

Salford Primary Care Together Board Meeting

Friday 19th November 2011 9:00am – 3:30pm SPCT Willow Tree

MINUTES

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

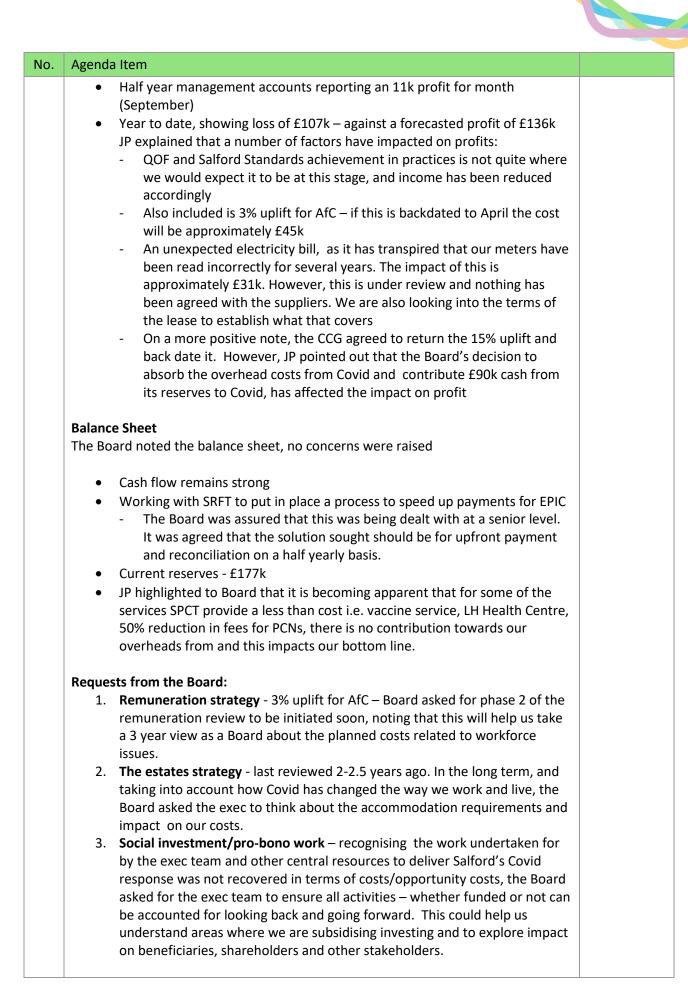
Apologies:

Dr Pete Budden (PB)	Clinical Lead, Eccles & Irlam PCN
Dr Brian Hope (BH)	Non-Executive Director

In Attendance:

Jane Ashworth	Minute Taker

No.	Agenda Item		
1	Welcome Introductions and Apologies for Absence		
	Apologies were received from Dr Brian Hope and Dr Pete Budden.		
	The Chair welcomed all and thanked everyone for attending the meeting which was held at SPCT Willow Tree practice.		
	Agenda Items		
2	Draft Minutes of the previous meeting held on 15/10/21 and any matters arising		
	 The minutes were accepted as a true and accurate record of the meeting. All approved Board minutes are available on the SPCT Website. 		
	- There were no matters arising.		
3	Action Log		
	See action log for all updates.		
4	Finance Update		
	Julie Parr, Finance Manager		
	The Board noted the Management Accounts		
	Key Messages:		



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No.	Agenda Item	
	The Board thanked JP for her time, and recognised that capacity around JP has not been where it needs to be. The Board noted their confidence in the numbers produced.	
	A discussion followed:	
	• PS queried why provision was not made for the £90k contribution from its reserves to Covid?	
	The Board stated that it had made the best decision in light of the available information at the time. In light of new information, it was agreed that this was not the most prudent decision.	
	The Board was pleased that finances are looking stable and for the first time SPCT is financially self-sufficient, reaffirming our policy in this situation is that any surplus over target is shared out – $1/3$ goes back into the resilience and strengthening business, $1/3$ goes back into developing and growing the capability of workforce and $1/3$ goes back into investing in the community.	
	It was acknowledged that this should form part of our social reporting. LC reminded the Board of the offer for a national expert in this field to help the organisation in its understanding of social auditing, social impact and social on a probono basis. PS confirmed she is in the process of arranging a workshop.	
	LC also suggested it would be most valuable and worthwhile to do a social impact report just about the Covid experience - a social account of what we did in Covid. To demonstrate what we have contributed to the system. ACTION 143 – Exec team to:	
	143.1- schedule the phase 2 remuneration review for completion before the end of the financial year 143.2- schedule a review of the estates strategy in light of the changing needs for	
	office based accommodation 143.3-put in place a mechanism to capture the value/cost of work undertaken that	
	is unremunerated or where costs are not recovered 143.4- to schedule the teaching on social accounting, audit, verification, value and impact	
5	AMS Medical Accountants Proposal Dawood Anwar, CCO	
	DA outlined the case for the organisation to access specialist medical accountancy advice. EPIC is now a large part of the organisation, and there is a real need to review the operating model, financial model and risks. Many of the staff are sessional, with the majority being locums- which enables us to be truly agile in meeting unplanned care but has cost and risk implications.	
	DA highlighted the two aspects to the proposal:	
	1. AMS acknowledged the good work done and the position JP has managed to get us in, but they also acknowledged there are some gaps. Proposing to	

No.	Agenda Item	
	 evaluate where we are now, discuss the current team and processes and look at efficiencies. This reflects the Board request to review capacity and capability following the redundancy of the CFO role and the Board's wish to ensure we have a robust /risk assessed service in place 2. The second part of the proposal covers what they can offer us in terms of accounting. Produce management accounts and use these to inform decisions going forward. To cover PCN, EPIC and Primary Care Practice accounts – producing 3 different sets but bringing them into one report. It was noted that if AMS felt that our processes had improved and their input wasn't needed as much they would step back and stressed that they are not looking to take over but to step in and help. Initial insights have lead AMS to suggest that the finance team would benefit greatly from a good book keeper. 	
	The Board welcomed the presentation and acknowledged the work of the Executive to identify expertise that can both conduct end to end review and make recommendations as well as bringing additional capacity and capability to strengthen our existing resources.	
	However, concern was raised around SSP which is given as a reference by AMS, given there have been work concerns around SSP which are in the public domain.	
	HL pointed out that if the organisation is looking to change accountants (or any other Board level advisor) at least 3 quotes should be obtained. The Board agreed and asked the Executive to plan for either the 4 th quarter of this financial year or 1 st quarter of the next financial year to do a proper review and secure at least 3 proposals for delivering accountancy and/or audit services . ACTION 144: Executive to present to Board 3 organisations which would provide specialist accountancy services given the nature of our business.	
	 The Board approved the appointment of AMS to provide an end to end review, to identify what is required, and make recommendations around the proper staffing structure and systems required capacity and capability immediately that strengthens our current resources and allows the business to take stock of what is required 	
	Action 144 - Exec to: 144.1- appoint AMS and to bring back their recommendations for our medium to longer term requirements. 144.2- Exec to undertake a review of the market and bring forward 3 options for changing our accountants and auditors	
6	COO/CCO Board Update	
	The Board noted the presentation by Peta Stross, COO and Dawood Anwar CCO.	
	PS emphasised the focus of the presentation was to provide the Board with assurance that we are sighted on key risks of the business.	

SALFORD PRIMARY	CARE
TOGETHER	

No.	Agenda Item	
	Highlights:	
	Business Model and Strategy	
	 Winter Access Fund – looking likely that SPCT will provide support to Eccles 	
	& Irlam and Broughton PCNs.	
	LC suggested producing a product sheet outlining the offer, price point,	
	 benefits to customers and potential customers Dashboards – noted the BI team is producing dashboards which are helpful 	
	 Dashboards – noted the BI team is producing dashboards which are helpful in managing the business. The Board were keen to contribute to the 	
	thinking of what it needs by way of dashboards and agreed that a single	
	purpose meeting would be scheduled for HL/IM and DA/PS to develop	
	options to come back to Board for us all to test	
	ACTION 145: SPM to develop data/dashboards suitable to Board to come back to	
	the full Board to test	
	• The Quality and Governance Lead role has been filled (James Dickinson	
	appointed)	
	HL pointed out that comments/questions left on the practice website had	
	not all been answered. PS confirmed that one of the objectives of the Q&G	
	lead is the implementation of Ulysses and closing down actions taken to	
	remedy incidents/comments raised by patients and service users. The	
	Board stated it would like assurance that the practices that we are	
	accountable for directly are as good as, if not offering some best practice	
	that other practices may want to trial. DA – patient and service user	
	engagement are large markers of where we are and further work will be done to track and improve both	
	 PS informed Board that there is a plan in place for the practices 	
	• I s morned board that there is a plan in place for the plactices	
	Workforce	
	HR function to be reviewed	
	• Pay Strategy – draft proposal received from JB/GH, noted that this does not	
	address reward and recognition.	
	ACTION 146: LG to take the lead on continuing with Phase 2 of the remuneration	
	review following up with either of the two firms that responded to our phase $\ensuremath{1}$	
	request for partners. LG to share both proposals with the full exec team	
	• HR Reporting – awareness that PeopleHR does not have the right data in it,	
	and the need for finance and HR systems. PS informed Board that she is	
	talking to other potential partners with regards to HR	
	Culture	
	 Clarity of roles and responsibilities and who is accountable for what – is a 	
	work in progress.	
	Currently working with the clinical leads to provide them with more clarity	
	of their roles. The job role has now changed name to 'GP with additional	
	responsibilities' with each GP leading on a particular area of	
	interest/expertise.	
	• Trauma informed care – noted that the Inclusion team is solution focussed,	
	resilient, innovative and supportive. It was felt that lessons could be	
	learned from this service and shared across the organisation.	
	Operating Environment	

No.	Agenda Item	
	 Recognised that staff members are tired and stressed, looking at ways to help staff become more resilient. Looking at targeted recruitment and identifying what the need is. Noted there has been an offer of support from the CCG for struggling practices 	
	 Human Resources Exit strategy in place for HR Manager PS talking to other HR advisors 	
	 The Board was satisfied that a thorough review on finance and HR was in progress. assured that all of these things are on the 'to do list' and thanked PS and DA for an extremely informative update which had given assurance related insight and information, and strategic insight information. 	
7	CEO Update	
	The Board noted the presentation by Lance Gardner, CEO	
	 The Board noted the list of Board advisors and asked for the date of appointment and date of review to be added. ACTION 147: Board Advisors - date of appointment and date of review to be included 	
	• To note - Board felt Hempsons should be informed that, as governance advisors to date, we had now moved this work to another provider in response to a member led change to our Articles. We should thank them for their support to date and inform them that will review in the next 3 years and would be happy to include them on the list of those we invited to respond.	
	The Board approved the list as our Board advisors and requested that any proposed changes to the agreed list would need to come back to Board for decision.	
	 Contract Dashboard The RAG rating on the dashboard reflects the time left on the contract and the likeliness of retaining the contract. *To remove corporate/legacy – no longer applicable. 	
	Provider & Collaborative Purpose LG provided the Board with an update around all things ICS related. Board considered the suggestion to <i>'Convert the Locality Board strategic intent into co-designed and coordinated delivery in line with Salford Locality Plan priorities'</i> and recognised the value in this approach. The Board suggested however, it was not a vision statement – from which all could infer outcome measures to which we contribute. LG asked to continue to seek to influence this if possible	
	ACTION 148 LG to seek to influence the Locality Board's development to support	

Ageno	da Item	
	evelopment of a clear purpose/vision statement and outcomes	
Furth	er updates included:	
•	Chair of GM ICB - Sir Richard Leece.	
	Interviewed for CEO, did not appoint. Gone out to advert for the rest of the	
•	Executive Team without a CEO.	
•	Locality still trying to sort out own governance.	
•	3 governance approaches being discussed.	
	a. Provider Leadership Board Model	
	b. Lead Provider Model	
	c. Shared Leadership Model	
Mom	harshin Considerations	
iviem	bership Considerations LG was asked to bring to SPCT Board specific questions for comment:	
	a. How many representatives should each organisation have on the	
	board?	
	b. What level of seniority/authority should representatives hold	
	c. Should there be specialist representation? (eg. Medical, nursing)	
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	wing discussion the Board asked LG to take the following comments/response to Provider Board for consideration:	
	questions cannot be answered out of context. The focus on defining its purpose	
	enable all to identify the skills, competencies, experience, and diversity	
	sary to ensure that purpose can be delivered through all that exist to deliver	
	utcomes and impacts individually and collectively	
	ever is on the Board must have the ability to influence and to take those people	
-	need to influence with them, build trust and to commit parts of the system	
	will deliver. As the Board serves the people of Salford it must be configured in	
a way	' that enables it to deliver the purpose'	
Chair	ing Options	
•	The Board felt that the Purpose Statement needs to be challenged; to focus	
	on outcomes and impacts.	
•	Consensus was that the position should be remunerated as this makes	
	people more accountable and enables people to dedicate the time	
	required.	
•	Co-Chairing would be the favoured option - depending on the purpose the	
	skills, competencies, diversity and experience, and on a 3 year rotation.	
•	Voting structure had been agreed at Transition Board	
Socia	l Value/Community Purpose	
Hlghli		
•	Salford Covid team won 'Inclusion Champion' at the Greater Manchester	
	Health and Care Champion Awards for services to vaccinating People with	
	Learning Disabilities. LG pointed out that the SRFT LD team are outstanding	
	and a joy to work with. It was this team that put the bid in.	
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• DA shortlisted by SRFT for research, Innovation and Education category for

No.	Agenda Item	
	Pre-ED Streaming Service. DA informed Board that it was decided that the streamers would attend the awards as they have been at the forefront of the service.	
8	Governance	
	The Board noted the presentation by Lance Gardner, CEO	
	There was a discussion about the potential future direction of SPCT to address the needs of the members/stakeholders and our ability to deliver our objects. Board agreed this needs further development.	
	 It was confirmed that: AGM and SGM should be disaggregated due to the need to file accounts at Companies House before Christmas and the complexity of the discussions and decisions that the SGM will consider that is best done face to face. Explanation and a save the date for SGM will go out with AMM notice and papers. There is also a reminder from the Board and Exec team that we are happy to meet with people/practices at any time. 	
	• AMM will take place on 15/12 – 7:30pm via ZOOM	
	 SGM will take place on 26/01/22 – 6:30pm face to face notice and papers to go out no later that 05/01/22. 	
	Any Other Business and Review of the meeting	
9	Any Other Business	
-	None	
	Review of the Meeting	
	 Good presentations from the Executive Team, starting to see infrastructure and focus Good strategic Board level overview 	
	 Acknowledgement that the presentations were far more meaningful when talked through. 	
	 All agreed that this was one of best meetings, if not the best meeting this Board has held 	
	 BAF and serious discussion – was all inclusive (Dewar with not never over was avident in all we saw and discussed) 	
	 'Power with not power over' was evident in all we saw and discussed There was a sense of purpose and direction, working as a team, hearing 	
	 There was a sense of purpose and direction, working as a team, hearing diverse views and coming to same conclusions - coming at it with one voice. 	
	 Appreciation of the efforts of everybody to get to where we are today. 	
	Acknowledgment that the past few weeks have been very stressful emotionally taxing.	
	 Good energy in the room, good discussion and very constructive. Good to 	
	be able to challenge – it's been a Board of equals.	
	 Recognition that it's 'not great' out there at the moment, lots of stress, anxiety and unpleasantness 	



No.	Agenda Item		
	LC echoed the above comments and felt the Board is better focussed on the things that matter most. Noting that there is still work is ongoing with the infrastructure. There was much appreciation for the work done in preparing for the Board meeting, and acknowledgment that it's tough out there. The Board recognised the need to keep focused on ensuring on the right things that make the biggest difference to the people we serve. The Board is united and share good thought processes.		
	LC thanked everyone for their time and constructive contributions.		
	Meeting closed at 16:05		
10	Dates and time of next meeting:		
	Thursday 16 th December		
	9am-12:30pm		
	Boardroom		
	2 City Approach		
	*don't forget your Christmas Jumper 😊		
	Close		



Record of Members' attendance

Attended: Apologies Received: Non-Attend	ance: Cancelled X
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Name	15/07/21	17/09/21	15/10/21	19/11/21	16/12/21			
Liz Cross								
Lance Gardner								
Alan Kershaw								
Brian Hope								
Helena Leyden								
Peta Stross								
lan 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											