

Board Meeting:	Open Session		
Venue:	GoToMeeting		
Date:	30 July 2020		
Time:	10am		
Attendees:		Apologies:	Date of Next Meeting:
Steve Hawkins – (SH) <i>Chairman</i> Mary Ryan (MR) - <i>CEO</i> Jay Carr (JC) – <i>Director of Service Delivery</i> Heledd Cooper (HC) - <i>Director of Finance</i> Paul Cummins (PC) - <i>NED</i> Kathryn Foreman (KF) - <i>NED</i> Paula Grey (PG) - <i>NED</i> Paula Grey (PG) - <i>NED</i> Paul Kavanagh-Fields (PKF) – <i>Director of Nursing</i> Sandra Oelbaum (SO) – <i>Medical Director</i> <b>In attendance:</b> Margaret Swinson (MS) – <i>Company Secretary</i> Tracey Harrington (TH) <i>Deputy Company Secretary</i> Susan Westbury (SW) – <i>Associate Director of HR</i>		None	24 September 2020

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1.	Chair's Welcome, apologies for absence and opening comments	
	The Chairman welcomed all members to the meeting and specifically welcomed SW as the new Executive Director of People, taking up that post on 1 August 2020. There were no apologies.	
2.	New declarations of interest	
	There were no new Declarations of Interest to record.	
3.	Minutes of the meetings held on 28 May 2020	
	The minutes of the Board meeting held on 28 May were agreed subject to the following amendments:	
	• Paragraph 7.2.2 – the figures had been transposed and should read £421k and not £241k.	
	• Paragraph 7.3 – The majority of this surplus was generated by the Extended Access contracts which ended on 31 March 2021 should read "end" and not ended.	
4.	Matters arising, action list progress and Corporate Risk Register	
	Action List:	
	Action 1. <b>Sustainability baseline assessment:</b> Suspended due to restrictions on visiting sites.	

	Action 2. <b>Reserves Policy</b> Formal document to be presented in due course, but reserves being treated in accordance with Board agreed policy.	
	Matters arising:	
	There were no other matters arising.	
	Risk Registers:	
	The Chairman asked for further information in relation to the reconfiguration of Urgent Care services and in particular relationships with Mersey Care.	
	JC explained that, due to Covid-19, Merseycare had changed the way they run the Walk in Centres, some of which are co-located with PC24 services. The two organisations were working together to ensure services were as seamless as possible for patients.	
	The Chairman offered both his and the NEDs assistance with contacts and relationships if required.	
5.	5.1 Chairman and Non-Executives' Report	
	The Chairman expressed his thanks and gratitude to all the corporate functions for their ongoing work and complimented MM for the Communications which he thought were fabulous. He specifically thanked MS, TH and CD for maintaining "the engine room" of the organisation and for keeping everybody connected.	
	The Board:	
	<ul> <li>Noted the Chairman's comments.</li> </ul>	
6.	Chief Executive's Report	
	The CEOs report had been circulated in advance. Comments and questions were invited by exception. The following were noted:	
	<ul> <li>The allocation of responsibilities with regard to Mobilisation</li> </ul>	
	<ul> <li>The reconvening of the Provider Alliance, chaired by MR, and the reassessment of priorities in light of the changes effected in response to the pandemic. Good practice would be embedded and any outstanding permissions arranged.</li> </ul>	
	The Board:	
	<ul> <li>Noted the update and thanked the CEO.</li> </ul>	
7.	Performance	
	7.1 Integrated Performance Report	
	SH asked that the report, as usual, be taken by exception.	
	JC explained that during March / April performance had been steady with no specific areas of concern. He noted:	
	<ul> <li>The activity of the Covid-19 CAS had reduced significantly and was now a 10<sup>th</sup> of what it was at the start of the pandemic</li> </ul>	
	<ul> <li>Operational performance had been good and there had been a general shift to remote consultations across all services</li> </ul>	
	<ul> <li>As highlighted in the CEO's report, some services were not yet operating at full capacity.</li> </ul>	

	The Chairman invited SO to comment on the increase in remote consultations and its reception by patients. She explained that there had been a paradigm shift in how care is delivered, not for the first time. However a new balance would need to be reached in respect of remote and face to face consultations which was likely to be somewhere between pre-Covid-19 and the current position and would be informed by input from patients regarding these developments which had been lacking during the pandemic.			
SO also advised the board that PC24 was well placed and experienced in remo consultation through the Out of Hours service and worked hard to ensure t recording of patient history during such consultations was thorough. Th experience was being shared with GP Practice colleagues.				
	Board members raised the following comments relating to the IPR:			
	<ul> <li>The reports to the Finance &amp; Performance Committee supported good performance in light of the necessary changes.</li> </ul>			
	<ul> <li>The organisation and the staff adapted quickly to the changing situation which was reflected in the strong performance figures.</li> </ul>			
	The Board:			
	<ul> <li>Noted performance for May and June 2020;</li> </ul>			
	<ul> <li>Was assured that action was being taken where required.</li> </ul>			
8.	Covid			
	8.1 Covid Recovery Update			
	PKF highlighted aspects of his written report.			
	<ul> <li>A Service Level Baseline Assessment had been conducted for each service area</li> </ul>			
	<ul> <li>Staff engagement questionnaires had been completed</li> </ul>			
	<ul> <li>Environmental Risk Assessments had been conducted for all PC24 operational locations. PKF thanked Sheila Dineley for her work in completing these assessments and working with staff responsible for the various locations</li> </ul>			
	Personal risk assessment tools had been distributed to all staff.			
	The report included the various documents by way of detailed Appendices.			
	Assurance was sought on the engagement of staff with the risk assessment process. PKF emphasised that managers were raising this as part of the appraisal process and in 1:1 meetings. The assessment tools had also been sent to Agencies for completion by those undertaking work for PC24. He also assured the Board that the Risk Assessment Tool being used included risks associated with ethnicity.			
	PKF explained that at this point it was unclear whether there would be a system- wide review of changes made and the impact of Covid-19. PC24 would be assessing these matters internally.			
	The Board:			
	<ul> <li>Noted and thanked PKF for the report</li> </ul>			
	<ul> <li>Thanked PKF for his leadership as Covid-19 SIRO.</li> </ul>			

## 9. Governance

## 9.1 Board Assurance Framework

MS gave a short presentation on the process of introducing the BAF and an update on the recent meeting of the Executive Team with MIAA to begin to profile risks. This had highlighted the need to re-visit and identify the current high level strategic objectives for PC24.

She suggested some themes which might underpin those objectives:

- Business sustainability
- Business development
- Employer of choice
- Innovation/quality in patient care
- Optimal support functions and structures
- Social value/environmental sustainability.

SH thanked MS for the presentation which Board members had found helpful.

The following were suggested in the strategic objectives:

- outcomes of care
- patient engagement
- diversity and inclusion
- reduce jargon
- emphasise the purpose of the organisation

MS commented that the objectives needed to be kept at a high level and some areas were risks to the objectives rather than objectives in their own right such as patient engagement, where poor engagement was a risk to achieving the quality of care objectives of the organisation.

The Board were asked for a steer if the high level objectives should be agreed as a Board, or if the Executives develop the themes and present the drafts to Board for approval.

The Board:

- Thanked MS for the presentation
- Took assurance there was a clear sense and appetite for the BAF
- Requested the Executive Team to bring objectives to the ned Board meeting for approval.

## 9.2 Driver Policy

The Driver Policy paper had been circulated to the Board for approval.

The paper had been through an extensive consultation process culminating in its review by the Policy Group, Finance & Performance Committee as well as the Quality and Workforce Committee.

The Board:

• Approved the Driver Policy.

	9.3 Updated Audit Committee Terms of Reference		
	The original Terms of Reference had been drawn up having due regard to the principles set out in the Audit Committee Handbook. As part of the annual review and self-assessment process undertaken by the Committee some minor amendments were proposed in order to reflect current best practice. The amendments had been tested against other organisations Audit Committee TORs and MIAA had also been consulted.		
	The Board:		
	Approved the updated Audit Committee Terms of Reference.		
10.	Committee Reports		
	10.1 Quality & Workforce 22 July 2020		
	PG presented the report noting that most of the matters raised had been discussed during the meeting with the exception of		
	<ul> <li>the CQC Emergency Support Framework telephone call for Seaforth and Litherland during which PC24 had satisfied CQC with their handling of Covid-19 issues in the practices</li> </ul>		
	<ul> <li>the clinical audit plan which had been presented and would go, in due course, to the Audit Committee as part of the organisational assurance process.</li> </ul>		
	The Board:		
	<ul> <li>Was assured that the Committee was giving due scrutiny to the information presented to it</li> </ul>		
	<ul> <li>Noted the main issues from the meeting.</li> </ul>		
	10.2 Finance & Performance 22 July 2020		
	PC presented the report which had been circulated to the Board in advance of the meeting. He noted the strong financial performance and the reduction of sites for the Sefton practices from 7 to 4 during the pandemic as part of resilience building and risk mitigation. It was hoped that these arrangements would continue.		
	The Board:		
	<ul> <li>Took assurance that the Committee was giving due scrutiny to the information presented to it</li> </ul>		
	Noted the main issues from the meeting.		
	10.3Audit Committee 24 June 2020		
	KF presented the report, highlighting the support of MIAA in the annual review process and the work of the committee in providing high level assurance to the Board in respect of the controls in the organisation.		
	The Board:		
	<ul> <li>Took assurance that the Committee was giving due scrutiny to the information presented to it</li> </ul>		
	Noted the main issues from the meeting.		
	The Chairman thanked all involved in the work of the Committees.		

12.	Any Other Business	
	There being no other business, the meeting closed.	

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