

Minutes of the **Somerset Clinical Commissioning Group Annual General Meeting** held on **Tuesday, 17 September 2019** at the **Westlands Entertainment Centre, Westbourne Close, Yeovil**

Present:	Dr Ed Ford	Chairman, GP Irnham Lodge Surgery
	Sandra Corry	Director of Quality, Patient Safety and Engagement
	Lou Evans	Vice Chair and Non-Executive Director, Governance and Audit
	Basil Fozard	Non-Executive Director, Secondary Care Doctor
	David Freeman	Chief Operating Officer
	Wendy Grey	Non-Executive Director, Practice Representative
	David Heath	Non-Executive Director, Patient and Public Engagement
	Alison Henly	Chief Finance Officer and Director of Performance
	Trudi Mann	Non-Executive Director, Practice Representative
	Dr Jo Nicholl	Non-Executive Director
	James Rimmer	Chief Executive
In Attendance:	Maria Heard	Programme Director, Fit for my Future
	Dr Alex Murray	Clinical Lead, Fit for my Future
	Sandra Wilson	Observer Lay Member, Chairman of the Somerset Patient Participation Groups (PPGs)
Apologies:	Dr Jayne Chidgey-Clark	Non-Executive Director, Registered Nurse
	Trudi Grant	Director of Public Health, Somerset County Council
	Judith Goodchild	Observer, Healthwatch
Secretariat:	Kathy Palfrey	Secretary to the Governing Body

AGM 001/2019 WELCOME

Dr Ed Ford welcomed everyone to the Annual General Meeting of the Somerset Clinical Commissioning Group (CCG), in particular, members of the public, and the charity and voluntary organisation stallholders that had agreed to take part in the day's NHS Somerset Community Health Fair.

The CCG has a statutory obligation to hold an Annual General Meeting to formally present the annual report and accounts, to ensure that we are accountable for the services and money we spend on the public's behalf.

The Annual Report and Accounts 2018/19 were approved by the Governing Body at its meeting on 23 May prior to submission to NHS England on 24 May 2019. They are available in both full and summary hard copy versions and also on our website

AGM 002/2019 APOLOGIES FOR ABSENCE

Apologies for absence were received from Dr Jayne Chidgey-Clark, Trudi Grant and Judith Goodchild.

AGM 003/2019 MINUTES OF THE ANNUAL GENERAL MEETING HELD ON 18 SEPTEMBER 2018

The Minutes of the Annual General Meeting held on 18 September 2018 were provided for information. The Minutes were formally approved by the Governing Body at the meeting held on 31 January 2019.

AGM 004/2019 OUR YEAR: REVIEW OF 2018/19 and WHAT WE ARE DOING NOW

The Chairman, Chief Executive and Executive Directors outlined the salient points from the CCG's annual report and accounts for 2018/19, and described the work we are doing at the moment:

Our Somerset - Our Vision (Dr Ed Ford)

- we want people to live healthy and independent lives, supported by thriving and connected communities with timely and easy access to high quality and efficient public services when they need them

What we do

- we plan, buy and monitor most local NHS services in Somerset through a process called commissioning
- the services include district and community hospitals; community services; GPs and primary care; urgent care services, including NHS 111, mental health services and others
- we are accountable for everything that is spent on healthcare

Why we matter

- we aim to ensure that the right help is available when you need it

and we hold our providers to account for the safety, quality and value for money of services

Listening to your voice

- we have a legal obligation to involve the public in planning and changing services
- we want to make sure your voice is heard and to listen to what you want to say – we want to encourage people to ask questions
- we want to make sure that the patient and public voice is at the heart of everything we do

How you can get involved

- join your GP Practice PPG (patient participation group)
- follow us on Twitter@somersetccg
- share your patient story with us
- get involved with Fit for my Future
- come to a Governing Body meeting
- join the Somerset Engagement and Advisory Group
- join Healthwatch Somerset
- sign-up for our weekly Patient Engagement newsletter

Our people (James Rimmer, Chief Executive)

- 1 in 4 (25%) of the Somerset population is over the age of 65
- Somerset people are relatively healthy and have a good life expectancy: however, depending on where you live, there are inequalities
- 18.8% of people in Somerset are living with a disability
- 12% of people smoke
- 66% of adults in Somerset are obese or overweight, as are 20% of children under five
- 12.5% of people in Somerset have been diagnosed with anxiety or depression

Our providers

- Primary care: There are 65 Somerset GP Practices
- There are three Foundation Trusts – Yeovil District Hospital, Taunton and Somerset (Musgrove Park Hospital) and Somerset Partnership (community and mental health services)

- for urgent care, South West Ambulance Service and Devon Doctors
- we also commission services from many independent sector providers, community and third sector (voluntary) support

Our staff

- we value our staff and offer pilates, yoga, running and walking sessions; flexible working; an employee assistance programme; a compassionate network, and NHS health checks for those who are registered with a Somerset practice
- we strive to become a better employer, and to provide a better place to work, so that we can recruit the NHS staff we need
- we have developed a set of five values and behaviours, and these have been signed up to by all CCG staff:
 - * Quality improvement
 - * Integrated working
 - * Personal integrity
 - * Compassion
 - * Self-awareness

Our Successes (David Freeman – Chief Operating Officer)

- Somerset's three Foundation Trusts – Yeovil District Hospital, Taunton and Somerset, and Somerset Partnership – were rated by the Care Quality Commission (CQC) as 'Good'
- Our investment in My Diabetes, My Way: an online platform has been developed so that people with diabetes can sign-up and have their condition monitored on an ongoing basis
- Mental health: we have given greater attention and effort to performance levels in psychosis waiting times
- GP primary care: we are working to increase access, opening hours and on line access
- Improving cancer care: we have invested in the development of new pathways and new tests

Building on our successes: over the next 12 months we will:

- roll out Primary Care Networks (PCNs) to encourage GP practices to work together across a bigger footprint – meaning the provision of more services in the community rather than in hospital

- continue to progress the work on mental health. We have been successful in achieving additional funding from NHS England for increasing mental health support in schools
- continue to support the collaboration between two of our Foundation Trusts who are working together to achieve the best possible services for oncology
- continue to look at new dermatology technology and at different ways of providing this services. 70% of consultations are now being conducted through Telederm

Facing our challenges:

- finance: our task is to use tax payers' money to the best of our ability and to maximise patient outcomes
- age related conditions: Somerset has an older than average population, so people are living longer but with more complex conditions, and these need to be addressed
- staff/workforce: recruitment is difficult – there is a shortage of GPs, nurses, and specialist consultants. We need to think differently about how we provide care: even if the money were available, recruitment difficulties would remain
- Fit for my Future: puts more emphasis on prevention and self-care.
- Social prescribing: this will be a key area of focus over the next 12 months
- Digital solutions/technology: we need to embrace technology to make services more accessible

Annual Report and Accounts (Alison Henly – Director of Finance)

- the financial duties of Somerset CCG were all delivered in 2018/19, achieving a breakeven position
- the CCG had a budget allocation of approximately £762 million. The majority - £151 million – was spent in secondary care providers (hospitals)
- from 1 April 2019, Somerset CCG became responsible for all primary care services in the county, ie. GP Practices
- how the NHS Somerset £ is spent:
 - * £0.52 – secondary care services

- * £0.14 – primary care services
- * £0.11 – community health services
- * £0.11 – mental health and learning disability services
- * £0.06 – continuing healthcare (CHC) and funded nursing care
- * £0.03 – emergency ambulance services
- * £0.02 – other programme services
- * £0.01 – running costs

Improving Quality: (Sandra Corry, Director of Nursing and Quality)

- we work with all of our service providers and look at how we can deliver services on a day-to-day basis. We accept that – although the majority of services are good - things can sometimes go wrong. Key areas of focus include:
 - * patient stories: there has been considerable improvement over the past six months in sharing information and we want to continue this
 - * ‘flu: we need to prepare our system and workforce to increase resilience and to ensure that patients and vulnerable people are well-equipped
 - * hospital and care homes:
 - the infection control team continues to decrease the reliance on antibiotics
 - joint working has increased and people are being discharged in a more timely fashion. Risk mitigation is paramount, to ensure that people receive the right care in the right setting
 - * Somerset CCG continues to work closely with Social Care around the safeguarding agenda for adults, children, and children looked after
 - * there is a national focus on early detection of sepsis
 - * Somerset CCG is conducting a review of falls’ prevention to better support people in their home environment
 - * funding has been secured from NHS England to support people suffering from domestic abuse
 - * funding has been awarded from Health Education for primary nurse quality improvement training, so they can better support their GP colleagues

Joint Plans for Somerset’s Future
(Maria Heard and Dr Alex Murray)

- we want people to live healthy and independent lives, supported by thriving and connected communities with timely and easy access to high-quality and efficient public services when they need them
- to help us achieve this, the way we organise and commission our health and care services needs to change
- we know that change will be more effective if we prioritise and concentrate our efforts on achievable actions that will have greatest impact, and work together with our partners to design services that are sustainable for the future
- together with our partners we have agreed on some key priority areas for health and care
 - * Prevention:
 - we will invest more in helping people to stay well and live healthy lives. In the immediate future we are focusing on the development of social prescribing and the prevention of cardiovascular disease
 - we need to encourage people to live healthier lifestyles in order to tackle some of the underlying causes of ill health and longer term health conditions
 - * Development of local services:
 - we will support people to remain at home through more closely integrated neighbourhood health and care teams
 - we are working on a new model of care that will reduce the time people have to stay in hospital and deliver 'wrap-around' health and care services in the community, closer to home
 - * Strengthening specialist and hospital services:
 - we will design a model for our acute hospitals which will make sure they have a vibrant future and distinct purpose, with stronger links to hospitals outside of Somerset
 - we will invest in community adult mental health services and improve access for people who need support for a mental health condition. We will continue to develop and enhance home treatment services to provide the right care at the right time, with a strong focus on prevention and early support

- we will work towards better care and earlier intervention services for children in crisis
- * Working better together:
 - we will develop systems that support information sharing, joint decision making, service integration and directing resources towards prevention and place-based care
 - we will do this by continuing to develop Fit for my Future, our integrated health and care system for Somerset
- * Improving our finances:
 - we will develop and deliver a three year financial recovery plan
- * Involving you in our plans:
 - we want local people - whether they are patients, carers, members of the public or our staff – to have the opportunity to be involved in the strategy and our proposals
 - some of our proposals can be taken forward through our current delivery groups and programme boards without delay. Others will need full public consultation. We will be talking to you about these, starting in the autumn with acute mental health inpatient beds for people of working age. You will all have the opportunity to have your say about additional service proposals over the coming months.

AGM 005/2019 PUBLIC QUESTIONS

- 1 **What is the situation with St Margaret's Hospice? How is it funded, does the CCG have a contract with them and are there any requirements on this contract?**
 - St Margaret's Hospice operates under a standard NHS contract
 - as with all NHS contracts, service specifications apply
 - the contract monitors activity and quality
 - there are a number of defined outcomes in the contract
 - there is no specification for centralising the service
 - the funding we provide to St Margaret's Hospice has been static, but funding from other areas (such as voluntary donations) has reduced: we fund approximately one-third of the Hospice's running costs
 - the Hospice funding issue is not unique to St Margaret's or Somerset – it is a nationwide issue

2 Does the CG support the closure of inpatient beds at St Margaret's Hospice in Yeovil?

If the deficit at St Margaret's Hospice continues to get worse, it could bring the entire sector in Somerset into difficulty. Inpatient beds are one of the most costly services to run and this means that any funds placed in this area would not be able to be used on other services across our county. We will continue to assess this issue based on demand and the needs of our local population.

We will continue to work with St Margaret's Hospice Care to explore all possible options with a view to ensuring that they have a sustainable future for many years to come.

3 What is the plan for mitigating the paediatric patients currently waiting for referrals?

We are sorry to those who have experienced delays to their paediatric referrals and we know this should have been done better. We are working directly with providers to see what we can do to support them. We are also working to link up services across the county to make sure that referrals are being made in good time and waiting lists are as short as possible.

4 Is the NHS giving patients good value for money?

The NHS is one of the most productive organisations in the UK. As a CCG it is our responsibility to continue to push hard for efficiency in Somerset and give our people good value for money.

5 Can the CCG lobby parliament about bringing back a nursing bursary?

We would encourage anyone who is passionate about this issue to lobby their local MP. We will be working with the Royal College of Nursing to support a safer working initiative across England (which includes a look at bringing back the nursing bursary).

6 What nursing apprenticeships are available in Somerset?

Our provider, including Yeovil District Hospital NHS Foundation Trust and Taunton and Somerset NHS Foundation Trust, as well as our community partners, all offer nursing apprenticeships.

7 How can we support people with online access?

We understand that online access and digital healthcare is not always suitable for everyone, which is why we will not be replacing our traditional methods with digital ones. Instead we want to offer both digital and traditional methods of healthcare in tandem. However, would encourage those who are interest in getting online

access to do so.

AGM 006/2019 CLOSE

Dr Ed Ford again expressed his thanks to the voluntary and community services who had participated in the Healthy NHS Somerset event, and to members of the public for their attendance.

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CHAIRMAN

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