

Board Meeting:	Open Session
Venue:	Meagor Room, PC24
Date:	29 <sup>th</sup> January 2020
Time:	After the Closed session

Attendees:	Apologies:	Date of Next Meeting:
Steve Hawkins – (SH) Chairman		
Jay Carr (JC) – Director of Service Delivery	Dr Mary Ryan (MR) – <i>Chief</i>	26 <sup>th</sup> March 2020
Heledd Cooper (HC) - Director of Finance	Executive	
Paul Cummins (PC) - NED		
Kathryn Foreman (KF) - NED		
Paula Grey (PG) - NED		
Paul Kavanagh-Fields (PKF) – Director of Nursing		
Sandra Oelbaum (SO) -Medical Director		
In attendance:		
Tracey Harrington (TH) Deputy Company Secretary		
Margaret Swinson (MS) - Company Secretary		
Susan Westbury (SW) – Associate Director of HR		

Item		Action
1.	Chair's Welcome, apologies for absence and opening comments	
	SH thanked everybody for attending the meeting. Apologies had been received from Mary Ryan.	
2.	New declarations of interest	
	There were no new Declarations of Interest to note.	
3.	Patient Story	
	The patient story had been taken in the closed part of the meeting.	
4.	Minutes of the meetings held on 28th November and 11th December 2019	
	The minutes were approved as a true and accurate record of the meetings.	
5.	Matters arising, action list progress and Corporate Risk Register	
	Matters arising:	
	There were no matters arising.	
	Action Log	
	Action 1. Cash Flow reporting: The Board was reminded that regular cash flow reporting would be incorporated for the 2020/21 financial year.	
6.	6.1 Chairman and Non-Executives' Report	
	The Chairman:	

informed the Board he had met with the Head of Social Care, Martin Farran in Liverpool who was promoting asset based community development (ABCD). MF was engaging leaders across many sectors seeking to make every contact count through smarter integrated working. SH had been involved as part of the voluntary sector, but noted primary care was involved. SH would also be meeting John Ashton who was also an advocate of ABCD;

had attended a presentation on Fair Funding which sought to redistribute funds according to need using indicators such as infant mortality rates;

PC explained that this approach had been adopted in Sefton and work was ongoing to engage with PCNs, Public Health and community connectors. The budget in Sefton was under pressure but Sefton would not be making budget cuts this financial year. Social Care accounts for 2/3rds of the budget and there were now 560 children in care;

SH opened a discussion on the Coronavirus to see if PC24 had any involvement in networks or were aware of disaster planning and quarantine as cases had reached Europe and airlines had started cancelling flights. PKF informed the Board there was no formal infrastructure or network to be part of nor had we been approached by NHSE or Commissioners at this stage. However, guidance had been received and disseminated via the PC24 Alert Process and the organisation was doing everything it could do at this stage. MS confirmed that there were elements of pandemic response within the Business Continuity Plan.

#### The Board:

- Noted the Chairman's report;
- Agreed that there should be a discussion about developing a primary care engagement strategy, at an away day.

### 6.2 Non Executive Board Membership

The Board noted that PG's term of office did not expire until 30 September and therefore this paper was not required.

# 7. Chief Executive's Report

The CEO had provided a written report highlighting the following:

- Performance over the Christmas holiday period with KPI compliance better than in December 2018 due to improved rostering and careful use of clinical resource;
- The IUC GP OOH Bid had been the focus of most executive work since Christmas. The bid would be submitted on 30 January. It had required a huge commitment from many staff members but we had achieved a submission to be proud of. Interviews for the shortlisted organisations would be on February 27<sup>th</sup>:
- The CQC revalidation telephone call for Crosby, Crossways, Maghull and Thornton had taken place and all four had retained their 'Good' ratings;
- The Executive team had been reviewing PC24's Strategic Vision and Objectives to ensure they reflected current work;
- The 'Crosby Village Library Project' was ongoing and meetings had taken
  place with builders and architects. Full costings for this plan were awaited and
  would be needed for future decision making. PC was also involved in the
  project;

 MR had spent an afternoon shadowing 2 receptionists at the Aintree ED service and had found it highly informative.

#### The Board:

Noted the report and thanked the CEO.

#### 8. Performance

## 8.1 Integrated Performance Report

SH asked that the report, as usual, be taken by exception.

JC informed the Board there was nothing exceptional to report but would like the increase of 15% in Out of Hours activity for December was noted and the teams had coped well.

KF sought further information in relation to the recruitment of nursing staff for the Asylum practice. The post, which is for a Band 5 to cover maternity leave, remained vacant. PKF explained that he had met with the Asylum staff, Dr Sara Wilks and the Practice Manager, Ann Pettit, to discuss issues. The decision was made to continue with agency and bank staff. Further meetings to discuss staffing requirements would be taking place. The Executive Team would review the situation further as some renegotiating of the service might be required in order to meet volume and skill demand.

#### The Board:

- Noted performance for November and December 2019;
- Was assured that action was being taken where required;
- Thanked the Executive and Leadership Teams and Committees for their support.

### 9. 9.1 Corporate Induction

SW had provided a copy of the Corporate Induction paper to the Board. The proposal had been commended by the Q&W Committee. Good induction would support comments earlier in the meeting about bringing TUPE or other new staff on board from day 1. Agreement had been made to trial a video induction approach and Board members committed themselves to taking part.

### The Board:

Agreed to trial the proposed corporate induction.

### 9.2 Leadership and Development

SW presented the paper which outlined generic and bespoke training for teams in relation to coaching, mentoring and team development. The programme was based on the NHS Leadership Model framework. There would be generic training and bespoke work for teams relating to coaching, mentoring and team development. The proposal had been commended by the Q&W Committee

#### The Board:

Agreed the proposed leadership and development programme.

## 9.3 Staff Survey

SW presented the proposal to introduce a staff survey for the employees of PC24 which would provide a baseline assessment from which to measure progress in the respect of the People Strategy. The questions were based on the NHS Staff Survey and an annual survey was in line with best practice in organisational effectiveness.

The Board:

Approved the proposal.

### 10. Governance

#### 10.1 Use of Retained Reserves

HC presented her paper which set out a proposal for the use of reserves in excess of the 6 months agreed at the November meeting of the Board. The paper explained the principles behind the proposal and offered some structural options.

HC explained that:

- When accounts had been closed the surplus was subject to tax and incorporated into reserves;
- On present financial performance there would be a substantial surplus in the current year;
- Each year's financial performance was based on income and expenditure committed or incurred in that year. Spending 'from reserves' showed in the accounts as current year expenditure and could result in the accounts showing an in year loss. Any such loss put PC24 at a disadvantage when bidding for new work;
- The proposal did not preclude non-recurrent in year spending, this was to be encouraged. A number of proposals had been considered and agreed.

The purpose of the paper was to look at how any surplus could be protected and available for future use without generating an in year accounting loss for PC24.

HC explained that PC24 would not have the same direct level of control, but that a vehicle could be established which had aims and objectives consistent with those of PC24 and in which PC24 had a strong voice. Funds could then be used for health and social care based projects, including projects led by PC24.

The paper invited the Board to consider which vehicle might serve PC24 best but HC stressed that, at this stage, no funds were being committed. The options set out in the paper had been prepared by lawyers assisting PC24 on this particular matter.

PG observed that the new Sustainability Committee which is being established would link very closely to this new vehicle. PC noted that the vehicle would have charitable objects and sought further explanation of how entities of this nature were used in the NHS. HC explained that it was legal and most NHS organisations had an entity of this type to support their entity. In response to concerns expressed by KF, HC assured the Board that the rules and governance around the Charity, including values and objectives, would be so closely aligned to those of PC24 that any decisions made should follow our principles. Local entities who met the values and objectives of the Charity, including PC24, would be able to apply for funds.

A full and lengthy discussion took place during which PKF expressed concern that some teams were struggling with capacity and questioned whether any surplus could be used to support this. HC reminded the Board that conversations about how

to use the surplus had been underway for the previous 12 months. The Executive Team as asked to consider this further outside the meeting.

HC explained that any change in the reserves policy would increase the 'fixed' reserve but any expenditure from reserves would still show as 'in year' expenditure and risks creating an accounting loss.

The question of capacity to process the Charity was raised. Both MS and HC expressed commitment to complete the work with appropriate legal support and the Board's agreement to the principles.

#### The Board:

- Thanked HC for her paper;
- Agreed to take forward the establishment of the Charity and to present further information to the March Board meeting;
- Noted the concerns expressed about the relationship between PC24 and the new entity, and the need to retain PC24's objectives in those of the new entity in order for PC24 to be eligible to access funds;
- Was assured that no funds would be moved into the Charity without prior Board approval.

# 11. Committee Reports

### 11.1 Quality & Workforce 20 November 2019

PG presented the report. The bulk of which had been discussed elsewhere on the agenda but she noted the following:

- The timescale target for completion of complaints in Primary Care was not being met;
- An Action Plan for the key findings from a StEIS report would be overseen by the PMO and reported to the Q&F committee.

## The Board:

- Was assured that the Committee was giving due scrutiny to the information presented to it;
- Noted the main issues from the meeting.

#### 11.2 Finance & Performance 20 November 2019

The report of the meeting had been circulated and had been discussed elsewhere on the agenda. PG Chaired the meeting as PC was present by phone. She outlined the following not already covered on the agenda:

The establishment of the IR35 status had to be finalised in the next few
months and asked for recognition on the level of work involved in identifying
the status the GPs.

# The Board:

- Took assurance that the Committee was giving due scrutiny to the information presented to it;
- Noted the main issues from the meeting.

## 12. Any Other Business

There being no other business, the meeting closed.

Date of next meeting: 29<sup>th</sup> January 2019

Time: 2pm

Venue: PC24, The Boyd Room