

UN-CONFIRMED MINUTES OF THE MID-NOTTINGHAMSHIRE INTEGRATED CARE PARTNERSHIP (ICP) BOARD MEETING HELD ON 18TH FEBRUARY 2021 VIA MICROSOFT TEAMS

PRESENT:	Rachel Munton	Independent Chair	RMu
	Richard Mitchell	ICP Executive Lead and Chief Executive, Sherwood Forest Hospital NHS Foundation Trust	RMi
	Lorraine Palmer	Interim Programme Director, Mid-Nottinghamshire ICP	LP
	David Ainsworth	Locality Director, NHS Nottingham and Nottinghamshire CCG	DA
	Amanda Sullivan	Accountable Officer, NHS Nottingham and Nottinghamshire Clinical Commissioning Group	AS
	Michael Cawley	Operational Director of Finance, Mid- Nottinghamshire, NHS Nottingham and Nottinghamshire Clinical Commissioning Group	MC
	Greg Cox	General Manager – Nottinghamshire Division, East Midlands Ambulance Service	GC
	Tim Guyler	Director of Integration, Nottingham University Hospitals NHS Trust	TG
	Sarah Furley	Director of Partnerships, Nottinghamshire Healthcare NHS Foundation Trust	SF
	Sharon Creber	Deputy Director of Business Development and Marketing, Nottinghamshire Healthcare NHS Foundation Trust	SC
	Dr Gavin Lunn	Clinical Lead – Mid-Nottinghamshire, PICS Limited and Primary Care Network Representative	GL
	Lorna Branton	Director of Communications, Sherwood Forest Hospitals NHS Foundation Trust	LB
	Theresa Hodgkinson	Director of Place and Communities, Ashfield District Council	TH
	Mariam Amos	Strategic Director, Mansfield District Council	MA
	Helen Ellison	Health Improvement Officer, Newark & Sherwood District Council	HE
	Leanne Monger	Deputy Locality Director, Nottingham and Nottinghamshire CCG	LM
	Maria Ballantyne	Group Manager – Living Well South, Nottinghamshire County Council	MB
	Joanna Cooper	Reablement Evaluation Officer, Nottingham and Nottinghamshire ICS	JC
	Jane Laughton	Chief Executive, Healthwatch Nottingham and Nottinghamshire	JL
	Jane Hildreth	Partnership and Engagement Officer, Newark and Sherwood CVS	
	Lesley Watkins	Partnership and Engagement Manager, Mansfield CVS	LWa
	Arwel Griffiths	Chief Executive, Nottingham Emergency Medical Services Community Benefit Services	AG
IN ATTENDANCE:			
	Laura Webster	Sherwood Forest Hospitals NHS Foundation Trust (Minutes)	LW
	Ann Mackie	Observer	AM
	Pat Kelsey	Observer	PK
	Gilly Hagan	Observer	GH

APOLOGIES: Hayley Barsby	ICP Deputy Executive Lead and Chief Executive, Mansfield District Council
Thilan Bartholomeuz	Clinical Lead, Mid-Nottinghamshire ICP
Jonathan Gribbin	Director of Public Health, Nottinghamshire County Council
Alison Rounce	Managing Director, PICS Limited
Sue Batty	Service Director, Nottinghamshire County Council
Claire White	Deputy Director of Integration, Nottingham University Hospitals NHS Trust
Suzanne Shead	Director of Housing, Health and Wellbeing, Newark and Sherwood District Council
Rebecca Larder	Programme Director, Nottingham and Nottinghamshire Integrated Care System
Madeleine O'Sullivan	Chief Executive, Newark and Sherwood CVS
Steve Morris	Chief Officer, Mansfield Community and Voluntary Services (CVS)
Ben Widdowson	Mid-Nottinghamshire ICP Estates Lead
Dr Khalid Butt	Primary Care Network Representative
Carol Cooper-Smith	Interim Chief Executive, Ashfield District Council
Paul Robinson	Chief Financial Officer, Sherwood Forest Hospitals NHS Foundation Trust
ABSENT: Richard Henderson	Chief Executive, EMAS
Dawn Jenkin	Consultant in Public Health, Nottinghamshire County Council
Sarah Taylor	Health and Wellbeing Officer, Ashfield Voluntary Action
Teresa Jackson	Manager, Ashfield Voluntary Action

Item No.	Item	Action	Date
ICP/20/108	<p>WELCOME AND INTRODUCTIONS INCLUDING MINUTES OF THE PREVIOUS ICP BOARD MEETING HELD 28TH JANUARY 2021 Quoracy Check; Chair, ICP Chief Executive Lead and a member of each of the member bodies is required.</p>		
Length of Discussion; 5 minutes	<p>The meeting was held by video conference. All participants confirmed they were able to hear each other. The meeting being quorate, RMu declared the meeting open at 14:00.</p> <p>Following a review of the minutes of the ICP Board held on 28th January 2021 the Board CONFIRMED the minutes as a true and accurate record.</p> <p>RMu queried whether the System Progression Tool (SPT) is now ready for use. JC informed RMu the release of the SPT is now expected for Spring 2021. JC advised the Board that work is underway on a development plan in anticipation of the SPT. A draft outline plan will be ready for early April 2021 and will be brought to the Board's attention once complete.</p> <p>Action: JC to present the draft outline plan following receipt of the System Progression Tool.</p>	JC	15/04/21
ICP/20/109	<p>APOLOGIES FOR ABSENCE</p>		
Length of Discussion; 1 minute	<p>Apologies for absence were noted as outlined above. It was emphasised that attendance or non-attendance should be notified in advance to optimise on line meeting efficiency.</p>		
ICP/20/110	<p>DECLARATIONS OF INTEREST</p>		
Length of Discussion; 1 minute	<p>No declarations of interest were received from those present relating to items on the agenda.</p>		
ICP/20/111	<p>ACTION TRACKER AND FORWARD PLANNER</p>		
Length of Discussion; 3 minutes	<p>The Board CONFIRMED that actions ICP/20/090.2 and ICP/20/105 were COMPLETE and could be removed from the tracker.</p> <p>The Board REVIEWED action ICP/20/089.2. RMu asked if this action's progress narrative could be reduced to show headlines only.</p> <p>Action: LP and DA to provide shortened narrative to LW regarding action ICP/20/089.2.</p> <p>The Board REVIEWED action ICP/20/102. RMu advised the Board this item has been scheduled to come back in May and could now be marked as COMPLETE.</p> <p>The Board REVIEWED the forward planner. RMu advised the Board that two Board meeting activities are planned, one to be led by RMi regarding Staff Recovery and Wellbeing, and secondly a piece on the sense of PLACE and the direction the Board is headed with this.</p>	LP/DA	18/03/21

<p>ICP/20/113</p>	<p>PLACE BASED NEIGHBOURHOOD WORKING</p>		
<p>Length of Discussion; 40 minutes</p>	<p>RMu outlined the key focus for each of the planned group discussions which had been put together following the King's Fund PLACE Based workshop.</p> <p>DA and RMu gave a presentation to the Board regarding the PLACE Based Neighbourhood Working to provide a background to the group discussions.</p> <p>The Board was equally split into three virtual rooms where group discussions took place for approximately 40 minutes.</p>		
<p>ICP/20/114</p>	<p>CONSOLIDATION OF NEXT STEPS</p>		
<p>Length of Discussion; 32 minute</p>	<p>Following the group discussions the following feedback points were raised:-</p> <p>Group 1 This group focused on the following two questions:-</p> <ol style="list-style-type: none"> 1. How are we doing in relation to the King's Fund key functions? 2. What do we need to do to make the greatest possible difference to our citizens, increasing the pace and scale of change? <p>TH informed the Board that six key areas were highlighted within the group discussion. Firstly to identify local Place based health and wellbeing partnerships already in place across the region to recognise potential collaborative opportunities to provide assurance to the ICP Board. Secondly to understand targeted communities and to implement impactful links to health and wellbeing amongst these groups. Thirdly to hold a focused discussion on culture and the positive impacts achieved during the COVID-19 pandemic. Fourthly it was highlighted that the COVID-19 pandemic has driven the ICP into a positive position however a forward view from a risk management perspective should be considered.</p> <p>TH stated that due to COVID-19 Government funding financial matters have not been a concern, albeit going forward more focus should be placed on the impact this has had on communities, and specifically how non-COVID-19 patients have been affected whilst waiting for treatment. Another area highlighted was how ICP Board members can challenge themselves to prepare for potential financial challenges ahead. TH advised the Board the group also discussed how best to triangulate all data and intelligence, and finally the group felt it was important to bring in the prevent agenda as a key focus to mitigate against dealing with cause.</p> <p>Group 2 This group focused on the following three questions:-</p> <ol style="list-style-type: none"> 1. How would you assess MN ICP against the King's Fund identified principles? 2. Which have we already adopted within MN ICP? 3. Which need greater attention? 		

GC informed the Board that the group considered the principles of PLACE based working and the relationships within this to create a well-established multi-agency across the community. The group felt it is important for the Board to challenge itself about what has already been achieved and whether the ICP delivery model enhanced these outcomes. GC stated that the group also felt it would be important to review the MC ICP objectives and whether these are captured within a Framework that all members recognise.

Another point raised by the group is to consider how the ICP engages with its citizens/patients to clearly understand their needs/wants/opinions.

The group reflected on learning from COVID-19 service/organisations delivery and debated whether a workshop should be held to acknowledge what the positive changes look like and how the ICP is able to maintain this standard.

The group discussed how the ICP could manage and balance the dichotomy between national/regional asks and the needs/asks of the local population. GC fed back that the group recognised the need for a strong and effective PLACE leadership which will represent and champion the aspirations/needs/wants of that local population. The group expressed that budgetary arrangements for PLACE is still unclear.

Group 3

This group focused on the following two questions:-

1. What else needs to happen next to further embed our PLACE based work?
2. Making reference to the board paper provided and/or the word clouds generated by the King’s Fund event feedback, where should we focus our attention?

SF informed the Board that the group discussed building on strong foundations with clear objectives such as community asset management. The group felt that this ambition could be planned 5, 10 or 20 years ahead. SF stated that the group also felt that a single approach to communication should be considered when recovering from the COVID-19 pandemic; this will benefit both the population and colleagues.

The group felt that there is a potential health bias amongst the ICP and to dismantle this with the focus on targeted community impactfulness. SF advised the Board that the ICP could hold a ‘no barriers week’ to identify issues within the community and unblock them in the same week; this will help build trust between the population and the ICP and provide an understanding of the needs of the population as well as achieve positive change in a short space of time.

	<p>SF suggested that the ICP should consider a Framework that will guide the ambition of the White Paper and provide members with aspirations and tangible gateways to indicate the ICP is headed in the right direction.</p> <p>RMi thanked members for their contributions and added that the ICP has pre-existing priorities and objectives that are well-structured and combine the needs of health and care of citizens. RMi felt that there is a well-structured way of working across MN and that the ICS will also shape the decision making of the ICP. RMi reiterated the importance of evidencing delivery over the next 12 months to demonstrate the success the MN ICP has achieved for its citizens.</p> <p>RMu felt that the focus on the ICP's financial management is pivotal and a need to understand the way the ICP contributes to the financial management of PLACE is to be strengthened.</p> <p>LP provided a verbal update with regards to next steps following the group discussions. LP advised the Board that the ICP will be asked to set out its ambitions and plans for 2022 onwards and stated that a roadmap has already been drafted in preparation. Priority and planning sessions with objective leads are due to take place in the coming weeks and will be shared with the ICP Board at March's meeting for assurance.</p> <p>Action: LP to provide an update to the Board following priority and planning sessions held with objective leads.</p>	LP	18/03/21
ICP/20/115	ANY OTHER BUSINESS		
Length of Discussion; 0 minute	No other business was raised.		
ICP/20/116	DATE AND TIME OF NEXT MEETING		
	<p>It was CONFIRMED that the next ICP Board meeting would be held on 18th March 2021 at 14.00</p> <p>There being no further business the Chair declared the meeting closed at 15:00.</p>		
	<p>Signed by the Chair as a true record of the meeting, subject to any amendments duly minuted.</p> <p>Rachel Munton</p> <p>Chair</p>		<p>Date</p>