as a current chair of a PPG. The Governing Body received and noted the Interim Accountable Officers Report.	

7	Finance and Performance Committee Chair's Report There was nothing further to add to the report included in the board pack, however BM did draw attention to the Finance and Performance Committee Terms of Reference (ToRs) whereby we are working to these in their present form but acknowledged these may need to be adapted as the arrangements for placed based are confirmed. NB chaired the May Finance and Performance Committee and reported that as we had achieved our financial target for 18/19 a substantive amount of time was allocated for discussions about the 19/20 plan. The Governing Body received and noted the Finance and Performance Committee's Chairs Report.	
8	Monthly Finance and Activity Report JD noted there was nothing further to add to the enclosed report, however he was pleased to report that for year end month 12 for 18/19 the auditors have given an unqualified opinion as expected. SK queried the conditions attached to the Commissioner Sustainability Fund (CSF). JD replied that that was agreement of a long-term milestone-based recovery plan against the cumulative debt and once we are back to a positive surplus each year we will pay off the cumulative debt but that no time frame has been specified for this. On behalf of the Governing Body ST congratulated JD and the wider team on their achievements as a couple of years ago the thought of returning to a balanced position was imaginary and it is a testament to their hard work that we have reached this place. It was noted that the annual report will be published in June and formally presented at our AGM in September. The Governing Body noted the month 12 financial position and the level of risk to deliver the CCGs control totals.	q
9	Risk Management Framework Coinciding with the merger of the CCGs an internal audit review was undertaken, although a satisfactory rating was given there were several recommendations for improvement and these were detailed in the executive summary of this report, but GS drew attention to the following: • Robust reporting of risks • Corporate Objectives nearing the stages of completion which will help improve the effectiveness of the assurance framework • Senior Leadership Team – to receive more up to date information to help support and shape agenda's • Risk Management – training programme • How do we manage risk in the system – this will be incorporated in the STP governance arrangements GA referred to the table on page 73 and the review of risks at governance level and suggested that GB oversight should be included in the governance level of risk that will be reviewed to strengthen assurance. The Governing Body received noted and approved the Risk Management Framework.	

10	Integrated Commissioning Executive (ICE) Terms of Reference (ToRs) ST presented referred to the executive summary of the report and noted that the ToRs were for the Governing Body's information rather than approval. The purpose of this meeting is for a joint mechanism in aligning strategy planning with our local authority colleagues and will also give us an opportunity to focus on driving the system toward a strategic nature. Shared decision making would be undertaken by senior responsible officers who already have delegated authority to act in agreement within a framework for each organisation. CB felt it would be useful see future ICE reports and ST agreed for the minutes of these meetings and workplan to be included in the addendum pack of Governing Body papers. ST mentioned that it would be beneficial to invite voluntary sector representatives to future meetings at relevant points as it is important to have different views at the right time. Following discussions, it was agreed that section 3.1 responsibilities bullet point two should be amended to: Supporting the delivery of the Operating Plan 2019/20 and supporting the development of a long-term plan for the wider Devon The Governing Body received and noted the ICE ToRs.	
11	Audit Committee Report NB presented this report and declared for the record that the head of internal audit opinion was reviewed at the Audit Committee held earlier in the day and approved. NB highlighted two recommendations to bring to the Governing Body's attention a minor change to the Audit Committee ToRs and that the Better Care Fund should be an agenda item for discussion at a Governing Body Development session. ACTION 2: NC to add Better Care Fund (BCF) to Governing Body forward planner for 19/20. Post meeting update this action is recommended for closure. The Governing Body received and noted the Audit Committee Chairs Report.	
12	Quality and Performance Report SM referred to the report in the pack which was based on validated data of the month of March 2019 for both CCGs prior to the merge. SM drew attention to the following: - Delayed Transfers of Care (DTOC) – improvements are continuing to be seen around performance and we have met our target for the STP - A&E performance is slowly making progress and continues to fluctuate in some areas in particular the Western and Southern Localities. The CCG are participating in the regular gold command calls. SM noted that performance for the other indicators remain static and next months quality and performance report should be aligned to the single CCG.	

	LW reported that A&E is continuing with quality surveillance checks until improvements remain sustained and highlighted there will be checks through lived patient experience and PJ suggested for LW to link with CB for a future patient story. ST declared a conflict of interest in that his step son is a quality surveillance checker. SK mentioned the standards for Mental Health IAPT/ recovery and access rates as the current waiting times are increasing and asked where this issue is being discussed. It was suggested for the Quality Committee to make space at a future meeting to review and then feedback to the Governing Body. ACTION 3: Governing Body to receive an update on waiting times for Mental Health IAPT/ recovery and access rates. NK raised SWAST response times and that nationally we are rated as a risk of 25 and queried the impact this has had on patients. LW confirmed that this is being discussed as part of our quality surveillance meetings with NHS England and we are reviewing this as a system and we are working with our delivery boards. Data analysis is underway on delays of 60 minutes or more and we are awaiting the outcome report. JWo welcomed the rotation focus on the Governing Body agenda for quality and performance and financial performance in moving forward. The Governing Body received and noted the quality and performance report.		
13	Locality Updates Southern MF presented this report and drew attention to the opening of the new Friends Centre in Brixham and PJ confirmed that he will be going to visit this centre soon and encouraged other Governing Body members to as well. MF noted that progress is being made with Local Care Partnership (LCP) delivery group. <i>Dr Matthew Fox left the meeting.</i> Eastern SK was pleased to report that due to community conversations Okehampton is making progress and Budleigh Community Hub may be showed cased later this year when there is a locality focus session as part of the Governing Body meeting. One of the key achievements over the past month has been engagement with our members and we are continuing to work with Eastern A&E delivery board. SK did indicate that support was needed for the infrastructure in working with the wider health partnership and that there were concerns around the gap in provision for patients requiring mental health support and cardiology waiting times in the East. Northern JWo talked about the positives in the North including: • Collaborative system • Different conversations		

	• Clinicians mood is different • Reaching out to the community – clinicians from the acute trust JWo touched on the One Northern Devon and the benefits of this initiative and highlighted the risk around urgent care and the workforce challenges. Western SMc referred to key priorities and the Primary Care Networks (PCNs) and how best to work together. Support required to ensure social prescribing is aligned whilst retaining our workforce experts and making sure that no one work in isolation. Concerns have been raised around mental health and patients falling through gaps in services. There will be an opportunity in the integrated care partnership to commission in a different way that meets the needs of our population. JT confirmed that there will be some joint work with commissioners and providers through the Local Medical Committee (LMC) to get an understanding of current issues. Mental health investment monies will help towards improving communities and strengthen what community services should look like. ST mentioned that our locality representation is now placed based to ensure our commissioning reflects the needs of our local population and suggested that the triumvirate of executives and clinical representatives consider how they would like to present the locality reports at future Governing Body meetings. BM felt as digital is a priority for NHS England that it would be useful to include this on a future agenda for the Governing Body and suggested that a presentation on interoperability would be informative. ACTION 4: NC to add digital interoperability to the Governing Body 19/20 forward planner. Post meeting update action completed and recommended for closure. The Governing Body received and noted the contents of the Locality Reports.		
14	Primary Care Committee Chair's Report NK presented this report and there was nothing further to add, however JWö did note that although as a CCG we do not commissioning dentistry services the presentation that was recently delivered by NHS England was interesting. The Governing Body received and noted the contents of the Primary Care Committee Chair's Report		
15	Close of Meeting The Chair closed this meeting and informed the members that a survey would be circulated to the Governing Body to gain feedback to support the continued improvement and effectiveness of our meetings. The meeting closed at 15.20pm.		

Attendees (attended** / apologies ^A)		
<i>Name and initials</i>		<i>Title and organisation</i>
Andrew Millward (AM) ^A		Devon System Lead Director of Communications and Engagement; and Director of Communications and Human Resources, Devon CCG
Brian Mackness (BM) **		Non-Executive Director/ Lay Member – Devon CCG
Caroline Dimond – Dr (CD) ^A		Director of Public Health, Torbay Council
Charlotte Burrows (CB) **		Non-Executive Director/ Lay Member – Patient Public Involvement, Devon CCG
Dr Matt Fox (MF) **		Clinical Representative, Southern Locality, Devon CCG
David Greenwell – Dr (DG) ^A		Clinical Lead Representative, Southern Locality, Devon CCG
Ginny Snaith (GS) **		Board Secretary, Devon CCG
Glynnis Atherton (GA) **		Non-Executive Director/ Lay Member – Quality Assurance of Services, Devon CCG
John Dowell (JD) **		Chief Finance Officer, Devon CCG
John Womersley – Dr (JWo) **		Clinical Lead Representative, Northern Locality Devon CCG
Jo Turl (JT) **		Director of Transformation, Devon CCG
Judith Hargadon (JH) ^A		Non-Executive Director/ Lay Member – Primary Care
Lorna Collingwood-Burke (LCB) ^A		Chief Nursing Officer, Devon CCG
Lorraine Webber (LW) **		Deputy Director of Quality Assurance and Improvement, Devon CCG
Nick Ball (NB) Vice Chair **		Non-Executive/ Lay Member – Financial Management and Audit, Devon CCG
Nick Kennedy – Dr (NK) **		Secondary Care Doctor, Devon CCG
Paul Johnson – Dr (PJ) Chair **		Clinical Chair, Devon CCG
Piers Tetley (PT) **		Associate Director of HR, Devon CCG
Ruth Harrell – Dr (RH) **		Director of Public Health, Plymouth City Council
Shelagh McCormick- Dr (SMc) **		Clinical Lead Representative, Western Locality, Devon CCG
Tracey Polak (TP) **		Assistant Director Public Health, Devon County Council
Simon Kerr – Dr (SK) **		Clinical Lead Representative, Eastern Locality, Devon CCG
Simon Tapley (ST) **		Interim Accountable Officer, Devon CCG
Sonja Manton – Dr (SMa) **		Director of Commissioning, Devon CCG
Virginia Pearson – Dr (VP) ^A		Director of Public Health, Devon County Council
<i>In Attendance</i>		
Nikki Coombes (NC) **		Executive Assistant, Devon CCG
James Peskett (JP) **		PA Consulting
Alex Cameron (AC) **		Media and Publications Manager, Devon CCG
Minutes approved	Date: 28 June 2019	Signed by chair: Dr Paul Johnson, Clinical Chair