

Meeting of the governing body

Summary sheet

Date of meeting: 16 March 2021

For: Public session (Part 1)

For: Information

Agenda item: Chair's update

Author(s): Nikki Kelly, governing body lay member

Presented by: Nikki Kelly, governing body lay member

Lead director/GP from CCG: Helen Charlesworth-May

Clinical lead: Not applicable

Executive summary

At the POG committee on 16 March the following was discussed:

Sickness absence

The highest cause of absence during February 2021 with 71.92 FTE days is anxiety, stress or depression mainly attributed to a number of long- term cases.

Staff survey

Colleagues were invited to join 1 of 2 sessions in February in which the headline results of the staff survey were shared. Approximately 115 attended the sessions which I chaired. The second stage will be a number of facilitated listening sessions. Colleagues will be asked key questions to prompt discussion. The idea behind this is to understand the results before acting on them. The aim is to:

- understand what drove the responses
- what's relevant in particular areas or teams
- what colleagues would like to see being done differently
- how that might be achieved
- identify what has worked well in the past and how this can be adapted to the current working environment

People board agreed that these sessions should be led by heads of service and deputy directors.

The results were formally published on Thursday 11 March.

Shaping services we can all be proud of

NHS Kernow's staff voice group have advocated for a return of the directors' briefings. This proposal was taken and supported by people board, followed by the joint senior leadership team. The briefings will be called 'team brief' and 3 initial dates have been identified with the first taking place on 1 April.

Integrated care systems (ICS)

Colleagues remain very unsettled following the announcement of the NHS England proposal and publication of the white paper. Helen Charlesworth-May's live briefings and monthly extended senior leadership team have sought to reassure colleagues particularly in light of the 'employment promise' that has been referred to in the proposal. Further work is planned for ongoing engagement and follow-up from the initial sessions and will be development as part of the workstreams within the overall work programme for the ICS transition.

The appraisal rate has increased from 62% at end of December to 66% in February. Overall compliance for mandatory training has increased from 85% to 88%.

Patient participation group conference

Each year we arrange and host a patient participation group (PPG) conference that brings together representatives from GP surgeries. Last year's event was cancelled, but we are planning either a conference, or a number of localised events in November 2021. We will set up a project group, including members of the citizen advisory panel (CAP), to help us.

Our communication team developed a survey with our partners to ask children, young people, and their families to understand the specialist services they used during the pandemic. Working closely with the NHS Kernow's children and young person's commissioner the team have produced a comprehensive report, with recommendations on the next steps. This has been presented to the one vision board, and the child health service development group for review, feedback and discussion. The report will be designed and shared in the coming weeks.

Annual report

Work has begun on producing NHS Kernow's annual report, covering April 2020 to March 2021. The report will highlight the achievements and work of colleagues working across NHS Kernow, and the health and care system, during the pandemic, and the work to create an integrated care system. NHS England has extended the submission deadline by 2 weeks, and we are aiming to share a draft of the report at the end of March, ahead of the first submission date of 27 April.

NHS Kernow's communications and engagement strategy will be updated to align with the creation of the ICS and will cover public and staff messaging to ensure

everyone understands its benefits, and how it will affect them. Updates will be shared at a future meeting.

The draft citizen advisory panel (CAP) terms of reference were agreed and would be shared with CAP members at the March meeting. In addition, the CAP Chair shared an update re outline workplan 2021 and CAP membership

The timescales for the implementation of the proposals for CCGs to become a statutory ICS body mean that there is a very short period to plan and manage the transition given the scale and breadth of change. With this in mind, a small group of colleagues with expertise and experience in areas relevant to the change came together to consider the potential workstreams. The Committee were asked to note that these are initial thoughts, and it is expected that the required workstreams and their scope require further development and discussion. **Integrated approach** Most workstreams will need a CCG and system perspective, to ensure alignment and opportunities for collaborative working are maximised.

POG development session. February 2021

CAP development: Lead Paul Hulme, project lead Hollie Bone

Two key pieces of work are recruiting additional members and advertising the CAP chair role. It is envisaged Paul Hulme will become the director with responsibility for supporting this group.

Reorganisation resulting from the ICS white paper: Lead Paul Hulme, project lead tbc

There are many facets to the white paper and several workstreams shall be established in the coming weeks. Of vital importance is managing the implications for NHS Kernow staff and its governing body members. This programme of work and regular updates shall be managed by Paul Hulme and bi-monthly updates, if not more frequent, provided to POG. It is suggested there is a detailed discussion at the April 2021 POG development session.

New ways of working, agile working: Lead Paul Hulme, project lead Emma Goudge

This project has recently re-commenced - It is proposed the programme scope and details form part of the April development session too.

Development of NHS Kernow's wider engagement strategy: Lead Paul Hulme, project lead Laura Patrick

It is proposed this work features on the June development session.

Governance review to ensure the CCG is discharging its responsibilities: Lead Paul Hulme, project lead Trudy Corsellis

Significant work is required during the next year to create the new ICS white paper governance arrangements. This will include the establishment of shadow boards and the creation of a system executive group. Whilst POG will oversee much of this work, onward reporting to the governing body shall be essential. It is proposed this work features as a detailed update at the June development session as the green paper is expected during May 2021. A briefing can be provided to the April or May meeting, as appropriate.

Improving our approach to equality, diversity, disability and inclusion: Lead Paul Hulme, project lead Jayna Chapman and HR representative tbc

The governing body is asked to:

1. Note the contents of the report
2. Note the minutes of the workforce committee meeting held in March 2021

Additional required information

Cross reference to strategic objectives

- Improve health and wellbeing and reduce inequalities
- Provide safe, high quality, timely and compassionate care
- Work efficiently so health and care funding give maximum benefits
- Make Cornwall and the Isles of Scilly a great place to work
- Create the underpinning infrastructure and capabilities critical to delivery

Evidence in support of arguments: Agenda papers presented to the workforce committee meeting.

Engagement and involvement: Will be covered under each individual item considered by the committee.

Communication and/or consultation requirements: Published as part of the governing body papers onto NHS Kernow's website, distributed to individuals requesting copies of governing body papers and distributed to the governing body members.

Financial implications: Will be covered under each individual item considered by the committee.

Review arrangements: Will be covered under each individual item considered by the committee.

Risk management: No red risks or significant changes.

National policy/ legislation: Will be covered under each individual item considered by the committee.

Public health implications: Will be covered under each individual item considered by the committee.

Equality and diversity: None

Climate change implications: None for this paper.

Other external assessment: Will be covered under each individual item considered by the committee.

Relevant conflicts of interest: None

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Qualified/absolute*: None - item may be published

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