

NHS DORSET CLINICAL COMMISSIONING GROUP

GOVERNING BODY MEETING

18 MARCH 2020

PART ONE PUBLIC - MINUTES

A meeting of Part 1 of the Governing Body, of the NHS Dorset Clinical Commissioning Group was held virtually at 2pm on 18 March 2020.

- Present:**
- Forbes Watson, Chair (FW)
 - Mary Armitage, Secondary Care Consultant Member (MA)
 - Vanessa Avlonitis, Registered Nurse Member (VA)
 - Jenny Bubb, Locality Lead for Mid Dorset (JB)
 - Tim Goodson, Chief Officer (TG)
 - Karen Kirkham, Locality Lead for Weymouth and Portland and Assistant Clinical Chair (KK)
 - Blair Millar, Locality Lead for West Dorset (BM) (Part)
 - Mufeed Ni'Man, Locality Lead for East Bournemouth (MN) (Part)
 - David Richardson, Locality Lead for Poole North (DR)
 - Nick Robinson, Governing Body Lay Member and Audit Committee Chair (NR)
 - Nikki Rowland, Chief Finance Officer (NRo)
 - Ben Sharland, Locality Lead for Central Bournemouth
 - Jacqueline Swift, Governing Body Lay Member and Deputy CCG Chair (JS)
 - Kay Taylor, Governing Body Lay Member for Public and Patient Participation (KT)
 - Simone Yule, Locality Lead for North Dorset (SY)
- In attendance:**
- Sally Banister, Deputy Director – Integrated Care Development (SB)
 - Steph Lower, Executive Assistant (SL)
 - Vanessa Read, Director of Nursing and Quality (VR) (Part)
 - Sally Sandcraft, Director of Primary and Community Care (SSa)
 - Charles Summers, Director of Engagement and Development (CS)

		Action
1.	Apologies	
1.1	Apologies were received from:-	
	- Colin Davidson, Locality Lead East Dorset	

- Nick Evans, Locality Lead for Poole Bay
- Rav Ramtohal, Locality Lead for Christchurch
- Simon Watkins, Locality Lead for Poole Central

2. Quorum

- 2.1 It was agreed that the meeting could proceed as there was a quorum of members present.

3. Declarations of Interest, Gifts or Hospitality

- 3.1 Declarations of Interest were made as follows:-

Agenda item 25 (Part 2) – Remuneration Committee recommendations

- Tim Goodson, Chief Officer and Nikki Rowland, Chief Finance Officer

Both the Chief Officer, Chief Finance Officer and any executives present would be required to withdraw from the meeting for this item.

SL

4. Minutes

- 4.1 The Part 1 minutes of the meeting held on 22 January 2020 were **approved** as a true record.

5. Matters Arising

- 5.1 There were no further Matters Arising.
- 5.2 The Governing Body **noted** the Report of the Chair on matters arising from the Part 1 minutes of the previous meeting.

6. Chair's Update

- 6.1 The Chair introduced his Update.
- 6.2 This would be the last Governing Body for a number of Locality Leads and on behalf of the CCG and personally, the Chair thanked them for their significant contributions to the Governing Body and the wider organisation.
- 6.3 The Governing Body **noted** the Update of the Chair.

7. Chief Officer's Update

- 7.1 The Chief Officer introduced his Update.

M Ni'man joined the meeting

- 7.2 A letter had been received from the NHS Chief Executive and Chief Operating Officer regarding next steps in relation to the NHS response to Covid-19. There were a number of measures that would require enacting with immediate effect.
- 7.3 A more detailed Covid-19 update would be provided at the conclusion of Part 2.
- 7.4 The Bournemouth and Poole hospitals merger continued to progress. The Competition Markets Authority (CMA) had finished their field work and would be expected to report their findings at the end of April. NHS England and Improvement were continuing with their assessment. The merger date currently remained set for July 2020, however the current Covid-19 priorities may cause a delay.
- 7.5 The Governing Body **noted** the Update of the Chief Officer.

8. Strategy

- 8.1 There were no Strategy items to note.

9. Delivery

9.1 Quality and Performance Report

This item was taken at the end of Part 2 due to the availability of the Director of Nursing and Quality.

- 9.1.1 The Director of Nursing and Quality introduced the Quality section of the report.
- 9.1.2 The Governing Body noted the revised format of the report which had more of a system view.
- 9.1.3 A continued area of focus was the health assessments for Looked After Children and the completion of adoption medicals.
- 9.1.4 During the current Covid-19 pandemic, the Nursing and Quality Team would have an increased specific focus on safety.
- 9.1.5 The Deputy Director – Integrated Care Development introduced the Performance section of the report.

- 9.1.6 Progress had been made with the setting of escalation thresholds as requested by the System Leadership Team and it was planned for these to be finalised by the next report.
- 9.1.7 Priority would be given to responding to the impact of Covid-19. All non-urgent elective operations were required to be postponed from 15 April at the latest for a period of three months and consideration was being given on how best to wind down the elective activity. Consideration would also need to be given to how to reinstate the elective activity following the pandemic.
- 9.1.8 The Governing Body **noted** the Quality and Performance Report.
- 9.2 **Finance Report**
- 9.2.1 The Chief Finance Officer introduced the Finance report.
- 9.2.2 It was anticipated the CCG would deliver its £2M surplus control total. There remained an overspend within Personal Health Commissioning (PHC) and acute commissioning.
- 9.2.3 Although there remained an overspend within Personal Health Commissioning (PHC), improvement had been seen, however concern remained regarding the pace of recovery into 2021, with non-recurrent resources being used in the current year to mitigate.
- 9.2.4 The Governing Body **noted** the Finance Report.
- 9.3 **Assurance Framework**
- This item was taken at the end of Part 2 due to the availability of the Director of Nursing and Quality.**
- 9.3.1 The Director of Nursing and Quality introduced the Assurance Framework report.
- 9.3.2 An Assurance Framework workshop had been held at the conclusion of the February Audit Committee. The format of the Framework would be revised as soon as practicably possible in light of the current pandemic priorities.
- 9.3.3 There were no gaps in control identified through the existing Framework.
- 9.3.4 The Governing Body **noted** the Assurance Framework.

9.4 **Governance Arrangements**

9.4.1 The Chief Finance Officer introduced the Governance Arrangements report.

B Millar joined the meeting

9.4.2 Following a query regarding the clinical skill mix on the Governing Body/Committees, the Governing Body directed that consideration be given to the potential for widening the clinical skill mix e.g. nurse practitioner members.

SL

9.4.3 The Governing Body **approved** the recommendations set out in the Governance Arrangements report.

9.5 **Annual Review of Declarations of Interest**

9.5.1 The Chief Finance Officer introduced the Annual Review of Declarations of Interest report.

9.5.2 The Governing Body noted the CCG's Conflicts of Interest regime had received substantial assurance from Internal Audit in all the areas within the NHSE guidance and the processes in place were being used as examples of good practice elsewhere.

9.5.3 The Governing Body **noted** the Annual Review of Declarations of Interest report.

9.6 **Special Educational Needs and Disabilities (SEND) Reform Update**

9.6.1 The Director of Primary and Community Care introduced the Special Educational Needs and Disabilities (SEND) Reform Update.

9.6.2 Both Dorset Council (DC) and Bournemouth, Christchurch and Poole Council (BCP) were continuing to focus on their internal arrangements in relation to SEND.

9.6.3 The BCP SEND inspection had not yet taken place. A Local Government Association peer review team had been engaged to help prepare and undertake a critical look at progress and the review had highlighted a number of areas requiring focus.

9.6.4 There had been an increased number of children and young people with health and care plans and the capacity to support the CCG SEND work was being reviewed as this was likely to continue to grow.

- 9.6.5 Progress had been slow in relation to a system-wide approach to improving support available to children and young people with speech, language and communication needs across Dorset.
- 9.6.6 One other area highlighted was the further work required regarding the information, advice and support services to parents/carers and young people regarding how to address concerns relating to their education health and care plans. This work would likely have a resource impact for the CCG.
- 9.6.7 There had been a number of changes in leadership, particularly within Dorset Council and this was likely to have had an impact on progress with implementation, however the current leadership was action-focused and keen to demonstrate progress.
- 9.6.8 The Governing Body noted that there was good engagement with the special schools where there were a number of medical SEND needs identified, however, more focus was required within the general schools.
- 9.6.9 The Governing Body **noted** the Special Educational Needs and Disabilities (SEND) Reform Update.
- 9.7 **Integrated Care System (ICS) Delivery Update**
- 9.7.1 The Deputy Director – Integrated Care Development introduced the Integrated Care System (ICS) Delivery Update.
- 9.7.2 The current Covid-19 pandemic had required priority focus on the Primary Care transformation work with the Primary Care Networks (PCNs) and Dorset Healthcare University NHS Foundation Trust (DHUFT) regarding escalating the hot and cold sites model.
- 9.7.3 There was concern at the lack of communications to GPs in relation to Covid-19, particularly from DHUFT, which had meant PCNs were having to develop their own models.
- 9.7.4 There was a need for a strong and consistent approach and urgent discussions were underway with the Chief Executive at DHUFT. The CCG's Assistant Clinical Chair had been involved in drafting operating guidance for GPs which would be communicated imminently.

9.7.5 It was suggested that this be a workstream under the tactical command group for health and care which linked into the Local Resilience Forum which should enable appropriate timely responses from all partners.

9.7.6 The Governing Body **noted** the Integrated Care System (ICS) Delivery Update.

10. Wider Healthcare issues

There were no Wider Healthcare issues to note.

11. Committee Reports, Minutes and Urgent Decisions

11.1 Reports

11.1.1 There were no reports to note.

11.2 Minutes

Approved minutes

11.2.1 Primary Care Commissioning Committee (Part 1 – Public) – 4 December 2019.

The Governing Body **noted** the approved minutes from the Primary Care Commissioning Committee (Part 1 – Public) – 4 December 2019.

Draft minutes

11.2.2 Primary Care Commissioning Committee (Part 1 – Public) – 5 February 2020.

The Governing Body **noted** the draft minutes from the Primary Care Commissioning Committee (Part 1 – Public) – 5 February 2020.

11.3 Urgent Decisions

11.3.1 There were no urgent decisions to report.

12. Questions from the Public

12.1 There were no public questions.

13. Any Other Business

13.1 The Chief Finance Officer said following Governing Body approval of the Ambulance Joint Commissioning Committee

Terms of Reference at its meeting on 22 January 2020, a number of subsequent amendments had been made. She ran through the changes as set out in the document circulated to Governing Body members separately from the agenda papers. The Governing Body **approved** the changes as set out in the document.

14. **Date and Time of the Next Meeting**

14.1 The next meeting of the NHS Dorset Clinical Commissioning Group Governing Body would be held on Wednesday 13 May 2020 at Vespasian House at 2pm.

The Special Governing Body meeting to approve the Annual Report and Accounts would be held on Wednesday 20 May 2020 at Vespasian House at 11am.

15. **Exclusion of the Public**

It was resolved that representatives of the Press and other members of the public were excluded from the remainder of this meeting having regard to the confidential nature of the business transacted, publicity of which would be prejudicial to the public interest.

