

**Salford Primary Care Together
Board Meeting**

**Friday 11th March 2022
9am-3pm
Little Hulton Health Centre**

MINUTES

Present:

Liz Cross (LC)	Chair of the Board
Lance Gardner (LG)	CEO
Dawood Anwar (DA)	CCO
Peta Stross (PS)	COO
Helena Leyden (HL)	Non-Executive Director
Ian Marchant (IM)	Non-Executive Director

Apologies:

Dr Brian Hope (BH)	Non-Executive Director
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In Attendance:

Jane Ashworth	Minute Taker
Julie Parr	Finance Manager

No.	Agenda Item
1	<p>Welcome Introductions and Apologies for Absence</p> <p>Apologies were received from Dr Brian Hope, noting that</p> <ul style="list-style-type: none"> • he remains active and in touch outside of meetings • the Board is benefiting from his contributions • due to his change in clinic patterns the Board meeting dates for 2022 will be re-arranged to ensure all can attend <p>The Chair welcomed everyone to Little Hulton and thanked them for attending.</p>
Agenda Items	
2	<p>Draft Minutes of the previous meeting held on 14/01/22 and any matters arising</p> <ul style="list-style-type: none"> - The minutes were accepted as a true and accurate record of the meeting. - There were no matters arising. <p>Draft minutes of the SPM held on 16/02/22</p> <ul style="list-style-type: none"> - The minutes were accepted as a true and accurate record of the meeting.
3	<p>Action Log</p> <p>See action log for all updates.</p>

No.	Agenda Item	
4	<p>Finance Update The Board noted the presentation by Julie Parr, Finance Manager</p> <ul style="list-style-type: none"> • Profit of £5k for February 2022 • YTD position shows a loss of £113k • A projected loss of £139k to end of financial year, partially mitigated by potential reduction in utility costs of £15k and reimbursement of £33k (Newbury Place) <p>Little Hulton Development Accounts</p> <ul style="list-style-type: none"> • JP informed Board the 20-21 account for LHD show a loss. This is due to tenants not moving in and lack of rental income. • Management charges will also impact on profit • Noted value of LHHC increased by £1.2million which will be reflected in SPCT 21-22 accounts, but is held on behalf of others and therefore not something SPCT can borrow against or use for our own benefit. • The accounts are to be finalised for sign off- JP to ensure they are filed <p>Reserves</p> <ul style="list-style-type: none"> • Confirmed that the monthly payroll is between £350k-£400k • Reiterated that the reserves position is in line with our policy <ul style="list-style-type: none"> ○ We do not retain funds that should be deployed in line with our objects • Confirmed shareholder capital is ringfenced • Noted a Social Investment Policy would be beneficial in the future, and this should be discussed with the Members Assembly/stakeholders to ensure we deliver the community benefit expected in line with our CIC status <p>In summary:</p> <ul style="list-style-type: none"> • The Board has received the management accounts – showing a positive surplus for February because of timing of income that has been secured. • As of today (11/03/22) we are predicting a loss of somewhere between £70-£90k. However, further work is being done to ensure recovery of costs that will bring us closer to a break even position. • We recognise that during the life of these accounts we haven't been practicing full cost recovery and there has been about £400k of billable time for which we have never raised an invoice – reflecting corporate resources redirected to work on the early covid response. <p>Lance Gardner, CEO informed the Board:</p> <ul style="list-style-type: none"> • Requested a more formal relationship with the CCG, with an outcome based contract to this. This was agreed with Steve Dixon, interim COO for the CCG. (Need to get contract signed/in place.) • Requested an emergency resilience contract, to which SD has agreed. • Have offered secretariat services to Primary Care representation on the Locality Boards etc. SD agreed money should be made available/funding for secretariat services. <p>Board approved the 2022/23 budget, which is based on a true understanding of what it costs to develop and deliver services including apportioning costs to the</p>	

No.	Agenda Item	
	<p>services based on activities/need and recognising that we will be looking at new services and new income streams.</p> <p>ACTION 157: Board requested a re-based budget to include some of the cost allocations (May)</p>	
5	<p>Finance</p> <p>The executive team presented an options paper on the finance function</p> <p>The Board noted that :</p> <ul style="list-style-type: none"> • The review undertaken by People.Performance.Reward informed decisions that led to the reshaping of the Executive function and reflected the changing needs of the business • This led to the CFO post being made redundant and consideration of level required for a lead officer accountable for Finance. • There had been some delay in implementing change around this decision which has left a gap around finance services /financial reporting. • AMS was approached, as they brought primary care expertise, to review the requirements /likely needs. They provided advice and suggested options including: <ul style="list-style-type: none"> ○ Bringing in additional resource at a bookkeeper level ○ Bringing in a financial controller – on a temp basis ○ Recruitment of a head of finance/finance director/controller – on a permanent <p>The Board agreed</p> <ul style="list-style-type: none"> • the need for an additional senior leadership role to be accountable for the providing a strategic and operationally fit for purpose finance function. • The role would likely be called ‘Head of Finance/Financial Controller’ – working with the executive, and the Board and:- <ul style="list-style-type: none"> • Supporting the business in providing forward looking and forecasting capability • Undertaking financial modelling and option appraisal based work • Leading the modernising of the finance department, including building capacity in people and systems to enable budget holders to strengthen their ownership/management of their budgets and delivering their services • Supporting the executive in externally facing contract management / negotiations • Operating on a full time or flexible basis - subject to advice from People Reward – likely to be paid around £75-80k <p>The Board gave the executive delegated authority to recruit an additional, temporary bookkeeper immediately and to finalise the plan to recruit a Head of Finance level role.</p> <p>Action 158: LG, with EDs to, recruit an additional, temporary bookkeeper immediately and to finalise the plan to recruit a Head of Finance level role.</p>	

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6	<p>Draft business plan / operational plan</p> <p>Peta and Dawood explained to the Board that the Business Plan has not significantly progressed. It was agreed that this could be brought to the April Board meeting.</p>	
7	<p>HR – Progress report from People Puzzles The Board noted the presentation by Peta Stross, COO</p> <p>Over 3 days in January 2022 SH from People Puzzles interviewed 26 members of staff, the Chair of the Board, and an external consultant. Some consistent themes were identified across the business and a 3 month plan of action was put in place, prioritising what was identified during the Discovery:</p> <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="text-align: center;">  <p>People Puzzles Feb - April 22 plan board</p> </div> <div style="text-align: center;">  <p>People Puzzles Feb - April 22 plan board ve</p> </div> </div> <p>The Board noted the reports and was assured by the work undertaken, the forward plan and the priorities identified by the Executive Directors.</p>	
8	<p>COO/CCO Update</p> <p>The Board noted the presentation from Peta Stross, COO and Dawood Anwar</p> <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="text-align: center;">  <p>0322 COO & CCO Board presentation.</p> </div> <div style="text-align: center;">  <p>0322 COO & CCO Board presentation.ppt</p> </div> </div> <p>The Board was informed of the vaccination (needlestick) incident and noted.</p> <ul style="list-style-type: none"> ○ Assurance from the Executives that the incident has been investigated. ○ The patient was not harmed. ○ A case has been brought against possible needlestick injury. <ul style="list-style-type: none"> ○ The case is against the vaccinator who was an independent contractor not SPCT. ○ Confirmed our policies and guidance are very clear. ○ Incident form has been completed and learning shared. <p>CQC Inspection</p> <p>Dawood Anwar informed Board:</p> <ul style="list-style-type: none"> ● The inspection highlighted clinical issues, coding issues, staff not using systems properly and confusion over roles and responsibilities ● Over the next 3 months the aim is to prioritise patient safety and the effective management of staff supported by work on systems and processes to strengthen assurance . ● Noted that the LMC have offered to help with response to CQC. <p>The Board noted</p> <ul style="list-style-type: none"> ● this was the first face to face inspection carried out by the CQC since Covid 	

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	<ul style="list-style-type: none"> the need for a solid action plan for the next 3 months to improve and innovate. That there have been changes in leadership since the last inspection and learning from this inspection should inform the action plan for stabilising and improving the service we offer our patients. <p>The Board noted that Lance Gardner is currently the registered manager for CQC, and requested that in light of our new ED structure – that registration be moved to Dawood Anwar.</p> <p>ACTION 159: DA to become Registered Manager for CQC</p> <p>ACTION 160: Following the CQC inspection, 3 month action plan to be developed and that this should be reviewed with HL on behalf of the Board before bringing back to full Board for approval.</p>	
9	<p>CEO Update The Board noted the presentation from Lance Gardner, CEO</p> <p>ICS</p> <ul style="list-style-type: none"> The Place Based Lead for the Collaborative has been agreed – Tom Stannard CEO of Salford City Council. There is still an issue around joint committees and section 75, only public sector bodies can vote under section 75. A work around has been agreed – proposing an indicative vote of everybody before the statutory vote. Mark Fisher appointed as chief exec of Greater Manchester ICS <p>Development of the Riverside Site</p> <p>LG explained that this is the Lower Broughton equivalent of Little Hulton.</p> <ul style="list-style-type: none"> Lower Broughton Medical Practice do not want to be landlords. The CCG has asked SPCT to consider. LG informed the Board that he had shared with the CCG that SPCT may be interested, on condition that: <ul style="list-style-type: none"> SPCT, if acting as landlord, would want to provide other services Practices had to be in agreement PCN had to be in agreement There is a 51/49 split of ownership – the condition is that the 51% has to go into a community trust. In response to this, LG advised Board that the Hedge Fund is really keen on the community trust idea and that the CCG had no issue with it. After further discussion and further research around the location of patients in context of the proposed new site, LG suggested it would not be feasible for SPCT Willow Tree to move into the new development. However, there may be an options to consider around the Inclusion Team to moving in. <p>The Board was keen that if our involvement in the Riverside Development is to progress then it would require stronger project methodology around it and to apply the lessons learned from the LH development.</p>	

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	<p>Salfordian Hotel</p> <ul style="list-style-type: none"> • LG informed Board that the CQC had confirmed they were happy for SPCTs CQC registration to be used to support this venue offering step down services. • LC asked for more understanding around the Salfordian and who delivers care and how this would work in practice <p>ACTION 161: LG to provide more information around the Salfordian Hotel, who delivers care and how this idea would work in practice</p> <p>UK-Med</p> <ul style="list-style-type: none"> • LG confirmed that SPCT is now affiliate members of UK-Med, a front line medical aid charity based out of the University of Manchester. 	
10	<p>GMA</p> <ul style="list-style-type: none"> ○ Governance overview including rights, responsibilities and exit clauses DA informed Board that he was still waiting for a discussion and would provide a summary as soon as he was able. <p>ACTION 162: Board asked DA to provide a summary before any final decision is taken regarding membership</p>	
11	<p>Governance</p> <p>The Board was informed of current activities around the next steps in developing our governance and engagement activities which included arranging meetings with individual member practices to explore</p> <ul style="list-style-type: none"> • Moving more quickly to a Board sub-committee <ul style="list-style-type: none"> ○ that would enable some of the processes and benefits of a Members Assembly to be made operational ○ before the Articles are fully changed to devolve powers which typically would sit with Directors in law <p>This approach would give everyone time to test whether the members assembly approach works before crystallising these in new Articles to be put to a SGM in the autumn.</p> <ol style="list-style-type: none"> i. The Board endorsed this direction of travel and for the Executive team/Chair to begin conversations with CDs, practice managers. ii. Subject to finalising the TORs, this sub-committee to meet every 6 weeks – to keep momentum going, to fully test the idea of a members assembly and to hold an SGM in Autumn at which time a new set of Articles could be considered <p>NED recruitment programme</p> <p>The Board noted that</p> <ul style="list-style-type: none"> • BH is retiring as a partner in July, but intending to continue to work in general practice in Salford after this date. <ul style="list-style-type: none"> ○ the Board confirmed this continues to meet the requirements we had adopted to have a Salford based GP NED on the Board • the need for an experienced NED, with ACCA or similar, was critical to strengthen the Board 	

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	<ul style="list-style-type: none"> ○ the Board agreed to advertise for this role making clear the 2 criteria that are essential for candidates to be considered <p>Action 163: – JA/LC Re-advertise for experienced NED with ACCA or equivalent</p>	
Any Other Business and Review of the meeting		
10	<p>Any Other Business</p> <ul style="list-style-type: none"> • Noted – the potential conflict of interest with the incorporation of ‘Salford Primary Care Alliance’ and the PCNs/practices who may choose to become members. <p>Review of the Meeting</p> <ul style="list-style-type: none"> • Good – level and maturity of debate. Risk of the vacuum • The Board was appreciative of the hard work undertaken since last meeting. • Appreciated the honest conversation around finance • Felt a level of assurance around the CQC inspection • Continue to learn • Glad to be in a position to provide more assurance and clear about the message conveying to Board. • Pleased with the new way of looking at financial budgets, looking at costs and allocating activities, bottom-up budgeting and looking at the level of need. Thinking medium to longer term and optimistic planning. • The CQC inspection was challenging and the feedback painful. However, this will be worked into the plan. It has given a level of assurance of what we need to do to turn things around. • Good team work with robust challenge – <i>‘the wisdom of many...’</i> • Good thinking, reflection and good decision making - encourage people to keep speaking up. <p>LC thanked everyone for all the hard work, recognising that this is a very busy time of year to have a CQC inspection.</p>	
10	<p>Dates and time of next meeting:</p> <p style="text-align: center;">Board Meeting Friday 29th April Time TBC Venue – Boardroom, City Approach</p>	
Close		

Record of Members' attendance

Attended:		Apologies Received:		Non-Attendance:		Cancelled	X
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Name	15/07/21	17/09/21	15/10/21	19/11/21	16/12/21	14/01/22	11/03/22				
Liz Cross											
Lance Gardner											
Alan Kershaw											
Brian Hope											
Helena Leyden											
Peta Stross											
Ian Marchant											
Pete Budden											

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											
Alan Kershaw											
Brian Hope											
Helena Leyden											
Ray Harding											
Peta Stross											
Pete Budden											

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											