

**Minutes of Frimley Commissioning Collaborative Board <sup>1</sup>held on Tuesday 14 April 2020 between  
 09.00am and 10.00am via Microsoft Teams**

<b>Present:</b>	<p><b><u>Frimley Commissioning Collaborative comprised of East Berkshire, Surrey Heath and North East Hampshire and Farnham – interim roles in response to Covid-19 detailed in <i>italics</i> below:</u></b></p> <p>Dr Andy Brooks – Clinical Chief Officer          Dr Lalitha Iyer, Executive Medical Director – <i>Interim Lead aligning clinical thresholds at system and supporting the Interim Chief Operating Officer and the Director of Quality and Nursing</i>          Nicola Airey, Executive Place Managing Director, Surrey Heath - <i>Interim Chief Operating Officer</i>          Sarah Bellars, Executive Director of Quality and Nursing – <i>Interim lead focussing on IPC; Governance, Safeguarding; System Quality.</i>          Emma Boswell, Executive Director of Development and Improvement – <i>Interim lead Staff; Workforce and Comms and capturing improvement in practice</i>          Rob Morgan, Executive Director of Finance – <i>Interim lead System use of Resource</i>          Fiona Slevin-Brown, Executive Place Managing Director, Bracknell Forest – <i>Interim role Full Time System Gold Lead / EPRR Accountable Emergency Officer</i>          Caroline Farrar, Executive Managing Director Royal Borough          Ollie White – Interim Executive Place Managing Director, NEHF</p> <p>Dr Peter Bibawy – Clinical Chair North East Hampshire and Farnham - <i>Interim Clinical Chair for the Frimley Collaborative</i>          Caroline Warner – Lay Person for Patient and Public Engagement Surrey Heath and East Berkshire - <i>Interim Lay Convenor for the Frimley Collaborative</i>          Dr Amanda Wellesley – Secondary Care Consultant East Berkshire and Surrey Heath- <i>Interim Secondary Care Consultant for the Frimley Collaborative</i></p> <p>Dr Martin Kittel – Senior Clinical Lead East Berkshire – <i>Interim Clinical Leader Bracknell Forest</i>          Dr Ed Palfrey – Secondary Care Lay Member North East Hampshire and Farnham – <i>Interim role Lay Member for Bracknell Forest</i></p> <p>Dr Jim O'Donnell – Locality Lead for Clinical Leader for Slough – <i>Interim Clinical Leader Slough</i>          Arthur Ferry - Lay Member for Audit and Governance East Berkshire – <i>Interim Frimley Collaborative Lay Member for Audit and Governance and Lay Member for The Royal Borough and Slough</i></p> <p>Dr Huw Thomas - Locality Lead for the Royal Borough – <i>Interim Clinical Leader Royal Borough</i></p> <p>Dr John Fraser – Clinical Lead Surrey Heath – <i>Interim Clinical Leader Surrey Heath</i>          Tony Fitzgerald - <i>Interim Lay Chair Surrey Heath – Interim Frimley Collaborative Lay Member for Primary Care and Place Lay Member for Surrey Heath</i></p> <p>Dr Steven Clarke – Governing Body GP North East Hampshire and Farnham – <i>Interim Clinical Leader North East Hampshire and Farnham</i></p>
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<sup>1</sup> The Frimley Commissioning Collaborative Board comprises: NHS North East Hampshire & Farnham CCG; NHS Surrey Heath CCG; NHS East Berkshire CCG

	Kathy Atkinson, Lay Member for Patient and Public Engagement North East Hampshire and Farnham – <i>Interim Lay Member for Patient and Public Engagement for the Frimley Collaborative and Lay Member for North East Hampshire and Farnham</i>
<b>In attendance:</b>	Sharon Ward, Deputy Director of Communication and Engagement. M-J Steijger – Head of Governance (Acting) – North East Hampshire and Farnham CCG (secretariat)
<b>Apologies for Absence:</b>	<b><u>Frimley Health and Care:</u></b>  Fiona Edwards – Chief Executive Surrey and Borders Partnership NHS Foundation Trust and Frimley Health and Care Lead.

1	<b>Welcome and Apologies</b>
	<p>Caroline Warner in her capacity as Interim Lay Convenor welcomed the interim members to the meeting of the Frimley Collaborative Board which was taking place remotely in compliance with national social distancing guidance.</p> <p>No questions had been received in advance in relation to the papers which had been circulated.</p> <p>Caroline Warner informed members that due to the time constraints of the meeting it may not be possible for all questions to be answered in sufficient detail – Andy Brooks and the Executive Team had agreed in advance that any remaining unanswered questions would be collated and a separate question and answer document would be circulated to members after the meeting.</p> <p style="text-align: right;"><b>Action: Andy Brooks</b></p> <p><b>Apologies were noted as outlined above.</b></p>
2	<b>Conflicts of Interest Register</b>
	<p>There was one amendment to the Conflicts of Interest Register which had been included within the pack of papers – Caroline Farrar was incorrectly listed as the Medical Director for The Royal Borough rather than the Managing Director. The Conflicts of Interest Register would be amended accordingly – no other amendments or updates were received. There were no Conflicts of Interest in relation to any of the items of the agenda.</p> <p><b>The Conflicts of Interest Register would be updated accordingly. Action: M-J Steijger</b></p>
3	<b>Minutes of the Frimley Collaborative Board meetings on 10 and 24 March 2020 and Action Tracker</b>
	<p>The minutes of the previous meetings on 10 and 24 March 2020 were approved without amendment as a correct record,</p> <p><b>The minutes of the previous meetings were approved.</b></p> <p>The action tracker from the previous meetings was reviewed.</p> <p><b>015</b> – members noted that the deadline to approve the draft Constitution had been rolled forward from April to July 2020.</p> <p><b>016</b> – it was noted that the Draft Operational Plan 2020/21 version 5 March 2020 had been circulated with the papers for the meeting and the action was complete.</p> <p><b>017</b> – members noted that the decision to suspend meetings and enact EPRR would be reviewed at its meeting on 9 June 2020.</p> <p><b>018</b> – The Board Assurance Framework / SITREP had been circulated to members and was on the agenda for discussion in item 8. The action was marked as green and complete.</p> <p><b>The action tracked was reviewed and noted.</b></p>
4	<b>Matters Arising not otherwise covered on the agenda</b>

	There were no matters arising.
5	<p data-bbox="172 143 592 181"><b>Clinical Chief Officers Update</b></p> <p data-bbox="172 181 1487 315">Andy Brooks provided members of the Frimley Collaborative Board with an update on (i) the work that had been undertaken since its last meeting on 24 March 2020 to support the response to Covid-19 (ii) the current position and (iii) look ahead to future issues / next phase of preparation for the Frimley ICS.</p> <p data-bbox="172 349 1487 618">Andy Brooks thanked the interim members of the Frimley Collaborative Board for their extra-ordinary efforts over the preceding three weeks – working remotely to support the Frimley Incident Control Centre managing a range of often complex and challenging issues both professionally and personally. Andy Brooks thanked Caroline Warner and Peter Bibawy for their support in their new capacity as Interim Lay Convenor and Interim Clinical Chair. Andy Brooks welcomed Caroline Farrar the newly appointed Executive Place Managing Director for The Royal Borough to her first meeting of the Frimley Collaborative Board – he thanked Caroline Farrar for the support that she had provided in terms of wider system thinking.</p> <p data-bbox="172 651 762 689">Andy Brooks highlighted the following points:</p> <p data-bbox="172 723 1487 1021">The Frimley Collaborative had enacted <u>Emergency Preparedness Resilience and Response arrangements</u> which had resulted in huge changes to existing patient pathways and Sarah Bellars and clinical colleagues had been working at speed to assess the quality impact of these service alterations. Emma Boswell was supporting the newly created <i>Frimley Workforce Bureau</i> which had successfully redeployed staff across the system – a <i>Volunteers Bureau</i> was also now in place. Rob Morgan was working to support the system response for the provision of Personal Protective Equipment (PPE) and Peter Bibawy was working with the Frimley Leadership Academy. Nicola Airey was providing strategic leadership to primary care supported by the Directors of Operation at Place – she was also working with Lalitha Iyer on the roll out of the hot and cold sites across the geography.</p> <p data-bbox="172 1055 1487 1189">Andy Brooks stated that previous national modelling on Covid-19 had indicated that the peak of the pandemic would be reached over the Easter Weekend, however, this peak had not occurred in the numbers originally anticipated; he acknowledged that there was an ongoing likelihood that there would be a surge of Covid-19 cases and updated national modelling was awaited.</p> <p data-bbox="172 1223 1433 1261">Andy Brooks advised member of the Frimley Collaborative Board that key system risks included:</p> <ul data-bbox="172 1294 1487 1429" style="list-style-type: none"> <li data-bbox="172 1294 1487 1332">• The as yet unknown number of excess deaths which had resulted from non-Covid-19 causes</li> <li data-bbox="172 1361 1487 1429">• The balance of “hot” and “cold” activity and any resulting health inequalities attributable to Covid-19</li> </ul> <p data-bbox="172 1462 847 1500">Caroline Warner invited members to ask questions.</p> <p data-bbox="172 1534 1487 1630">Tony Fitzgerald asked Andy Brooks if the Frimley ICS was communicating the need for business as usual presentation for non-Covid-19 illnesses, particularly for Paediatrics following warnings from The Royal College of Paediatrics and Child Health.</p> <p data-bbox="172 1664 1487 1865">Andy Brooks assured Tony Fitzgerald and other members that a national NHS public health campaign was about to be rolled out across the country as part of the next phase of contingency planning - members of the public would receive clear and consistent messaging urging them to seek help from their GPs if they became ill for non-Covid-19 related reasons. Andy Brooks informed members that the Frimley ICS Ambitions Group would lead on the system response to this next “pre-recovery” phase of planning.</p> <p data-bbox="172 1899 1487 1966">Amanda Wellesley reported that in her role as an A&amp;E consultant she had seen a real increase in the amount of mental health issues resulting from Covid-19.</p>

	<p>Martin Kittel advised colleagues that the Improving Access to Psychological Therapies Service (IAPT) was offering video consultations – there were other support offerings from Local Healthwatch organisations as well as from the Samaritans.</p> <p>Fiona Slevin-Brown assured members that Local Authorities were also providing support to people for mental health and wellbeing and the Frimley Collaborative websites were linking through to local authority public health team portals to ensure joined up care.</p> <p>There were no other questions for Andy Brooks and he concluded his verbal update with the view that whilst under strain the Frimley System was coping and its EPRR arrangements were working effectively.</p> <p><b>Members noted the verbal update.</b></p>
6	<p><b>Integrated Care System Update from the Frimley ICS Lead</b></p>
	<p>Fiona Edwards who had offered her apologies (as noted previously) as a result of an unavoidable clash with a national meeting had asked Andy Brooks to provide members with some comments from her.</p> <p>Andy Brooks reported that Fiona Edwards wished to extend her personal thanks to members of the Frimley Collaborative for their support to the Frimley Incident Control Centre which was now running very well and ensuring strong system connectedness. Fiona Edwards reported that she felt well supported and had been able to place reliance on the information provided by the Frimley Incident Control Centre when reporting at regional and national levels.</p> <p>Andy Brooks on behalf of Fiona Edwards expressed her thanks to both Peter Bibawy and Caroline Warner for the support that they had already provided to the Frimley ICS in their new interim collaborative roles.</p> <p><b>Members noted the verbal update.</b></p>
7	<p><b>Position Statement on Covid 19</b></p>
	<p>Fiona Slevin Brown in her capacity as full time System Gold Lead provided members with a position statement on the Covid-19 pandemic since its last meeting on 24 March 2020.</p> <p>Fiona Slevin-Brown noted many of the key issues had been covered by Andy Brooks in his earlier update – however, additional headlines included:</p> <ul style="list-style-type: none"> <li>• The number of Covid-19 related deaths in the Frimley System were continuing to increase – at Frimley Health NHS FT there had been 156 positive cases and 77 deaths at Wexham Park Hospital there had been 187 positive cases and 123 deaths.</li> <li>• The availability of Personal Protective Equipment (PPE) remained an ongoing issue – although Fiona Slevin-Brown acknowledged that the co-ordination of national and regional supplies of PPE had improved. It was noted that the Frimley ICS had established mutual aid networks with its neighbouring systems for PPE.</li> <li>• The Frimley ICS Workforce Bureau had successfully redeployed 154 members of staff across the system.</li> <li>• Covid-19 testing for staff had been rolled out across all sectors including care home staff.</li> <li>• Bed capacity at Frimley Health NHS FT had been increased – bed occupancy was done by two thirds as a result of improved discharges and collaborative support for medically fit patients and a reduction in Delayed Transfers of Care (DTCs) - Fiona Slevin-Brown reported that this put Frimley Health NHS FT in good position for a potential surge in Covid-19 cases.</li> <li>• The Frimley ICS had moved into its planning for the next “pre-recovery” phase as the demand profile changed and patients sought access to non-Covid-19 related services - as mentioned earlier by Andy Brooks a national communication was expected later in the week.</li> </ul>

Caroline Warner invited members to ask any questions:

1. Steven Clarke asked if there was any spare capacity within the Frimley system would the Frimley ICS be asked to take overflow from any surrounding areas which might be under some more pressure.

Fiona Slevin-Brown confirmed that networks had been established with neighbouring ICS systems to support mutual aid in the event that it was needed.

2. Jim O'Donnell stated that a topic of discussion at a recent Slough meeting was the probability of a future rise in cases of PTSD amongst clinical personnel dealing directly with Covid-19 patients who were also our patients locally. Jim O'Donnell asked if this sort of concern was being picked up elsewhere in the system.

Fiona Slevin-Brown referred the question to Emma Boswell who assured Jim O'Donnell that the Frimley Leadership Academy and a Wellbeing Cell that had been formed would be looking at the issue of PTSD amongst clinical staff.

Jim O'Donnell thanked Emma Boswell for her response and confirmed that he was sufficiently assured that the issue was being addressed.

**Members noted the assurances provided by Fiona Slevin-Brown**

**8 Board Assurance Framework / SITREP**

As agreed at the previous meeting the Board Assurance Framework/SITREP document which had been circulated to members before the start of the meeting was intended to provide a clear concise report on the status of current threats against achievement of the strategic priorities.

Each of the five Executive Leads had provided a short synopsis of the key risks; risk scores; controls and mitigating actions within their areas which were set out in the paper.

1. Quality and Safeguarding – Sarah Bellars
2. System and Partnership Working – Fiona Slevin-Brown
3. Finance and Resources – Rob Morgan
4. Primary Care and Community Services – Nicola Airey
5. Our People – Emma Boswell

Caroline Warner invited questions from members.

Steven Clarke advised Caroline Warner that the Clinical Leaders had just taken part in their regular catch-up meeting before the start of the Frimley Collaborative Board and this earlier meeting had provided the Clinical Leaders with an opportunity to air and discuss most of their previous questions.

Tony Fitzgerald asked Emma Boswell for further clarity on sickness absence data - he had noted a variance in the figures reported in recent Workforce Reports. Emma Boswell provided assurance that sickness absence rates that were being report to the Frimley Workforce Bureau remained stable – she agreed to have separate conversation with Tony Fitzgerald after the meeting to address the specific query he had raised in relation to the data. **Action: Emma Boswell**

The following questions were collated for a separate more detailed response that would be circulated after the meeting:

1. Martin Kittel asked Fiona Slevin-Brown about the strategic approach to system testing at present and for details of future plans.

	<p>2. Peter Bibawy asked if Fiona Slevin-Brown was able to confirm actual numbers of staff who had been tested. <b>Action: Fiona Slevin-Brown</b></p> <p>3. Jim O'Donnell asked Sarah Bellars how primary care could further support vulnerable groups of patients with underlying health conditions who themselves were either (i) working in care homes (ii) other domiciliary settings or (iii) who were carers.</p> <p>Sarah Bellars described the work of the Frimley ICS Wellbeing Cell that had been established – she confirmed that members of her Nursing and Quality Team were working collaboratively with Local Authority colleagues to provide support to these vulnerable workers. Sarah Bellars agreed to provide a more detailed response to the question after the meeting. <b>Action: Sarah Bellars</b></p> <p>4. Jim O'Donnell asked Nicola Airey what further support primary care could obtain to remotely manage the rise in the number of anxious patients who were contacting GP practices (i) in response to shielding letters that had been sent out or (ii) in anticipation that a shielding letter should have been sent out to them. Jim O'Donnell reflected that there was a complex array of available mental health offerings and it would be good to have a consolidated summary.</p> <p>Jim O'Donnell also asked about electronic prescribing at “hot” sites.</p> <p>Amanda Wellesley asked for a communication to member of the public on maintaining mental health and wellbeing during Covid-19 and available support.</p> <p>The Frimley Collaborative agreed that it wished to receive an update on the changes to mental health offerings that are available to citizens during the emergency and how these offerings are being communicated to enable people to navigate a complicated system.</p> <p>Nicola Airey advised to Jim O'Donnell that clear guidance had been sent to GPs on shielding letters. Nicola Airey agreed to provide more information on the management of “hot” site prescribing. Nicola Airey agreed to provide a summary on available mental health and wellbeing support outside of the meeting. <b>Action: Nicola Airey</b></p> <p>5. Ed Palfrey asked Lalitha Iyer about what sort of immediate support was available to GPs and paramedics from secondary care / hospices to help them in their decision making in relation to the management of patients with Covid-19. Lalitha Iyer advised that she was working with clinical colleagues within the Frimley ICS on an ethical framework and end of life pathways – a network of senior GPs had been identified and these individuals would provide support to GP colleagues and paramedics.</p> <p>Lalitha Iyer agreed to further describe to members of the Frimley Collaborative Board how these end of life messages would be further articulated for staff and more widely to members of the public. <b>Action: Lalitha Iyer</b></p> <p>Lalitha Iyer would connect with both Ed Palfrey and Amanda Wellesley after the meeting to follow up on the end of life work that was taking place in the Frimley ICS – she welcomed their support in this work. <b>Action: Lalitha Iyer</b></p> <p><b>A separate question and answer document would be circulated after the meeting.</b> <b>Action: Andy Brooks</b></p>
9	The meeting closed at 10.00am. The next meeting would take place on Tuesday 12 May 2020.