

Briefing from the Board meeting held on 24 May 2018

This briefing is intended to give a summary of the key areas of discussion and decisions at the meeting of the Board of Oxfordshire Clinical Commissioning Group (OCCG) and is intended for circulation. The minutes will provide the official record of the meeting. The agenda and all papers related to the agenda are available on the OCCG website:

<http://www.oxfordshireccg.nhs.uk/get-involved/board-meetings/>

Patient story: the meeting began with a short film produced by Healthwatch Oxfordshire about the Patient Participation Group at Luther Street Medical Centre, a GP surgery which specialises in offering primary care to homeless people. Click [here](#) to watch the film.

Chief Executive's Report: Highlights include:

- Dr Kiren Collison and Lou Patten attended a board meeting of Healthwatch and gave a presentation about integrated care systems.
- Lou Patten joined the Chief Nurse of Oxford University Hospitals Trust on a visit to Witney Community Hospital. They visited the wards, the Minor Injury Unit and the Emergency Multidisciplinary Unit (EMU).
- A meeting took place with Helen and Douglas House to discuss children's palliative care services.

Locality Clinical Director Reports: The Locality Clinical Directors' reports give an outline of activities in each of the six localities. The paper is available on the OCCG [website](#). Highlights include:

- Several areas highlighted focus on integrating services so they work better for patients. These include an 'Integrated Front Door' in north Oxfordshire at the Horton General Hospital to transform urgent care, developing Integrated Respiratory Teams.
- The Healthy New Town Programmes in Bicester and Barton are two years in and have started to address some of the complex, multi-dimensional factors associated with reducing obesity and social isolation.
- A meeting took place with GPs, OCCG, local MP and patient representative to discuss plans for expanding primary care services in Wantage.

Oxfordshire CCG Operational Plan: The full report can be found [here](#). The 2018/19 Operational Plan was submitted on 30 April 2018 and is an update of the two year plan that was agreed in January 2017. The plan details the CCG's programme of work for the year to deliver local and national priorities with a focus on making the system more sustainable. In 2017/18 and 2018/19, OCCG will have received the minimum level of growth of 2%. OCCG is planning for a breakeven position at the end of the 2018/19 year. The pressures experienced over winter are expected to be similar next year and plans are being made now for how this is managed better for 2018/19. Six priorities have been agreed:

- Operational delivery
- Transformation of health and care
- Engaging communities
- Integration
- Empowering patients
- System leadership

Finance Report Month 12: The full report can be found [here](#). OCCG has achieved its end of year target with a surplus of £4.6m. Significant pressure during 2017/18, particularly over winter, have resulted in overspends on some contracts that have been off-set by underspends elsewhere and the CCG contingency fund.

Integrated Performance Report: The Integrated Performance Report is designed to give the Board assurance of the processes and controls around quality and performance. It contains analysis of how OCCG and associated organisations are performing. The full report can be found [here](#). Highlights include:

- All cancer targets were met at year end despite some being missed for individual months during the year.
- OCCG reported four cases of MRSA during 2017/18 (three were assigned to OCCG). All were reviewed and no lapses of care were identified and the cases were deemed to be unavoidable.
- The daily average bed days lost to Delayed Transfers of Care (DToC) increased during February to 133 but then improved to 111 in March.

Annual Report and Annual Accounts: The annual report and accounts have been reviewed and approved by the auditors and the CCG Audit Committee and will be submitted to NHS England to meet the deadline of 29 May. The full report will be published with a public-friendly summary and a separate report on patient and public involvement by the deadline of 15 June and will be presented at the CCG Annual Public Meeting on 27 September 2018.

Strengthening the Clinical Leadership Role: All the work of OCCG needs to have strong clinical leadership. Following the review of the Health and Wellbeing Board, changes to the committee structure of OCCG were agreed:

- The Executive Committee will become a formal sub-committee of the Board.
- The scope of the OPCCC will be reviewed .
- The membership and terms of reference of other Board committees will be reviewed.

In doing this, it is intended that more clinical time will be available to support other work within OCCG.

Developing OCCG's approach to public and patient engagement: The full report can be found [here](#): A considerable amount of work and effort takes place across the organisation in engaging and involving patients and the public across small and large projects. Despite this, the overall perception of many is that OCCG is not doing enough to engage early enough or in a meaningful way. Experience and reflection during the past 12-18 months has led to learning for how to improve the way OCCG engages others and reports how it has used feedback in decision-making. Some changes have been made and a full review of the communications and Engagement Strategy is planned.

Other Reports: The Corporate Governance Report, Strategic Risk Register, Minutes of the Audit Committee, Finance Committee, Oxfordshire Primary Care Commissioning Committee and Quality Committee and the Annual Reports of each of the Board committees : The full papers and reports can be found [here](#)

All [Board papers](#) and this [summary briefing](#) are published on the OCCG website.