MINUTES OF THE NHS LEEDS WEST CLINICAL COMMISSIONING GROUP GOVERNING BODY MEETING HELD ON WEDNESDAY 7 MAY 2014 AT NEW WORTLEY COMMUNITY CENTRE, LEEDS, LS12 1LZ

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<tr>
<th>Members</th>
<th>Role</th>
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<tr>
<td>Dr Gordon Sinclair</td>
<td>Chair</td>
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<tr>
<td>Philomena Corrigan</td>
<td>Chief Officer</td>
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<td>Dr Philip Dyer</td>
<td>GP Non-Executive Director</td>
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<td>Dr Steve Ledger</td>
<td>GP Non-Executive Director</td>
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<td>Dr David Murray</td>
<td>GP Non-Executive Director</td>
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<td>Dr Andrew Sixsmith</td>
<td>GP Non-Executive Director</td>
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<td>Diane Hampshire</td>
<td>Director of Nursing and Quality</td>
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<td>Visseh Pejhan-Sykes</td>
<td>Chief Finance Officer</td>
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<tr>
<td>Dr Bryan Power</td>
<td>Medical Director – Quality &amp; Performance Acute Provider</td>
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<td>Dr Simon Stockill</td>
<td>Medical Director – Service Transformation</td>
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<td>Dr Peter Belfield</td>
<td>Lay Member – Secondary Care Consultant</td>
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<td>Susan Robins</td>
<td>Director of Commissioning, Strategy &amp; Performance</td>
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<td>Angie Pullen</td>
<td>Lay Member – PPI</td>
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<td>Chris Schofield</td>
<td>Lay Member – Governance</td>
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<td>Lisa Purvis - minutes</td>
<td>Head of Business &amp; Corporate Services</td>
<td>✓</td>
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<tr>
<td>Dr Fiona Day</td>
<td>Consultant in Public Health Medicine</td>
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Members of the public observing the meeting – 3

AGENDA ITEM: LW2014/98 – PATIENT VOICE

1. The Director of Nursing and Quality presented to members of the Governing Body a presentation in relation to the Patient Voice. This focused on a complaint received around End of Life Care from a family member with a mixture of compliments and concerns. The presentation included background, approach and what could be done differently in future to help to avoid any other family having the same experiences.

2. To follow up on this issue, the Director of Nursing and Quality had agreed to write to providers detailing the compliments and raising concerns on the complaint areas.
asking for a response and will feed back to the members at the next meeting on the progress of this complaint.

3. Comment received from members was whether this situation raised questions as to whether there is a commissioning issue or an issue with whether providers are delivering what they should be. The locality development session to be held on the 8 May 2014 with members will be discussing this in more detail.

4. The Governing Body were asked to receive the presentation on Patient Voice and note progress steps to be taken.

The Governing Body received:
   a) presentation on Patient Voice.

**ACTION:**
1. Update on the progress of complaint around End of Life care to be provided under Patient Voice item at the next meeting.

**AGENDA ITEMS 99 & 100 – WELCOME, APOLOGIES FOR ABSENCE AND DECLARATIONS OF INTEREST**
5. The Chair welcomed everyone to the meeting. No apologies had been received prior to the meeting. General House-keeping was covered and members were advised there were no fire drills expected during the meeting.

6. The Chair asked members if they had any additional declarations of interest to note in relation to agenda items being presented for discussion at the meeting. None were raised.

**AGENDA ITEM: LW2014/101 – QUESTIONS FROM MEMBERS OF THE PUBLIC**
7. The meeting was opened up to the public to take any questions they had at this stage. They were advised that there would be another opportunity for questions at the end of the meeting. Questions and answers are listed in appendix A.

**AGENDA ITEM LW2013/102: MINUTES OF THE NHS LEEDS WEST CLINICAL COMMISSIONING GROUP GOVERNING BODY MEETING HELD ON 5 MARCH 2014 HELD AT PUDSEY CIVIC CENTRE**

a) **Accuracy**
8. The Chair asked members to confirm accuracy. The minutes were reviewed page by page.

9. The Chair noted an amendment to the format of paragraph 42 on page 7. The first three sentences relate to a question asked by Lay member for PPI on how to make process better; the second part is a response from the Chief Finance Officer.

10. All agreed for the amendment to be made and once this has been completed, the Chair to sign off the minutes.

b) **Matters Arising**
11. The Chief Finance Officer updated on item 108, action 1 on the action log:
12. Due to tight timescales, submission of draft version of the Better Care Fund (BCF) had been submitted to the Health and Wellbeing Board. Explanation of the process was that this document should be submitted to the Health and Wellbeing Board first and then come back to the Governing Body. As this is an iterative process, members could discuss the interim position at the July board meeting and receive a final version in October 2014.

13. No other matters were raised relating to content of the minutes.

c)  Action Log
14. All actions were completed on the log apart from item(s):-

15. Item 103, action 2: Final agreed Transformation programme plans for programme management support to be circulated to Governing Body members and Clinicians. Update: The plans are not fully completed but will be circulated as part of the minutes of the 7.5.14 meeting. Carry forward

16. The Governing Body were asked to agree accuracy of the minutes and noted actions completed on the action log.

The Governing Body agreed:
   a) minutes were a correct and accurate record noting amendment referred to in paragraph 9. Chair to sign off once amendment made.
   b) actions on the action log were completed with updates received on item 103, action 2 and item 108, action 1.

ACTION:
1. Amendment to format of paragraph 42 on page 7 of the 5 March 2014 minutes to be made and once amendment made, Chair to sign off the minutes as an accurate record.
2. Item 103 action 2 to stay on the action log until final agreed Transformation programme plans for programme management support document circulated with minutes from 7 May 2014 meeting.

AGENDA ITEM: LW2014/103 – ADOPTION OF CONSITION CHANGES FOR APPROVAL BY NHS ENGLAND
17. In the private pre-meeting of the Governing Body members discussed the proposed constitution changes for submission to and approval by NHS England by the 2 June 2014.

18. The Governing Body were asked to agree adoption of the proposed changes for submission to NHS England for approval.

The Governing Body agreed:
   a) adoption of the proposed changes to the Constitution for approval by NHS England.

AGENDA ITEM: LW2014/104 - CHIEF OFFICER’S UPDATE
19. The Chief Officer introduced agenda item LW2014/104, that provided Governing Body members with an update on issues of interest since the last meeting.
- Submission of 5 year plan – 4 April 2014
- Asthma NICE Gold Standards for Asthma care
- Staff survey results
- Annual report and accounts 2013-14

- Winterbourne view report
- Call to action
- NHS change day
- Involving the patients and public

20. Highlighted points included:
- 5 year plan submitted on 4 April 2014 - feedback to be received from area team tomorrow with final plan submission 20 June 2014.
- Winterbourne Review – NHS Leeds West CCG confirmed that all placements for learning disabilities have been reviewed. On the 1st June two Leeds West patients will remain in placements as dictated by their care needs. The Commissioning Manager for learning disabilities and Autism has oversight for all cases and provides assurance to the Director of Nursing & Quality and the Leeds CCG Quality Surveillance Group.
- Asthma – recognising that asthma has a major impact on health and quality of life and that people with asthma deserve great treatment from the NHS. We therefore pledge to take action to see that the Asthma Quality Standard is implemented in our area by March 2016.
- Call for action – feedback from March event will form basis on which to develop robust plans which will meet the challenges ahead and the final report will be published on the website.
- NHS change day 3 March 2014 – all pledges have been uploaded to the NHS change day website.
- Improving patients and public engagement – the engagement team have been involving patients and the public in shaping a number of services; redesign of citywide anticoagulant service, supporting medicines management team to develop a business case to extend their enhanced medication reviews in care homes project and supporting a project to improve access to primary care for the Gypsy and Traveller community.
- Annual report and accounts – thanks given to Chief Finance Officer and the team for achieving submission of annual report and accounts to NHS England before the submission deadline.
- Staff survey results – overall pleased with results; some areas highlighted for improvement that will be worked on over the coming months.

21. The Chair asked the Chief Officer to expand on the 5 year planning process. The 5 year plan is not a new document and so the majority of it would be familiar as it links to the Leeds West CCG strategy. Members may not recognise items such as the detail on West Yorkshire and the stroke programme concentrating on prevention and early supportive discharge. The plan will look at responding under the JSNA and accelerating areas of work, how we can do more with less resources and the potential impact on different services throughout Leeds. Submission of plan to NHS England is required by 20 June 2014. Work is underway and there will be a strategy workshop arranged early June for members.

22. Positives from the staff survey were touched on and members noted work to be done on improving some areas raised such as hot-desking, access to remote working and opportunities for personal development.
23. Medical Director for Transformation commented that he was pleased to see work being done on Asthma in children and improving access to Primary care for Gypsy and Traveller community. He updated on Health Education Yorkshire & Humber joint funding for clinical fellows scheme and being encouraged to bid for future funding.

24. The Governing Body were asked to receive the Chief Officers report.

The Governing Body:
(a) received the Chief Officer’s update.

AGENDA ITEM: LW2014/105 – INTEGRATED QUALITY AND PERFORMANCE REPORT (IQPR)/NEW FORMAT – APRIL 2014

25. Director of Commissioning, Strategy and Performance introduced agenda item LW2014/105, detailing key points on Service Quality and Governance issues and Performance issues.

26. The IQPR has been refreshed and revised with quality aspects still being worked on; some metrics still need to be added with a Cancer dashboard being developed to cover screening up to end of life care. There is a performance concern emerged in late spring relating to pressures in A&E. LGI & LTHT have put plans in place to deal with these pressures and Leeds CCG is monitoring this and supporting the hospital where it can.

27. The Assurance Committee continues to have the IQPR as a standard agenda item and a review of the refreshed version was carried out on the 2 April 2014; reference to suggestions made by the Committee are detailed in the Chair’s summary on page 2.

28. Update from the Medical Director for Quality and Performance on stroke included 30 April external accreditation visit; Stroke Network demonstrating robust mechanisms and plans are in place to deal with gaps. The Trust demonstrated through presentation a more improved position and feedback is expected from the CQC visit but initially there are no areas of concern. Assurance to the board that a tight QIPP is in place in relation to LTHT infections and these are monitored by the Quality Surveillance Group with learning been taken back through practices.

29. GP Non-Executive made reference to the tendering process undertaken jointly with Bradford CCG in relation to healthcare services at Eccleshill Treatment Centre. The Director of Commissioning, Strategy and Performance confirmed this is being re-procured currently and she was hopeful that diagnostics will be in place for July 2014 and nothing has been raised that would be cause for concern.

30. The Chair asked what commissioners can do to improve uptake to health checks in relation to dementia diagnosis. Public Health Consultant confirmed there is work being done on this.

31. Members felt that development of the document is heading in the right direction; that it links more with strategic goals and looks at where providers are not performing and what we are doing about this. Some small house keeping on year to date figures and what period this relates to and whether there could be reporting on historic
decommissioning items and wards being closed due to staffing issues. The next iteration will include information around staffing and complaints to include safeguarding data that will strengthen this area. Lay member for PPI is feeling more assured that the right areas are identified for visits and connecting to areas being worked on.

32. The Governing Body was asked to receive the IQPR and agree recommendations.

**The Governing Body:**

(a) **received** the current IQPR and agreed recommendations.

**AGENDA ITEM: LS2014/106 – FINANCE REPORT**

33. The Chief Finance Officer presented agenda item LW2013/106; the Finance report provides an update on:

- Leeds West CCG’s unaudited financial outturn position for the 2013/14 financial year. The draft year end accounts and annual report were submitted to both NHS England and the Leeds West CCG’s external auditors for approval in line with the national deadline of 23 April. Leeds West CCG final accounts and annual report will be presented to special meetings of both the Audit Committee and Governing Body scheduled to take place on 4 June 2014.
- the 2014-15 planning and contractual signing position and presents the Leeds West CCG high level 2014-15 budgets to the Governing Body for approval.
- initial proposed planning assumptions for the nationally set 2.5% non-recurrent headroom spend in 2014-15.

34. The above updates highlighted areas such as agreed contracts signed, retained surplus as inherited, staying within cash limit, paying 91-95% of invoices under better practice code, remaining within the running cost envelop, agreed reduced value and services from Commissioning Support Unit, Eccleshill Treatment Centre tender process; VFM coming into place and we will be able to test the market and how services and quality will be affected next year when aim for running costs is to be 10% lower.

35. Discussion on how challenges on reducing costs impact on budget, commissioning activity in the private sector increasing, legal issues and planning for reserves even if it is unlikely there will be a need to spend these.

36. Members expressed their congratulations to the Chief Finance Officer on getting all contracts signed with the exception of Harrogate and meeting the tight deadline for submission of the draft year end accounts and annual report.

37. The Chief Finance Officer asked members to confirm their availability to attend the extra-ordinary Governing Body meeting on the 4 June 2014, note timetables and if not available must sign declaration prior to this date.

38. The Governing Body is asked to note the recommendations in the finance report cover paper and the timetable for sign off of annual report and accounts.
The Governing Body:

a) noted and commented on the CCG’s draft closing 2013-14 financial position and performance against the CCG’s major financial performance targets
b) noted and commented on the 2014-15 contractual update
c) noted, commented and approved the 2014/15 high level budgets.
d) noted the latest local and cross city proposals for the 2.5% headroom spend in 2014-15

ACTION(S):
1. Members to confirm their availability for the extra-ordinary Governing Body meeting on the 4 June 2014; if unable to attend ensure they have signed declaration prior to meeting.

AGENDA ITEM: LS2014/107 – PROCUREMENT POLICY

39. The Chief Finance Officer explained that the Procurement Policy is intended to inform all decisions relating to procurement for Leeds West CCG. It is a statutory requirement for CCGs to have their procurement policy posted on their website, hence showing transparency in decision making. Cross referencing has been done with procurement policies of other Leeds CCGs and the wider Yorkshire and Humber CCGs for consistency purposes. CSU Procurement team has formally reviewed the policy to ensure that it is factually correct and appropriately comprehensive; Leeds West CCG’s Senior Management team and Audit Committee have reviewed and commented on previous drafts of this policy prior to submission to the Governing body. All employees and colleagues working on behalf of Leeds West CCG will be required to ensure they follow the requirements in the Procurement Policy. The policy links into and adheres with the detailed financial procedures for Leeds West CCG. The Audit Committee may invite nominated officers to clarify the reasons for the deviation from the standard policy (e.g. procurement waivers).

40. The Chief Finance Officer advised members that there is a standard agenda item on Audit Committee advising on procurement waivers.

41. Members discussed the importance of having this policy in view of the fact that the organisation is a public body and open to challenge in this area and possible embarrassment if procedures are not adhered to, the importance of ensuring that patient and public engagement is fully completed before making large decisions that may affect the public and patients and public members having the opportunity to be involved in the tendering process. The Chief Officer confirmed it is the intention to always have a member of the public or patient on tender panels and this maybe needs to be communicated better to ensure patients understand this happens.

42. Confirmation that tuition sessions have been scheduled in for key staff members to go through the process and rules to test system.

43. Amendment noted to paragraph 2.5.3 where it refers to Leeds South & East CCG – this should be changed to Leeds West CCG.
44. The Governing Body is asked to review and comment on the Procurement Policy and note the requirement for deviations from the policy to be discussed by the Audit Committee when appropriate.

The Governing Body:
   a) reviewed and commented on the Leeds West CCG’s Procurement Policy
   b) noted the requirement for the Audit Committee to discuss deviations from the policy when appropriate.

ACTION(S):
1. Amendment to paragraph 2.5.3 of the Procurement policy where it refers to Leeds South & East CCG – this should be changed to Leeds West CCG.

AGENDA ITEM: LS2014/108 – BUSINESS CASES
45. Two business cases were presented to the Governing Body for consideration and approval;

   i) Asthma
46. Medical Director for Transformation referred to the NICE Gold Standards for Asthma Care and the fact that Leeds West CCG had signed up to the Asthma UK pledge to take action to see that the Asthma Quality Standard is implemented in our area by 2016. He detailed the work that has been undertaken to prepare this business case and the benefits of the recommended option that included buying sustainability and leaving a legacy after year 1.

47. Discussion on similar models like this that have worked in the past, the aim to take this into schools, when returns will be seen, promotion of self-care scheme, what can be built into the programme to make it more sustainable, retaining practice nurses, and incorporation of this into the primary care dashboard. Question raised as to whether it is likely to be taken up by other CCGs to help with sustainability was answered by the Director of Nursing and Quality who advised that Leeds South & East CCG Governing Body have adopted this already.

48. The Governing Body is asked to receive the paper and approve the recommendation for funding to support implementation and sustainability of gold standard care to improve the quality of life for asthmatic children and young people across Leeds West.

The Governing Body:
   a) received the Asthma business case and approved the recommendation of for funding to support implementation and sustainability of gold standard care.

   ii) Year of Care
49. The Director of Commissioning Strategy and performance introduced the approved city wide business case asking the Governing Body to approve this in principle. Members requested some tweaks be made but noted good processes in place to empower patients and the strong evidence base.

50. The Director of Transformation advised that funding was approved through Leeds CCG Network and figures provided are city wide. Discussion on pilot schemes and
how this fits with health champions and items already funded; Leeds West CCG has a patient empowerment model and supporting self management in diabetes.

51. The Chief Officer asked for further details confirming that this had been approved by the Network and more details on P4 relating to outcomes.

52. The Governing Body approved in principle the paper with more detail to be provided to the Governing Body in the form of a briefing note being sent electronically.

**The Governing Body:**

(a) **approved in principle** the paper with more detail to be provided to the Governing Body in the form of a briefing note being sent electronically.

**ACTION(S):**

1. Further details confirming that this business case had been approved by the Network and more details on P4 relating to outcomes in the form of an electronic briefing to members.

**AGENDA ITEM: LS2014/109 - GOVERNING BODY ASSURANCE FRAMEWORK (GBAF)**

53. The Director of Nursing and Quality presented item LS2014/109 that provides the Leeds West Governing Body with an updated GBAF at April 2014. This is presented for information; the GBAF 2013/14 had been thoroughly reviewed and the Assurance Committee reviewed this on the 2 April 2014.

54. As part of the most recent review each GBAF risk had been challenged for the strength of its controls and assurances. The underlined sections highlight new areas challenged to reduce gaps. This exercise has led to questions raised around which meetings assurances are presented to and this has resulted in more robust assurance. At the Governing Body workshop on 30 April 2014, findings of this exercise were presented and there was a discussion on whether any new risks needed writing. New risks to be worked up in order that the first draft of the GBAF 2014/15 can be presented to the Assurance Committee meeting in June 2014 and thereafter on the Governing Body agenda for discussion on a quarterly basis.

55. There was a suggestion that the Governing Body might want to have a selection of high risks to look at in more detail. Discussion on whether members felt the need to have deep dives; who would undertake the reviews and would this work need to be done out of the main Governing Body meeting due to the size of the agenda. Members agreed for this to be discussed out of the meeting and the Chair to feedback on outcome. The Director of Nursing & Quality to work with the Governance team to put some proposals for the July meeting relating to which risks the members could review.

56. The Chair of the Assurance Committee confirmed that the Committee were assured by the process taken to review the GBAF and this is detailed in his Chairs summary.

57. The Governing Body is asked to receive the GBAF for information and note development process that is underway for 2014/15.
The Governing Body:

a) received for information the GBAF and noted process that is underway to develop this for 2014/15.

ACTION(S):

1. Chair to discuss with Director of Nursing and Quality proposals for which risk areas the Governing Body members would like to review under ‘deep dives’.


58. The Director of Nursing and Quality introduced paper LW2013/110 the NHS Leeds West Corporate Risk Register (CRR). The risk register was last presented to the Assurance Committee on the 2 April 2014. At that time there were three corporate risks identified.

59. The Corporate Risk Register now holds two risks that have been recently escalated. The risks are:

Risk No 339 Cancer under achievement of 62 day urgent GP referral – this had been escalated as LTHT are highly likely to fail Q4 on this metric.

Risk No 286 Outpatient follow up waiting list - this has been escalated due to the high numbers of patients whose follow-ups at LTHT are more than 3 months behind due date particularly in colorectal and gastroenterology and the continued failure of LTHT to be able to provide a satisfactory clearance plan.

60. The following previous corporate risk has been removed from the corporate risk register and returned to management:

Risk No 226 C Difficle Infection (rated at amber)
The new national trajectories relating to C Difficle transmission in acute care have been calculated on a reviewed formula and are expected to be achievable based on Leeds Teaching Hospitals current rates. The risk narrative describes work that continues to take place in-line with national recommendations and monitoring regime in place to measure performance.

61. The Governing Body is asked to consider and agree the corporate operational risks listed in the Corporate Risk Register.

The Governing Body:

(a) considered and agreed the current corporate operational risk register.

AGENDA ITEM: LW2014/111 – DEVELOPING OUR STAFF (EDUCATION & TRAINING)

62. The Director of Nursing and Quality updated members on item LW2014/1111. These papers outlined the systems and processes in place within the Organisation to ensure we have the right focus on education, training and development. It outlines the approach taken since the establishment of the CCG including induction, appraisal, Personal Development Plans (PDPs) and access to short and long courses. Data relates to staff with an employed status, Governing Body members
and where appropriate Clinical Leads, agency staff, contractors, seconded and volunteer staff. The level of training and education required will depend on the nature and duration of the contract and the requirements of the post.

63. Appendix 1 shows compliance information for employed staff at 31 March 2014. Direction of travel on employed staff is climbing each month and it is anticipated green ratings will be achieved by the end of June 2014. Target of compliance has been agreed by SMT to be set higher at 100% and the dashboard will be amended to reflect this. Once training has been completed; a system will be in place to notify people 2 months prior to their training expiring to give them time to factor this into their working arrangements.

64. Members discussed their training and ratings and agreed that it was unacceptable that they were not showing as ‘green’. There had been some issues around remote access, which training they were required to complete and whether training completed in their other areas of work could be used to show compliance. Support to members will be provided to assist them in completing the required training.

65. The Governing Body was asked to receive the paper showing the current position in relation to learning and development, acknowledge work is overseen by the Senior Management team and receive updates as required.

The Governing Body:
a) received this paper outlining the current position of the Organisation around Learning and Development.
(b) acknowledged that this work will be overseen by the Senior Management Team.
(c) received updates as required.

ACTION(S):
1. Support to be provided to members in relation to assisting them in achieving full compliance on their required statutory/mandatory training.

AGENDA ITEM: LW2014/112 – DIRECTOR OF PUBLIC HEALTH ANNUAL REPORT 2013 & LEEDS WEST PROFILE
66. Medical Director for Quality and Performance introduced item LW2014/112 that included the Annual Report of the Director of Public Health and the Annual Health Profile for Leeds West Clinical Commissioning Group. These documents give a comprehensive picture of health needs of the population and the health inequality challenges that will help support the CCG’s role in improving health and reducing health inequalities in line with the Leeds Joint Health & Well Being Strategy.

67. The annual report 2013 highlights several issues, two of which are key for Leeds West CCG. One is that infectious diseases remain a concern for the population, and that a Health Protection Board for the city is to be established with CCG representation. Consultant in Public Health Medicine has been confirmed as Health Protection lead and terms of reference for this group are being signed off.

68. Consultant in Public Health Medicine re-emphasised these documents are important for reflecting on improvements from Victorian times to now. She encouraged
members to review these documents and updated on the work being carried out with renewed focus on infant mortality and continuing to focus on improvements in relation to cardiovascular and cancer prevention and early intervention.

69. Members felt these reports were helpful and commented on whether infectious disease HIV should be included for future years and for the Governing Body to keep this on their radar. Other areas of discussion included data and how this is used, demographics included in the report, on life expectancy, inequalities and ethnicity.

The Governing Body was asked to:

a) note the contents of the DPH annual report 2013 and the Annual Health Profile 2013.

b) support the recommendations in the DPH annual report including the proposal to create a Health Protection Board under the Leeds Health & Well Being Board.

c) be assured that the Annual Health Profile and other population needs assessments have been used to inform the CCG’s 2 and 5 year commissioning plans

d) maintain a strategic focus on Continuing to reduce inequalities in health through partnership working and improving cancer and cardiovascular disease outcomes with a focus on prevention and early intervention

The Governing Body:

a) noted recommendations listed above a- d and supported the recommendations to establish a Health Protection Board.

AGENDA ITEM: LW2014/113 - END OF YEAR STRATEGIC OBJECTIVES REVIEW
AGENDA ITEM: LW2014/114 – REFRESH OF 2014-16 CCG POPULATION STRATEGY
AGENDA ITEM: LW2014/115 – 2 YEAR CITY WIDE STRATEGIC AND OPERATIONAL PLANS

The Director of Commissioning, Strategy and Performance gave an overview of the three papers in relation to items LW2014/113 – 115 as these were closely linked.

Item 113 describes the end of year review on progress against objectives 2013/14 celebrating successes and details what we have done. Members felt the Director of Health document was good but not getting feel for how well we are doing against the strategic objectives. The Chief Officer advised that strategic priorities are included in the IQPR.

In relation to item 114, the Director of Commissioning, Strategy and Performance would take comments on board and incorporate these into the refresh. The existing 2014-16 strategy had been reviewed to update it in light of where we are now.

Citywide work on the two and five year strategic and operational plans is underway with the 2 year city wide plan reflected on current strategy. Draft 5 year strategy was submitted and the final will be submitted on 20 June 2014.

Members reviewed the papers and commented that it was good to have an end of year report and a question was raised ‘how will this be presenting to the public? Are we producing a summarised document and events for public to attend before June?’ It was
confirmed that there will be a summarised document produced for the public with a series of events running up to the AGM in September.

There was a reminder of the importance of engagement with the citywide/transformation agenda; to be careful not to lose sight of reducing health inequalities, drivers or focus on areas that will make the difference to our population locally.

Members agreed it would be beneficial to hold a Governing Body workshop on strategy.

The Governing Body was asked to note the position statement of Strategic Review 2013/14, receive and approve the refreshed April 2014 Clinical Commissioning Strategy, note for information the two year planning submission for Leeds West CCG and note the Leeds Health economy planning position statement.

The Governing Body:

a) **noted** the position statement of Strategic Review 2013/14
b) **received and approved** the refreshed April 2014 Clinical Commissioning Strategy
c) **noted for information** the two year planning submission for Leeds West CCG and **noted** the Leeds Health economy planning position statement.

**ACTION(S):**

1. A Governing Body workshop is to be arranged on Strategy.

**AGENDA ITEM: LW2014/116 – POLICY RATIFICATION**

Item LW2014/114 paper seeks the Governing Body’s adoption of the following policies that have been reviewed and approved by the appropriate sub-committees:

a) Recruitment and Selection Policy  
b) Acceptable Standards of Behaviour Policy  
c) Protection of Pay and Conditions Policy  
d) Organisational Change Policy  
e) Partnership Working and Recognition Policy  
f) Performance Policy  
g) Pay Progression Policy

For assurance, annex A of the paper provides a summary of the purpose of the policy, details any changes made, through which review group and date they have been approved for recommendation to adopt.

Originally there were 120 PCT policies of which 34 were HR related. After working with CSU the HR policies have been reduced to 23. The above policies have been badged as new policies not a renewal of old PCT policies.

The Governing Body was asked to approve adoption of new policies listed a – g.

The Governing Body:

a) **approved** adoption of the policies listed above a - g.
AGENDA ITEM LW2014/117 – NHS LEEDS WEST CLINICAL COMMISSIONING GROUP FORWARD WORK PROGRAMME 2014

The Chair advised that the forward work programme has been populated up until the end of the year and will be revised after each meeting to add any new items.

Members noted the inclusion of two workshops i) strategy in June and ii) business planning and finance in October and an extra-ordinary board meeting to sign off the annual accounts on the 4 June 2014.

The Governing Body were asked to note the items listed on the forward plan and for members to feed in any new items.

The Governing Body:
   a) accepted items currently on the forward work programme.

AGENDA ITEM: LW2014/118 – QUESTIONS FROM MEMBERS OF PUBLIC

The meeting was opened up to the public for the second opportunity to ask any questions. Questions and answers are listed in appendix A.

The Chair thanked the public for attending and participating in the questions and answer sessions.

AGENDA ITEM: LW2014/119– ANY OTHER BUSINESS (AOB)

The Chair asked the members if there were any other items for discussion. No items were raised.

Formal thanks were recorded to Dr Power; Medical Director as this will be his last Governing Body meeting before leaving the NHS Leeds West CCG at the end of June 2014.

AGENDA ITEM: LW2014 – DATE OF THE NEXT GOVERNING BODY MEETING:

The Chair announced that the next NHS Leeds West CCG Governing Body meeting would take place on Wednesday 9 July 2014 at 2pm. The venue for the meeting is the Cardigan Centre, Headingley.

AGENDA ITEM: LW2014/IFI 01 – CHAIRMAN’S SUMMARY OF THE CLINICAL COMMISSIONING COMMITTEE (CCC) MEETINGS HELD ON 19 MARCH AND 16 APRIL 2014

The Governing Body was asked to receive the CCC Chair’s summary of meetings held on the 19 March and 16 April 2014.

The Governing Body:
   a) received CCC Chair's summary of meetings held on the 19 March and 16 April 2014

AGENDA ITEM LW2014/IFI 02 – CHAIRMAN’S SUMMARY OF THE ASSURANCE COMMITTEE MEETING HELD ON 2 APRIL 2014

The Governing Body were asked to receive the Chair of the Assurance Committee report.
The Governing Body:
  a) received Assurance Committee Chair’s summary of meeting held on the 2 April 2014.

AGENDA ITEM LW2014/IFI 03 – CHAIRMAN’S SUMMARY OF THE AUDIT COMMITTEE MEETING HELD ON 12 MARCH 2014

The Governing Body were asked to receive the Chair of the Audit Committee report.

The Governing Body:
  a) received Audit Committee Chair’s summary of meeting held on the 12 March 2014.
Annex A - Public Questions/Comments

Session 1

1. A member of the public who was unable to stay until the second question session had a conversation with the Chief Officer who advised members that he had a question relating to the high level suicide rate for New Wortley and what the NHS Leeds West CCG are doing about this. Upon reading the prospectus document 2013-2015, he was informed of details of what we know and what we aim to do. He asked if the Chief Officer would come and talk at their next residents meeting.

Answer:
The Chief Officer agreed she was happy to attend and give a talk on this subject.

Session 2

No questions were raised in this section.

If you would like to raise any questions, but cannot attend the Governing Body meetings you can email them to commsleedswestccg@nhs.net and we will be in touch within two working days.

Approved and signed by the Chair, Gordon Sinclair:

Date: