

Minutes of the Northern Locality Clinical Board held on: 14 August 2013

Held at Crown Yealm House, South Molton from 14.00 – 15.00

Minute's number: NL140813.05

Present: Dr John Womersley (Chair), James Wright (Head of commissioning), Dr Chris Bowman (Vice-Chair), Caroline Dawe (Managing director – northern locality), Kevin Wheller (Locality chief finance officer), Barbara Jones (Head of contracting), Mark Elster (Locality patient safety and quality manager), Frances Williams (Communications lead – northern and eastern), Richard Croker (Head of Medicines Optimisation, Northern and Eastern Localities), Andrew Kingsley (Lead for healthcare acquired infection), Dr Duncan Bardner (GP), Tracey Polak (Consultant public health – Devon County Council), Dr Stephen Miller (GP), Dr Tim Chesworth (GP),

Apologies: Lorna Collingwood-Burke (Deputy chief nursing officer), Alex Aylward (Non-Executive member, CCG governing body) and Dr Darunee Whiting (GP),

Minutes: Ruth Carter (Business and governance manager)

Section 1

Opening business

1. Welcome, Sign in, register of interests and apologies

Dr John Womersley chaired the meeting and welcomed both board members and the members of the public in attendance and explained the process for submitting questions. Board members were requested to sign in and also to declare any new interests or conflicts of interest with the agenda for this meeting. No new interests or conflicts of interests declared. Apologies were noted as above.

2. Patient Story

As an important reminder that the patient is at the centre of everything we do, the board meeting opens with a patient story. This month Mark Elster presented slides detailing a patient story around patient transport and featuring the Patient Advice and Liaison service (PALs) service.

Action – RC to circulate the slides with the minutes.

3. Chair update and previous minutes of the Board meeting held on 10th July 2013

The minutes were agreed and signed as a true and accurate record of the meeting. Action arising was Barbara Jones to lead work around early warning measures - this is in progress with reviewing information.

An update was given by the chair including;

The new 111 service set to go live with a soft launch from the 1st September when the 111 phone line will be turned on; 3rd September NHS Direct will close, and from 1st October 111 will go live. The Northern locality will be the first area in Devon to go live. Dorset figures are positive and we will benefit from their experience.

The Interview for a lay member to join the board was successful and the HR process is in its final stages of completion. We hope to make a formal announcement soon. The role of the lay member has a vital part on our board to help us with the engagement process; to make sure that our engagement process is effective and to engage with recognised hard to reach groups.

The chair recommended a document; 'The NHS belongs to the people – A call to action' which will be put on our website, this document sets the scene for where the NHS is and where we need to be, it calls the public to have a say in the future of the NHS, the chair quoted the document that "to do nothing is not an option".

Action – RC to put this document on our website

4. Locality Managing Directors Report

Caroline Dawe, managing director of the northern locality presented her report for information; the content of the report can be seen on our website at;

<http://www.newdevonccg.nhs.uk/northern/more-about-us/board-meetings-and-papers/august-2013-northern-locality-clinical-board-papers/100534>

. Key items included;

- Care closer to home
- Torrington Community Cares
- Practice visits
- Clinical Pathway Groups

No new actions were recorded relating to this report.

5. Locality Board Report

This briefing report covers contracting, finance, key local and national targets for quality and performance for providers managed by the northern locality. The report highlights areas of concern, details the actions being undertaken to improve the situation and provide the board with assurance around the operation and delivery of healthcare within the locality.

The report was introduced, then handed over to relevant leads to speak to the detail within the report which was presented for information and assurance purposes. The content of this report can be seen at; <http://www.newdevonccg.nhs.uk/northern/more-about-us/board-meetings-and-papers/august-2013-northern-locality-clinical-board-papers/100534>

Highlights, questions and actions in relation to these reports are reported below;

Assurance Reports

These were outlined as per the report.

Patient Safety and Quality

Mark Elster spoke to the content of the Patient Safety and Quality section highlighting to the public that this is a high level report for information. More detailed analysis of individual cases happens outside of the public meeting due to patient identifiable information and confidentiality responsibilities of the organisation. This more detailed information is available to board members for information and assurance purposes. It was also highlighted that while the majority of the items within the report were classed as 'red' this is because only concerns are required to come to the board, a lot of indicators within the locality are green and progressing without the need for analysis.

Questions arising relating to this section of the report;

- 1) Why in the patient quality dashboard – pressure sore rates, does North Devon appear to have a high prevalence? The answer; the data in the dashboard includes NDDH, community hospitals and community nursing figures – direct comparison to other providers with different footprints would be of questionable value – a member of staff in Business intelligence is looking out the community hospital figures only which can be fed back at a later date.
- 2) Is the Barnstaple Leg Club a pilot?
Yes the Barnstaple Leg Club pilot is predominantly supporting patients from the Community Nursing caseloads, (from the Barnstaple Cluster GP practices for the purposes of the pilot). The Leg Club has been running for 15 out of a 18 month period as a test of change. The findings of the pilot are to be shared with the Locality Board in order to seek approval for continuation of the work beyond the pilot phase; spreading good work to other areas if successful. The Leg Club members receive on going treatment and support in a social group setting within the Barnstaple area. Local performance is currently being reviewed against both national data and in respect to the performance noted through the other leg clubs nationally. Local patient experience data is also being used as part of the evaluation report. The Leg Club pilot is currently under formal evaluation, prior to the submission of the proposal paper to the September Locality Board for evaluation and decision on further work. The findings of this test of change will be brought back to the September Locality Board. Board members were extended a further invitation to attend the Barnstaple Leg Club, (every Thursday morning, Living Wells Resource Centre Barnstaple between 9-1).
- 3) Falls data – Why does north Devon appear to have a much higher number of falls than Royal Devon and Exeter Hospital data? This is due to the community hospitals falling under the Northern Devon Healthcare Trust for northern and eastern community hospitals.
- 4) Clarification on wording on page 21 – “the Locality is responsible for the contracts”
The locality is responsible for managing the contracts.

Finance and Contracting

This report covers information up to the end of June. Detailed contracting information has now been received to show performance of provider contracts. The largest of these contracts is with Northern Devon Healthcare Trust. An improvement in the overall position is expected in the next report once the effect of a number of QIPP schemes can be seen. The financial position of the locality impacts on the overall position of the Clinical Commissioning Group. Kevin Wheller and Barbara Jones spoke to the content of the report.

No new actions were arising from this section of the report.

Communications

Fran Williams spoke to the content of the communications section of the report in relation to the work of the Communications team and the ways in which the team supports the Locality. The success of the July heat wave campaign was highlighted in respect of getting the message about safety in the sun out to potentially vulnerable groups
No new actions were arising from this section of the report.

General Business

6. Clinical Pathway Groups flash reports

A number of flash reports were presented to update the board on the progress of some of the Clinical Pathway Groups; the work of these groups is reported to the board for updates and assurance on a rolling basis. The reports received by the board and actions / highlights this month were;

- **Urgent Care**; the urgent care forum has now met twice and consists of multiple organisations working together including representation from NHS England.
- **Stroke**; the early supported discharge team has now won two national awards and been highly commended, plans are being developed to increase the provision of this service.
- **Respiratory**; a joint breathlessness clinic is underway with Northern Devon Healthcare Trust. Funding for the telehealth project expires in December and a decision will need to be made at the September Board based on the outcomes of the project.

Action – James Wright to feedback timescales of board paper to relevant lead within the team.

Question; respiratory flash report point 3.4 Implement Community and Virtual clinics in Torrington from 1st Sept, this was coloured red for seriously off target. The question came from a member of the audience ‘if this is seriously off target will this impact on the quality of community services in Torrington and therefore delay the bed closures’.

Action – RC to investigate and feedback to the board and the member of the public (contact details given).

Post meeting comment regarding the question above, the answer given post meeting by a member of the commissioning team is; ‘Virtual clinics’ are a new initiative and are not actual clinics where patients attend. They are aimed at testing out an annual case review process between primary and secondary care clinicians predominantly for education/consultation purposes and to strengthen joined up working between a GP and specialist. Being unable to develop this initiative currently will have no effect on the usual commissioned care or services received by a person with respiratory illness. Nor would there be any impact on whether individuals could be cared for at home by appropriately skilled clinical staff if they had the need for this level of care.

- Referral management. Concerns regarding the PSA tracker – lack of implementation from NDHT, a letter has been written and now awaiting a response.
- Ophthalmology. Concerns regarding pre-school vision screening, awaiting national guidance.

Action – TP to find out the current situation with the National Guidance

7. Torrington Community Cares

The Board acknowledged the public concerns in relation to the Torrington Community Cares project including those from the District Council. The Locality will review the process with Northern Devon Healthcare Trust. The Locality stated that this is their number one priority to work with the community and to engage on any plans even if they are temporary. The Locality will meet with the district council, county council and other interested group. It was noted that no decision had been made on initiating the pilot as feedback from the public was still being accepted. A meeting is due to be held this evening 14 August 2013 with MP Geoffrey Cox and local councillors to discuss the future of this test of change in Torrington.

Public Questions

8. Written questions from the public

There were no questions submitted prior to the board from members of the public on this occasion.

Closing business

9. Date and time of next meeting

The next Northern locality meeting open to the public for attendance is to be held on the 11th September 2013 from 14.00 – 17.00 and will be held at Crown Yealm House, Pathfields Business Park, South Molton.

Section one of the meeting closed at 15.00

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Signed;

Date;

Name; Dr John Womersley

Job Title; Chair