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## Board Meeting Minutes

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Pier Room, Fourth Floor, BICS, 177 Preston Rd, Brighton

Tuesday 26th April 2016

9:30 – 3pm

### Present

Matthew Riley (MR), CHAIR- Non-Executive Director

Lindsay Coleman (LC)- Non Executive Director

Zoe Nicholson (ZN)-Chief Executive

Jonathan Serjeant (JS)- Clinical Director

Jan Austeria (JA )-Non-Executive Director

Peter Devlin (PD) –Clinical Director

### In Attendance

Gillian Howson (GH)-Executive Assistant

Michelle Eades (ME)- Director of Business Development

Jon Ota (JO)-Director of Sussex MSK Partnership Central

Helen Curr (HC)-Director of Clinical Services

Mark Cannon (MC)-Director of Primary Care Collaboration

Paul Macauley-(PMac), Circus Team – (For item 4.0)

### 1.0 Apologies

Craig Milne (CM) – Non-Executive Director

Paul Deffley (PDe)-Primary Care Collaboration Clinical Lead

### 2.0 Declaration of Interests

No new interests were declared.

### 3.0 Minutes of the last meeting

The formal minutes of the previous meeting of 26<sup>th</sup> January 2016 (quarter 3) were discussed. Other actions were noted as complete or in progress. LC formally signed the previous minutes as an accurate record of the meeting.

## 4.0 Moving to Here

P Mac provided an update of the plans for the change of company name to Here. It was agreed that some of the narrative could be changed to better express who we are and what we do and that the right stories of what we have achieved need to be created. A discussion was held about registering the name as 'Care Unbound', trading as Here and the plans for the resolution at the shareholder meeting.

It was agreed that additional sessions to enable staff to connect with the name and its relationship with purpose should be set up. It was suggested that 'EVENTBRITE' bookings should be arranged.

### **Action PMac/GH**

Discussion was also held about how engagement with other organisational groups could be advised using existing meetings and forums eg culture group in MSK. **Action PMac /All Board**

It was agreed that each Board attendee would write a blog piece in relation to purpose and name. A schedule would be prepared by GH to facilitate this. **Action all**

It was also agreed that the change might be marked by an activity that connects with our purpose and that supporting briefs from a diversity of voices could be in video format to create a sense of partnership and community. **Action PMac**

## 5.0 Projects Update

ME informed the Board a range of core enhancements on Vedas2 have been identified which should save significant time minutes for each CReSS appointment. Staff will be trained to use the enhancements and the task timings re- run in order to calculate cost/benefit situation.

ME advised and updated the board on a broad range of tender opportunities. It was agreed that JS would have input into the Project Update report in future. **Action ME/JS**

## 6.0 Start - Up Fund

ZN advised the Board that the start-up fund was available from April 1<sup>st</sup> 2016 and presented the paper that had been circulated prior to the Board Meeting. ZN sought advice on whether the principles set out in the paper were balanced enough to support the intention.

It was advised that point 7 could be strengthened in terms of a commitment to actively share any learning; the title of 'group of peers' or 'panel' should be made consistent and that a support group of ME,MR and PD would be available. **Actions ZN**

## 7.0 Quality Assurance

### 7.1 Annual IG Report

MR highlighted the main areas for focus moving forwards as outlined in the report:

1. Managing compliance across Proactive Care as a complex IG model
2. Use of mobile devices- improving awareness of the policy amongst users
3. Mapping of data flows and corresponding risk (inc network security)
4. IG Training levels

The Board were also made aware of an additional new risk around Smart Cards and demonstrating that our processes are secure and the attention of the Board was drawn to the objectives outlined in the report.

### 7.2 Quality Policy, Strategy and Action Plan

The Board of Directors approved the policy and strategy with agreement that further evolution was planned.

It was agreed that:

- 1) the Action Plan would become a regular feature for Quasar Assurance and Scrutiny Meetings,
- 2) the word 'strategy' would be changed to 'learning culture'
- 3) a network of coaches would be created to develop the skills create the culture
- 4) Patient safety group would be written in bold on the policy.

**Action HC/JW**

### **7.3 MAS Action Group Learning Report**

ZN presented the key points on the report which had been circulated to the Board prior to the meeting. Board members were invited to consider how best to roll out learning to teams and to commissioners.

## **8.0 Integrated Performance and Update Report**

### **8.1 Community Eye Service**

HC asked the Board to note that activity was back to former levels and that the CCG were interested in including laser treatment.

### **8.2 CPAMS**

HC advised the Board that the move to the direct referral pathway was working well.

### **8.3 CReSS**

The Board have been asked for feedback from the CReSS team on how progress is perceived and for support with conflict resolution. The Board would like to extend an open invitation to the CReSS team to provide support and advice. There is an active desire to help and utilise the skills of the Enabling Team.

It was agreed that JS and PD would attend occasional CReSS team meetings and that Board member attendance at cross organisational meetings would be valuable in order to broaden understanding of the offer of help and support from the Enabling Team across the organisation .

**Action All**

### **8.4 Wellbeing**

HC highlighted the progress around recovery rate and advised that there is a plan in place to identify why there has been a high demand experienced which affects performance. The service is on track to make a financial recovery.

### **8.5 Memory Assessment Service**

The KPI is coming back up to where it needs to be. Optum have been asked to investigate delays and the issue has been raised with the CCG.

## 8.6 MSK Central

JO drew the attention of the Board to the five key risk areas in the report that have been escalated to the Partnership Board.

It was agreed that further conversations with CCG and SCT with relation to managing risk would be arranged. **Action ZN/JO**

## 8.7 Primary Care Collaboration

This was discussed during the strategic discussion

## 9.0 Finance Report

The board received 2015/6 Quarter 4 Finance Paper, and noted the year end surplus position.

## 10.0 Strategic Conversation

.A discussion was held about primary care and future developments of new models of care in Brighton and Hove and other areas.

**Signed:**

**Name:** Matthew Riley

**Date:**

I agree the above as an accurate record of the meeting held.

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The next meeting will take place:

**Date: Tuesday 26<sup>th</sup> July 2016**

**Time: 12:00- 18:00**

**Venue: Palace Room, 177 Preston Road, Brighton, BA1 6AG**

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