

Board Meeting:-	Open Session	
Venue:-	Board Room, Urgent Care 24 (UC24)	
Date:-	25 May 2017	
Time:-	10.00am	
Attendees:-	Apologies:-	Date of Next Meeting:-
<p>Executives (EDs) Kate Lucy (KL) <i>Chief Executive V</i> Dr Mary Ryan (MR) – <i>Medical Director V</i> Scott Lingard (SL) – <i>Director of Finance V</i> Jay Carr (JC) – <i>Director of Service Delivery</i> Helena Leyden (HL) – <i>Director of Quality & Patient Safety</i></p> <p>Non Executives Director (NEDs) Alan Stuttard (AS) <i>Chair V</i> Kathryn Foreman (KF) <i>V</i> Paula Grey (PG) <i>V</i> Pat Higgins (PH) <i>V</i></p> <p>In attendance: Alison Hughes (AH) – <i>Associate Director of HR</i> Margaret Swinson (MS) – <i>Company Secretary</i></p> <p><i>V indicates a voting member of the Board</i></p>	<p>Jane Keenan (JK) – <i>Chief Operating Officer/ Deputy Chief Executive V</i></p>	<p>27 July 2017</p>

Item		Action
1.	<p>Apologies and welcome</p> <p>The Chair welcomed those attending and noted apologies from Jane Keenan.</p>	
2.	<p>Declarations of Interest</p> <p>There were no new declarations of interest.</p>	
3.	<p>Minutes of the last meeting</p> <p>The minutes of the meeting held on 27 April 2017 were agreed unamended.</p>	
4.	<p>Matters arising and Action Log progress</p> <p>The Action Log was reviewed.</p>	

	<p>Action 1. Safeguarding diagnostic: The Board noted the proposal for a Task and Finish approach to continue improvements in safeguarding.</p> <p>Action 2. Balance of Part 1 and Part 2 Business: The Audit Committee had considered a paper prepared by MS and noted that business had been allocated appropriately (see also items 9.5 and 10.3).</p> <p>Item 5 (Chair’s Report) no 4: PG reported that she and MR had also been at the meeting. The Board noted that Ged Fitzgerald had been arrested in connection with a police operation at Lancashire Council, along with three other men.</p> <p>Out of Hours Contract Extensions: KL reported that 1 year extensions had been agreed and that both Liverpool and Knowsley had indicated that a further extension of 1 year would follow. The Board was advised that a national moratorium on commissioning out of hours services was in place, consistent with the proposed changes in urgent care provision.</p>	
<p>5.</p>	<p>Chair’s and Non-Executives’ Report</p> <p>5.1 Monthly Report</p> <p>AS presented his report and discussion focussed on the recent cyber attack.</p> <p>AS had received updates from KL on the impact of the attack on UC24 who reported that, although UC24’s systems had held up well, the decision made by iMerseyside to turn off the Adastra platform had significant effect and staff had managed as well as could be expected. Following the weekend the paper records a team had been transcribed onto Adastra and forwarded to the relevant GP practices. This work was approaching completion. JC advised that it was unlikely the weekend’s activity could be accurately measured against NQRs and the Board agreed that the weekend of the attack should be excluded from the performance reports for May.</p> <p>The Board was informed that 2 complaints had already been received, one of which had been sent directly to Liverpool Clinical Commissioning Group (LCCG), and it was likely that further complaints would be received in the following weeks.</p> <p>A review was underway and lessons, both internal and external, were being identified. While the internal lessons would be implemented immediately, it was less clear how the external lessons would be reflected in system change. The key external issue identified to date was the need for UC24 to be included in major incident communications.</p> <p>The attack had taken place when the organisation was already busy and staff had undertaken additional work. As a consequence a number of regular items had been put on hold by those handling the consequences during the following week.</p> <p>The Board:</p> <ul style="list-style-type: none"> • Noted the Chair’s report • Thanked staff for their response to the Cyber Attack. 	
<p>6.</p>	<p>Chief Executive’s Report</p> <p>6.1 Monthly Report</p> <p>KL introduced her report highlighting:</p> <ul style="list-style-type: none"> • Easter: April performance had been good in spite of the high demand over the Easter weekend. 	

	<ul style="list-style-type: none"> • Out of Hours Contract: The contract extension provided a positive opportunity for UC24 to co-produce the new service profile. • Contract Variation: The contract variation work was progressing. • Clinical Advice Service: The service was developing and plans were being put in place to extend the service into the Out of Hours period in line with the rest of the North West. • GP Streaming: The profile for the service had been dictated nationally, based on the Luton & Dunstable model. MR and HL were working to influence the local expression of the service in light of UC24's local evidence. • Start of the Year events: The feedback from the events had been very positive and there had been high levels of engagement from NHS 111 and Sefton GP Practice staff. AH thought that use of an external speaker had increased the sense among staff that they were being invested in by UC24. KL indicated that more work was necessary, and would take place, to increase awareness of the organisation's objectives as this had not been the main focus of the events. • Community Services: KL outlined her engagement with partners engaged in the planning and delivery of community services. She had spent half a day with Liverpool Community services and an invitation had been extended for them to meet the UC24 Leadership team. She and HL had also met with Jo Rafferty and KL had also been invited to join the Strategic Partnership group at Mersey Care, Community Services provider for Sefton. Since writing her report, a letter inviting UC24 to be part of the group formulating a future integrated system of care, such as was being delivered by Alder Hey for children and MR was due to meet the Medical Director from Alder Hey. <p>Following the outcome of the General Election, new plans and proposals would be laid out.</p> <p>The Board:</p> <ul style="list-style-type: none"> • Noted the Chief Executive's report. 	
7.	<p>Performance</p> <p>7.1 Integrated Performance Report</p> <p>KL introduced the IPR emphasising that performance had been good and that work was ongoing in relation to workforce sustainability in Out of Hours .and Primary Care.</p> <p>Service Delivery:</p> <p>JC presented the service delivery report.</p> <p>Out of Hours: Performance had been good, including the high demand Easter weekend.</p> <p>NHS 111: Performance was stabilising. Sickness was under control with 0% reported for clinical staff. Incidents within the service were being managed more promptly.</p> <p>Urgent & Community Services: The long-standing services continued to perform well but JC reminded the Board that daytime Primary Care Services were likely to undergo some changes. In response to queries, JC informed the Board that part of the downturn in utilisation was due to ongoing discussions about the length of appointments and also the introduction of access to EMIS. He also advised that the clinical time available had been reduced due to the use of GP resource in the Clinical Advice Service.</p> <p>Sefton GP Practices: The transition from mobilisation to stabilisation had taken place. A number of specific areas of progress were noted:</p> <ul style="list-style-type: none"> • Lessons learned had been captured 	

- An interim senior group practice manager, who managed two of the practices and had previous experience with the CCG, had been recruited. Recruitment would take place for the definitive role.
- The finances, though hard, were better understood and work was being undertaken to ensure that all funds due were identified and received
- The monitoring and reporting of performance was being considered.

The Board noted:

- The ongoing clinical workforce challenges and the re-commencement of recruitment for NHS111 clinicians
- The steady, good performance of Out of Hours and Urgent & Community Services
- That the forecast performance column was influenced by past performance which was partially the reason for the NQR8 and Friends & Family forecast. A number of telephone calls had also been received suggesting that formal complaints would be made
- That the Out of Hours Contract Management Board had become accustomed to good performance and that this did not help them appreciate the service challenges
- The positive reception of the UC24 presentation by SL and Anna Cumbers at the Halton Quality Account meeting.

Finance:

SL reported that Quarter 1 would be challenging financially. The position was under review by the Leadership Team with a view to mitigation through acceleration of the efficiency programme and close monitoring of costs. The Board was advised to expect an overspend in March.

KF brought some minor issues raised through the external audit process to the Board's attention. These issues centred on the readiness of UC24 for the audit fieldwork visit and had highlighted the resource pressure on the finance team. This pressure should be alleviated by two new staff members currently being recruited.

The Board noted that:

- The financial position was being closely monitored.

Quality:

HL presented the information in the report, highlighting the investigation underway into the death of a young man, the outcome of which would be presented when the investigation report was complete. The Board was informed that 84 complaints had been closed during the year, 38 of which had been closed outside the target 25 working day timescale. However the Board noted that recent performance showed significant improvement with 5 open complaints at the end of April 2017 rather than 17 at the end of April 2016. AS affirmed the importance of monitoring the trend in complaint closure and KF noted that a report had been received for NHS111.

Safeguarding: the external review had been considered at the Quality & Workforce Committee meeting at which a task and finish approach to improvement had been agreed. HL reminded the Board that work was required to broaden organisational awareness beyond NHS 111.

The Board noted:

- That the GP practices were beginning to engage with UC24 quality processes

	<ul style="list-style-type: none"> • That a task and finish approach was being taken to improving safeguarding processes • The statistics for the closure of complaints. <p>HR:</p> <p>AH reported that:</p> <ul style="list-style-type: none"> • Although NHS111 sickness was being calculated, global data was not yet available due to the failure of RotaMaster to recognise sickness spanning month ends. This would be resolved by an upgrade in early June • Training compliance remained good • Appraisals completion was being reported on the basis of manager confirmation of completion. Analysis would identify the reasons and trends for noncompliance • Staff numbers reflected the addition of the Sefton staff, who were not yet reflected in the appraisal data as the appraisal numbers did not include those in their probationary period, on sickness or maternity leave etc. <p>The Board commended the HR team for the improvements made.</p> <p>The Board:</p> <ul style="list-style-type: none"> • Noted the further progress being made in relation to HR matters. 	
8.	<p>Strategy</p> <p>8.1 No strategy items were scheduled for discussion in the open part of the Board meeting.</p>	
9.	<p>Governance</p> <p>9.1 Risk Register items 15+ post mitigation</p> <p>CR17: Fulfilment of the GP rota: It was emphasised that the risk related to all services not just Out of Hours. The Board noted the changes which had taken place in mitigation and were reminded that risks which took time to address needed to be kept fresh and up to date to maintain progress.</p> <p>The Board:</p> <ul style="list-style-type: none"> • Noted the risk and the work being undertaken in mitigation. <p>9.2 Sefton Interim Policy Arrangements</p> <p>As part of the move from mobilisation to stabilisation, the Quality & Workforce Committee had received a paper recommending the adoption of the current policies being used in the GP practices on an interim basis. During this interim period, all practice policies would be reviewed and harmonised across the practices and as far as possible with UC24. The Board was advised that some UC24 policies, including incident and complaints policies, were already being applied in the practices.</p> <p>KL reminded the Board that UC24 staff were continuing to learn more about the practices and that NHS England were being kept regularly up to date with developments.</p> <p>The Board:</p> <ul style="list-style-type: none"> • Agreed to adopt the Sefton GP practice policies on an interim basis. 	

9.3 Duty of Candour Policy

The Board noted that the Duty of Candour policy worked alongside the complaints and incident management policies and ensured that appropriate review processes had taken place.

The Board approved the Duty of Candour Policy.

9.4 Hand Hygiene Policy

The Board noted that this policy would require significant follow-up work in relation to embedding the procedures. Procedures would be monitored and assessed as part of the clinical audit cycle.

The Board approved the Hand Hygiene Policy.

9.5 Governance Review

MS presented a paper focusing on governance matters.

Non-Executive Director Terms: The Board noted the Non-Executive Director terms of office and requested a change in text from 'interim' to 'intervening' in relation to reviews taking place between appointment and 6 years in office. In response to a query from PH, MS indicated that the Nomination & Remuneration Committee could recommend Non-Executive Director appointments to the Board but did not itself appoint. The Board also noted that the Nomination & Remuneration Committee should be included in the committee reporting process, though such reports would generally be of a confidential nature.

Review of Rules: The Board noted that a review of the Rules would be undertaken with a view to equipping UC24 for the future both structurally and in terms of managing its widening business portfolio. The review would also ensure that UC24 adhere to the Rules.

Allocation of items between open and confidential parts of the Board meeting: MS reported that the paper presented to the Audit Committee detailed each item taken as confidential business and the Board noted that the allocation was appropriate.

Meeting frequency: The Board agreed the proposal to move to bi-monthly meetings of both Board and its Committees but noted that Committees could hold additional meetings should they be necessary to address business pressures such as the approval of policies. The Committee chairs would speak to their Executive Leads in the interim months.

With the change in meeting timetable, an additional 8 days would be available for informal discussions, visits and other engagement at or on behalf of UC24 for example in the building of relationships with key partner organisations. MS agreed to circulate the schedule of partner organisation Board meetings to Non-Executive Directors.

The Board discussed the production of papers to support both Board and Committee meetings. A seamless process with minimal duplication was the goal and would be considered over the coming two months in preparation for the July Board and Committee meetings. The Board agreed that one of the June dates would be used to discuss the practicalities of the new pattern.

The Board:

	<ul style="list-style-type: none"> • noted that a review of the Rules would be undertaken during the current year • agreed that one of the June meetings would be used for developing the new pattern of working • requested MS to circulate the list of partner organisation Board meetings • agreed that the frequency of Board meetings will be reduced to bi-monthly with the next meeting of the Board taking place in July 2017 • noted that additional Committee meetings or interim reports to Committee members might be required from time to time. 	
<p>10.</p>	<p>Committee Reports</p> <p>10.1 Quality & Workforce</p> <p>PG presented the report, noting that most of the items had been raised under other items of Board business. The Committee particularly commended the progress in provision of Equality & Diversity data to the Board, though it also noted that a number of staff had failed to complete the forms.</p> <p>The Board:</p> <ul style="list-style-type: none"> • Was assured that the Committee was giving due scrutiny to the information presented to it • Noted the main issues from the meeting <p>10.2 Finance & Performance</p> <p>PH reminded the Board that, although performance had been strong in April, the bank holidays in May continued to present a workforce challenge.</p> <p>She noted that as Month 1 had not been reported and the next scheduled Committee meeting was not until July, reporting Month 3, an interim report of Month 2 data would be advisable. It was hoped that, in future years, information for Month 1 could be produced for consideration at Board and Committee.</p> <p>The Board:</p> <ul style="list-style-type: none"> • Was assured that the Committee was giving due scrutiny to the information presented to it • Noted the main issues from the meeting <p>10.3 Audit</p> <p>KF suggested that the report was self-explanatory. The three year rolling audit programme would be prepared in advance of the next meeting following discussion of the first iteration in May. The programme would need to be flexible in responding to the risk register and encompass the wide range of activity which could be described as audit.</p> <p>KL suggested a review of the standard recommendations used on Committee reports.</p> <p>The Board:</p> <ul style="list-style-type: none"> • Was assured that the Committee was giving due scrutiny to the information presented to it 	

	<ul style="list-style-type: none">• Noted the main issues from the meeting	
11.	Any Other Business Members of the Board were invited to move to confidential items of business.	

Date of next meeting: 27 July 2017

Time: 10am

Venue: UC24 Board Room