

Minutes of the Northern Locality Clinical Board held on: 10 April 2013

Held at Crown Yealm House, South Molton from 14.00 – 16.00

Minutes number: NL13.04.01

Present: Dr John Womersley (Chair), Dr Duncan Bardner (GP), Dr Darunee Whiting (GP), Caroline Dawe (Managing director – northern locality), Carol Albury (Prescribing lead), James Wright (Head of commissioning), Lorna Collingwood-Burke (Deputy chief nursing officer), Kevin Wheller (Locality chief finance officer), Barbara Jones (Head of contracting), Mark Elster (Locality patient safety and quality manager), Hannah Nicholas (Locality communications manager), Tracey Polak (Consultant public health – Devon County Council).

Apologies: Dr Chris Bowman (Vice-Chair), Dr Stephen Miller (Sessional GP), Dr Tim Chesworth (GP), Richard Croker (Head of medicines management and optimisation), Frances Williams (Communications lead – northern and eastern),

Minutes: Ruth Carter (Business and governance manager)

Section 1

Opening business

1. Sign in, register of interests and apologies

Apologies were noted (as above). There were no public attendees to sign-in. Board members were asked to sign-in and to declare any interests further to those already on the declaration register for the locality which will be updated. No new declarations were made which directly impact on today's agenda.

2. Chair update and welcome

Dr John Womersley opened the meeting and welcomed the board to the NHS Northern, Eastern and Western Devon Clinical Commissioning Group; Northern Locality's first clinical board meeting. It was noted that all present had been through rigorous interview processes and attendees were congratulated on their new appointments.

3. Minutes and actions of previous meeting held on 13th March 2013

The minutes from the March meeting were agreed as accurate and signed by the Chair. Actions arising were reviewed and closed appropriately.

Safety and quality update

4. Patient safety and quality update

A paper was provided by Mark Elster entitled 'Patient safety and quality report: April 2013'. On the cover sheet the board were requested to:

- Note key quality of care issues and recommend appropriate action or challenge.
- Consider each noted action with regards to on-going support and assurances required.
- Provide on-going feedback in respect to the content and presentation of this report.

The layout of the reporting is being reviewed to ensure that relevant and up to date information is captured in an appropriate reporting format for the board. It is likely an interim reporting structure will be used next month to allow time for the emerging model. The content of the report was reviewed with discussion focusing on key quality care issues including;

Stroke – February figures from Northern Devon Healthcare Trust show a fall in performance, continuing the trend of previous months. The healthcare provider have cited pressures within the system having an adverse effect on the stroke pathway, these include an increase in the number of stroke patients, an increase in admissions through the accident and emergency department and other winter related pressures. Concerns were raised regarding the sustainability of the service with the Chair citing the recent Francis report which stated; 'Any service incapable of meeting fundamental standards should not be allowed to continue'. It was agreed that re-assurance was required on the sustainability and safety of the service. When previously raised with the provider they have not delivered on requests for an updated 'combined stroke action plan'. Timescales for turnaround of performance were raised with a decision required around actions to be taken to ensure performance improvement. Need to ensure that enough time is allowed for the provider to be able to meet formal improvement targets. A request was made to better understand the options open to commissioners when providers fail to meet quality targets or indicators. It was discussed that imposing financial targets should be considered only as a last resource with preference being to work supportively with providers and or partners to mutually beneficial results.

A suggestion was made of using the Pencord stroke modelling system used by Royal Devon and Exeter Hospitals NHS Trust to generate conversations to assist in the development of an action plan.

Mark Elster informed the board of the appointment of Verity Ellis as the Equality and diversity manager for the Clinical Commissioning Group within the Patient Safety and Quality team. Part of her role will be to support the board and work with the communications team in respect of equality and diversity information and projects.

Action – Darunee Whiting is asked to talk to Tim Chesworth regarding the possibility of using the Pencord modelling system.

Action – Mark Elster and Barbara Jones are asked to raise the stroke performance figures formally at the Clinical Quality Review Meeting this week (Thursday) and escalate through the contracting route in order for a remedial action plan to be set out complete with timescales for turnaround of performance and evidence of sustainability and to feedback to the board.

Performance

5. Weekly performance report, week ending 17th March 2013

There were no new issues to report or any information significantly different from the March meeting. Elective admissions are down and referral to treatment figures low all year. Accident and emergency figures spike and dip accordingly in relation to expected winter pressures with a small overall increase on year to date against last year. Also the Northern Devon District Hospital will be in breach of the four hour target for patients being seen in the accident and emergency department within four hours for Quarter four of the last financial year. Ambulance handover times could be improved, failure of this target will incur nationally set financial penalties to the North Devon Hospitals Trust. It is expected that the urgent care forum once set up will produce projects to support and improve urgent care processes; a whole system approach will be required including South West Ambulance Services Trust and out of hours services.

An early indication for the referrals position show that levels at the end of the financial year will be around 0.9% above the level for the previous year. This is a significant achievement in controlling the growth in numbers shown in previous years.

Performance in relation to slot availability was commented on as performance appeared to be deteriorating. It was remarked that the number of available slots for new patients were decreasing despite referrals for new patient appointments remaining nearly level, it was stated that this could be for a variety of reasons including consultant annual leave and possible clinic set up changes. Other sources of referrals may also have an impact and a specialty based analysis would be required to understand further.

ACTION – Mark / Barbara to request breakdown of slot availability analysis by clinic type at the Clinical Quality Review meeting this week.

Commissioning Plan

6. Northern locality commissioning plan

A draft paper was submitted by James Wright entitled Northern Devon Locality plan 2013-2014, on the cover sheet the board were requested to;

- Note and consider wider implications with the Care Closer to Home Agenda.

The draft nature of this paper was highlighted with reference to the origins of the paper being to support the authorisation process for the NHS Northern, Eastern and Western Devon Clinical Commissioning Group and that it had been built on previous plans residual to the Devon Primary Care Trust. A need was highlighted to start building these plans into the Clinical Commissioning Group's workload and incorporating the vision and values of the new organisation to ensure a more robust plan for next year with a draft available for September Board with visions and timelines going forward. There are key pieces of work within the plan which require clinical feedback to the board and discussion at the executive team meetings. A proposal was made of adding a standing item to the board agenda on a quarterly basis for a portfolio report to allow for feedback of the projects and key pieces of work, this would be a focused, short report on key updates and progress.

Action – John Womersley is asked to raise for discussion at next Executive team meeting

Action – Mark Elster; is asked to draft a paragraph on the Locality's commitment to Patient Safety and Quality and add this to the report.

Finance

7. Finance update

A PowerPoint presentation was provided by Kevin Wheller highlighting the high level make-up and allocation of finances within the Clinical Commissioning Group including how the previous Primary Care Trust resources were distributed between the new organisations and what proportion of finance is to be allocated to Localities and planning assumptions featured within calculations for headroom, surplus and contingency funding. Slides will be made available upon request.

Public questions

8. Questions from the public

There were no questions asked from members of the public on this occasion.

Closing business

9. Date and time of next meeting

The next meeting of the Northern locality clinical board is to be held as a joint meeting with the Eastern locality on 08th May 2013 and is to be held at the Great Western Hotel in Tiverton, this is not a meeting for public attendance.

The next Northern locality meeting open to the public for attendance is to be held on the 12th June 2013 from 14.00 – 16.00 and will be held at Crown Yealm House, Pathfields Business Park, South Molton.

Section one of the meeting closed at 15.20. Section two (confidential section) held 15.20 – 16.10.



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12/06/2013