

ANNUAL GENERAL MEETING

17 September 2020

Held as a Zoom Meeting and Live-streamed on YouTube due to CORONAVIRUS COVID-19

PRESENT

Members of the Council of Representatives (It was not possible to identify which Practices were represented via Zoom)

Governing Body

Dr Nigel Wells Clinical Chair

Simon Bell Chief Finance Officer

Michelle Carrington Executive Director of Quality and Nursing / Chief Nurse

Dr Helena Ebbs North Locality GP Representative

Phil Goatley Lay Member and Audit Committee Chair

Julie Hastings Lay Member and Chair of Primary Care Commissioning

Committee, Quality and Patient Experience Committee

and Remuneration Committee

Dr Andrew Lee Executive Director of Primary Care and Population Health

Phil Mettam Accountable Officer

Denise Nightingale Executive Director of Transformation, Complex Care and

Mental Health

Dr Ruth Walker South Locality GP Representative

Michèle Saidman Executive Assistant

Apologies

David Booker Lay Member and Chair of Finance and Performance

Committee

Dr Andrew Inglis Tadcaster Medical Centre
Dr Gordon Orr Front Street Surgery

Dr Chris Stanley Central Locality GP Representative

Welcome address and minutes of the previous Annual General Meeting – Dr Nigel Wells (NW)

NW welcomed everyone to the meeting noting that it was being live-streamed on YouTube and would be available on the CCG website. He advised that no questions had been submitted.

NW referred to the minutes of the Annual General Meeting, held on 19 September 2019, which he would sign as approved.

NW noted that reflecting on the achievements of 2019/20 was impacted by the ongoing COVID-19 pandemic. He expressed appreciation to patients, the public and staff in social care and the NHS for their support highlighting the rapid transformation of services in response to the pandemic. NW emphasised the perspectives of 'all in it together' and 'Right Thing, Right Time, Right Place'.

Overview - Phil Mettam (PM)

Whilst reiterating the impact of COVID-19, PM highlighted that 2019/20 prior to this had been a year of achievement. He thanked the Governing Body for their support to himself and the Director Team, the CCG's Member Practices for their response in engaging with partners and ensuring the patient focus, the Directors and all staff for their work.

PM highlighted that, as a result of its value based approach, focus on improving patient outcomes and clinical leadership, the CCG was now recognised as an anchor organisation across the Vale of York. He expressed appreciation to partner organisations for their support.

PM commended the innovation that had emanated from unprecedented challenges reiterating 2019/20 being a year of achievement for the CCG.

A Summary of the Annual Accounts – Simon Bell (SB)

SB explained that, following historic non delivery of the financial position, the CCG had in 2019/20 taken a principled stand in setting an £18.8m deficit plan which was realistic and would ensure safety, quality and improvement of services. He noted the context of the Regulator seeking a £14m deficit plan but highlighted that, through rigorous spending control, leading significant innovation across the system and partnership working, the CCG had for the first time since 2014/15 delivered its financial plan.

SB advised that at the end of 2019/20 the North East and Yorkshire Region had been allocated additional national funding which had enabled the CCG to break even, as reported in the accounts. He emphasised however that the £26m underlying deficit position remained an ongoing challenge.

In respect of the first six months of 2020/21 SB reported that the response to the pandemic by Local Authorities and across the NHS had resulted in recognition of the need for further joint working to ensure value for money for services. Discussions about progressing this approach were taking place.

SB clarified aspects of the accounts: the Unqualified 'true and fair' and regulatory opinions from External Auditors were as a result of the CCG meeting its statutory duties; the Qualified Value for Money Conclusion was due to the CCG not currently having a plan to address the £26m underlying deficit and return to balance within five years.

With regard to the financial impact of COVID-19 SB explained that for the first six months of 2020/21 the CCG would receive additional funding for reasonable additional expenses to 'true up' to break even. From October 2020 the allocations process was

changing nationally. As a result the NHS Vale of York CCG's allocation would go to NHS North Yorkshire CCG as the host CCG for the North Yorkshire and York system. SB explained that Directors of Finance across the system were committed to ensuring that the detail of how this new approach was implemented would be done with a view to ensure unnecessary complication was avoided for the remaining six months of the year. At the same time a programme of change was taking place to ensure streamlined governance where appropriate.

SB reported that allocations and guidance for the second half of 2020/21 had been received the previous day. North Yorkshire and York remained in a challenging financial position and would continue to work collectively to achieve best value.

In summary SB reiterated the CCG's progress in partnership and collaborative working and clinical leadership. Clinically led change included advances in the MSK orthopaedic service and Referral for Expert Input and, although with additional resources, the CCG had delivered a clinically led financial plan.

The CCG's Annual Report and Accounts for 2019/20 are available at: https://www.valeofyorkccg.nhs.uk/publications/

Focus on Primary Care and Innovation – Dr Andrew Lee (AL)

AL reflected on the fact that c90% of health care takes place out of hospital and in primary care with 10% of the budget. He commended the high quality care delivered by General Practice across the CCG and the value for money achieved but noted the demands this placed on teams.

AL referred to the establishment of Primary Care Networks during 2019/20 applauding their level of maturity achieved in this time. He explained that the CCG would continue to work with the eight Primary Care Networks to support them in innovative developments.

AL described areas of support and training provided by the CCG to primary care and support to the system in response to COVID-19, notably in terms of a number of IT solutions. He highlighted the extensive collaborative working and service transformation and commended the CCG's Communication and Engagement Team for their varied approaches to providing messages to stakeholders, providers and the public.

AL emphasised the need to also support Practice teams and care staff from the personal perspective to ensure resilience. He concluded by expressing thanks to all involved in providing care.

Quality and Nursing – Michelle Carrington (MC)

MC commented that the meeting coincided with World Patient Safety Day.

MC described areas of initiatives and improvement relating to children and young people in terms of establishing an expert perinatal mental health service, sharing Baby Theo's story in many forums to highlight the importance of pertussis vaccination in pregnancy, investment in End of Life Care, and work with the Local Authority in response to the SEND (Special Educational Needs and/or Disabilities) report.

MC commended the Safeguarding Children Designated Nurses and GPs noting the detailed information about support for these services in the presentation.

For older people MC referred to the enhanced offer to care homes, the Partners in Care forum, COVID specific infection prevention and control training including development of a tool to understand outbreaks, and nomination of the Quality Team for awards in this aspect of work. MC noted that the team was again a finalist in the 2020 Nursing Time Awards in the older people's category.

MC additionally reported that the CCG's research activity was continuing, some of this being COVID-19 related, and noted that work was taking place to further develop Advance Care Planning.

MC highlighted the CCG's commitment to staff wellbeing and maximising opportunities. She emphasised that the staff were the CCG's greatest asset and reiterated the previous expressions of thanks.

Children's Mental Health, Adult Mental Health and NHS Continuing Healthcare – Denise Nightingale (DN)

DN advised that for her area of responsibility the highlights of 2019/20 were increased partnership working and early intervention services to prevent deterioration or poor outcomes in the future.

DN explained that the examples describing children's mental health services were for early intervention and in addition to, not instead of, the Child and Adolescent Mental Health Service and secondary care. She noted that the Kooth site, available across North Yorkshire, had had more than 8,000 log-ins in six months, which was 1,500 worker hours supporting both children and families. Other aspects of children's mental health services included the Whole Pathway Commissioning Group, bringing together providers and commissioners across North Yorkshire and York, and the launch of a 24/7 crisis service for children. Examples of support for children in City of York were The Beehive, a new capital development, and art therapy offered by the voluntary sector via a three year programme with MIND.

For adult mental health services DN highlighted the opening of Foss Park. She reported improvements in Improving Access to Psychological Therapies (IAPT), also noting that currently 18 staff were co-located in GP Practices with the benefits that gave for patient access. The service was available via self or GP referral. DN highlighted the multi disciplinary approach to dementia through a dementia nurse pilot in the City of York and care co-ordinators in the Vale and noted improved access for Early Intervention for Psychosis.

DN explained that the CCG had met all NHS Continuing Healthcare targets during the year and through this work had made system improvements including personalised end of life health care and, where appropriate, personal health budgets. The team had supported 605 complex patients with mental health and physical health conditions, over 200 of whom lived in their own homes. DN expressed appreciation to the team for their work which had continued throughout the pandemic.

DN highlighted the CCG's selection as a mentor site to support other CCGs across the country following significant work to increase the number of people who had a personal health budget for NHS Continuing Healthcare.

Future Clinical Transformation and Closing Remarks – Dr Nigel Wells (NW)

NW highlighted the innovation and transformation achieved at scale with lessons learnt in terms of trust and relationships and continuation of pushing forward boundaries to provide the best possible care for the population. He referred to the CCG's implementation of Protected Learning Time which provided opportunities to share best practice and noted that Referral for Expert Input, endorsed at regional level, would continue so that patients could receive early support.

NW explained that the Humber, Coast and Vale Integrated Care System had received in excess of 300 examples of innovation during the pandemic, many of which had originated in the Vale of York. These would be further developed to enhance community care. Additionally, efforts would continue to address inequity and inequality.

NW expressed appreciation to GP Practices, providers, the CCG's Governing Body, Director Team and all staff for their work in 2019/20 and ongoing, particularly in support of efforts in response to COVID-19.

In closing the meeting NW urged everyone to follow the COVID-19 guidance to stay safe. He reiterated the emphasis on 'Right Thing, Right Time, Right Place'.