

2014 – 15 Annual General Meeting**Minutes of the Annual General meeting of the Lewisham Clinical Commissioning Group (LCCG)
Governing Body held on Wednesday 30 September 2015 at 13:00 at****Governing Body**

Dr Marc Rowland	Chair, LCCG
Dr David Abraham	Senior Clinical Director, LCCG
Dr Brian Fisher	Healthwatch Lewisham Representative
Prof. Ami David MBE	Nurse Member, LCCG
Dr Simon Parton	LMC Chair
Ms Rosemarie Ramsay	Lay Member, LCCG
Dr Angelika Razzaque	Clinical Director, LCCG
Mr Tony Read	Chief Financial Officer, LCCG
Ms Diana Robbins	Lay Member, LCCG
Mr Ray Warburton OBE	Lay Deputy Chair, LCCG
Mr Martin Wilkinson	Chief Officer, LCCG

In Attendance

Ms Lesley Aitken	Board Secretary, LCCG (minutes)
Mr Michael Keating	Facilitator
Ms Mina Jesa	Head of Engagement, LCCG

Present (approx.): **75 members of the public**
 5 from member practices
 20 members of staff

Apologies

Ms Aileen Buckton	Executive Director Community Services, LB Lewisham
Dr Sebastian Kalwij	Clinical Director, LCCG
Dr Faruk Majid	Senior Clinical Director, LCCG
Dr Jacky McLeod	Clinical Director, LCCG
Dr Danny Ruta	Public Health Director, LB Lewisham

1. Welcome and Introductions

Dr Rowland welcomed all to the second official AGM of the NHS Lewisham Clinical Commissioning Group. The Governing Body members present introduced themselves.

Dr Marc Rowland added that he has been a practicing Lewisham GP for 38 years and has been Chair of the CCG since September 2013 and has recently been elected for a further two years. During the past year he has met with many interesting people including Lewisham residents, carers and workforce.

Dr Rowland described how Lewisham was the geographical centre of SE London. Indicating the *SEL Strategy* he recommended it as an interesting read which gave a good explanation of Health and Social Care joint working.

Referring to co-commissioning, Dr Rowland explained that the CCG was now responsible for commissioning primary care services with NHS England. Mr Warburton, as Chair of the Audit Committee, monitors issues around any resulting potential conflicts of interest.

He acknowledged that there must be an improvement in access to primary care. All practices bar one had signed up to the enhanced access DES (direct enhanced service) with agreement that GP standards would be raised as a result of it.

2. Improving Health and Care in Lewisham

Mr Wilkinson introduced the presentation on the Annual Report and Accounts for 2014-15, for which the full documents were available on the CCG website at: www.lewishamccg.nhs.uk the slides for the presentation would also be available on the website.

2.1 Annual Report 2014/15

Mr Wilkinson reported that the Audit Committee had signed off the Annual Report 2014/15 at its meeting on 6 May 2015 and received by the Governing Body at its meeting on 9 July 2015. The CCG had met all the requirements of the Annual Report which were:

- All CCGs are required to prepare an annual report and set of annual accounts for the year ending 31 March 2015.
- That they follow NHS England's *CCG Annual Reporting Guidance*
- That the final audited annual report and accounts were signed off by the deadline date of 28 May.
- That they would be presented at an AGM and published on the CCG website

The report this year had been prescriptive in terms of the content which had consisted of:

- Member practices' introduction
- Strategic report
- Members report
- Remuneration report
- Statement of Accountable Officer's responsibilities
- Governance statement

Mr Wilkinson added that he was proud to be working with GP members in Lewisham which was a lively, active and richly diverse borough, though it was recognised that there were challenges in the area including the high levels of cancer, heart disease and respiratory problems and levels of deprivation. The CCG's aim is to support residents to stay healthy, recover from illness quickly with good available health services and more proactive and planned care in the community. The priority areas for the CCG include:

- Neighbourhood community teams; working with partners to set up four Lewisham teams bringing together district nurses and social workers based around GP practices and in alignment with mental health community teams and;
- Developing primary care plans to provide collaborative, proactive and high quality primary care services.

Mr Wilkinson highlighted the areas where the CCG had met the targets set last year which included:

- Suspected cancer referrals to be seen within 2 weeks of referral
- Definitive treatment to commence within 31 days of diagnosis of a cancer
- 95% of patients needing outpatient treatment area treated within 18 weeks from referral
- The number of people entering psychological therapies
- The proportion of people reaching recovery after psychological therapy.
- Improve diagnosis of dementia

The CCG did not achieve the targets:

- 95% of patients seen in A&E, admitted or discharged within 4 hours.
- 85% of patients referred by a GP and diagnosed with cancer starting treatment within 62 days.
- 90% of patients who need hospital admission are treated within 18 weeks from referral.

Work is ongoing with the Local Authority, Lewisham and Greenwich NHS Trust (LGT) and other local providers to achieve the above targets therefore providing the best level of care to the residents of Lewisham.

In July 2015 the CCG Medicines Management Team with LGT and London Borough of Lewisham were recognised nationally when they were awarded the HSJ Patient Safety in the Managing Long Term Conditions category for the Lewisham Integrated Medicines Optimisation Service (LIMOS). This was a good example of joined up working.

2.2 Annual Accounts and Financial Review 2014/15

Mr Read presented the report and explained that the main financial objectives for the year consisted of statutory and local objectives and expectations from NHS England (NHSE).

He reported that all the financial duties had been achieved in 2014/15 which indicated that the CCG was living within its means and delivering value for money. This included delivering the

required surplus, managing the costs within the £25 per head of population, keeping the cash spending within maximum drawdown value, using public resources in a fair and effective manner and to exceed the Better Payments Practice Code 95% target.

Mr Read explained that the income for the CCG from the Treasury, via NHSE, in 2014/15 was £391m. The CCG had achieved running costs of £22.50 per head of population, less than the £25 required. £22.50 a head was in line with this years, 2015/16, target. There was £132k bank balance at the end of 2014/15.

Referring to the expenditure by category for 2014/15, he explained that about:

- 62% was spent on acute services
- 20% on mental health
- 8% on community services with remainder on other

The annual accounts had been audited by the external auditors, Grant Thornton who had given an unqualified opinion on that; the financial statements presented a true and fair view, that tax payers were receiving value for money and that the financial statements were proper and not irregular.

It was noted that the Annual Report and Accounts 2014/15 were being presented at this Annual General Meeting.

Questions taken and answers given at this stage are shown as a separate attachment (appendix 1)

3. Presentations

There followed presentations on: Engagement active 2014/15, Primary care: how is primary care changing in Lewisham and Self-management of long term conditions: making it work.

Full slides from all the presentations are on the Lewisham CCG website www.lewishamccg.nhs.uk

3.1 Engagement activity 2014/15

The presentation was given by Ms Rosemarie Ramsay, the Lay Member for Public Engagement and Ms Mina Jesa, the Interim Head of Engagement. The presentation covered;

- Our vision for engagement
- Engagement activity undertaken throughout the year
- The outcome of the *You said... We heard....* Event including 'what matters to me and what I want
- Next steps of what the CCG will work to.

3.2 Primary care: how is primary care changing in Lewisham

An interactive voting system was used for questions posed throughout the presentation.

Dr David Abraham and Dr Simon Parton gave the presentation which covered:

- Collaborative working by GP practices
- Improving access to primary care
- What collaborative working is and why it is important
- Using technology to support efficient working around the sharing of medical records and video conferencing
- Improvements in flu vaccination rates
- Increased number of patients supported to self-manage
- Accessing GP and health services including supporting alternative ways to access GP services and delivering training to primary care.

Questions taken and answers given at this stage are shown as a separate attachment.

3.3 Self-management of long term conditions: making it work

An interactive voting system was used for questions posed throughout the presentation.

Dr Angelika Razzaque gave the presentation which covered:

- The definition of a long term condition by Department of Health: *conditions that cannot, at present, be cured, but that can be controlled by medication and other therapies*
- Examples of long term conditions
- What is self-management
- Benefits of self-management
- Main self-management programmes in Lewisham 2015
- Commissioning Priorities 2016/17
- Next steps

Questions taken and answers given at this stage are shown as a separate attachment.

4. Close

Concluding, Dr Marc Rowland thanked all those who had attended the Annual General Meeting which had been an interesting meeting with lively questioning and answer sessions, these would be used to inform the CCG short and longer term views.

He thanked Dr Hilary Entwistle, who had not stood for re-election to the Governing Body, for her contribution to the work of the CCG, in particular with long term conditions. Dr Rowland also thanked Ms Diana Robbins, who had also not stood for appointment, to the role of lay member for engagement for all her work in promoting engagement in Lewisham.