

**Sheffield Primary Care Trust Board 7 July 2009**  
**Minutes of the meeting held in public in the Boardroom, 722 Prince of Wales Road,**  
**Sheffield S9 4EU**

**Present :** Tony Pedder, Chairman  
Robert Bailey, Non Executive Director  
Professor Rhiannon Billingsley, Non Executive Director  
Mohammed Ismail, Non Executive Director  
Simon Kirk, Director of Strategy  
Malcolm Lindley, Non Executive Director  
Mark Lovell, Non Executive Director  
Julia Newton, Director of Finance  
Dr Richard Oliver, Joint PEC Chair  
Jan Sobieraj, Chief Executive  
Professor Malcolm Whitfield, Non Executive Director

**In Attendance:** Ian Atkinson, Director of Performance  
Karen Curran, Head of Primary Care (on behalf of the Director of Standards and Engagement)  
Jill Dentith, Head of Corporate Services  
Simon Gilby, Managing Director of Provider Services  
Carol Henderson, Committee Secretary  
Dr Paul Redgrave, Deputy Director of Public Health (on behalf of the Director of Public Health)

**Members of the public:**

Eight members of the public were in attendance.  
A list of members of the public who have attended Board meetings is held by the Head of Corporate Services

**226/09 Welcome**

The Chairman welcomed members of the Board, those in attendance and observing and members of the public to the meeting.

**227/09 Apologies for Absence**

Apologies had been received from Penny Brooks Cordon, Director of Standards and Engagement, Dr Zak McMurray, Joint PEC Chair, and Dr Jeremy Wight, Director of Public Health.

**228/09 Declarations of Interest**

The Joint PEC Chair declared a conflict of interest in the following papers:

- Practice Based Commissioning (paper I)

**ACTION**

- Community 1st Sheffield Ltd (paper L)

Mark Lovell declared a conflict of interest in the following papers:

- Procurement Workplan for 2009/10 (paper F)
- Community 1st Sheffield Ltd (paper L)

## **229/09 Minutes of the Meeting held in Public on 9 June 2009**

The minutes of the meeting held on 9 June 2009 were agreed as a correct record and signed by the Chairman, subject to the following amendments:

### **a) Chief Executive's report (minute 196/09 (j) refers)**

Second paragraph to read as follows:

At the Yorkshire and Humber Health and Social Care Awards a couple of weeks ago the Provider Service's Care Homes Team had won an award for Dignity in Care for their Care Home Olympics.

### **b) Implementation of the extended opening hours enhanced service (minute 215/09 refers)**

Second sentence of second paragraph to read as follows:

There had been positive media coverage through the local papers and radio and the Head of Communications was working on further communications to help reduce Did Not Attend (DNA) rates.

### **c) Chlamydia screening programme (minute 216/09 refers)**

Fifth sentence of second paragraph to read as follows:

The PCT was targeting vulnerable young people to participate in the screening programme

## **230/09 Actions and Matters Arising from the minutes of the meeting held in public on 9 June 2009**

### **a) Corporate Services Staffing Establishment (minute 59/09 refers)**

The Director of Finance advised the Board that information had been requested at the beginning of June from the Core Cities PCTs for the benchmarking. Not all responses had been received and so it was proposed that information would be included in the finance report to the September Board.

**b) Equitable Access in Primary Care Procurement Programme (minute 60/09 refers)**

The Head of Primary Care confirmed that the evaluation of the programme would be presented to the October Board.

PBC

**c) Talent and Leadership Strategy (minute 73/09 refers)**

The Chief Executive confirmed that he would present an update to the Board in September.

JS

**d) Learning Disabilities: Transfer of Social Services Funding (minute 77/09 refers)**

The Director of Finance confirmed that she would present a progress report at November Board. She advised the Board that a further joint update submission by the PCT and Sheffield City Council had been made to the Department of Health against the 30 June confirmation requirement.

JN

**e) World Class Commissioning: Board Development (minute 78/09 refers)**

The Head of Corporate Services reported that details for the 20 July Board development session had been confirmed in writing to Board members.

**f) Yorkshire and Humber Specialised Commissioning Group (SCG) minutes 16 January 2009: improving mental health of children and young people in the youth justice system (minute 96/09 (b) refers)**

The Chief Executive confirmed that an update would be presented to the Board in November.

JS

**g) Yorkshire and Humber Specialised Commissioning Group (SCG) minutes 16 January 2009: specialist fertility services (minute 96/09 (c) refers)**

The Chief Executive advised the Board that consultation on the new draft SCG Fertility policy would take place from late Autumn onwards. The final draft policy would be presented to the Board for approval in early 2010.

JS

**h) Health and Safety report (minute 124/09 refers)**

The Head of Corporate Services advised the Board that the revised Health and Safety Policy was currently out to consultation and would be presented to the September Board

JED

**i) NHS Sheffield's Local Decision Making about Individual Funding Requests (IFRs) for Medicines and Other Interventions (minute 163/09 refers)**

The Director of Strategy advised the Board that the further iteration and final standardised policy would be presented to the Board in September.

**SK**

**j) Health and safety issues for PCT commissioning staff (minute 167/09 refers)**

The Head of Corporate Services confirmed that the Health and Safety Executive (HSE) action plan and final report would be shared with the Board via the weekly information pack.

**JED**

**k) Chief Executive's report (minute 196/09 (a) refers)**

The Chief Executive confirmed that he had written formally to Sheffield Children's NHS Foundation Trust (SCHFT) advising them that Frances Cuning had been nominated as the PCT's partner representative on SCHFT's Governing Council.

**l) Feedback from Non Executive Directors (minute 198/09 (a) refers)**

Robert Bailey advised the Board that the NEDs training programme was in the process of being produced and he would circulate this in due course. Sixty people from across Yorkshire and the Humber had attended a breakfast meeting the previous week for a discussion around the Care Quality Commission (CQC) and Commissioning for Quality and Innovation (payment framework) (CQUINS).

**m) Feedback from Non Executive Directors (minute 198/09 (d) refers)**

The Chief Executive reported that Leeds PCT had confirmed that they had not agreed a special pricing structure with the Yorkshire Ambulance Service.

**n) Commissioning High Quality Services (minute 200/09 refers)**

The Director of Strategy advised the Board that a draft plan for discussion would be presented to the September Board.

**SK**

**o) Estates Plan for 2009/10**

The Director of Strategy advised the Board that a one off workshop to engage the Consortia in the development of decision making

criteria would take place in late July or early August. A report would be presented to the September public Board.

SK

**p) Draft Memorandum of Understanding (minute 205/09 refers)**

The Chief Executive advised the Board that formal confirmation to proceed with the establishment of the Provider Services Advisory Board was still awaited from the Strategic Health Authority.

The Managing Director of Provider Services requested that the PCT move into interim formal Committee arrangements. He would meet with the Chairman and Chief Executive the following week in this regard.

**231/09 Chairman's Matters**

The Chairman informed the Board of the following matters:

- a) Discussions at the Patient Advisory Forum held on 24 June had mainly focused on Achieving Balanced Health 3. The next meeting taking place on the evening of 21 September would be held jointly with the PCT Board. Board members to note.
- b) The Board development session on ABH3 and strategy development would take place on Monday 20 July 2009, 11.00 am - 3.00 pm, in the 722 Boardroom.
- c) The PCT Board meeting due to take place on 4 August had been cancelled as there were no urgent items for discussion.
- d) A Board to Board meeting with the Cabinet of Sheffield City Council had taken place on 24 June. It had been a positive meeting, with the Council keen to be radical about the thinking around the public health agenda. A follow up meeting would be scheduled before the end of the year.
- e) The appraisal process for Non Executive Directors had been completed. Completed forms would be returned to the NEDs in due course.
- f) Due to the increasing number of Freedom of Information (FOI) requests asking for details of expenses claimed by some or all Board Directors, Non Executive Directors were asked to ensure that claim forms were sent in the first instance to Carol Henderson or Karen Shaw at the PCT office. Copies of forms and all receipts would be retained in a one file (with restricted access as the forms contain personal details) eliminating the need for the payroll department to access relevant claim forms/receipts, which was proving to be a time consuming and costly exercise. Details of all claims would be made public and placed onto the PCT's website.

JS

NEDs

JN

The Board noted the report.

#### **232/09 Chief Executive's Report**

The Chief Executive informed the Board of the following matters:

- a)** As part of the preparation for 2011 and the expected limited growth, a useful meeting had taken place to review the Sheffield Way (a way of working in collaboration). Attendees had included representatives from primary care, secondary care and the Local Authority.
- b)** A meeting had taken place between the Chief Executive and Directors of Finance from the Local Authority and NHS organisations in Sheffield with regard to what actions to take to drive up the quality of care.
- c)** A planning session had taken place between the Executive Teams of the PCT and Sheffield Teaching Hospitals NHS Foundation Trust. This was a productive meeting and a number of workstreams had been agreed to take this shared agenda forward.
- d)** The first meeting of the Sheffield Quality Improvement Academy would take place on Wednesday 5 August, which Professor Helen Bevan would be attending. This was the mechanism to review, spread good practice and generate good ideas.

The Board received and noted the Chief Executive's report.

#### **233/09 Planned Care Framework**

The Director of Strategy presented the Planned Care Framework, which enabled the PCT to demonstrate progress against World Class Commissioning (WCC) competencies. He advised the Board that he now wanted to replicate the principles from Framework for Unscheduled Care to use for other projects within WCC.

The Board approved the Planned Care Framework.

#### **234/09 Swine Flu**

The Deputy Director of Public presented an update on the swine flu outbreak and its effect on health and social care services in the city. He advised the Board the spread of flu was increasing rapidly across the country. It was a milder condition than planned for and the vast majority of people did not have any major symptoms, although a small number, mainly people with serious underlying health conditions, had experienced more major symptoms.

Nationally, there had been a number of deaths reported but as yet none in Sheffield. The majority of cases were recorded for younger people and those under the age of 18, although nationally a small number of people over the age of 65 had contracted the virus.

With regard to the PCT's response to the outbreak, the local and national website updates were invaluable and the PCT's website was updated frequently.

A detailed discussion took place about whether any particular sections of the community were more prone to contracting the virus than others. The Deputy Director of Public Health responded that cases had been reported across most of the city but currently the spread was more focused on some schools with predominately black and minority ethnic pupils. Meetings had taken place with the staff and parents at these schools and a meeting was scheduled with local Imams. The PCT was currently concentrating on making links with harder to reach groups and communities.

It was confirmed that alcohol gel was available in all the PCT's provider facilities and the main national messages was to raise awareness of the need for personal hygiene.

Further updates would be sent to the Board in the weekly information pack which would include an update of the vaccination programme when available.

The Board endorsed the report.

## **235/09 Finance Director's Report**

The Director of Finance presented this report which provided the Board with a summary of the 2009/10 financial position for the period to 31 May 2009 and an assessment of the current risks to achieving the financial plan for the year. She advised that the PCT was continuing to forecast remaining in recurrent financial balance with a £4.5 million surplus, in line with the PCT's financial plan. Risks to achieving this, however, included increases in emergency and elective activity and in referrals which had been higher than planned in the first few months. With regard to the overall financial position, the finance team had been carrying out a first set of risk assessments, and more work on managing these risk areas was being done to bring them in line with the plan.

With regard to the Better Payment Practice Code, except for NHS invoices by value, performance continued to be below target but the Director of Finance confirmed that actions continued to be taken to improve performance. The Audit Chairman agreed to keep developments under review with the Director of Finance.

The Board:

- Endorsed the year to date and forecast financial outturn positions for 2009/10.
- Endorsed the budget changes that had been actioned in Month 2.

### **236/09 Procurement Workplan for 2009/10**

The Director of Finance presented an update on delivery against the plans, as requested by the Board. She advised the Board that a number of procurements, including Independent Mental Health Advocacy, Older People's Advocacy, Peer Support for Breast Feeding and Children and Young People's Mental Health Services, had been successfully completed in the first quarter of the financial year. The PCT was working hard on the market analysis side and a workshop in this regard would take place on the afternoon of Friday 10 July. The Director of Finance advised the Board that tendering and development work both remained on schedule.

The Director of Finance was asked to liaise with Mark Lovell regarding initiatives on recruitment of temporary staff regionally.

The Board endorsed the updates to the procurement workplan and skills/market development plans.

JN

### **237/09 Charitable Funds Annual Report for 2008/09**

The Director of Finance presented the 2008/09 Annual Report on Charitable Funds. She also advised the Board that key developments in the coming year would be the need to separate out funds related to PCT Provider Services as opposed to the commissioning arm of the PCT; and the closure of a number of small separate funds where there had been little or no activity in the last two years, with the transfer of resources to the PCT's general fund (subject to Trustee approval in August) to allow greater flexibility in the use of funds.

The Board endorsed the report.

### **238/09 Performance Director's Report**

The Director of Performance presented this report which included the key performance issues as at Month 2. He drew the Board's attention to the following key issues:

Health Outcomes: World Class Commissioning would now focus on our performance against our health outcomes. There would be a release of data in July which would update the 2008/09 position. The Board report now recognised the key importance of Sheffield Health Outcomes by moving them to the front of the report. Work was underway to add monthly proxies of the outcomes to track

progress through the year.

Maximum 4 hour wait in A&E: A meeting had taken place with Sheffield Teaching Hospitals NHS Foundation Trust and the PCT to agree an action plan for A&E performance. This plan had been shared with Monitor and would be presented to the Board in September. STHFT was now maintaining 98% making good progress against the plan.

IA

Referrals: There had been a 6% increase in referrals over the same period last year, but against the phased plan GP referrals were 14% over target with other referrals 11% over target. Actions were in place to address this. There was some ongoing debate in the Consortia as to whether some GP referrals were clinically necessary and as a result they were starting to look more closely at referral patterns.

A detailed discussion took place regarding ensuring systems were in place to manage this activity. The Joint PEC Chair reminded the Board that the Joint PEC Chairs had visited Sheffield's Top 10 highest referring GP practices a couple of years ago. The PEC Chairs had not analysed the degree of change against other practices, although there had been a reduction in the degree of variation across the city over the two year period for all practices.

The Board noted that referrals were increasing and nationally it was also a problem.

18 weeks: This had been achieved at the Trust wide level although there had been breaches in some specialties. A meeting would take place with Barlborough Treatment Centre to try and utilise some of their unused capacity for Orthopaedics. Speciality compliance would likely be part of the 2009/10 Care Quality Commission assessment of the standard.

Ambulance response times: The Director of Strategy was asked to send Mark Lovell a briefing note prior to the Yorkshire Ambulance Service (YAS) Board to Board meeting that Mark was attending. This note would include latest weekly data and regional and national comparative data

The Board:

- Noted the emphasis of the Sheffield Health Outcomes in the revised report.
- Endorsed the actions relating to the key performance concerns for Month 2.
- Noted the progress in respect of the Standards for Better Health.

**239/09 Practice Based Commissioning**

The Director of Strategy presented this report which provided information on the progress of Practice Based Commissioning (PBC) over 2008/09. The Board's continuing commitment to PBC was acknowledged.

A detailed discussion took place about the configuration of the four current Practice Based Commissioning Consortia. The Director of Strategy felt that it was the function rather than the form and that efforts would focus on developing the Confederation. It was felt that there could be some merit in looking at clusters in other PCTs with very similar geographical make up to Sheffield's. The Chief Executive responded that within the Core Cities they were trying to look at this and where and how they could work together with other PCTs.

Non Executive Directors confirmed that they were still engaging with the Consortia and attending meetings, although there had been some recent confusion regarding PCT links which the Director of Strategy was asked to follow up.

The Board:

- Noted the progress made with PBC in 2008-9.
- Endorsed the approach to further developing the effectiveness of PBC.

**240/09 Learning Disabilities Strategy**

The Director of Strategy presented this report which advised the Board on improving the health of people with learning disabilities. He advised the Board that he and Malcolm Lindley had attended a formal assessment session with regional colleagues the previous week when they had been positive about the PCT's progress. The outcome of this assessment was expected in September.

The Director of Strategy drew the Board's attention to associated risks to the PCT, in particular the potential for legal challenge under the Disability Equality Duty and/or Disability Discrimination Act around inequitable access to services that we provide or commission.

The Director of Strategy was asked to present an update to the Board in December.

**SK****SK**

The Board endorsed:

- Progress and plans to improve services for learning disabled people.
- The progress on the Annual Yorkshire and Humber Self Assessment "Health Check" .
- The introduction of the new Healthy Ambitions work stream on learning disability.
- The requirements of the Health Ombudsman in the "Six Lives" report.

**241/09 NHS Sheffield Carbon Management 2009/10 Implementation Plan**

The Deputy Director of Public Health presented the 2009/10 Implementation Plan and reporting arrangements for the delivery of the Carbon Management Plan for NHS Sheffield. He drew the Board's attention to the key messages which included the links to national and Sheffield First performance targets. It was a requirement and was being encouraged nationally.

The Board noted the importance of carbon management. However, this needed to be balanced within a costed framework ensuring value for money. The Deputy Director of Public Health responded that organisations were seeing it as a way of making savings as well as reducing the carbon footprint and thus was being led by Directors of Finance, not Directors of Public Health. Part of the criteria for every new procurement was to look at the carbon reduction requirement.

The Deputy Director of Public Health was asked to keep the Board advised of progress on a quarterly basis.

The Board approved the NHS Sheffield Carbon Management 2009/10 Implementation Plan.

**242/09 Community 1st Sheffield Ltd**

The Director of Strategy presented this report which updated the Board on the progress of LIFT developments in Sheffield. He drew the Board's attention to the key messages which included the proposed accelerated programme to deliver the Bluebell, Foxhill, Darnall and Norfolk Park schemes by April 2011. Stage 1 reports on these schemes would be presented to the Board in October.

**SK**

A discussion took place about under utilised space at Jordanthorpe and Wincobank LIFT properties. The Director of Strategy was asked to send Mohammed Ismail and Mark Lovell details in this regard.

**SK**

The Board noted progress on the LIFT schemes.

#### **243/09 Health and Safety Issues for PCT Commissioning Staff**

The Head of Corporate Services presented an update on Health and Safety issues. She advised the Board that the final report from the Health and Safety Executive (HSE) had now been received. A copy of the letter from the HSE together with a copy of the PCT's action plan would be included in the weekly information pack, and sent to staff side colleagues and health and safety representatives. She also advised the Board that good progress was being made with regard to Back Care and Moving and Handling and information on this would be sent to the HSE by the end of July. The revised Back Care and Moving and Handling Policy would be presented to the Board in September. The HSE had also received information on the management of Latex which had been approved by them.

JED

Ten incidents had been added to the report since June, some of which related to medication issues. These were being addressed by the Pharmacy Team in the Standards and Engagement Directorate.

The Health and Safety webpage on the PCT's Intranet site was in the process of being updated. Information would also be included in the staff newsletter and in the weekly information packs.

The Board endorsed the report.

#### **244/09 Policies**

The Head of Corporate Services introduced this report which listed, at Appendix A, the policies which had been through a robust development process including consultation with relevant individuals and groups.

The policies were:

##### **Clinical**

Barrier Nursing Precautions Policy  
Hand Hygiene Policy

##### **Corporate**

Compliments and Complaints Policy

The Head of Corporate Services advised the Board that the Compliments and Complaints Policy had been revised in response to changes to the system from 1 April 2009. Further work would be

done in terms of the commissioner / provider split. The Board requested that an amendment be made to the Policy to include the process of how to advise the Board of any serious complaints as this was not formally stated.

Subject to the amendment made as above, the Board approved the policies and asked the Head of Corporate Services to publicise the policies on the intranet.

**245/09 Report from the Chairman of the Audit and Integrated Governance Committee**

The Chairman of the Audit and Integrated Governance Committee (AIGC) updated the Board on the following matters:

- a)** Robert Bailey and Malcolm Lindley would be attending the International Financial Reporting Standards (IFRS) training on 17 August 2009. Training for other committee members would be arranged for a later date as required.
- b)** The Board formally noted the unadopted minutes of the Audit and Integrated Governance Committee held on 9 June 2009.
- c)** The Director of Finance presented the revised Terms of Reference of the Audit and Integrated Governance Committee, which had been changed in respect of the commissioner / provider split as there was now a requirement to split the AIGC agenda into two sections, whilst maintaining one Committee.

The Board approved the revised Terms of Reference of the Audit and Integrated Governance Committee, subject to confirmation from the Strategic Health Authority that recruitment to the Provider Services Advisory Board could proceed as requested.

The Board noted the report.

**246/09 Professional Executive Committee (PEC)**

The Joint PEC Chair updated the Board on the following matters:

- a)** The Board was asked to endorse the PEC's plan for 2009/10. The report included themes about different activities and involving the PEC more with the provider arm of the organisation. There was clear involvement in practice based commissioning and in developing future clinical leads. The table of contents included the PEC workplan for the next one to two years.

The Board endorsed the plan.

- b)** The Board was asked to note the unadopted minutes of the PEC meeting held on 11 June 2009.

The Board received and noted the Joint PEC Chair's report.

**247/09 Specialised Commissioning Group (SCG)**

The Chief Executive updated the Board on the following matters:

**a)** Key highlights from the Yorkshire and Humber Specialised Commissioning Group minutes 15 May 2009 included formal confirmation from the Audit Commission that progress had been made in the review of the SCG arrangements. It was noted that this report had been presented to the PCT's Audit and Integrated Governance Committee on 9 June.

A stocktake of the current risk share arrangements would be undertaken and a paper on how this would be managed would be presented to the next meeting of the Board.

The Board noted the minutes.

**b)** Arrangements under the SCG PCT Establishment Agreement and Scheme of Reservation and Delegation had been changed to take account of the move to one formal SCG and to establish three sub groups.

The Board approved the SCG PCT Establishment Agreement and Scheme of Reservation and Delegation.

**248/09 Report from the Provider Services Management Board held on 23 June 2009**

The Chief Executive presented this report which provided a brief summary of the key issues impacting on the PCT's directly provided services over the last month. He advised the Board that although there was nothing to note of concern, provider services had a large and testing cost improvement programme, and a significant proportion of these savings would be made non recurrently this year.

The Managing Director of Provider Services reported that robust project management arrangements had been put in place with regard to tendering opportunities. This represented 15% of business over the next year and it would be challenging to respond to, both in terms of time and cost.

A formal review regarding Transforming Community Services had taken place with the Strategic Health Authority the previous day. The PCT was deemed to be on track and an action plan had to be submitted by the end of July and a further progress update had to be submitted by the end of July 2009

The Managing Director of Provider Services would have discussions with the Deputy Director of Public Health with regard to Swine Flu and modelling work against their business continuity plan.

The Board noted the report.

**249/09 Feedback from Non Executive Directors**

Mark Lovell advised the Board that he had met with the Treasury a couple of times since the last Board meeting regarding application of savings and better integration between service providers. He advised the Board that the PCT should consider new and collaborative ways of working and think about this in relation to the planning cycle. This was an opportunity to help tackle health inequalities. The Chief Executive agreed to discuss these opportunities outside of the meeting.

**JS**

**250/09 Questions from the Public**

Although there were no questions raised, a member of the public asked if the Chief Executive could respond to a letter regarding housing issues. This would be followed up with the relevant partner organisation.

**JS**

A member of the public advised the Chairman that copies of LINK's first annual report were now available and in the process of being distributed.

**251/09 Confidential Session**

The Board resolved that representatives of the press and other members of the public be excluded from the remainder of this meeting having regard to the confidential nature of the business to be transacted, publicity on which would be prejudicial to the public interest, section 1(2) Public Bodies (Admission to Meetings) Act 1960.

**252/09 Any Other Business**

There were no items of any other business.

**253/09 Date and Time of Next Meeting**

Please note that a Board meeting will not be held in August unless there are exceptional circumstances.

The next meeting of Sheffield Primary Care Trust Board will be held on Tuesday 1 September 2009 from 1400 hours in the Boardroom, 722 Prince of Wales Road, Sheffield S9 4EU