

**Salford Primary Care Together  
Board Meeting**

**Friday 14<sup>th</sup> May 2021  
9.00am – 2pm**

**Novotel Hotel, Worsley**

**MINUTES**

**Present:**

Liz Cross (LC)	Chair of the Board
Lance Gardner (LG)	CEO
Alan Kershaw (AK)	CFO
Peta Stross (PS)	COO
Helena Leyden (HL)	Non-Executive Director
Dr Brian Hope (BH)	Non-Executive Director

**Apologies:**

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**In Attendance:**

Dr Pete Budden (PB)	Clinical Lead, Eccles & Irlam PCN
Jane Ashworth	Minute Taker

No.	Agenda Item	
1	<p><b>Welcome Introductions and Apologies for Absence</b></p> <p>No apologies were received.</p> <p>The Chair welcomed Directors and thanked everyone for attending the meeting which was held at the Novotel Hotel, Worsley.</p>	
<b>Agenda Items</b>		
2	<p><b>Draft Minutes of the previous meeting held on 14/05/21 and any matters arising</b></p> <ul style="list-style-type: none"> <li>The minutes of 14/05/21 were agreed as a true and accurate record. There were no matters arising.</li> </ul>	
3	<p><b>Action Log</b></p> <ul style="list-style-type: none"> <li>See action log for updates.</li> </ul> <p>To note:</p> <ul style="list-style-type: none"> <li>Action 080 - Lead NED – Board agreed to close this action. The JD's have been drawn up and agreed and the lead on finance and risk will be allocated to the new NED once appointed. The Board affirmed its approach to having lead NEDs in place of sub committees given we are a small Board with only 4 NEDs. LC confirmed that HL will act as lead NED on matters of safety- including clinical governance and psychological safety/employee well being</li> <li>HL suggested it would be useful to have a published quality account, this is</li> </ul>	

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	<p>to be further discussed by HL &amp; PS</p> <ul style="list-style-type: none"> <li>Action 092 - Little Hulton Single Purpose Meeting – agreed this action to be closed, but the points of principle and lessons learned should be pulled out, detailing an understanding of the arrangements underpinning the Little Hulton development.</li> </ul> <p>Clarity is required on the CCG underwriting and the inconsistency of subsidies that were given. The Board noted that decisions were made that did not involve SPCT on these matters and recognised these were of concern to our customers/members. The Board suggested a conversation with the Medical Director of the CCG to try and bring a close to the queries by practices over the subsidy charges would be helpful.</p> <ul style="list-style-type: none"> <li>LC requested 2 pages of A4 detailing key points of the Little Hulton build, extracting the design principles for future projects of this nature.</li> <li>The Board agreed that it will be necessary to look at finding other tenants and a date should be agreed by which we will need to start looking for alternative uses.</li> </ul> <p><b>ACTION 101: A new action to be raised to keep open the opportunity to PCN leads/members for a Single Purpose Meeting on exploring the lessons learned from the Little Hulton development.</b></p> <p><b>ACTION 102: 2 x pages of A4 detailing key points of the Little Hulton deal</b></p> <p>Other highlights:</p> <ul style="list-style-type: none"> <li>NED recruitment – a very productive meeting has taken place with HR and Dr Girish Patel, who is representing the CDs on the recruitment panel. A process has been agreed and interviews will hopefully be held at the beginning/mid July.</li> <li>LC requested that a Remuneration Committee be set up and an early item would be to agree the principles for a 3 year pay strategy i.e. market forces, what others are paying, retention, recruitment, agenda for change. Colleagues asked to consider in advance and JA to arrange the Rem Com.</li> </ul> <p><b>ACTION 103: to arrange rem com meeting - JA</b></p> <p>Further discussions emerged on matters of general interest including the issue of the appraisal process and validation was discussed by the Board, in the main discussing the gap in requirements between GPs nearing retirement and younger GPs. The possibility of running an annual or twice-yearly seminar/workshop about career planning, transition and retirement planning was suggested. Consideration of this to be picked up in discussions around the Academy and our plans for training and development activity</p> <p><b>ACTION 104: PS to pick up idea of career planning, transition and retirement planning in context of discussions around the Academy - PS</b></p>	
4	<p><b>Key Updates – Finance / Operations / COVID / ICS Update</b></p> <p><b>Finance</b> <b>Alan Kershaw, CFO</b></p> <p>Highlights</p>	

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	<ul style="list-style-type: none"> <li>• Finance now have a team of 3 in place</li> <li>• 100% ahead of where we had anticipated we would be. A significant part of this is the Covid work but OOH, LCAS work, and the Practices have all made a positive contribution</li> <li>• The Board requested that common names are adopted across all reporting and that 'Workforce' is referred to as 'Academy' on the dashboard.</li> <li>• The Board also requested that Covid/Covid Vaccine accounting is removed and placed below the line.</li> <li>• AK noted that there is some concern over costs and the out of hours subcontract from SRFT</li> <li>• The Board asked for greater assurance that going forward, services that are contracted for are clearer and that costs are fully understood, ensuring that the services included in our business model are viable and any cross subsidies understood.</li> </ul> <p><b>Balance sheet</b></p> <ul style="list-style-type: none"> <li>• AK informed Board that there has been a loss this month, although we are still in a stronger position than at the start of the year.</li> <li>• Significant increase to cash balance in March, the most significant element is SRFT OOHs</li> <li>• Noted that the bank has agreed to increase the daily payment limit to £500k</li> <li>• The Board was pleased with the reporting and stressed that linking the dashboard with the accounts was important for Board to better use this information for governance purposes. The Board suggested that JP (Finance Manager) could be invited to every other Board as it gave the Board confidence to see those leading expert functions and for them to interact with the Board to see how we use the information provided by them.</li> <li>• AK noted that as a company SPCT has a low level of reserves, and although not in the business to make large profits, we require reserves to ensure we are resilient. The Board agreed it wished to discuss and approve a reserves policy and to agree how we might invest any profit to help the system in the new financial year.</li> </ul> <p><b>ACTION 105: Paper on Reserves Policy required and discussion about any surplus beyond target – AK to pick up</b></p> <ul style="list-style-type: none"> <li>• LC noted that this has been an exceptional year in many respects. From an accounting point of view the Board agreed that 'Covid' should be moved below the line, to enable greater visibility of any surplus which may be reinvested back into the system. The Board had some concerns that the profit showing wasn't a true reflection of Covid activity as there has not been any cost recovery for the management and leadership time and executive costs associated with it.</li> <li>• The Board suggested the Executive team provide a rough estimate and calculate the financial proxy for time that has been spent to ensure we better understand the cost of the service and that the notional value could be shown this year within our social account as investment of unbilled/unpaid for time.</li> </ul> <p>The Board emphasised that it is committed to trying to truly reflect the cost of the</p>	

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	<p>Covid programme and if it is possible this year we would wish to relieve the shared burden of Covid by transferring funds back into the Salford system that to mitigate the impact it had placed on General Practice / Primary Care .</p> <p><b>ACTION 106: Executive team to provide an A4 side detailing the income/expenditure/subsidy/uncosted time in relation to the Covid vaccination programme</b></p> <p><b>ACTION 107: PS to provide a % calculation, for phase 3 planning around Covid testing and vaccination activities.</b></p>	
4b	<p><b>COO Report</b> The Board noted the presentation by Peta Stross, COO</p> <p><b>Highlights</b></p> <ul style="list-style-type: none"> <li>• All Practices have now transitioned to EMIS.</li> <li>• The new Practices operations manager has made a great start and has made a positive impact.</li> <li>• Priorities for the next 12months are QoF, Salford Standard delivery, sorting out leadership and management as there has been an issue with turnover of staff.</li> <li>• EPIC – a business case will be present to the PCCC on 25/05/21. The team are sighted on the next stages of what do they need to do in particular around KPIs, the structure of the team - with work to do around reducing staffing costs.</li> <li>• COVID Service – noted that it remains busy and paediatric referrals have increased significantly.</li> <li>• On the day Urgent Care – this is a new service that is currently being trialled. Essentially transferring across to EPIC any urgent on the day cases to relieve pressure from the pilot general practices in E&amp;I. Feedback has been incredibly positive.</li> <li>• PS noted that currently this work is only being offered directly to practices, not across the PCNs. However, the service is slowly being developed.</li> <li>• The Board noted that we have trialled something that on the face of it looks like it could be a design solution to relieve some of the pressures on GPs, and we've done so in response to practices approaching us for some innovation. As part of the SPCT business model we will always have a range of services provided directly to practices in a responsive way, as well as having PCNs procuring commissioned services.</li> <li>• A new auditing tool - Clinical Guardian is to be implemented. This will audit the quality of service, and looks at the 'whole patient journey'. The Board was assured that there is a system in place and asked that once the system is properly embedded and there is a good understanding of how the assurance process works it would be useful to showcase.</li> <li>• Vaccinations – now looking at 'phase 3', and asking practices to tell us what they require from SPCT. The Board noted that the system has benefitted from our interventions and responsiveness, and we are now creating with others and giving that space back to people to come back to SPCT if there is a specific ask.</li> </ul>	

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4c	<p><b>ICS Update</b> <b>The Board noted the presentation by Lance Gardner, CEO</b></p> <ul style="list-style-type: none"> <li>• LG updated the Board with progress made to date, noting that Salford has a good system, good relationships and we're working together. Programme management is in place and Salford is one of only 3 localities in GM with a Transition Board. There are 4 workstreams in place, membership for each includes representation from CCG, Council, SRFT, GMMH, CVS and Primary Care.</li> <li>• There was some concern that the primary care representation on the Transition Board may not have been properly briefed and that perhaps SPCT could offer some proactive development around stakeholder management and influencing, and developing skills</li> </ul> <p>The Board thanked LG and acknowledged the effort and progress made in terms of relationship building.</p> <ul style="list-style-type: none"> <li>• LC informed Board that SPCT is working closely with the Salford CVS and we are co-hosting/co-facilitating a round table event to discuss issues such as funding, and how we can protect and expand the CVSE sector and its contribution to Health and Well Being . Noted that there is such a diverse range of Social Enterprises, charities and community groups across GM there is a danger that we could lose the ground we have gained in this sector. Noted the importance of the comms coming out of this and ensuring that GPs are aware of and reading about the initiatives and reinforcing Salford as a Social Enterprise City.</li> <li>• LG explained to Board that there is increased concern about pressure in the NHS system and general practice, with the system close to a meltdown. In response to this LG has called a 3 hour emergency summit to talk about managing pressures in general practice. There has been a lot of support and interest from across general practice and GM. Speakers from across primary care including patients, GP, Dentist, will share their experiences. Breakout groups are planned with a patient representative on each group. The event is to be facilitated by Nicola King, and there is also a journalist sitting in, who will listen and advise how best to use the output. Everybody is giving their time for free, and the aim is to co-produce with the public.</li> </ul> <p>The Board was pleased we were working with others to surface the pressures on General Practice/Primary care and commended LG on his initiative.</p>	
5	<p><b>Business Plan/Scheme of Delegation</b></p> <p><b>The Board noted the Business Plan presented by Alan Kershaw, CFO</b></p> <ul style="list-style-type: none"> <li>• The plan was well received and the Board commended the Executives on a great piece of work.</li> <li>• The Board agreed that it captured the right goals. Service lines need to be reviewed and the Board asked whether there are other service lines SPCT could pick up as a consequence of the CCG changing. Fits with system</li> </ul>	

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	<p>integration goals and values, recognising partnerships and being as transparent as we can.</p> <ul style="list-style-type: none"> <li>• LC suggested the values may need to review to ensure they reflected the 'how we do things' and what we would promote or challenge in the way in which we see colleagues eg 'System Integrator' is less of a value and more of an activity we engage in as part of our purpose</li> <li>• The Board noted that if we were to offer our services out of area, it must be to the benefit of the work we do in Salford. It was agreed a slide on principles around growth would help enable the Execs to be opportunistic and for the Board and CD Council to shape rather than constrain growth</li> </ul> <p><b>ACTION 108: An additional slide stating 'our primary focus and purpose is Salford based, however on the following principles we would consider growth that ....'</b></p> <p>The Board expressed their thanks to the Executive Team for their brilliant work and endorsed the document to be used both internally and a summary version for external comm. Noted there is some slight tweaking to be done, but this shows the very essence of the SPCT business, and the team should be confident to use this as an active document to support governing, leading, managing, budgeting and operational delivery. Suggested that alongside the contracts and finance dashboard a services dashboard would also be useful and would make reporting easier and discussions more valuable.</p> <p><b>ACTION 109: the development of a services/operational dashboard to be developed – PS/Execs</b></p> <p><b>Scheme of Delegation</b></p> <p><b>The Board noted the document shared by Alan Kershaw which he spoke to.</b></p> <ul style="list-style-type: none"> <li>• The Board noted the table of contents needed to reflect those matters reserved to for the CD Council and those matters retained by Board or delegated to the CEO or his team.</li> <li>• LC stated that the position of the CD council would become much clearer in the new Articles of Association and that this CD Council was helpful to this Board in ensuring we secured a range of perspectives from our General Practice communities.</li> <li>• LC shared that for example where previously the annual plan would in theory be agreed by the members at an AGM , the CD Council can now get closer to the detail, challenge it, and once agreed, advocate for our plan and budget</li> <li>• The Board suggested that the framework may be clearer if there was a third table showing 'reserved to members &amp; CD Council' under which the current tables then make more sense around Board and its delegations</li> <li>• Noted that the Delegatory Framework takes it guidance from the new Articles of Association and is a key piece of architecture and is robust and thorough</li> </ul> <p>The Board agreed the document and accepted that it will be fine-tuned by the</p>	

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	<p>Executives and brought back to Board . The Board asked that the Executives ensure the current SFI's are reflected in this new document and that the more operational delegations really work. The Board noted a job well done.</p> <p><b>ACTION 110: the Delegatory Framework to be finetuned and tested against the SFIs, accountabilities as reflected in job descriptions and with operational requirements in mind – AK /Execs</b></p>	
6	<p><b>Academy Brainstorm</b></p> <p><b>Due to lack of time, the Academy discussion will take place as a single purpose meeting.</b></p> <p><b>Questions to consider:</b></p> <ul style="list-style-type: none"> <li>• Why do we want an academy/ what purpose does it serve</li> <li>• How is it different to all other training providers?</li> <li>• What's the shape/size of the Academy</li> <li>• What outcomes and incomes would we expect it to have</li> <li>• What diff would we want it to make?</li> </ul> <p><b>ACTION: 111 - JA to arrange a single purpose meeting to explore the Academy proposition before next Board</b></p>	
8	<p><b>Governance - CD Council / Articles of Association / EGM</b></p> <ul style="list-style-type: none"> <li>• AK confirmed the need to push ahead with the EGM and is waiting for contact with lawyer RG in order to be able to organise a date.</li> <li>• Discussions have taken place with the PCNs regarding the Articles of Association. A couple of tweaks have been asked for but in essence everybody is happy.</li> <li>• The EGM is required in order for existing shareholders to sign off the new Articles of Association – the votes will be cast by post with votes being counted in partnership with the CDs.</li> <li>• LG informed the Board that subject to the new Articles being agreed, the first CD Council will take place on 9<sup>th</sup> June, and he asked if it would be proper to present and discuss the business plan and finance &amp; contracts dashboard. The Board agreed that we should be completely open and transparent and LG should share this information with the CD council</li> </ul> <p>The Board noted that significant steps have been made and relationships are in a good place.</p>	
<b>Any Other Business and Review of the meeting</b>		
6	<p><b>Any Other Business</b> None</p> <p><b>Review of the Meeting</b></p> <ul style="list-style-type: none"> <li>• Everyone agreed that meeting face to face had been really great, and conducive to what had been a good and productive meeting.</li> </ul>	

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	<ul style="list-style-type: none"> <li>• The presentations were welcomed and the hard work of the executive team very much appreciated</li> <li>• The Business plan in particular was noted as being very good, and the feeling is that everything now feels a lot calmer</li> <li>• The meeting was more open and transparent and there was an appreciation of a more mature and open dialogue</li> <li>• It was good to have the opportunity to come together on frustrations and talk about the work that has come together with the Transition Board. Really helpful to share.</li> <li>• Disappointment that there was not enough time to have the Academy discussion, however this will be picked up as a SPM and any thoughts on the Academy can be sent to JA</li> </ul> <p>LC closed the meeting and thanked colleagues for all their efforts and for a constructive and effective meeting.</p>	
11	<p><b>Dates and time of next meeting:</b></p> <p style="text-align: center;"><b>Thursday 17<sup>th</sup> June</b> <b>9-2pm</b> <b>Venue – Novotel, Worsley</b></p>	
<b>Close</b>		



**Record of Members' attendance**

<b>Attended:</b>		<b>Apologies Received:</b>		<b>Non-Attendance:</b>		<b>Cancelled</b>	<b>X</b>
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Name	22/01/19	27/03/19	12/06/19	14/08/19	19/09/19	09/10/19	20/11/19	18/12/19	14/02/20	13/03/20	17/04/20
Liz Cross											
Lance Gardner											
Alan Kershaw											
Brian Hope											
Helena Leyden											
Ray Harding											
Peta Stross											

Name	15/05/20	18/06/20	16/07/20	18/09/20	16/10/20	13/11/20	16/12/20	19/02/21	12/03/21	16/04/21	14/05/21
Liz Cross											
Lance Gardner											
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