

## 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 May 2023 via Microsoft Teams Video-conferencing

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| <b>Present:</b>                                 | <b>Name</b>                     |  |
| <b>Executive Directors:</b>                     | <b>Dr Andrew Craze</b>          | Chairman   |
|   | <b>Dr Jonathan Katz</b>         | Interim CEO/Medical Director   |
|   | <b>Mrs Laura Wheeler</b>        | Director of Integrated Primary Care Services   |
|   | <b>Ms Maria Harvey</b>          | Director of Integrated Community Care Services   |
|   | <b>Mr Kieran Bignell</b>        | Director of IUCS   |
| <b>ICA Director and Deputy Representatives:</b> | <b>Dr Andy May</b>              | ICA Board Director Member representing Central Cornwall/ PCN Clinical Director/ GP partner |
| <b>Non-Executive Directors:</b>                 | <b>Mr Stephen Holby</b>         | Non-Executive Director/ Managing Partner, Carn to Coast Health Centres                     |
|   | <b>Mr Gary Jennings</b>         | Independent Non-Executive Director   |
| <b>In Attendance</b>                            | <b>Ms Emma Ridgewell-Howard</b> | CEO of Kernow LMC  |
|   | <b>Mrs Jemma Ignaczak</b>       | Executive Assistant (Minute Taking)  |
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#### CHAIRMAN

Dr Andrew Craze 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.

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| 2023/81 | <b>Apologies</b>  |
|         | Apologies were received from Dr Cowan and Dr Barnes.                                    |
| 2023/82 | <b>Declaration of any New Interests / Conflicts of Interest for Part 1 Agenda items</b> |
|         | There were no new interests to declare.   |

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| 2023/83 | <b>Declarations of Interests Register</b><br>The Declarations of Interests Register was noted.   |
| 2023/84 | <b>Conflicts of Interest for Part 1 Agenda Items</b><br><b>AGREED:</b> 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.  |
| 2023/85 | <b>Board Attendance Register</b><br>The register was noted.  |
| 2023/86 | <b>Approval and ratification of Part 1 Board Minutes of the meeting held on 26 April 2023</b><br><b>AGREED:</b> Following a preview of the minutes by Dr Katz, Dr Craze and Mr Holby, the Board approved and ratified the Part 1 minutes of the Board meeting held on the 26 April 2023, as a true and accurate record and signed by the Chair.  |
| 2023/87 | <b>Matters Arising and Action Grid from the Board minutes of the 26 April 2023</b><br>2023/71 Ms Harvey to discuss the points raised regarding the Mobile IT Security Policy with Mr Ball and arrange for the amended policy to come back to Board for ratification.<br>Completed. Close.  |
| 2023/88 | <b>General Business Update</b><br><p>Ms Harvey noted that a surgery had handed in their 3 months' notice for the SAS contract. A funding opportunity email had been issued out to practices to join the scheme. The existing practices were interested in taking on the additional patients and a new practice in the West had responded to the email, however, there were patients based in the North that required a practice.</p> <p>The Devon school immunisation service was in mobilisation and a call had been scheduled with senior managers, Ms Harvey, and Angie Cavanagh to go through the significant changes that would be made to the service. The go live date is 1<sup>st</sup> August 2023. Ms Harvey added that the tender for the Cornwall school immunisations contract is due to be published on 24<sup>th</sup> May 2023.</p> <p>Mrs Wheeler commented that the GP recruitment event is being held today at Hotel Bristol in Newquay. 57 attendees are registered, and it is hoped that additional people would also attend. This year a lot of social media and paid for advertising had been used.</p> |

The menopause advice line had gone live, and statistics will be brought to a future meeting. The Practice Manager apprenticeship course has launched and will be the first of its kind in the country, the course will begin in September in conjunction with Truro & Penwith College.

Mrs Wheeler noted that Excellence in Practice had received an additional grant for the continuation of the Carclaze housing development work. Cornwall Council had been pleased with the work completed to date. An additional £100k has also been received to further the estates toolkit work.

Mrs Wheeler has been supporting Health Education England with workforce planning for the 7 ICS systems. Cornwall had not used the funding yet and Mrs Wheeler suggested that it could be used to fund someone to complete placed based planning. This would be presented to North, West and East to seek approval. Mrs Wheeler added that she had been invited to the System People Committee and this was the first time anyone had been invited to represent General Practice.

Mrs Wheeler noted that the Collaborative Board was now up and running with Dr Beth McCarron currently Chair. The next meeting will focus on demand and capacity. Pam Smith would provide program management support to the Board as this would be more cost effective.

Dr Craze queried whether the estates toolkit had been good for Cornwall.

Mrs Wheeler replied that it had been mixed, the first part was mainly information gathering but part 2 would now move that forward. The estates toolkit was a national programme.

Mr Holby queried whether there was the distant prospect of an end product. Mrs Wheeler hoped that there will be and that had been the aim of taking over the piece of work for Cornwall to ensure there was more control over the end product. Being a national programme, it was hard to know what the planned outcome will be.

Mr Holby asked what Mrs Wheeler meant by making it work for Cornwall.

Mrs Wheeler replied that it was about reaching agreement across multiple sector estates around assets.

Dr May noted that it had a big political spin attached and ultimately CHP would line their pockets. From a Collaborative Board perspective, it would be good to talk with PCNs to investigate how many clinicians they did not have rooms for. This should be tied in with new housing developments and then the information handed over to the ICB as a neat package. The ICB's narrative was care at place and this would detail what they needed to put in place.

Ms Ridgewell-Howard replied that the LMC can hold the ICB to account as the situation was now known. There was a focused Collaborative Board piece where the ICB could come and explain what they are going to do about the known issues. They have resource and an estates strategic director function.

Dr May replied in terms of presentation it had been really clear what the need was. Once the issues were presented to the ICB they needed to outline their plan and timescale. Dr May added that this should be challenged centrally at the ICB meetings also.

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|         | <p>Mr Bignell noted that the relationship with HUC continued to be good. There had been national challenge around the call abandonment rate which had led to a more forensic breakdown. There was 90 seconds of national advice prior to the call being connected and the KPI measured abandonment before and after 30 seconds, therefore patients may not even be making it through to Cornwall 111.</p> <p>Mr Bignell noted that there had been an executive-to-executive meeting with CFT, requested by their chair to open conversations around challenges and improvements going forward and to build trust between the organisations. Actions had arisen to work with them to support community nursing. Mr Bignell would be meeting with Tamsyn Anderson to begin scoping this piece of work.</p> <p>Mr Bignell noted that a number of staff had been nominated for the NHS 75 at Westminster Abbey and Kernow Health were leading the statistics in the admission avoidance department.</p> <p>Following Mr Bignell speaking at a recent conference there had been numerous approaches from organisations to incorporate ChatGPT into the healthcare sector. Mr Bignell had been approached by the CCIO of Microsoft and by Swansea University who had started to look at the AI bot.</p> <p>The final stages of preparation were underway for the Royal Cornwall Show which would include engagement activities, look at wellbeing and promote school immunisations. Mr Bignell added that feedback received the previous year had been taken into consideration and any freebies with Kernow Health branding would be in line with the green plan.</p> |
| 2023/89 | <p><b>System Updates</b></p> <p>Dr May noted that the Central ICA had met the previous week. The level of resource allocation to developing ICAs and care was disappointing. Dr May added that Primary Care could not afford the Agenda for Change (AfC) pay rises and the extra bonus on top. Practices were facing a situation where they would need to fall off the Agenda and if the ICB wanted to support the community and primary care to properly pay its staff then it could not fund one part of the system and not the other. With an absence of equality across the system, staff would leave one area for the other.</p> <p>Mr Holby commented that Kernow Health, in its representative capacity for GP practices, should be concerned about any practices which had committed themselves to paying AfC rates. As reimbursement for 'additional roles' was linked to AfC, some PCN's had agreed to pay at stated 'bands' and would be open to challenge from practice staff who were not.</p> <p>Dr Craze noted that PCNs were having to use these pay rates to bring in new staff.</p> <p>Mr Holby made the distinction between benchmarking to AfC and actually committing to the rates it specified.</p> <p>Mr Bignell noted that he had raised the Agenda for Change paper as an issue with the Finance Director at RCHT and queried whether a similar thing had</p>   |

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|         | <p>been done for general practice. There was a need to formally recognise the risk.</p> <p>Ms Ridgewell-Howard replied that there had been nothing specific yet. Nationally, this was a huge issue and was part of the inflationary aspect of things and a primary reason why this year's national contract had been rejected. It was not clear if the ICB fully understood the risk. From a Collaborative Board perspective this needed to be discussed further. The practices were additionally getting themselves into hot water over the ARRS roles as full reflection of actual cost had not been factored in.</p>   |
| 2023/90 | <p><b>Regulatory Reports</b></p> <p><b>CQC</b><br/>All routine for CQC.</p> <p><b>EPRR</b><br/>Nothing to report.</p> <p><b>Home Office</b><br/>Nothing to report.</p>  |
| 2023/91 | <p><b>Corporate Risk Register for ratification, approved by the Governance Committee:</b></p> <p><b>Corporate Risk Register</b><br/>Ms Harvey noted that risk KH47 Agenda for Change had been added. This was discussed at the last Governance Committee and would affect the CEDS, school immunisations and IUCS nurses. This will be raised at contract meetings.</p> <p>Mr Holby noted that it would be useful via the Governance Committee minutes to have some understanding of the rationale behind the scorings on the risk register. They did not always seem obvious when risks were compared to one another, the minutes stated that the risk would be added to the register but did not say why or show any of the discussion around the impact.</p> <p>Ms Harvey replied that there was a policy detailing how risk scoring was set. Ms Harvey was happy to add this to the next meeting.</p> <p>Mr Holby queried the impact on what and or whom. The risk associated with NHS Pensions appeared at one time to threaten the viability of the Company the whole company to go bust and was scored a 5 and the ambulance delays were rated the same but would not have the same impact on Kernow Health.</p> <p>Ms Harvey replied that she would pull out the scoring policy as a separate meeting was held to review them.</p> <p>Dr Craze noted that it was one of those things that was subjective no matter how much the aim was to make them objective.</p> <p>Mr Holby noted that scoring appeared to be based on criteria which were not commensurable.</p> <p>Dr Craze replied that it was important to recognise the risks more than the score.</p> |

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|         | <p>Mr Bignell commented that the risks were defined as corporate, patient population or service. It may be worth reviewing the corporate risk register and Mr Bignell would speak with Ms Harvey regarding this.</p> <p>Mr Jennings suggested splitting the register into subheadings; corporate, system and clinical.</p>   |
| 2023/92 | <p><b>Policy Ratification</b></p> <p>Management of Violence Aggression (Zero Tolerance) Policy</p> <p>Mr Holby noted that, as calling the police was a notifiable event for CQC, consideration needed to be given to that in this policy.</p> <p><b>AGREED:</b> Subject to the consideration suggested above, the Board agreed for the Management of Violence Aggression (Zero Tolerance) Policy to be ratified.</p> |
| 2023/93 | <p><b>Board Chairperson</b></p> <p><i>Dr Craze left the meeting at this point.</i></p> <p>The Board were asked to submit their vote on keeping the current Chairman in position for another year.</p> <p><b>AGREED:</b> The Board agreed for Dr Craze to remain in post as the Chairman.</p> <p><i>Dr Craze returned to the meeting at this point.</i></p>   |
| 2023/94 | <p><b>Any Other Business</b></p> <p>There was no other business.</p>   |
|         | END OF PART 1  |

#### **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 Katz, Dr Craze and Mr Holby, the Board approved and ratified the Part 1 minutes of the Board meeting held on the 26 April 2023, as a true and accurate record and signed by the Chair.
4. Subject to the consideration suggested above, the Board agreed for the Management of Violence Aggression (Zero Tolerance) Policy to be ratified.

5. The Board agreed for Dr Craze to remain in post as the Chairman.

**FINAL COPY – RATIFIED**

Signed by the Chair:



Dated: 05 July 2023