

Board Meeting:-	Open Session	
Venue:-	Board Room, Urgent Care 24 (UC24)	
Date:-	27 July 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> Jay Carr (JC) – <i>Director of Service Delivery V</i> Helena Leyden (HL) – <i>Director of Quality & Patient Safety</i></p> <p>Non Executives Director (NEDs) Pat Higgins (PH) <i>Acting Chair V</i> Paula Grey (PG) <i>V</i></p> <p>In attendance: Alison Hughes (AH) – <i>Associate Director of HR</i> Danny Williamson (DW) – <i>Head of Finance</i> Margaret Swinson (MS) – <i>Company Secretary</i> Anne-Marie Aldridge - <i>Notetaker</i></p> <p><i>V indicates a voting member of the Board</i></p>	<p>Scott Lingard (SL) – <i>Director of Finance V</i> Kathryn Foreman (KF) <i>V</i></p>	<p>5 October 2017</p>

Item		Action
1.	<p>Apologies and welcome</p> <p>The Acting Chair welcomed those attending and noted apologies from Scott Lingard and Kathryn Foreman.</p>	
2.	<p>Declarations of Interest</p> <p>MR declared that she was now a Clinical Advisor to the NHS Transformation Unit. MS reminded the Board that the annual re-declaration would take place at the next meeting.</p>	
3.	<p>Patient Story</p> <p>HL shared a patient story which had been reported to the Contract Management Board. The patient's spouse had called the NHS 111 service and after DCA at UC24</p>	

	<p>had received a home visit from a GP. The family reported that they had received excellent care and attention throughout the process. The GP concerned was one of those travelling regularly from Poland and the Board's attention was drawn to the challenge of keeping GPs from within the EU in the current uncertain political situation.</p> <p>The Board noted that this was the first such input and that there would be a patient story, in some form, at each meeting.</p>	
4.	<p>Minutes of the last meeting</p> <p>The minutes of the meeting held on 25 May 2017 were agreed with the following amendment:</p> <p>Page 6 Item 9.5 Review of the Rules: The sentence 'The review would also ensure that UC24 adhere to the rules' should replace the final sentence in that paragraph.</p> <p>Matters arising and Action Log progress</p> <p>The Action Log was reviewed.</p> <ul style="list-style-type: none"> Action 1. Performance Report: data from the cyber attack weekend had been removed from the statistics. Action 2. Patient Death: Full investigation in progress. The outcome would be reported to Quality & Workforce committee and, as necessary, to Board. Action 3. Review of Rules & Business vehicle: superseded by items on the agenda. 	
5.	<p>Chair's and Non-Executives' Report</p> <p>5.1 Monthly Report</p> <p>PH presented a brief verbal report having been in post for only a few days. She thanked the Board for the confidence shown in her. KL thanked PH for her work and for the quality of the communication with Board members.</p> <p>The Board:</p> <ul style="list-style-type: none"> • Noted the Chair's report <p>5.2 Terms of office for Non-Executive Directors</p> <p>MS presented her paper, reminding the Board that all members had some level of conflict of interest in the discussion. The proposals set out in the paper had been offered to the Board in order to give continuity during the review period and to allow for flexibility in future Board membership depending on the outcome of the review process. The Board was reminded that at the end of the proposed extension period PG would not have completed 6 years and would be eligible for a further renewal should that be appropriate, though the terms of office as per the Rules suggested 3 years plus 3 years.</p> <p>The Board agreed</p> <ul style="list-style-type: none"> • To extend, on an exceptional basis, the term of office of Pat Higgins by 6 months to 31 March 2018 • To extend the term of office of Dr Paula Grey by 6 months to 31 March 2018, at which time a further extension would be possible subject to performance and organisational need • That Pat Higgins should be appointed Acting Board Chair. <p>5.3 Revised Committee Arrangements</p>	

	<p>The reduction in the number of Non-Executive Directors from 4 to 3 had triggered a review of the arrangements for chairing and attending Committees for the Non-Executive Directors. MS presented a paper which set out the position in light of the reduced number and suggested attendance for future meetings. The Board noted that the Terms of Reference for Finance & Performance and Quality & Workforce required 1 Non-Executive to attend therefore attendance did not require change but it was agreed that one of PG and KF would attend Finance & Performance in order to increase scrutiny. To comply with the TORs the Acting Chair would not attend the Audit Committee.</p> <p>A more substantial discussion took place in respect of the Nomination & Remuneration Committee. The Board agreed that the Chief Executive and the Associate Director of HR would attend committee meetings. After some discussion it was agreed that the Acting Chair would chair the Committee but also that MS would undertake a review of the Terms of Reference and present updated Terms to the Committee for discussion and to the Board for approval.</p> <p>The Board agreed:</p> <ul style="list-style-type: none"> • attendance at Committees as set out under section 2 of the paper, including attendance at Finance & Performance by either PG or KF depending on availability • that the Chairing of committees would remain unchanged, with the exception of the Acting Chair taking over as Chair of Nomination & Remuneration • that an initial review of the Terms of Reference for the Nomination & Remuneration Committee be undertaken and revised terms presented to the Board for approval. 	
<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"> • Out of Hours had performed well despite the continuing clinical workforce pressures. These had been raised with Commissioners and discussions regarding a multi-disciplinary approach were continuing. • Sefton stabilisation continued. • NHS 111 remained challenging. • The first Audit South West core review had resulted in a 'good' rating overall with 'excellent' for meeting patient need. KL thanked staff for their work during the audit. • NHS Cyber attack: UC24's resilience had been reviewed in light of the recent attack and a number of actions were required • UC24 continued to be represented at Liverpool Integrated Community Services events and to take a lead at AIM meetings. KL drew attention to a number of external events focussed on social benefit and on the development of future models of primary care. <p>The Board:</p> <ul style="list-style-type: none"> • Noted the Chief Executive's report. 	
<p>7.</p>	<p>Performance</p>	

7.1 Integrated Performance Report

KL introduced the IPR and handed over to the team for the detailed reports.

Service Delivery:

JC presented the service delivery report.

Out of Hours: Although performance continued to be good, the clinical staffing issues were challenging and this had been escalated to Commissioners. The financial performance of the service was affected by a combination of unfilled shifts and the need to pay enhancements on some shifts in order to maintain sufficient resource for service needs. The clinical challenges had been exacerbated by 12 GPs withdrawing from the service due to rising indemnity costs.

NHS 111: Performance remained stable with lower staff turnover and reduced rates of sickness.

Urgent & Community Services: Services were being monitored monthly and performance remained good.

Sefton GP Practices: Stabilisation continued. Four new salaried GP appointments had been made with the roles becoming more attractive due to the indemnity support available for salaried posts. An Associate Director of Service Delivery had been recruited who would focus on the GP practices.

Integrated Urgent Care: UC24 was ideally placed to deliver the changes likely to result from the implementation of Integrated Urgent Care and was involved in the discussions about service development. The direction and timescales for integration were subject to some local variation but it was expected that IUC would be implemented locally by April 2019, which would result in some overlap with the UC24 Out of Hours contract. KL emphasised that UC24 needed to maintain its interest and income in order to support the organisation through this change. A presentation would be made to the next Board meeting.

The Board noted:

- The ongoing clinical workforce challenges in Out of Hours
- The stabilisation evident in the NHS111 service
- The ongoing good performance of Urgent & Community Services
- The continuation of the stabilisation work in Sefton
- That an Integrated Urgent Care presentation would be made to the next Board meeting.

Finance:

DW presented the report in SL's absence. As previously reported, Quarter 1 had been seriously financially challenged finishing £132k behind plan. Some of the overspending related to inherited pressures in the Sefton service but it was hoped that ongoing salaried GP recruitment would reduce this. Expenditure was being monitored closely. The Board noted the position and the cash balance at the end of quarter 1.

PH requested that a key be added onto Appendix 9 to improve readability for those who were not financial experts.

The Board was advised that Commissioners had not yet agreed a CQUIN programme for the year.

The Board noted:

	<ul style="list-style-type: none"> • Financial performance for May and June • That the financial position was being closely monitored, in particular in relation to the GP practices. <p>Quality:</p> <p>HL presented the Quality report highlighting:</p> <ul style="list-style-type: none"> • The increase in complaints in June which was largely attributable to the Sefton GP practices where there had been some longstanding complaints in particular relating to locum use. • Three cases had been reported under StEIS. These related to potential drug fraud, the death of a patient referred through the Pathfinder service and one relating to the conduct of an out of area Agency GP which was being followed up by NHSE in the GPs own area • The reporting of complaints not resolved within 25 days was being reviewed in order to improve clarity of reporting to Board and Committee • The majority of safeguarding referrals continued to come through the NHS 111 service. The governance team was working actively with colleagues in Out of Hours to improve the rate of identification and reporting of these issues within that service. <p>The Board noted:</p> <ul style="list-style-type: none"> • The statistics for complaints • The work being undertaken in the review of StEIS cases and the identification of lessons for service improvement. <p>HR:</p> <p>AH reported that:</p> <ul style="list-style-type: none"> • Reliable sickness reports for services was not yet available through RotaMaster but work with RotaMaster to resolve this was ongoing. Sickness was being manually monitored and managed within services • Turnover in the period appeared high in relation to the target. A review of the target was going to take place to ensure it was appropriate for the size and nature of the organisation and roles on offer • The Health & Well-being advisor was undertaking exit interviews, particularly within the NHS 111 service, to ascertain the reasons why staff were leaving. This information would be collated and would inform future recruitment and retention work • Appraisal rates had improved further with only 7% of staff appraisals outstanding. Work continued in respect of those who were not attending for appraisal • The contract periods for Jo Robinson, HR lead for Sefton, and Linda Meagor, Health & Well-being Advisor, end in August. Both had made significant contributions to the organisation and were thanked for their work • Danny Williamson had secured a new role with Mersey Care. The Board congratulated him and wished him well, thanking him for his work for UC24. <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 Priorities for 2017/18</p>	

	<p>KL gave a presentation to the Board which would also be shared with staff and displayed in UC24's premises. The presentation is appended to the minutes.</p>	
<p>9.</p>	<p>Governance</p> <p>9.1 Risk Register items 15+ post mitigation</p> <p>CR13: Fulfilment of the GP rota: As indicated in the discussion of the IPR, this risk remained.</p> <p>The Board:</p> <ul style="list-style-type: none"> • Noted the risk and the work being undertaken in mitigation. <p>9.2 Governance Review</p> <p>MS presented a paper which updated the Board on the Governance Review, detailing each of the areas identified during June and July and their disposition. A number of matters would be dealt with through the review of the Rules or the preparation of the supporting document setting out custom and practice for Board working.</p> <p>The following areas were particularly noted:</p> <ul style="list-style-type: none"> • Until it remote access was available, hard copy papers would continue to be sent to Non-Executive Directors • The Staff Council had now met. MS would be providing briefing for members on the Board and its structure following which members of the Council would attend part 1 of the Board in pairs. PH would meet with those attending in advance to introduce herself • All future Board meetings would begin with a patient story • 360 degree reviews would be arranged as part of the development of the team. The Non-Executive Directors would be in the first tranche. These reviews would be part of a rolling programme rather than an annual occurrence. The process and delivery would be agreed by KL and AH. <p>The Board:</p> <ul style="list-style-type: none"> • noted the process for appointment of a new Non-Executive Director had been deferred pending completion of the review • noted the other actions and issue dispositions outlined in the paper. <p>9.3 Terms of Reference for the review of the legal vehicle and Rules of UC24</p> <p>MS presented her paper. The Board noted that the review would include the following:</p> <ul style="list-style-type: none"> • Company Secretary Role within and outside the Rules • Organisational Structure • Board skills • The presence and role of membership in light of the present organisational vulnerabilities • Those areas identified as part of the governance review document <p>The attached terms of reference were discussed. Staff consultation was to be encouraged through the Staff Council and Senior Management Team. The future structure needed to take into account opportunities and accountability. The Board looked forward to a further update at the next meeting.</p>	

	<p>The Board:</p> <ul style="list-style-type: none"> • Noted the terms of reference for the review • Agreed to proceed with the review <p>9.4 Job Role Review Policy</p> <p>AH advised the Board that a number of members of staff had requested job role reviews and this policy was designed to ensure all were considered through a consistent process.</p> <p>The Board requested that the Associate Director of Service Delivery be added to those listed panel members in para 5.3.2.</p> <p>The Board</p> <ul style="list-style-type: none"> • Approved the Job Role Review Policy as amended above. 	
<p>10.</p>	<p>Committee Reports</p> <p>10.1 Quality & Workforce</p> <p>PG presented the report highlighting the work which had been undertaken regarding the pay review and the progress made by the Learning & Development group on induction processes. MR drew attention to the review of clinical audit and the role of Clinical Guardian which was part of a refreshed approach to audit across the organisation.</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 advised the Board that the Committee had viewed the recovery plan and mitigations in respect of the quarter 1 cost pressures and that some areas of the efficiency programme were ahead of schedule. The major efficiency plan in relation to clinical workforce had not yet delivered all its savings but progress was being made in the implementation of skill mix changes.</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's report had been circulated with the papers. MS reported that the draft annual accounts had now been received, no major issues had been identified during the audit process and, following the internal audit report into the IPR a new process was in place for review of the report by leadership team prior to its presentation to the Board.</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>11.</p>	<p>Any Other Business</p> <ol style="list-style-type: none"> 1. The outcome of the Audit South West report would be circulated to staff 2. The Clinical Advice Service would be extended into the Out of Hours period in early August <p>Members of the Board were invited to move to confidential items of business.</p>	

Date of next meeting: 5 October 2017

Time: 10am

Venue: UC24 Board Room