



# Minutes

## Partnership Senate Meeting – for approval

15 October 2020  
10am – 12:30pm  
Microsoft Teams

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### Attendees and apologies

Please see last page of the minutes.

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### Minutes from the meeting

#### Item PS2020/016 – Welcome and Apologies for Absence

John Govett welcomed all to the Partnership Senate via Microsoft Teams. A warm welcome was extended to Mark Woolcock, Chief Executive of Kernow Health CIC who was not in attendance today, and David Smith, Chair of Cornwall Partners in Care.

Apologies received are noted on the record of attendance page of the minutes.

David Smith introduced himself as Chair of Cornwall Partners in Care (CPIC), and advised that the organisation is a trade association for the independent sector with 128 care homes representing 80% of all beds and 70% of home care provision in Cornwall. As Chair of CPIC he is elected biennially and communicates via the monthly Forums. David is the owner of a 35 bedded Care Home in St. Austell and his role previous to this had been as an NHS Manager.

#### Item PS2020/017 – Minutes, actions and matters arising from the previous meeting

It was agreed that the minutes of the previous meeting held on 16 July 2020 were an accurate record and were approved by the Senate.  
The action grid was updated and will be distributed with the minutes of this meeting.

#### Matters Arising

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A partnership between NHS Kernow Clinical Commissioning Group; Cornwall Council; Royal Cornwall Hospitals NHS Trust; Cornwall Partnership NHS Foundation Trust; Council of the Isles of Scilly; and NHS England.

## **Declaring a Climate Emergency**

John Govett confirmed the Climate Emergency paper which had been distributed for review prior to this meeting included the two recommendations below, both of which were noted by the Senate:

- i. That the declaration for Climate Emergency was made on 6 October 2020 by Cornwall Partnership Foundation Trust (CFT), Royal Cornwall Hospitals NHS Trust (RCHT) and NHS Kernow Clinical Commissioning Group.
- ii. That a joint healthcare Sustainability Development Management Plan (Green Plan) is in development and will report within six months on actions to take forward.

## **COVID-19 update**

Kate Shields confirmed an increase in COVID-19 cases across the country and there are currently four cases at RCHT with one in ICU. Dr Iain Chorlton noted activity was also increasing at University Hospitals Plymouth (UHP) and at Torbay hospital. The pressures at UHP had led to a decision to pause elective care for patients who require an overnight stay in the hospital. Kate Shields confirmed that the message from Simon Stevens at NHS England and Improvement (NHSE/I) is for providers countrywide to maintain elective activity. John Govett acknowledged the expectation to maintain these services.

Rachel Wigglesworth advised that the current the rate of 20 – 30 COVID-19 cases per 100,000 has been identified through lab testing and that a lot of work had been undertaken to prevent further outbreaks. She also emphasised the importance of positive messaging about the accessibility to the health service at this time in order to prevent people from being dissuaded from accessing services.

Kate Shields provided reassurance that RCHT has worked hard to provide red and green areas at the hospital to protect patients. This is also the case in the community hospitals.

John Govett stated that this was a positive update and that he had felt assured with all the steps being taken.

## **Item PS2020/018 – Questions from members of the public**

No questions had been received in advance of the meeting.

## **Item PS2020/019 – Healthwatch Surveys and Learning from System Partners during COVID-19**

Amanda Stratford confirmed that during the summer two pieces of work were undertaken to engage with the public across Cornwall and Isles of Scilly (CIOS) regarding their experiences during and after COVID-19 and the consequences to their health and employment.

The first survey asked about health and social care during the pandemic. There were 1731 online responses of which 22% had been from carers.

The second survey related to co-production and public engagement. The aim was to try to identify public experience and how things had worked to co-produce a set of principles for consistent future public involvement work. The headline findings were similar to that of the Academic Health Science Network (AHSN) report.

Kate Kennally expressed thanks for the reports and the need to follow up on the issues raised regarding carers as their resilience is seen as one of the biggest potential threats during the next phase of COVID-19. She asked for this to be identified as a specific system risk.

Sally Turner and Rachel Wigglesworth expressed their thanks for this report and stated that some of the findings reiterated work of Health Education England (HEE) - to strengthen the social prescribing offer through engagement with the voluntary sector and primary care networks.

Meredith Teasdale acknowledged that she works closely with Amanda and emphasised it is important for the Senate and integrated care system (ICS) to consider how we are listening to children and young people and how our services should look like going forward.

Mairi McLean also acknowledged and thanked Healthwatch for this welcome piece of work and confirmed that she completely supported the comments made.

John Govett asked the Partnership Senate to consider the following and to have this at the heart of our thinking going forward.

1. People who are hard to reach – there is a diversity and equality issue around this.
2. Carers resilience and also the resilience of those being cared for who are increasingly aware of the load which is being put on those caring for them – these people may need support.

## **Item PS2020/020 – Integrated Care System (ICS) Update**

### **Transformation Director**

John Govett confirmed the appointment of Carolyn Andrews, System Transformation Director at NHS Kernow and the members congratulated her on her appointment.

### **System Lead/CCG Accountable Officer**

John Govett informed the Senate there had been slight adjustment to the candidate pack in term of expansion of some of the structure charts. The interviews for the role of System Lead/CCG Accountable Officer are planned for 26 November 2020.

## **System Communication Director**

There is ongoing work being undertaken prior to progressing the recruitment to this role.

## **Partnership Senate Terms of Reference**

The Senate approved the updated terms of reference.

## **Integrated Care System (ICS) accreditation submission**

John Govett confirmed the submission was considered exemplary by NHSE/I, especially in relation to its place-based approach. Phil Confue advised there is a check and challenge meeting tomorrow to understand if any further work is needed before the final submission. The outcome of the CIOS application should be known in early December.

Comments from Senate members shall be incorporated into the final submission. All agreed considerable progress had been made and we should look forward with confidence, accelerating plans to transform of health and care services.

Following an enquiry from Sally Hawken around where the responsibility to drive the citizen's part of the programme would sit, it was confirmed this would be a collective responsibility.

The Senate agreed to receive the ICS submission and to endorse the plan to become a thriving ICS.

## **Item PS2020/021 – Director of Public Health (DPH) Annual Report - 2019/20**

Rachel Wigglesworth presented the report. She explained it had been produced by her predecessor and was published during the summer 2020. She confirmed the report covers planetary health as well as the health of the population. It reflects climate change is important and if we put as much effort into addressing climate change as we did the COVID -19 pandemic, we would be on a strong footing for change. She referred to the 30 recommendations listed on page 6 of the report and particularly highlighted the opportunities for sustainable commissioning and how we can use commissioning procurement on our carbon footprint and how to support our workforce.

Dr Iain Chorlton commended this as an excellent report and noted that it had been produced with colleagues in Devon. He confirmed the report was reviewed at Governing Body the previous week with the pledges and recommendations accepted.

The Partnership Senate noted and welcomed this excellent DPH Report and supported the recommendations.

## Item PS2020/022 – System Vision and Objectives

Carolyn Andrews presented the system vision and objectives paper to the Senate. She advised there is still work to be undertaken and the objectives feature in the ICS application. She acknowledged the paper needs to be in an accessible and easy to understand format as it will be a public facing document for the CIOs health and care partnership.

Members agreed each objective should be SMART (specific, measurable, achievable, realistic and timely). The metrics will feed into both joint assurance committees covering quality as well as finance and performance.

John Yarnold supported the progress of this paper and hoped that by November 2020 SMART objectives are in place so that the performance dashboard can be built to track progress.

Mairi McLean also reiterated the issues raised regarding language and commended this as good piece of work demonstrating collaborative working and an opportunity to make changes and consider how to improve the system.

Amanda Stratford thanked Carolyn for her openness and willingness to look at what people have to say and welcomed the opportunity to work with colleagues across the system to develop the next iteration.

John Govett and Kate Kennally emphasised the need to move from planning in to delivery as soon as possible.

### **Action**

Following the System Board meeting in November 2020 the first set of performance metrics and SMART objectives will be presented at the January Senate prior to budgets and priorities being set for the Long Term Plan.

## Item PS2020/023 – Update from integrated care areas

JG welcomed representation of primary care network (PCN) colleagues on the Senate and relayed that NHSE/I had been pleased we are working so closely at a community level.

Dr Penny Atkinson provided a brief verbal update on the work within the ICAs and PCNs, highlighting key issues as follows:

- All practices are contributing to system escalation plans and flu vaccinations
- Key objectives are around care homes and early diagnosis
- Collaborating with the workforce cell to optimise the additional role investment scheme to employ more paramedics and social prescribers to contribute to multi-disciplinary team within PCNs

Dr Atkinson also referred to the Primary Care Development Programme and the fact that it forms the basis of place based care. Resource gaps have been identified and there is work to progress this, including reviewing the need for additional clinical leadership roles

John Yarnold advised that in terms of clinical leadership, some additional resource may be required and should form part of planning for the coming year; there needs to be clarity of objectives from ICAs and Programme Boards which are built into the overall planning for 2021/22

Helen Charlesworth-May confirmed she would welcome a conversation with Penny, as Accountable Officer of NHS Kernow, since there are clearly people within the CCG who might be able to support this work and, from her perspective, management support from NHS Kernow to PCNs is a priority as it is a core building block of the new Cornwall delivery model.

Dr Iain Chorlton acknowledged that due to operational pressures Penny is the only clinical person in attendance at the Senate today. There is a need to acknowledge we are still working within the structure of membership organisation within NHS Kernow and that as Chair of the CCG he is working with the clinical leads in the Governing Body on how this we reset and reflect on this. Dr Chorlton noted that the Senate has strong primary care influence with input from 7 GPs and clinicians. He emphasised the need for more work around wider clinical influence.

John Govett acknowledged the work of the PCNs and the need for time and capacity to contribute to solutions.

## **Action**

Dr Atkinson to provide feedback on the clinical leadership roles to the Senate.

## **Item PS2020/024– Recent Submissions**

- **NHS People Plan Submission**

Kerry Eldridge updated the Senate on the 20/21 People Plan which is an integrated health and social care plan with a focus on PCNs and ICAs to ensure that alignment to place based support across CIOS. The plan has received positive feedback from NHSE/I. Work is now commencing on developing a three year People Plan 2022 – 2024 and will be shared in due course.

Phil Confue acknowledged Kerry's input and commended this work and advised it ties in with the bid to increase nurse training across the Devon and Cornwall Peninsula.

Kate Kennally said the plan is clear and that she was happy to support it, enquiring what needs to be done to progress the integrated plan going forward. Kerry Eldridge explained here is currently a move towards greeted enhanced apprenticeship working and joint recruitment and training. It would be beneficial if all colleagues

could train together, to the same standard, regardless of the environment they work in.

Kate Shields referred to the funding for capital programmes focusing on deprived communities offering apprenticeships and reskilling people and it is hoped that when the new build at the hospital is complete these people can be retained thereby maximising opportunities for investment in Cornwall.

Phil Confue provided a brief update on the nursing apprenticeships and the robust business case for training an 150 – 200 extra nurses per year in Cornwall. There is significant interest and Health Education England (HEE) is looking at this model in other areas. The business case developed through Price Waterhouse Coopers is powerful and will be shared with MPs and the System Board.

Rachel Wigglesworth welcomed and offered to work with Kerry to progress this work and emphasised the need to use the workforce to increase skills in preventing illness.

- **Phase 3 Plan**

The Phase 3 Plan has been submitted and the system has agreed to meet the ambitious targets requested by NHSE/I. This work is very challenging and will require collaborative working as a whole system. The new models of care will need to be based on this premise and work will be undertaken with the residents of Cornwall to better understand what is important to them and how this can be developed and delivered.

Phil Confue confirmed he had been working with Jonathan Price from adult social care to look at a good health and care response in the community and for there to be good flow throughout the process. It is essential to be able to respond to demand and a key part of this phase is to ensure community services can respond and deliver what is needed rather than people being in an inappropriate environment for too long, such as a hospital or care home.

John Yarnold welcomed the opportunity to look at the implications for the financial plan at Senate in January. Clare Bryan confirmed that whilst we can be clear regarding the process, we will not have a revised plan by January 2021 due the imminent financial framework changes. Mr Yarnold suggested a closer look at our own plans on how to drive forward and what delivery might provide a helpful starting point.

## **Item PS2020/025 – System Finance Update**

Clare Bryan, System Finance Lead provided a brief update. She explained almost £40million has already been spent on the COVID-19 response and this is set to continue as we head to the end of the year. She stated, as already discussed, the development of the system objectives were an important part of the financial planning process and the long term plan strategy.

Dr Iain Chorlton highlighted the high level nature of this report and confirmed that we are a system in financial deficit and it must be acknowledged there is a need to shift and move resources as was mentioned by Dr Penny Atkinson earlier in this meeting.

Senate members noted the update and acknowledged the system is in financial deficit.

### **Item PS2020/026 - Devolution Update – “The Cornwall We Want”**

Jessie Hamshar provided a brief introduction to The Cornwall We Want Report explaining that as we emerged from lockdown there was a demand for change by the people of Cornwall.

A significant amount of work had been undertaken and public responses received and this work has included listening to the hard to reach people to ensure that everyone has had a voice in the report. Jessie expressed appreciation for the partnership working during informal discussions in the summer including NHS Kernow’s Executive Group, System Leaders and voluntary sector in shaping the vision of the report which is shared with the Senate today. It is an opportunity for further comments and input and for CIOS health and care partnership to endorse this as a shared vision for Cornwall’s Leadership Board when it meets on 11 December 2020.

Jessie Hamshar advised the vision for Cornwall’s future is supported by the devolution of powers and funding and she referred to Phil Confue having spoken of some of the proposals from system leaders which are very much in line with feedback from residents around jobs and opportunities such as the nursing programme.

The Senate endorsed the progress made as part of the Devolution update.

### **Item PS2020/027 – Senate Forward Plan Items – Chair/All**

JG suggested the following be included in terms of forward planning:

- Key performance metrics and SMART objectives will be a focus and if we become ICS accredited in December, it will be important to consider what the Long Term Plan will look like.
- Each partner will need to ensure that committees can be fed back into the system boards and Senate so that plans are prepared for delivery on 1 April 2021.

Consider the consequences in terms of sharing and our communication strategy that flows from becoming an accredited ICS.

## **Item PS2020/028 – Questions from member of the public relating to the agenda**

There were no questions asked by members of the public.

## **Item PS2020/029– Any Other Business and Reflections**

JG referred to Rachel Wigglesworth's equality work across system and asked whether the system partners were engaging and supporting with this work.

It was confirmed there are designated leads on all of the boards and they have started meeting as a regular group. Main participants are equality leads and they are aligning this to the ICS health and equalities work. At the moment it is making some progress but must sit under the established strategies and feeding in with the measurable objectives.

There being no other business the meeting closed 12:39

The next Partnership Senate Board Meeting is scheduled on 14 January 2020

### **Action**

RW to provide an update on the progress of the equality work across the system board at the Partnership Senate Board in January 2021.

## **Final copy for ratification**

Signed by the chair:

Date: 14 January 2021

## Attendees

- John Govett, independent chair, NHS Kernow Clinical Commissioning Group
- Helen Charlesworth-May, accountable officer and Cornwall Council strategic director for public health and care
- Mark Woolcock, chief executive officer, Kernow CIC
- Carolyn Andrews, system transformation director, NHS Kernow Clinical Commissioning Group
- Dr Iain Chorlton, chair NHS Kernow Clinical Commissioning Group
- Phil Confue, chief executive Cornwall Partnership, NHS Foundation Trust
- Kate Kennally, chief executive, Cornwall Council
- Kate Shields, chief executive, Royal Cornwall Hospitals NHS Trust
- Mairi McLean, chair Royal Cornwall Hospitals NHS Trust
- Cllr Adam Paynter, Cornwall Council
- Emma Ridgewell-Howard, CEO, Kernow LMC
- Amanda Stratford, chief executive, Cornwall Healthwatch
- Barbara Vann, chair Cornwall Partnership NHS Foundation Trust
- Cllr Sally Hawken, portfolio holder, children and wellbeing, Cornwall Council
- Thomas Lafferty, director of strategy and performance, Royal Cornwall Hospitals NHS Trust
- Meredith Teasdale, strategic director for children, schools and families, Cornwall Council
- Dr Will Hynds, chair Kernow LMC
- Clare Bryan, director of finance, NHS Kernow Clinical Commissioning Group
- Trudy Corsellis, deputy director of corporate governance, NHS Kernow Clinical Commissioning Group
- John Yarnold finance and performance joint assurance committee
- Sally Turner, citizens advisory panel, NHS Kernow Clinical Commissioning Group
- Margaret Schwarz, quality joint assurance committee
- David Smith, chair of Cornwall Partnership in Care
- Loraine Brennan, PA NHS Kernow Clinical Commissioning Group
- Penny Atkinson, Rosedean Surgery, GP lead, East Cornwall.
- Kerry Eldridge, director of people & organisational development, Royal Cornwall Hospitals NHS Trust
- Jessie Hamshar, strategy and engagement service director, Cornwall Council
- Helen Boardman, chief executive officer, Voluntary Sector Forum
- Lisa Harvey, service director childrens health and wellbeing, Cornwall
- Tracey Lee, ICS readiness programme director
- Joanne Hichens
- David Smith, chair of Cornwall Partners in Care

## Apologies

- Geoff Griffin, South Western Ambulance Service NHS Foundation Trust
- Thomas Lafferty, director of strategy and performance, Royal Cornwall Hospitals NHS Trust
- Dr James Tait, Helston Medical Centre
- Julie Dawson, deputy chief exec Cornwall Foundation NHS Partnership Trust