

PART 1
**KERNOW HEALTH CIC (the “Company”)
(Company No. 07551978)**
**Minutes of a meeting of the Board of Directors of the Company
held at 08:00 on Wednesday 24 February 2021
via Microsoft Teams Video-conferencing**

Present:	Name	
Executive Directors:	Dr Adam Ellery	Chair/ GP partner
	Dr Jonathan Katz	Medical Director
	Mr Mark Woolcock	CEO, Kernow Health CIC
	Ms Maria Harvey	Director of Integrated Community Care Services
	Mr Kieran Bignell	Director of Integrated Urgent Care Services
	Mrs Laura Wheeler	Director of Integrated Primary Care Services
	Mrs Tyra Fox	Director of Corporate Services (also taking minutes)
ICA Director and Deputy Representatives:	Dr Malcolm McKendrick	ICA Board Director Member representing North and East Cornwall/ GP partner
	Dr Andy May	ICA Board Director Member representing Central Cornwall/ PCN Clinical Director/ GP partner
	Dr Andrew Craze	ICA Board Director Member representing West Cornwall/ GP Partner
Non-Executive Directors:	Mr Stephen Holby	Non-Executive Director/ Managing Partner, Carn to Coast Health Centres
	Mr Gary Jennings	Independent Non-Executive Director
In Attendance	Ms Emma Ridgewell-Howard	CEO of Kernow LMC
	Jemma Ignaczak	Executive Assistant (observing)

CHAIRMAN

Dr Adam Ellery chaired the meeting throughout.

NOTICE AND QUORACY

The Chair reported that due notice of the meeting had been given to all directors and that the meeting was quorate. Accordingly, the Chair declared the meeting open.

2021/08	Apologies were received from:
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	<p>None</p> <p>Welcome from the Chair Dr Ellery welcomed Jemma Ignaczak, Executive Assistant, to the meeting as an observer. Ms Ignaczak would be taking over the administration duties for and on behalf of the Board over the coming months.</p>
2021/09	<p>Declaration of any New Interests / Conflicts of Interest for Part 1 Agenda items</p>
2021/09a	<p>Declarations of Interests Register Dr McKendrick reported that Port Isaac have joined Mounts Bay Medical Research Ltd.</p> <p>AGREED: The Board approved the latest version of the Declarations of Interest Register and all the additions made.</p> <p>ACTION: Mrs Fox to amend and update the Interests Register as appropriate</p>
2021/09b	<p>Conflicts of Interest for Part 1 Agenda Items AGREED: Each of the Directors confirmed that they had no direct or indirect interest in the business proposed to be transacted in <u>Part 1</u> of the Board meeting which they would be required to disclose in accordance with section 177 of the Companies Act 2006 and the Articles of Association of the Company.</p>
2021/09c	<p>Board attendance register The register was noted.</p>
2021/10	<p>Approval and ratification of Part 1 Board Minutes of the meeting held on 27 January 2021</p> <p>AGREED: Following a preview of the minutes by Dr Ellery, Mr Woolcock and Mr Holby, the Board approved and ratified the Part 1 minutes of the Board meeting held on the 27 January 2021 as a true and accurate record and signed by the Chair.</p> <p>ACTION: Mrs Fox to arrange for the ratified minutes from 27 January 2021 to be uploaded to the website.</p>
2021/10a	<p>Matters Arising and Action Grid from the Board minutes of the 27 January 2021 <u>The following actions were closed:</u> 2020/73 – committee structure. At a future Executive Team meeting different Directors from the Board would be invited to discuss specific topics.</p> <p>The action grid was updated and completed actions closed.</p> <p>There were no other matters arising from the meeting.</p>

<p>2021/11</p> <p>2021/11a</p> <p>2021/11b</p>	<p>Policies and updated Corporate Risk Register</p> <p>Policy Ratification Ms Harvey noted there was an error in the Performance Improvement (Capability) Policy, and therefore would bring this back to the Board in March for approval.</p> <p>ACTION: Ms Harvey to bring back the Performance Improvement (Capability) Policy to the next Board meeting for approval.</p> <p>Corporate Risk Register The Governance Committee met on 9 February and discussed the Risk Register in detail. The scores are a positive outlook across the organisation. Dr Ellery congratulated the team on getting KHCIC to an excellent position.</p> <p>Ms Harvey reassured the Board the closed risks are reviewed on a regular basis to ensure their scores have not changed.</p> <p>AGREED: The Board noted the updates on Corporate Risk Register</p>
<p>2021/12</p>	<p>Covid Mr Bignell gave a brief update on the Covid 19 situation. He commented that numbers are significantly reducing and overall the position is reasonably positive.</p>
<p>2021/13</p>	<p>Coordinate My Care (CMC) update <i>Mr Joe Francis joined the meeting at this point.</i></p> <p>Mr Francis introduced himself to the Board and explained he was the Chief Clinical Information Officer, appointed in July 2020 to oversee the delivery of the CMC programme. He also holds the position as Interim Clinical Lead for IUCS and has a background as an Advanced Paramedic. He has worked with the Training Hub and 111 but is currently focussed on the CMC roll out.</p> <p>CMC is a digital programme which is part of the digital shared care record agenda being endorsed by NHS Digital. CMC is a system accessed through usual clinical systems (EMIS, System1, Adastra) and it is utilised to perform advanced care planning which can then be shared across the system.</p> <p>It was rolled out across London and has been an effective way to improve system flow, improving community working and reducing hospital admissions.</p> <p>CMC was procured after a request of the healthcare system a couple of years ago via a contract through the CCG. The project was delayed due to funding. KHCIC is the host of this project and was asked to roll the platform out across the system.</p> <p>A full governance structure has been set up with five workstreams which look at all aspects of the project. A Project Manager to work across the system was recruited in January 2021.</p>

The information flows from the workstreams to the CCG then to the Project Steering Group, with all stakeholders at that meeting. The accountability for this project falls under the UEC Board.

Mr Francis reported good progress so far, with communications continuing with the GPs. An expression of interest form has been circulated to practices asking for 'early adopters' of the system. East PCN are on board with the project already, and case studies will be built following the early adoption work.

Members of the practice would be trained on the system to complete the care plans.

The current issues are related to the Covid vaccination roll out, which is causing a lack of resilience across the system and Primary Care. There has been push back from the LMC around GP workload, but Mr Francis reiterated to the Board this is a system ask, and not something KHCIC are 'pushing'. This has also been communicated to the LMC.

Mr Woolcock confirmed that the project was a system ask, and KHCIC are hosting that project and delivering it.

Mr Francis also asked the Board to consider if they, or a practice they work closely with, would consider being an early adopter.

Dr Craze had expressed interest on behalf of his PCN. He asked if the platform was just a palliative care function at the moment. Mr Francis explained it is an urgent care record facility and is being used in that way in London, and therefore is not just for use as a palliative care record. However, it is currently being rolled out as a palliative care record due to lack of time and resources across Primary Care.

Dr May confirmed that the IUCS signed up to this when the bid was submitted to win the contract in 2017. From a GP perspective the issue is around the narrative to practices on why we are doing this. Dr May stated it is around driving the quality agenda, it will increase the quality around palliative care, and should reduce the workload within Primary Care. It needs to be articulated that by using the CMC platform, it will reduce the number of forms GPs need to complete for each patient...therefore saving time.

He further commented that if CMC is being rolled out it should be done in one 'hit' so that clinicians across the system are not trying to access patient data in many different places.

There is potential traction with the GP colleagues around a mass start and should be pushed up the quality agenda.

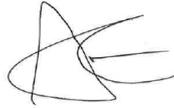
Mr Holby commented that it would be important to ensure that LMC were fully in support of the terms upon which practices were asked to adopt the platform

	<p>as otherwise KHCIC shareholders might misconstrue, or react negatively to, the Company's championing of it.</p> <p>Ms Ridgewell-Howard commented that CMC was discussed in 2018 and all agreed it was a good idea as a direction of travel. The CCG however does not want CMC to be an enhanced service (as it is in London) and therefore would be putting extra work onto GPs with no additional resource. Some aspects may fit within the DES, but there isn't enough information on what it will look like at the moment, which the pilot will hopefully highlight.</p> <p>Dr Ellery thanked Mr Francis for his time.</p> <p><i>Mr Francis left the meeting.</i></p> <p>There was no further business discussed in Part 1.</p>
	<p>END OF PART 1</p>

AGREED/ DECISIONS:

1. The Board approved the latest version of the Declarations of Interest Register and all the additions and amendments made.
2. Each of the Directors confirmed that they had no direct or indirect interest in the business proposed to be transacted in Part 1 of the Board meeting which they would be required to disclose in accordance with section 177 of the Companies Act 2006 and the Articles of Association of the Company.
3. Following a preview of the minutes by Dr Ellery, Mr Woolcock and Mr Holby and the amendment above, the Board approved and ratified the Part 1 minutes of the Board meeting held on the 27 January 2021 as a true and accurate record and signed by the Chair.
4. The Board noted the updates on the Corporate Risk Register.

FINAL COPY - RATIFIED



Signed by the Chair:

Dated: 24 March 2021