

**Unadopted Minutes of the meeting of NHS Sheffield Clinical Commissioning Group  
Governing Body held in public on 7 November 2019 in the Boardroom,  
722 Prince of Wales Road, Sheffield, S9 4EU**

**Present:** Dr Terry Hudson, CCG Chair  
 Dr Amir Afzal, GP Locality Representative, Central  
 Dr Nikki Bates, GP Elected City-wide Representative  
 Ms Nicki Doherty, Director of Delivery – Care Outside of Hospital  
 Ms Amanda Forrest, Lay Member (Deputy Chair)  
 Professor Mark Gamsu, Lay Member  
 Dr Andrew McGinty, GP Locality Representative, Hallam and South  
 Mr Brian Hughes, Director of Commissioning and Performance/Deputy  
 Accountable Officer  
 Mr Zak McMurray, Medical Director  
 Ms Jackie Mills, Director of Finance  
 Ms Anthea Morris, Lay Member  
 Ms Chris Nield, Lay Member  
 Dr Leigh Sorbie, GP Elected City-wide Representative  
 Dr Marion Sloan, GP Elected City-wide Representative  
 Ms Lesley Smith, Accountable Officer  
 Dr David Warwicker, GP Locality Representative, North

**In Attendance:** Ms Lucy Ettridge, Deputy Director of Communications, Engagement and Equality  
 Mr Greg Fell, Director of Public Health, Sheffield City Council (SCC)  
 Mr Gordon Osborne, Locality Manager, Hallam and South  
 Ms Judy Robinson, Healthwatch Sheffield Representative  
 Mr Paul Wike, Locality Manager, Central  
 Ms Lorraine Watson, Locality Manager, West  
 Mr Gary Barnfield, Deputy Director Medicines Optimisation  
 Mrs Alison Garrett, Corporate Secretariat/Business Manager [Minutes]

**Members of the public:** There were three members of the public in attendance. A list of members of the public who have attended CCG Governing Body meetings is held by the Director of Finance

ITEM NO.	ITEM	ACTION
118/19	<p><b>Patient Story</b></p> <p>Two short videos were presented of a patient within the community who describes their long term condition, from both a physical and mental health perspective, and the issues faced on a daily basis in relation to their care at home.</p>	
119/19	<p><b>Apologies for absence</b></p> <p>Apologies for absence have been received from Ms Mandy Philbin and Mr Alun Windle.</p>	

	<p>Apologies for absence from those who are normally in attendance had been received from Mr Nicky Normington, North Locality Manager North; Dr Mark Durling, Vice Chair, Sheffield Local Medical Committee (LMC), and John Macilwraith, Sheffield City Council.</p> <p>The Chair declared the meeting was quorate.</p> <p>The Chair outlined that there would be changes to the agenda due to the constraints of purdah, therefore, the Dementia Strategy (Item 8.D) and the Performance, Quality and outcomes Report (Item 13.I) will be moved to the Private section of the meeting to ensure compliance. The Director of Finance requested that any comments on the papers from individuals not due to attend the private session are forwarded to her directly and she will signpost to the correct personnel for response (<a href="mailto:jackiemills@nhs.net">jackiemills@nhs.net</a>).</p>	
<b>120/19</b>	<p><b>Declarations of Interest</b></p> <p>No declarations were made to the meeting.</p>	
<b>121/19</b>	<p><b>Questions from Members of the Public</b></p> <p>The Director of Finance confirmed that no questions have been received in writing from the public. The Chair invited any questions from the members of the public in attendance but none were received.</p> <p>The Chair took the opportunity to confirm that the Citywide GP process has been concluded and Dr Sloan and Dr Bates have been re-elected to their Governing Board positions. Dr Leigh Sorsbie had been appointed as a Citywide representative and Dr Lisa Philip will be joining in December and attending the development session of the Governing Body in December 2019. He also confirmed that the process for appointing the Secondary Care Doctor was in progress and he would provide an update at the 5 December 2019 development session.</p>	
<b>122/19</b>	<p><b>Minutes of the CCG Governing Body meeting held in Public on 5 September 2019</b></p> <p>Dr McGinty referred to the acronym PPG at the bottom of page 16 and suggested that the full title 'Patient Participation Group' should be included to aid understanding.</p> <p>Dr Leigh Sorsbie referred to question 4, appendix A, with regard to current levels of vacancies and agency staffing, and commented that whilst the question had been answered she did not feel that it fully addressed the concerns raised. Prof Gamsu noted that the CCG could request the information from providers and submit to a future Governing Body. Dr Bates responded that the information from Primary Care would be very difficult to obtain.</p> <p><b>ACTION:</b> Mr Hughes agreed to raise the issue at the Accountable Care Partnership (ACP) Workforce Group. An update would be provided to the Governing Body within matters arising and a further update would be provided to the member of the public who submitted the original</p>	<b>BH</b>

	<p>question.</p> <p><b>Following the amendments outlined above the minutes were agreed as a true and accurate record and were signed by the Chair.</b></p>	
123/19	<p><b>Matters Arising and follow up on reflections from last Governing Body</b></p> <p><b>a) Final Report to Governing Bodies on the Hospital Services Programme (minute 103/19)</b></p> <p>Ms Smith reported that this covers the aspect of patient involvement/engagement versus consultation and has discussed with the Hospital Services Programme Team who have engaged patients and members of the public throughout the programme, on both a large and small scale, to include different services. The Chair confirmed that stance was also agreed at the Joint CCG Committee in October 2019.</p> <p><b>b) Proposed dates for Governing Body meetings and Strategic Development Sessions in 2020/21 (minute 104/19)</b></p> <p>Attendees to note the agreed dates have been posted in members diaries.</p> <p><b>c) Improvement Plan Implementation Update (Minute 107/19)</b></p> <p>The actions are complete and forward plan established.</p> <p><b>d) Performance, Quality and Outcomes Report: Position Statement (110/19)</b></p> <p>Report included at item 13.I on the agenda.</p> <p>The Chair invited any reflections from Members and the actions that had been taken forward from the previous meeting.</p> <p>Dr Sloan noted the issue regarding vaccinations has been discussed, alongside a subsequent lively e-mail exchange, with the Pharmacy and Communication Teams to ensure that systems are connected.</p> <p>Mr Hughes reported that further to the discussion regarding staff attendance at Governing Body, staff are keen and enthusiastic to attend to present items, particularly at the Public part of the meeting. Nevertheless, given the change to the agenda due to purdah rules, it had not been possible for staff to present items at this meeting but they will be invited to present in the future. The Chair encouraged Members to meet with Teams and attend their meetings. Dr Warwicker and the Chair reported that they have recently attended Team meetings and Ms Morris is due to attend a forthcoming Finance Team meeting.</p>	
124/19	<p><b>Update on the development of Sheffield CCG's Strategy and Business Plan</b></p>	

	<p>Mr Hughes requested that due to purdah the Governing Body note the report. Members will have the opportunity to debate the report in the Private section of the meeting and any substantial issues will be minuted and discussed at the meeting in January 2020. For any member who is not in attendance at the Private section of the meeting Mr Hughes or Ms Mills are happy to receive any comments on the paper.</p>	
125/19	<p><b>Dementia Strategy</b></p> <p>Mr Hughes requested that, due to purdah, the Governing Body note the report which will be moved to the Private section of the meeting and a decision will be made if it will be presented to the January 2020 meeting.</p>	
126/19	<p><b>Improvement Plan Update report</b></p> <p>The Accountable Officer reported that this is the second iteration of the report to Governing Body and wanted to ensure the reporting format, actions and clarity behind the mechanisms were clearly set out. The report highlights that the improvement plan is moving with pace and provides details regarding the governance structure. The Governing Body and its associated Committees are responsible for monitoring the progress of agreed actions, whilst the Steering Group is responsible for monitoring the impact of those actions and whether the agreed actions remain fit for purpose. The report is self-explanatory in terms of actions completed, those due to complete within the next month and current progress of the three outstanding actions.</p> <p>Ms Nield noted that, as Chair of Improvement Plan Steering Group, she wanted to ensure that the process is embedded, working and that checks and balances are in place. A column is included which provides feedback from the Steering Group to provide quality input to Governing Body and a sense check of the Steering Groups effectiveness. A decision has been for the Steering Group to continue until April 2020 at which time, we will review if processes have been sufficiently embedded or if the group needs to continue beyond that date. Visitors to the Steering Group have been impressed with the input from staff, its reactivity to progressing issues and feeding those back in. Ms Forrest noted that she liked the style of the report and would like to volunteer to be part of the review of the Whistleblowing and Speak Up Guardian Policy.</p> <p><b>ACTION:</b> The Accountable Officer will ensure Ms Forrest is invited to be part of the review</p> <p>Ms Nield referred to 'culture' which is difficult to measure, as previously discussed at Governing Body. The Accountable Officer referred to the Barnsley CCG model which has a Staff Forum to provide a 'voice' and influence decisions to empower staff. This would be a good way of receiving feedback on culture, provides an idea of what is happening, what still needs to be done towards improvement and can obtain specific examples where a difference has been made. Staff have been asked to complete a 'culture' survey to provide a baseline of where things are at, how it feels and what their ideal culture would be and this will inform the design of the Cultural Change Programme, which all staff have been</p>	<p><b>LS</b></p>

	<p>invited to attend. The programme commences on 12 November 2019 and will have first sight of the baseline from the staff survey.</p> <p>Dr Warwicker referred to action 2.2 and staff on the ground floor who would appreciate more direct engagement with Governing Body Members and what can be done to address that action. Ms Morris confirmed that she has spoken to some of the staff and it appears to be a “them and us” culture and suggested that Governing Body Members visit the ground floor more often. Mr Hughes noted that he will be locating on the ground floor on certain days and that, in addition, Mr Windle will be spending time with the Continuing Health Care (CHC) Teams. Governing Body Members are invited to attend if they contact him directly. The Accountable Officer suggested holding a half hour informal session for staff to meet Governing Body Members and the first one could take place before the Development Session in December.</p> <p><b>The Governing Body approved the governance structure and the suggestions for staff engagement to be taken forward as part of the Improvement Plan.</b></p>	LS
127/19	<p><b>Quarterly Update on NHS Sheffield CCG Governing Body Assurance Framework</b></p> <p>The Chair extended a gentle reminder for Members to complete the Governing Body Framework questionnaire by the deadline of 8 November.</p> <p>The Director of Finance provided the report which provides assurance that there are systems and processes in place for the effective management of risks that may compromise the achievement of the CCG’s strategic objectives. There are 18 risks identified, 3 of which have decreased in risk score, a number of identified actions have been closed and three risks continue to show gaps in control. There is a robust internal process in place for scrutinising and testing those risks via the Senior Management Team and the Audit and Integrated Governance Committee.</p> <p><b>The Governing Body noted the report.</b></p>	
128/19	<p><b>Month 6 Finance Report</b></p> <p>The Director of Finance highlighted the overall year to date position which shows a surplus of £9.0m, which is in line with the planned year to date surplus. The CCG continues to forecast that we can deliver the year end control total of £18.0m surplus. However, we continue to rag rate the achievement of the control total as “amber” due to the need to manage a range of risks. There is a reasonably wide risk range from £6m deficit to £6m surplus, dependent on how a number of financial risks materialise/are managed. Prescribing is the most significant overspend although the forecast has slightly improved since the July statistics. Questions were invited from Governing Body.</p> <p>Mr Hughes reported that an issue previously highlighted to Governing Body regarding the level of un-coded activity associated with the</p>	

	<p>Sheffield Teaching Hospitals contract had improved due to the additional staff that have been trained.</p> <p><b>The Governing Body noted the update of the month Finance 6 report.</b></p>	
129/19	<p><b>Update on Month 6 Quality, Innovation, Productivity and Prevention (QIPP) Plan</b></p> <p>Mr Hughes provided an update on the position at month 6. Reporting delivery of £6.1m against a year to date target of £7.1m, therefore, achieving 86% of the plan. In relation to year end delivery, 17 programmes are rated as 'red' and ten as 'amber'. The programmes will be monitored on a monthly basis to assist in the achievement of the savings. The Forecast is to achieve 86% delivery at year end with an outturn of £2m. The QIPP is subject to monthly scrutiny through the QIPP Working Group who have been reviewing the current year to develop and inform the 2020/21 plan.</p> <p>Ms Morris noted that it is difficult to measure the impact of QIPP schemes and we have been exploring if there is any best practice that could be shared. Dr Sorsbie noted that it would be helpful to add a column to the table, page 4 of the report, to show the percentage variance for each area of spend to provide a clearer view of performance across the board.</p> <p><b>ACTION:</b> Mr Hughes agreed to incorporate a variance column</p> <p>The Accountable Officer reminded Governing Body members of the reduction of 20% to the Running Cost Allocation by April 2020 and that, to date, the CCG have been able to generate an underspend that contributed to QIPP savings. This benefit would be eliminated next year.</p> <p><b>The Governing Body noted the month 6 QIPP position.</b></p>	BH
130/19	<p><b>Performance, Quality and Outcomes Report: Position Statement, including a deep dive into mental health indicators</b></p> <p>Mr Hughes noted that the report will be moved to the Private agenda due to Purdah and any matters arising will be submitted to the January 2020 Governing Body.</p> <p>Prof Gamsu enquired if the Public Health data is reported within this section. Mr Fell responded that the report is published once a year and can be added to the Governing Body schedule if required.</p> <p>The Chair noted that the Governing Body would be happy to receive information annually or whenever it was available. The Accountable Officer suggested that should receive the Public Health report when signing off the strategy, business intentions and the business plan, ie; January of each year. Mr Fell confirmed that the Council receive the report in April but will be able to provide a report for Governing Board in January.</p>	

	<b>ACTION:</b> Public Health report to be included on the January 2020 agenda.	<b>TH/GF</b>
131/19	<p><b>Draft SYB Integrated Care System Response to the Long Term Plan</b></p> <p>Mr Hughes reported that the plan is for noting only. If any Member would like to feedback comments please e-mail directly and will feed those back to the Integrated Care System (ICS) Team. Mechanism for feeding back comments is also available on the ICS website at <a href="https://www.healthandcaretogethersyb.co.uk">https://www.healthandcaretogethersyb.co.uk</a></p> <p><b>The Governing Body noted the report which provided an update on progress and invitation for feedback on the Long Term Plan.</b></p>	
132/19	<p><b>Integrated Urgent &amp; Emergency Care (IUEC) Yorkshire and the Humber Collaborative Commissioning arrangements</b></p> <p>Mr Hughes outlined the rationale for revisiting the Integrated Urgent &amp; Emergency Care (IUEC) commissioning arrangements across the Yorkshire and Humber (Y&amp;H) region. The regional commissioning arrangements for the 999 and 111 contracts have been revisited to reflect the national agenda and gaining approval from each of the 21 CCG's who commission the Yorkshire Ambulance Services (YAS) to provide those services. A memorandum of understanding (MoU) is being developed in parallel for the South Yorkshire CCGs for agreement within the next 2 months. This will clarify responsibilities and streamline the arrangements for negotiations with YAS.</p> <p><b>ACTION:</b> Mr Hughes will provide an update at the January 2020 Governing Body.</p> <p>Concerns regarding the introduction of direct booking by 111 into GP practice appointments were raised by a number of GP's, in light of pressures on availability of appointments and triage systems employed in GP practices.</p> <p>The Chair enquired how many of the proportion of patients directly booked are triaged by a clinician or by a call handler's computer algorithm and are calls triaged by clinicians increasing? Mr Hughes responded that he would investigate and report back.</p> <p><b>ACTION:</b> Mr Hughes to report back to Governing Body.</p> <p>Dr Afzal requested that intelligence from practices on the appropriateness of bookings be collected in order that systematic experience could be fed back to YAS to inform the development of the service.</p> <p><b>ACTION:</b> Mr Hughes agreed to explore how this might be facilitated</p> <p>Dr McMurray outlined that in his personal experience of call review in the past much of the 111 triage was excellent. There certainly was, at that time, a mechanism for users or partner organisations to raise</p>	<p><b>BH</b></p> <p><b>BH</b></p> <p><b>BH</b></p>

	<p>concerns, specific calls could be listened to and any concerns would lead to pathway review, if appropriate. Dr McMurray offered to investigate whether this system is still in place and how any concerns could be raised.</p> <p><b>ACTION:</b> Dr McMurray agreed to report back to Governing Body]</p> <p>It was noted that there is no Clinical or Managerial Lead assigned within schedule 2 of the MoU. Mr Hughes to incorporate.</p> <p><b>ACTION:</b> Mr Hughes to incorporate Leads.</p> <p><b>The Governing Body noted the commissioning arrangements, supported the YAS partnership framework and endorsed the collaborative MoU. Plans were supported to drive forward the strategic intention, subject to the detailed discussion, and how that is embedded.</b></p>	<p><b>ZMc</b></p> <p><b>BH</b></p>
<b>133/19</b>	<p><b>Accountable Care Partnership (ACP)/Integrated Care System (ICS) Update</b></p> <p>The Governing Body noted the reports circulated in advance and no further update was provided.</p>	
<b>Part 5 - Reports circulated in advance for noting</b>		
<b>134/19</b>	<p>The Chair highlighted the key issues in relation to the following reports and no further comments were received:</p> <ul style="list-style-type: none"> <li>a) Accountable Care Partnership (ACP)/Integrated Care System (ICS) (to support main agenda item) <ul style="list-style-type: none"> <li>i) ACP Programme Director Report</li> <li>ii) Minutes of the ICS Collaborative Partnership Board 12 July 2019</li> </ul> </li> <li>b) CCG Chair's Report</li> <li>c) CCG Accountable Officer's Report</li> <li>d) Report from the Joint Committee of Clinical Commissioning Groups (JCCCG)</li> <li>e) Joint Committee of Clinical Commissioning Groups (JCCCG) Work Plan</li> <li>f) Report from the Audit and Integrated Governance Committee (AIGC)</li> <li>g) Report from the Primary Care Commissioning Committee (PCCC)</li> <li>h) Report from the Strategic Patient Engagement, Experience, Equality Committee (SPEEEC)</li> <li>i) Report from the Quality Assurance Committee (QAC)</li> <li>j) Update on progress with SEND action plan</li> <li>k) Quarterly Complaints and MP Enquiries update</li> </ul>	
<b>135/19</b>	<p><b>Any Other Business</b></p> <p>The Director of Finance reported that, as part of the mental health investment, the CCG has a duty to publish a standard compliance statement on the website and provide assurance, via external audit, that the figures reported are robust. She had hoped to bring, for approval, a letter of management representations but this had been slightly delayed. Ms Mills requested that approval to sign the letter of management representations be delegated to the Chair and Accountable Officer.</p>	

	<p><b>The Governing Body approved the authority for signing could be delegated to the Chair and Accountable Officer.</b></p> <p><b>ACTION:</b> The Chair and Accountable Officer to review and sign the final letter of Management Representation.</p> <p>The Governing Body welcomed Dr McMurray back to the Governing Body, following his period of special leave, and Mrs Alison Garrett who is the new Corporate Secretariat to the Governing Body.</p>
136/19	<p><b>Summary of Meeting: Reflections from Governing Body</b></p> <p>Dr Warwicker thanked Mr Barnfield for the videos at the start of Governing Body and it was interesting to hear about continuity of care that wasn't provided by a GP. Sometimes worry that a patient feels 'fobbed off' with healthcare professionals who are not the named doctor and heartened that the patient felt they had received a good outcome.</p> <p>Dr Sloan commented that she discussed Public Health data with Mr Fell around cancer, notably 'Fingertips'. Although she had never personally used the package the messages coming out can be used as a vehicle in which to engage GP's to make a difference to the patients they look after. Mr Fell noted that 'Fingertips' has been around for years and it will not fit in with all boundaries of health but the practices provide fundamental building blocks.</p> <p>Ms Forrest referred to purdah and that it is frustrating that some items couldn't be heard in public.</p> <p>Ms Nield commented that, as Chair of the Improvement Plan Steering Group, it has been useful to see the engagement of staff, hearing the challenges at Governing Body and how important it is to be on the agenda to hear about the improving situation and implementing the plan to make a difference. She would like to thank the Governing Body's commitment to that agenda.</p> <p>The Accountable Officer outlined that the emerging principle is that there are papers submitted to Governing Body where there is delegated responsibility to Joint Committees across Y&amp;H. It makes sense to commission some services at a higher footprint but the principle is that they are submitted and reported to Governing Body to outline what it means for Sheffield and its member practices, although was struck that it can create a void when it refers to services in other geographical areas and will take that into account for future papers.</p>
137/19	<p><b>Date and Time of Next Meeting</b></p> <p>The next full meeting in public will take place on Thursday 9 January 2020, 2.00pm–5.00 pm, Boardroom, 722 Prince of Wales Road, Sheffield S9 4EU</p>

..... **Signed (Chair)**

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