

**Minutes of the Mid Nottinghamshire ICP Board meeting held on
Thursday 25 June 2020, 13:00 – 15:00pm
Via MS Teams**

Present:

Rachel Munton (RMu)	Independent Chair
David Ainsworth (DA)	Locality Director, Mid-Nottinghamshire CCGs
Mariam Amos (MA)	Strategic Director, Mansfield District Council
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
Kerry Beadling-Barron (KB)	Director of Communications and Engagement, Mid-Nottinghamshire ICP
Michael Cawley (MC)	Operational Director of Finance – Mid-Nottinghamshire CCGs
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
Theresa Hodgkinson (TH)	Director of Place and Communities, Ashfield District Council
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
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

In Attendance:

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

Jonathan Gribbin (JG)	Director of Public Health, Nottinghamshire County Council
Dawn Jenkin (DJ)	Consultant in Public Health, Nottinghamshire County Council
Dr Gavin Lunn (GL)	Clinical Lead – Mid-Nottinghamshire, PICS Limited and Primary Care Network Representative
Steve Morris (SM)	Chief Officer, Mansfield CVS
Ben Widdowson (BW)	Mid-Nottinghamshire ICP Estates Lead
Peter Wozencroft (PW)	Director of Care Integration, Mid-Nottinghamshire ICP

ICP/20/035 Welcome and Introductions

RMu welcomed members to the meeting noting that the May meeting provided members with an opportunity to reflect on their personal and professional experiences during the pandemic and this meeting would be more action orientated.

ICP/20/036 Apologies for Absence

Apologies for absence were noted as outlined above.

ICP/20/037 Declaration of Interest

No conflicts of interest were declared.

ICP/20/038 Notes and Action Log from the May 2020 Meeting of the Mid-Nottinghamshire ICP Board

The minutes of the meeting held on 28 May 2020 were approved as an accurate record of discussion.

Action Log:

ICP/19/053 (2) – It was agreed that this action could be closed.

ICP/20/023 – RMu confirmed that she will lead on the review of the Terms of Reference.

ICP/20/039 Update on the Formation of an ICP Exec

RMi informed members that the ICP Exec had met on 12 June 2020 with representation from the Clinical Commissioning Group, Primary Care, Nottinghamshire Healthcare NHS Foundation Trust, Nottinghamshire County Council, District Councils and Sherwood Forest Hospitals NHS Foundation Trust. However, representatives from other organisations may join the Exec going forward. The ICP Exec will meet regularly and have a mandate and accountability to enact the actions arising from the ICP Board.

HB added that the meeting had been positive and built upon the connections and foundations developed through the Board. Commitment to the objectives of the ICP was being demonstrated.

SF was supportive of developing the Executive and using this as the group to drive through priorities and collaboratively problems solve and share successes.

ICP/20/040 Recommended ICP Breakthrough Objectives for 2020/21

SB had to leave the meeting early due to another commitment and was therefore given the opportunity to comment on the recommended breakthrough objectives for 2020/21 at this point. SB noted that she was broadly supportive of the objectives and the interface between social care and other sectors. However, the inclusion of mental health and carers needed to be considered. SB suggested that each organisation nominate a programme lead in order to work up a more formal programme of work.

ACTION: RMi agreed to share a list/diagram of the members of the ICP Exec.

RMi confirmed that the ICP Exec was not a way of changing either organisational form nor accountabilities, and personal accountabilities/responsibilities will still sit with sovereign organisations.

Once a refined list of priorities has been agreed, they will be **mapped across organisations** as some may already be in train and will therefore be easier to deliver on, some may sit across all organisations and some will be delivered through a bi-lateral approach.

TB stated that it would be helpful to understand how the Transformation Board fits into the ICP work programme as the Transformation Board may already be working on some of the identified priorities. JL highlighted the importance of making reference to the work already underway and utilising systems already in place to avoid duplication.

RMi and HB presented the breakthrough ICP objectives for 2020/21 highlighting the following key points:

- the ICP's focus must be on those areas where the collective endeavour and collaboration add value over and above the work of single unitary bodies or organisations
- there are a number of things that the objectives must do, which include: represent the views of all partners and bind health and care together, underpin the conversations at the ICP Board and reflect the overarching aims and objectives of the Nottinghamshire ICS and CCG
- the foundation principles running through each priority include: partnership working/ shared democracy and ownership, culture and inclusion and informed by our residents
- the five previously agreed priority themes are: to give every child the best start in life, to promote and encourage healthy choices, improved resilience and social connection, to support our population to age well and reduce the gap in healthy life expectancy, to maximise opportunities to develop our built environment into healthy places and to tackle physical inactivity, by developing our understanding of barriers and motivations
- Following an inclusive process 19 recommended breakthrough objectives for 2020/21 had been identified for consideration

RMi noted that the 19 objectives were not spread equally across the previously agreed priority themes and asked the Board to consider whether it would be helpful to have an equitable number of objectives underpinning each of the five themes.

HB asked members to ensure that the objectives were important to all members and focussed on partnership.

AS clarified that the objectives of the ICS and CCG were one and the same. The ICS and CCG are working to the same strategy and vision, with aligned commissioning intentions. AS highlighted two of the breakthrough objectives as areas where a whole partnership approach could add real value and the ICP had an opportunity to do something different and exciting. These were to improve Dementia support for people with the disease and their carers and increase physical activity in all breakthrough objectives. Members noted that

Mid-Nottinghamshire is an outlier in regard to smoking in pregnancy and there may be opportunities for partnership working in this area.

TB suggested that the first breakthrough objective 'reduce smoking in teenage pregnant girls' be split into two separate objectives; reduce smoking in pregnancy and reduce teenage pregnancy. He also noted that there were already programmes of work in place for the breakthrough objectives around frailty and cancer and the linkages needed to be made in order to effectively feed in local issues and influence these groups.

MA commented that the Board should be informed by residents through data and insight. DA added that some of this intelligence already exists and work was already underway on the data and intelligence available to inform next steps. DA suggested that it would be beneficial to write a plain English version of the ICP objectives to share with local communities.

Discussion took place around the need to strengthen the foundation principle around culture and inclusion to specifically reference the greater impact that Covid has had on some groups. TB highlighted the importance of making a true effort to capture the voices of the minority groups across Mid-Nottinghamshire.

RMi reminded members that an inclusive and rigorous process had been followed to identify the five previously agreed priorities, which are a combination of things that are important and/or urgent. The breakthrough objectives will underpin these previously agreed priorities.

SF noted that if the breakthrough objectives were in a matrix there would be a **number of interdependencies**. She was keen to work more as a neighbourhood/place alongside the voluntary sector in order to maximise the value added. TH echoed SF's comments adding that there needed to be a focus on the communities with the greatest need.

Members agreed that all of the objectives will be looked at with a **place based approach**, building on the engagement that had taken place pre-Covid.

JL stated that whilst she did not disagree with the content of the breakthrough objectives, she felt that some of the language could be changed to **make it more inclusive**. JL agreed to support colleagues to reframe the objectives.

ACTION: JL to support colleagues to reframe the breakthrough objectives.

ACTION: Plain English version of agreed objectives to be commissioned and produced.

In response to a query from SS regarding the objective around increasing referrals to leisure centres, RMi noted that this will sit within the broader objective around physical activity and further refinement will be required to get the right balance between being sufficiently broad while having enough detail to measure progress.

DA noted that some of the breakthrough objectives are transactional and will be driven through business as usual processes rather than via the ICP Exec. Whilst the ICP Board will want to see progress on these areas, it will be sought through other routes.

HB explained that by giving greater breadth to some of the breakthrough objectives, the number will reduce and careful consideration will be given to the nature of the interdependencies.

ACTION: RMI agreed to take the feedback from the Board back to the next meeting of the ICP Exec in order to:

- Reframe the language to ensure it is explicitly inclusive and reflects the partnership and the people served
- To refine the breakthrough objectives and cluster them under the five previously agreed priorities
- To strengthen the focus on a place based approach to all of the objectives
- To acknowledge the preferred/suggested emphasis identified in discussion

The updated objectives will be presented to the July meeting of the ICP Board for final sign-off. Following this, the Board will receive regular progress updates on and the ICP Exec will be empowered to build on this foundation and deliver, including a formal quarterly report to be received at September and November 2020 meetings.

ICP/20/041 Healthwatch Vulnerable People's Survey – Mid Notts Information

JL explained that in order to understand the impact of Covid-19 on vulnerable people in Nottingham and Nottinghamshire, and to inform local and national responses, Healthwatch Nottingham and Nottinghamshire (HWNN) carried out a short survey between 17th April and 4th May 2020. The Mid-Nottinghamshire specific feedback had been shared and may be useful for winter planning/any future Covid peaks. The report will be discussed in more detail at a future meeting of the Board.

ICP/20/042 Primary Care Network Update

DA reported that throughout the pandemic, the Primary Care Networks across Mid-Nottinghamshire had proven their ability to work together and are now looking at business as usual plans in preparation for winter and any future waves of Covid. RM hoped that the two PCN Director might be able to attend the next meeting to provide their perspective on the issues

ICP/20/043 Integrated Care System Update

RL noted that the ICS Board was stepped down in March due to the pandemic and has not yet been re-established. A CEO Group meets fortnightly and they are now looking at business as usual plans. The ICS Board is expected to be reinstated soon and the two-way reporting arrangement will then continue.

ICP/20/044 Any Other Business

No other business was discussed.

Date and Time of Next Meeting:

Thursday 23 July 2020, 13:00 – 15:00 via MS Teams

The meeting closed at 14:55.