

**COUNCIL OF MEMBERS  
ANNUAL GENERAL MEETING 2020/21**

**Wednesday 22 September 2021  
1.00pm – 1.30pm**

**THE MEETING WILL TAKE PLACE BY ZOOM**

**This meeting would normally be held in public however, due to the Covid-19 Pandemic, the CCG will be live streaming the meeting via its Facebook page. The video will then subsequently be saved on the CCG's website.**

**AGENDA**

<b>Item No</b>	<b>Item</b>	<b>Time</b>	<b>Format</b>
COMAGM/ 21/01	<b>Apologies for absence</b> – <i>received from the following:</i>  <i>Stewart Findlay, Chief Officer, County Durham CCG</i> <i>Michael Smith, Claypath and University Medical Group</i> <i>Lynne Trainor, Coxhoe Medical Practice</i> <i>Robert Carter, Barnard Castle Surgery</i> <i>Aileen Walton, Hallgarth Surgery</i> <i>Lesley Hunter, The Medical Group</i>	1:00	Verbal
COMAGM/ 21/02	<b>Welcome and Introduction</b> <i>Jonathan Smith, Clinical Chair</i>	1.01	Verbal
COMAGM/ 21/03	<b>Minutes and matters arising from the Annual General Meeting held on 24 September 2020</b> <i>Jonathan Smith, Clinical Chair</i>	1.02	Attached
<b>Items for Decision / Discussion</b>			
COMAGM/ 21/04	<b>Annual Report and Annual Accounts 2020 - 2021 for County Durham CCG</b> <i>This will include a presentation looking back over 20/21 and looking forward to 21/22</i>  <i>Richard Henderson, Chief Finance Officer,</i> <i>Dr Neil O'Brien, Accountable Officer</i>  <b><i>The annual report is available via the weblink below:</i></b>	1.05	Presentation (to follow) and Link

	<a href="http://countydurhamccg.nhs.uk">Annual reports (countydurhamccg.nhs.uk)</a>		
COMAGM/ 21/05	<b>Closing remarks</b> <i>Jonathan Smith, Clinical Chair</i>	1.25	<i>Verbal</i>
	<b><i>The meeting will be followed by a meeting of the Council of Members which will be held in private.</i></b>		

Chair: Dr Jonathan Smith [jonathansmith.ddes@nhs.net](mailto:jonathansmith.ddes@nhs.net)

Deputy Chair Rushi Mudalagiri [r.mudalagiri@nhs.net](mailto:r.mudalagiri@nhs.net)

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#### **COUNCIL OF MEMBERS MEMBERSHIP**

##### **Voting members:**

Chair

Member practice representatives (Clinical and Non Clinical – GP representative from each member practice or their nominated deputy)

##### **In Attendance (Non Voting Members):**

<i>Dr Neil O'Brien</i>	<i>Accountable Officer</i>
<i>Dr Stewart Findlay</i>	<i>Chief Officer</i>
<i>Nicola Bailey</i>	<i>Chief Officer</i>
<i>Richard Henderson</i>	<i>Chief Finance Officer</i>
<i>Sarah Burns</i>	<i>Joint Head of Integrated Strategic Commissioning</i>
<i>Dr James Carlton</i>	<i>Medical Director</i>
<i>Dr Ian Davidson</i>	<i>Medical Director</i>
<i>Anne Greenley</i>	<i>Director of Nursing and Quality (Interim)</i>
<i>Joseph Chandy</i>	<i>Director of Commissioning Strategy and Delivery (Primary Care)</i>
<i>Mike Brierley</i>	<i>Director of Commissioning Strategy and Delivery (MH/LD and Digital)</i>
<i>Diane Murphy</i>	<i>Director of Commissioning and Delivery (Continuing Healthcare)</i>

##### **Quoracy:**

*Meetings of the Council of Members will be quorate when there is a minimum of half of all members present, with the exception of the provisions for a vote of no confidence outlined in 2.3 of the CCG Standing Orders (below)*

*'To call a vote of no confidence at least 55% of member practices must agree there is a need to convene an extraordinary meeting of the Council of Members to consider a vote of no-confidence. A 70% majority of all member practices must be in agreement for a vote of no confidence to be carried in order than an elected member is removed from office'*

**COUNCIL OF MEMBERS**  
**ANNUAL GENERAL MEETING 2019/20**  
**1.00pm**  
**Thursday 24 September 2020**  
**Dial in via Microsoft Teams**

**Due to the exceptional circumstances linked to the  
Coronavirus this meeting was not held in public**

**UNCONFIRMED MINUTES**

ITEM NO		ACTION
COMAGM/ 20/01	<p><b>APOLOGIES FOR ABSENCE</b></p> <p>Apologies were noted from: Margaret Ross, Marlborough Surgery Sarah Leese, Middle Chare Medical Group Suzanne Kay-Worrall, Ferryhill and Chilton Medical Practice April Futter, Woodview Medical Practice Bev Barratt, St Andrews's Medical Practice David Anderson, William Brown Centre Victoria Reed, Chastleton Medical Group</p>	
COMAGM/ 20/02	<p><b>WELCOME AND INTRODUCTION</b> <i>Jonathan Smith, Clinical Chair</i></p> <p>The Clinical Chair welcomed everyone to the meeting. It was explained that the Annual General Meeting (AGM) would ordinarily be held in public but due to Covid 19 it was not possible. Members were advised the meeting was being recorded for internal purposes only. Members were reminded to record their attendance for the Local Incentive Scheme (LIS) in the chat.</p> <p>Feisal Jassat, Lay Member for Patient and Public Engagement, was welcomed to the meeting as an observer.</p>	
<b>ITEMS FOR DECISION/DISCUSSION</b>		
COMAGM/ 20/03	<p><b>Annual Report and Annual Accounts 2019 - 2020 for predecessor CCGs</b> <b>Durham Dales, Easington and Sedgefield CCG, and North Durham CCG</b> <i>Dr Neil O'Brien, Accountable Officer, County Durham CCG</i></p> <p>Members were advised that the presentation had been shared prior to the meeting and were reminded that it was a requirement of the AGM that a review should be given about the previous year. It was explained that the review would be for the two predecessor CCGs, Durham Dales Easington and Sedgefield</p>	

CCG (DDES) and North Durham CCG and would include the final annual accounts and reports.

Members were given an overview of the following from the presentation:

- The merger of Durham Dales Easington and Sedgefield CCG and North Durham CCG had taken place. County Durham CCG commenced on 1 April 2020,
- The CCG was working as part of the Integrated Care System (ICS) and Integrated Care Partnership (ICP) and integration was progressing with the local authority and the Trusts. The Mental Health Partnership was also working across County Durham. The County Durham place based commissioning plan had been to Governing Body,
- Primary Care Networks (PCNs) had been established across County Durham and had all responded well to the Co-vid pandemic,
- Public engagement had continued throughout 2019/20,
- The stroke rehabilitation consultation was started but was stopped due to concerns about the clinical model. From this came additional investment into therapies in the community and the maintenance of services at Bishop Auckland Hospital,
- The consultation about Shotley Bridge hospital was paused due to Co-vid. The Health Secretary, Matt Hancock, had visited the hospital recently to hear about the plans. The consultation will start again in 2021,
- Consultation work was carried out on rheumatology and ophthalmology and resulted in improvements to the clinical models,
- Constitutional targets were challenging pre Co-vid and action plans for improvement were challenged further by Co-vid,
- Key priorities and successes had been achieved during 2019/20,
- Care navigation was well underway and there were ongoing changes with children and young people's mental health,
- Work was carried out on the Learning Disability Mortality Review (LeDeR) programme and also on medication for people with learning disabilities and autism,
- A new pathway for Musculoskeletal Medicine (MSK) was developed,
- A Special Educational Needs and Disabilities (SEND) review was completed and the CQC was pleased with the improvements across County Durham,
- Developments were made for enhanced perinatal mental health services,
- DDES CCG and North Durham CCG both had an in year surplus and were in a strong financial position at the end of the financial year,
- The independent auditor (Ernst Young LLP) had completed their audit work with no significant issues and unqualified opinions were given for all areas. The Audit Committees did not raise any concerns about how the CCGs had managed resources.

No questions were asked by members about the review of 2019/20.

The priorities for 2020/21 were explained:

- Co-vid work was on-going and collaborative work was taking place with all NHS partners across the ICP and ICS to restore NHS services and to get activity for planned care back to pre Co-vid levels,
- As many services as possible will be re-started but the recent rise in Co-vid may affect services and elective capacity may be compromised,
- Flu - winter planning and the flu vaccination programme was underway with new innovative ways and flu clinics. Support will be provided to primary care from local flu groups and the CCG,

	<ul style="list-style-type: none"> <li>• New ways of working as a result of Covid - such as voice and telephone consultations and the uptake of advice and guidance need to be embedded further to improve patient outcomes,</li> <li>• Integration across the ICP and ICS will develop further. The joining up of health and social care across County Durham will be the best outcome for patients,</li> <li>• PCNs had worked well and performed above what was expected from the Direct Enhanced Services (DES). The CCG will continue to support them,</li> <li>• Learning disability health checks - are now part of the LIS and have been included in the PCN DES. Practices should ensure that as many are completed as possible,</li> <li>• Improvements are underway to improve autism diagnostic wait times,</li> <li>• Cancer – work is needed to look at how to improve cancer performance whilst living with Co-vid,</li> <li>• Primary Care Resilience – the CCG will continue to engage and work with practices and PCNs,</li> <li>• Commissioning – there will be a shift of care from acute to community / primary care,</li> <li>• Constitutional standards – some improvements are still required and collaboration across the ICS will be important to get performance metrics back on track.</li> </ul> <p><i>The annual reports are available via the weblink below:</i>  <a href="https://countydurhamccg.nhs.uk/documents/annual-reports/">https://countydurhamccg.nhs.uk/documents/annual-reports/</a></p>	
COMAGM/ 20/04	<p><b>CLOSING REMARKS</b>  <i>Jonathan Smith, Clinical Chair</i></p> <p>Members were thanked for attending the meeting and were advised that a Council of Members meeting would follow immediately after the AGM.</p> <p>The Accountable Officer informed members that there would be a focus on cancer and capital funding would be available from NHSE to help improve diagnostic capacity. A cancer hub for County Durham had not yet been identified. Bids had been made for funding to improve cancer performance and this would cover treatment as well as two week wait performance.</p>	
	<p><b>Next AGM Meeting:</b></p> <p>The next Annual General Meeting for County Durham CCG will be held in June 2021.</p>	