

**Minutes of the Mid Nottinghamshire ICP Board meeting held on  
Thursday 28 May 2020, 13:00 – 15:30pm  
Via MS Teams**

**Present:**

Rachel Munton (RMu)	Independent Chair
David Ainsworth (DA)	Locality Director, Mid-Nottinghamshire CCGs
Hayley Barsby (HB)	ICP Deputy Executive Lead and Chief Executive, Mansfield District Council
Thilan Bartholomeuz (TB)	ICP Clinical Lead and Clinical Chair, Newark and Sherwood CCG
Sue Batty (SB)	Service Director, Nottinghamshire County Council
Michael Cawley (MC)	Operational Director of Finance – Mid-Nottinghamshire CCGs
Carol Cooper-Smith (CC)	Chief Executive, Ashfield District Council
Greg Cox (GC)	General Manager – Nottinghamshire Division, EMAS
Sarah Furley (SF)	Director of Partnerships, Nottinghamshire Healthcare NHS Foundation Trust
Arwel Griffiths (AG)	Chief Executive, Nottingham Emergency Medical Services Community Benefit Services
Tim Guyler (TG)	Director of Integration, Nottingham University Hospitals NHS Trust
Jane Hildreth (JH)	Partnership and Engagement Officer, Newark and Sherwood CVS
Teresa Jackson (TJ)	Manager, Ashfield Voluntary Action
Rebecca Larder (RL)	Programme Director, Nottingham and Nottinghamshire ICS
Jane Laughton (JL)	Chief Executive, Healthwatch Nottingham and Nottinghamshire
Richard Mitchell (RMi)	ICP Executive Lead and Chief Executive, Sherwood Forest Hospital NHS Foundation Trust
Leanne Monger (LM)	Business Manager – Housing, Health and Community Relations, Newark and Sherwood District Council
Suzanne Shead (SS)	Director of Housing, Health and Wellbeing, Newark and Sherwood District Council
Amanda Sullivan (AS)	Accountable Officer, Nottinghamshire CCGs
Lesley Watkins (LW)	Partnership and Engagement Manager, Mansfield CVS
Ben Widdowson (BW)	Mid-Nottinghamshire ICP Estates Lead

**In Attendance:**

Rebecca Tryner (RT)	Mid-Nottinghamshire CCGs (Minutes)
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**Apologies for absence:**

Kerry Beadling-Barron (KB)	Director of Communications and Engagement, Mid-Nottinghamshire ICP
Jonathan Gribbin (JG)	Director of Public Health, Nottinghamshire County Council
Theresa Hodgkinson (TH)	Director of Place and Communities, Ashfield District Council

Dr Gavin Lunn (GL)	Clinical Lead – Mid-Nottinghamshire, PICS Limited and Primary Care Network Representative
Paul Robinson (PR)	Chief Financial Officer, Sherwood Forest Hospitals NHS Foundation Trust
Sarah Taylor (ST)	Health and Wellbeing Officer, Ashfield Voluntary Action
Peter Wozencroft (PW)	Director of Care Integration, Mid-Nottinghamshire ICP
Steve Morris (SM)	Chief Officer, Mansfield CVS

### **ICP/20/026 Welcome and Introductions**

RMu welcomed members to the meeting.

### **ICP/20/027 Apologies for Absence**

Apologies for absence were noted as outlined above.

### **ICP/20/028 Declaration of Interest**

No conflicts of interest were declared.

### **ICP/20/029 Notes and Action Log from the February 2020 Meeting of the Mid-Nottinghamshire ICP Board**

The minutes of the meeting held on 27 February 2020 were approved as an accurate record of discussion.

Matters Arising:

**ICP Board Development** – RMu explained that the Board was scheduled to have one more session facilitated by Karen Lynas and Mike Chitty as part of the EMLA Board development offer, which had helped the Board to develop its way of working and optimise connections across partners. The last commissioned session will be deferred to a later date when we can meet face to face

Action Log:

ICP/19/053 (2) – Members noted that it was not the right time to formally evaluate whether the ICP Board agenda was still relevant to organisations. The action, along with a short survey that had been developed by RMu and KBB, will be re-framed to be more reflective of the current position and issued at a later date .

ICP/19/055 – An engagement update will be provided at a later date.

ICP/20/007 (1) – BW confirmed that he had connected with colleagues at Nottinghamshire County Council in regard to the One Public Estate agenda. A more detailed summary will be presented to the June meeting of the ICP Board.

**ACTION:** BW to provide a progress update on the One Public Estate agenda at the June meeting of the ICP Board.

ICP/20/019 (1) – DA noted that education had been built into the roadmap for the next three to four years as a concept for future thinking and planning.

ICP/20/023 - RMu noted that as a result of the profound changes that had taken place over recent months it will be helpful to review the Terms of Reference in the near future.

**ICP/20/030 Members update on how our organisations are doing/how we are doing individually and what we have done differently as a result of Covid 19**

RMu explained that some people had been immersed both personally and professionally in the current situation whilst others may have had less involvement. The majority of the meeting would focus on feedback from members on a personal and professional level distilling learning that will be helpful for the ICP going forward.

RMu had experienced mixed emotions personally. On a professional level, a recent NHS Confederation session around the re-set process had provided an opportunity to give some thought to the way in which the ICP can re-engage and build on its successes.

JH noted that Newark and Sherwood CVS had been incredibly busy providing a shopping service to local residents and through the implementation of a check and chat service. However, there were still some concerns around loneliness and the fact that not all residents could or would access the services available to them. JH would like to hold on to the way in which the CVS was now engaging with communities on a more personal level with a grass roots approach.

Members noted that the situation had caused SF some concern in the beginning as she felt that there was potential for collaboration and joint working to be undermined. However, this had not been the case. The level of engagement with front line staff and the empowerment of clinicians had been both humbling and inspiring. Covid had suppressed demand for mental health services and careful consideration will need to be given to the mental health of staff, public and patients with mental health needs in the near future.

DA was proud of the way the Mid-Nottinghamshire system had made rapid changes to respond to the pandemic. The implementation of OPEL reporting for general practice enabled partners to see a true picture of demand on services across the Primary Care Networks. A significant amount of work had been undertaken across the ICP to shield vulnerable citizens and the support of volunteers had been invaluable. DA would like to carry forward the closer working relationships that had developed on a personal level over the last couple of months.

TJ explained that Ashfield Voluntary Action had been incredibly busy providing shopping deliveries for service users, implementing a chat/connect service, establishing a jigsaw/book library, and maintaining the digital support programme. Unfortunately, the social inclusion service for older people, which had taken a few years to set up, had been stood down. TJ highlighted the challenge that people who did not have access to the internet faced when trying to access information.

Members heard how TB had been encouraged by the new ways of engaging and the behavioural and cultural changes brought by the move to tele-medicine. He was proud of the achievements across Mid-Nottinghamshire, particularly OPEL reporting being adopted across the patch and the End of Life service being scaled up at rapid pace. Bonds between organisations had been strengthened and some of the successes had been a result of a reduced level of bureaucracy and reduced emphasis on the financial position. TB noted there was a risk of fatigue setting in and some level of concern around bureaucracy increasing. The positives need to be mobilised for the future and the ICP will be challenged to identify a common purpose going forward. A collaborative approach should be taken to restoration and recovery with management of the necessary governance elements.

SS informed members that she had commenced in post in mid-April and had therefore found it challenging to build relationships. The current situation had provided an opportunity to review the things that colleagues want to retain and to consider what this would mean for tenants moving forward.

LM had been leading the humanitarian response for Newark and Sherwood District Council, which had been very rewarding. There had been some challenges, but partners were working collaboratively to maintain the ambition.

HB noted that she had been working hard to encourage her team and to be honest and visible across the organisation. The shared common priority in Covid 19 has enabled partners to accelerate the things that were in development. The level of disadvantage across Mid-Nottinghamshire has been magnified by the pandemic and there is still a degree of unmet need. Moving to the recovery phase, Mansfield District Council is ready and willing to support test, track and trace and will be flexible to respond.

AS explained the CCGs across Nottingham and Nottinghamshire had merged to one organisation on 1 April 2020. The CCG role in the emergency was to coordinate the incident control centre and coordinate the health response. AS was proud of the judgements made to date, particularly in regard to the establishment of a Care Home Group. Health and local authority colleagues had delivered some incredible work through this group. There had been a shared sense of accountability with all partners working to a shared objective. The CCG operating model had changed and staff had adapted to the change incredibly well. It would be important not to revert to the old model of working in the future.

Members noted how Mansfield CVS had been finding alternative ways to connect with residents such as through radio interviews. The undefeatable campaign had moved to a digital channel and an exercise was being undertaken to collect and triage information. LW was proud of the partnership working across voluntary organisations and district councils who had collectively provided support to communities. There was concern that the areas with poor health outcomes could see a further deterioration.

AG informed members that NEMS had redistributed their workload to deal with staff working from home and had seen demand and capacity being driven to an aligned position. Practices had adopted video consultations and NEMS felt more connected to primary care and more connected to their workforce. Remote management was something that they would like to retain.

JL noted that Healthwatch colleagues usually talk to people face to face and the current restrictions had caused some issues. Healthwatch had a role to inform the national response and a survey was being published later that day. The response will be analysed at a Mid-Nottinghamshire level and feedback will be provided in due course. JL explained that the needs of vulnerable people are greater in this crisis and not all vulnerable people are clear whether they are at risk or not. A greater level of information is required to support the self-care agenda.

DA noted that the CCG engagement team intend to undertake a piece of work to capture the public response to the pandemic, particularly vulnerable groups, and the outcome of this work will be available mid-July.

**ACTION:** The results of the Healthwatch survey and the CCG engagement piece will be added to the forward programme for the first face to face meeting of the Board.

MC noted that he had even greater respect for front line workers than he already had. Going forward, he outlined the importance of striking a balance between holding onto the things that have gone well; making them sustainable as well as addressing the unintended consequences on health and care services as a whole when having to respond to Covid-19. He noted that there will come a point in the very near future when the overall financial position will need to be reviewed and re-considered in the light of Covid-19.

TG had been leading the mutual aid efforts at Nottingham University Hospitals NHS Trust and found the situation humbling. The population had turned its hand to whatever was needed and one of the key learning points will be to build on the kindness and creativity of people.

CC explained that Ashfield District Council had found through their humanitarian work that elderly people often turned down offers of support as they did not want to be any trouble. There had been some frustration around not being able to properly address some key issues during the pandemic such as, domestic violence and drug dealing. The pandemic had highlighted the real frontline workers within the council and these key workers had felt great pride in delivering services to the community. The voluntary sector had also provided fantastic support, which will need to continue after the restrictions are lifted.

SB informed members that staff within the County Council had been through a re-model prior to lockdown and were now in an interim re-model in order to appropriately respond to the current situation. Capacity had been increased within START re-ablement and a discharge to assess model had been implemented. These services should continue going forward.

GC had returned to the front line in response to the pandemic and had found the situation liberating on a professional level. There had been a lot of courage across the system with partners collectively making the right decisions to do things differently at pace. He also spoke about the personal and family impact of required social distancing

BW reflected that partners needed to maintain momentum with all of the good work that had been enacted across the system, particularly in relation to tech enablement. The level of generosity had been amazing and Sherwood Forest Hospitals NHS Foundation Trust had been sharing donations with charities across the patch.

RL highlighted the importance of showing staff appreciation and supporting them in the future. There had been some phenomenal transformation recently which had been awe inspiring and this must be maintained going forward.

Members of the public were given the opportunity to provide their thoughts and feelings about the situation and it was noted that people were grateful for the opportunity to be involved and support their communities. Going forward, there will be some economic uncertainty and partners were encouraged to prepare themselves in order to be best placed to respond.

#### **ICP/20/032 Revisiting ICP Priorities in the new context**

DA explained that the Marmot review stated that when society flourishes, health tends to. The health needs across Mid-Nottinghamshire will be greater post-Covid as the health outcomes will have further deteriorated. The ICP will renew its ambition and desire to do what is needed to work towards a common purpose with a focus on action.

#### **ICP/20/031 Update on the formation of an ICP exec**

RMi noted that colleagues had been supported to care for citizens during the pandemic. His role had evolved over the last couple of months and he had been focussed on supporting his Team and communicating to the organisation. Over the last 10 weeks, partners had an identified common purpose and had been galvanised to rapidly respond. This strength and focus needed to be sustained over the upcoming months.

In order to improve the ICP's ability to deliver operationally, an ICP Executive Team will be developed with the aim of strengthening and accelerating delivery of the jointly agreed common aims of the ICP. The Executives working within the ICP will maintain their organisational sovereignty. A further update on the development of the ICP Executive Team will be provided at the June meeting of the Board.

**ACTION:** RMi to provide an update on the development of the ICP Executive Team and delivery commitments at the June meeting of the Board.

#### **ICP/20/033 The ICP in the next period**

This item was not discussed.

#### **ICP/20/034 Any Other Business**

Members congratulated RMi on Sherwood Forest Hospital NHS Foundation Trust's recent CQC rating.

#### **Date and Time of Next Meeting:**

Thursday 25 June 2020, 13:00 – 15:30 via MS Teams

The meeting closed at 15:50.