

Meeting title: Transformation Board	Date: 12 th March 2020
Time: 10.00 – 12.00 Attendees: See overleaf	Venue: Trevithick Meeting Room, Sedgemoor Centre, St Austell, PL25 5AS

Agenda No	Item description	Objectives/ Desired outcomes	Process	Item presenter	Time
1.	Welcome and apologies	Information	Verbal	Chair	10.00 – 10.05
2.	Questions from the public received in advance of the meeting	Discussion	Verbal	Chair	10.05 – 10.15
3.	Minutes and matters arising from the last meeting <ul style="list-style-type: none"> • Plus Covid-19 update 	Information	Appendix 1	Chair Steve Brown	10.15 – 10.25
4.	Declaring a system climate change emergency	Decision	Appendix 2	Kate Kennally	10.25 – 10.35
5.	CloS revised system governance arrangements including proposed terms of reference for Transformation Board	Decision	Appendix 3	Independent Chair of CloS Health & Care STP	10.35 – 10.45
6.	2019/20 System objectives and system board updates	UPDATE: Scrutiny of 2019/20 performance and indicative 2020/21 plans – by exception	Appendix 4	Chairs of system board meetings to respond to questions	10.55 – 11.20
7.	2019/20 System financial position - update for current year	UPDATE: NHS and Council Plans – 2019/20	Appendix 5	System Finance Director	11.20 – 11.30
8.	Strategic plans <ul style="list-style-type: none"> • Health and wellbeing strategy • Council Business Plans • Long Term Plan (LTP) narrative 	UPDATE: Overview of key priorities for 2020/21	Appendix 6	Iain Chorlton (vice chair of health and wellbeing board) Kate Kennally Jackie Pendleton	11.30 – 11.45
9.	Forward plan	Plan of future reports	Verbal	All	11.45 – 11.50
10.	Next steps and close	Information	Verbal	Chair	11.50 – 12.00

Date of Future meetings	Time	Venue
18 th June 2020 September 2020 December 2020 March 2021	10.30 – 12.30	June meeting – Sedgemoor Centre, St Austell Other dates and venues to be confirmed in due course.

Transformation Board Members: for 12th March 2020

John Govett	CloS Health & Care STP Independent Chair
Kate Kennally	Chief Executive, Cornwall Council
Kevin Baber	Chief Operating Officer, Plymouth Hospitals NHS Trust
Clare Bryan	System Finance Director, NHS Kernow Clinical Commissioning Group
Tim Bishop	Executive Director for Operations, SWAST Representative
Helen Charlesworth-May	Strategic Director for Adult Social Care and Health, Cornwall Council
Dr Iain Chorlton	Chair, NHS Kernow Clinical Commissioning Group
Phil Confue	Chief Executive, Cornwall Partnership Foundation NHS Trust
Luke Culverwell	Chief Operating Officer, Specialised Commissioning – NHSE South
Cllr Adrian Davis	Council of the Isles of Scilly
Meredith Teasdale	Strategic Director for Children, Schools and Families, Cornwall Council
Dr Adam Ellery	Chair, Kernow Health Community Interest Company
Cllr Sally Hawken	Portfolio Holder, Children & Wellbeing, Cornwall Council
Dr Will Hynds	Chair, Cornwall and Isles of Scilly Local Medical Committee
Mark Boden	Chief Executive, Council of the Isles of Scilly
Dr Mairi Mclean	Chair, Royal Cornwall Hospitals NHS Trust
Jackie Pendleton	Chief Officer, NHS Kernow Clinical Commissioning Group
Christina Quinn	Director, NHS South West Leadership Academy
Cllr Rob Rotchell	Portfolio Holder, Adults, Cornwall Council
Kate Shields	Chief Executive, Royal Cornwall Hospital
Amanda Stratford	Chief Executive, Healthwatch Cornwall
Dr Barbara Vann	Chair, Cornwall Partnership Foundation NHS Trust
Trudy Corsellis	Deputy Director of Corporate Governance, NHS Kernow CCG



Minutes

Transformation Board Meeting in Public

Minutes of the meeting held on 15th August 2019, 10.30 – 12.30pm in Conference Room, Carew House, Dunmere Road, Bodmin

Present:

(KK) Kate Kennally (Chair)	Chief Executive, Cornwall Council
(TA) Tamsyn Anderson	Clinical Advisor & Chair of Clinical Practitioner Cabinet
(MB) Mark Boden	Chief Executive, Isles of Scilly Council
(SB) Steve Brown	Service Director, Wellbeing and Public Health, Cornwall Council
(HCM) Helen Charlesworth-May	Strategic Director, Adult Social Care and Health, Cornwall Council
(IC) Iain Chorlton	Chair, NHS Kernow
(PC) Phil Confue	Chief Executive, Cornwall Partnership NHS Foundation Trust
(TL) Tracey Lee	Programme Director
(RR) Cllr Rob Rotchell	Portfolio Holder, Adults, Cornwall Council
(KS) Karl Simkins	System Director of Finance
(BV) Dr Barbara Vann (Chair)	Chair, Cornwall Partnership NHS Foundation Trust

In attendance:

(CB) Clare Bryan	Director of Finance, NHS Kernow (also representing Jackie Pendleton)
(AC) Alison Cook	Service Director, Children's Health and Wellbeing, Cornwall Council (representing Trevor Doughty)
(TC) Trudy Corsellis	Deputy Director of Corporate Governance, NHS Kernow
(KK) Karen Kay	System Director for Urgent and Emergency care for Cornwall and Isles of Scilly
(NS) Natalie Swan	Health Watch Cornwall
(WV) Wendy Vincent	Senior Administrator, STP Cornwall and Isles of Scilly

Apologies:

Kevin Baber	Chief Operating Officer, University Hospitals Plymouth NHS Trust
Tim Bishop	Executive Director of IM&T, South Western Ambulance Service
Trevor Doughty	Strategic Director, Children, Families & Adults, Cornwall Council
Adrian Davis	Lead Member for Adults, Council of the Isles of Scilly
Amanda Fisk	Director of Assurance & Delivery, NHSE (South West)
Cllr Sally Hawken	Portfolio Holder, Children and Wellbeing, Cornwall Council
Mairi McLean	Chair, Royal Cornwall Hospitals NHS Trust
Jackie Pendleton	Chief Officer, Kernow CCG
Christina Quinn	Director, NHS SW Leadership Academy
Kate Shields	Chief Executive, Royal Cornwall Hospitals NHS Trust
Amanda Stratford	Chief Executive, Cornwall Healthwatch

Agenda No	Item discussion	Action No	Action By
1.	Apologies for Absence Apologies were noted as shown above.		

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2.	<p>Public Questions</p> <p>On this occasion there were no questions from the public.</p>		
3.	<p>Minutes of Previous Meeting – 9th May 2019</p> <p>The minutes were agreed as a correct record of the meeting.</p> <p>Action Log Updates</p> <p>A67 It was agreed to close this action, noting the Long Term Plan is to be a standing item on the Transformation Board agenda. Action: The November meeting to be bought forward to accommodate the Long Term Plan being signed off.</p> <p>A68 PC provided assurance that Ethna McCarthy has taken responsibility for this action. It was agreed that this action be closed</p> <p>A71 This action is closed. KK confirmed the right plans are in place to mitigate risk. Work is taking place with the integrated care areas ahead of the winter months.</p> <p>A77 Closed. New guidance has been issued relating to NHS Property Services. The Isles of Scilly Business Case should be ready in a month's time. Action: KK requested that information be shared with the Transformation Board and System Leaders Board.</p> <p>A78 Closed. TC confirmed that the Business Intelligence teams are looking at strengthening the reports for the system boards. KK explained that there is a requirement to understand the spikes in the system so there is a benchmark when reporting.</p>	<p>A84</p> <p>A85</p>	<p>WV</p> <p>MB</p>
4.	<p>System Operational Plan 2019/20</p> <p>Prevention</p> <p>Steve Brown highlighted the following areas:</p> <ul style="list-style-type: none"> • Joint development of a European Social Fund Work, Health and Wellbeing Programme in Cornwall to support employment of people with health conditions and disabilities • National Diabetes Prevention programme recommissioned, new provider for Cornwall is Weight Watchers. • Green Paper published 'Advancing our health: prevention in the 2020's set national framework for prevention • Need for longer term joint commitments to investing in prevention as part of LTP <p>Action: SB will provide the link to the Green paper and welcomes any comments from members before 14th October 2019.</p> <p>Along with the Weight Watchers(WW) programme NHS Kernow has commissioned Improving Access to Psychological Therapies (IAPT) services as well for people living with diabetes. This additional</p>	A86	SB

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	<p>support helps this cohort of people control their illness. KK concluded this item with a reminder of the wider determinants of health, KK has requested the Public Health advise of any European Structural Funds as this may impact on health programmes after the 31st October 2019.</p> <p>The Public Health team is actively participating in the production of the Long Term Plan document. There is a need to ensure prevention is a common theme running through the document when it is submitted in the Autumn.</p> <p>Children and Young People</p> <p>Alison Cook advised the Board that has been achieved through the One Vision Board.</p> <p>The development of a One Vision score card to provide better reporting across the system has been completed and in use. Young People are recognising the importance of climate emergency.</p> <p>Important milestones to note:</p> <ul style="list-style-type: none"> • Implementation of Family Hubs model with local Family Partnership and the delivery of Local Delivery Plans. More family hubs are to be launched in September focused on childhood and poverty. • The Sowenna unit opens on 6th September. • NHS Kernow has been successful in getting wellbeing workers in Schools. <p>There is a concern about keeping clinical teams informed and the work that is in progress. More communication is required about what is happening and how we are looking after young people in Cornwall, e.g. Sowenna, Head Start, CAMHS, etc.</p> <p>Action: One Vision executive to review the messaging to link in with Caroline Righton to ensure a joined-up message is being communicated.</p> <p>TL highlighted that a series of articles are being published in the Western Morning News.</p> <p>Community Services</p> <p>Over the last 4 -5 months, engagement has taken place with organisations not within health and care. The work of the Embrace Project Board, which reports to the Community Services Board, encompasses an extensive remit focussing on the over 65 population. Opportunities exist to improve outcomes for individuals as well provide more cost-effective services. Each proposed workstream has been informed by the diagnostic phase. They will be brought to senior leaders for approval and prioritisation. There will be defined success measure and how these are performing will inform system dashboards.</p> <p>Action: Bring agreed Embrace workstreams to November meeting and outline of implementation plan (HCM)</p>	<p>A87</p> <p>A88</p>	<p>TD/CR</p> <p>HCM</p>

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	<p>The Mental Health team held a great engagement launch day in May. Richard Williams from the voluntary sector has been engaged</p> <p>Action: Mental Health Strategy consultation document to be circulated</p> <p>Planned Care</p> <p>Referral to Treatment: 18 Weeks is currently 84% at RCHT, and 75% at UHP. RCHT are on track to make 90% by end of the year. UHP are not in quite the same position, but we are working closely with them to improve their position and are currently looking to commission additional capacity to help with the referral to treatment times.</p> <p>KK confirmed the system is performing well. The desire is to achieve more.</p> <p>KK asked if mental health is being picked up in planned care. It was noted that whilst RTT refers to consultant services, we should not be constrained by this. TA said she would welcome parity between national and locally determined access targets.</p> <p>Urgent and Emergency Care</p> <p>A number of projects are summarised within the paper provided, but not all are being led by Urgent and Emergency Care. They were brought to the Board for completeness.</p> <p>Clinical call validation has been put in place. 75%-80% are having their issues sorted at this point stopping people arriving at the door.</p> <p>Employees of Volunteer Cornwall are connecting people back into the community.</p> <p>Due to the success of the high intensity users work. a business case for Cat 2 call validation will be presented at the August A&EDB for authorisation and implementation in October 19. All agreed there is a need to capture these case studies and ensure that they are celebrated and shared.</p> <p>Action: A set of slides and video to be produced so the learning from the case studies can be shared with Health and Social Care providers.</p> <p>On 9 July, RCHT declared critical Opel 4 and more recently has been at Opel 2. The number of patients that had been in hospital less than 7 days has improved as has those remaining in community hospitals less than 14 days.</p> <p>There were positive conversations around MIU resilience, and how these could be staffed.</p> <p>IC asked how the narrative could move from a negative to a positive story, recognising staffing is a national issue and not just being a Cornwall issue?</p>	A89	WV
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	<p>KK suggested that the Transformation Board are provided with a copy of the debrief report on the critical incident, that was undertaken by the Emergency Planning Team.</p> <p>Workforce</p> <p>PC confirmed that sprint workshops have taken place which has engaged the workforce. Julie Gripton, Academy Principal has started in post this week.</p> <p>KPMG work has been funded by NHS England, commencing with a 4 week piece of work through October .to review our ICS journey in respective of workforce. During this period KPMG may be in contact with key members of staff. PC confirmed he is the SRO for this piece of work, Kerry Eldridge the Workforce Lead.</p> <p>Developing as an Integrated Care System</p> <p>The ICS represents the work that has been undertaken and work that continues to progress towards becoming a mature and cohesive health and care system. This is a way of organising our system working as our new “business as usual”.</p> <p>A recent assessment against the national criteria highlighted several strengths in our local approach, as well as clarifying areas of development. We are preparing to be an ICS by 2020, having been assessed by NHS England/Improvement as possibly joining the November 2019 cohort for the accelerator programme, which brings national support in a range of areas, and facilitates us in working with other developing ICSs to share good practice and approaches. As part of the work to becoming an ICS the logo has been updated.</p> <p>The action plan detailed in the paper sets out all the work we are working towards. The update is using the five domains</p> <ul style="list-style-type: none"> • System Leadership, Partnerships and Change Capability • System Architecture and Strong financial management and Planning • Integrated Care Models • Evidencing delivery of LTP priorities and service changes • Coherent and defined population <p>The next steps for the ICS readiness will be the appointment of the Independent Chair. More recently NHS Kernow have had the legal directions lifted and Cornwall Partnership Trust have been rated Good.</p> <p>The national thrust is joined up delivery at the front line and this will become a key component. There is a paper going to the ICS Readiness Executive Group detailing how Cornwall is working with Devon.</p> <p>KK welcomed the framework as a measure of what had been</p>		

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	<p>achieved and the work still to be completed.</p> <p>In terms of system architecture and oversight, members appreciated greater involvement of primary care networks (PCNs) is required and engagement work with the new Clinical Directors is underway.</p> <p>Finance and Performance Updates</p> <p>CB updated the Board regarding the Q1 System Financial Position update.</p> <p>The year to date end position is on track and we aim to deliver all plans. There is, however, a significant risk and the forecast is under close review to manage on plan. HCM confirmed adult social care will shortly report an overspend of £3 million. This is due to the increased cost of residential and nursing care. There are a range of complex issues we need to tackle together, and a paper will be going to the health and adult social care overview and scrutiny committee during early September.</p> <p>CB confirmed the savings plans are weighted more heavily between October and March and there is a net risk of £18 million which the CCG is trying to mitigate.</p> <p>The Board asked that for the November meeting there is a better understanding with regard to the £18 million, along with an understanding of the direction of travel for both health and care commissioners and providers, i.e. what are our trajectories, and have we achieved them? KS advised the long term plan will allow the opportunity to look at these risks to delivery, including those relating to the domiciliary and care home markets.</p> <p>TC took members through the performance report advising the breast cancer 2 week wait is overachieving its planned trajectory following recent changes to the pathway. The 6 week waits for diagnostic pathways remain below the expected target of 99% and a Peninsula Clinical Service Strategy (PCSS) workstream is about to commence.</p> <p>TC advised the performance dashboard for the One Vision Board is currently in development and will be presented at their September meeting. Several of the agreed performance metrics will be incorporated into the system dashboard for the next meeting and so a change would be visible. PC suggested the current performance dashboard was heavily focused on acute service indicators and asked for this to be rectified. TA requested, as part of any proposed changes, a greater range of outcome metrics be incorporated.</p> <p>Action: TC agreed to work with system board SROs to develop a new system performance dashboard in time for the November meeting.</p>	A91	TC

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5.	<p>Recruitment of Independent Chair</p> <p>BV confirmed that the advertisement had been published in national and local newspapers. 7 applications had been received and 4 people have been short-listed.</p> <p>It had been agreed interviews would take place on 29th August 2019 and stakeholders have been invited. It has also been agreed to follow the appointment process that has been used for the recent appointments of Chair and CEO of RCHT.</p> <p>The interview panel will consist of</p> <ul style="list-style-type: none"> • Elizabeth O'Mahoney, Regional Director of NHS England • Cllr Rob Rotchell, Cornwall Council • Kate Kennally, CEO, Cornwall Council • Kate Shields, CEO, RCHT • Barbara Vann, Chair, Cornwall Partnership Trust • Iain Chorlton, Chair, NHS Kernow • Mairi McLean, Chairwomen, RCHT <p>The appointment of the Independent Chair is a very important part of the ICS journey.</p>		
6	<p>Embrace project – findings from the initial diagnostic phase</p> <p>HCM said the diagnostic is showing us that our systems can make a lot of changes to improve care whilst also making cost savings. It is apparent that over 65's with a long term condition are more likely to end up in institutional care. The recent feedback provided by Newton Europe was warmly received by professionals who welcomed the evidence provided as this confirmed their intuitive thoughts about these patients. This information has been shared with over 300 people across the health and system, including the voluntary sector. The key question now is to achieve better outcomes - what do we need to prioritise as part of the diagnostic findings?</p> <p>Phase two of the Embrace project is currently out to market tender and the hope is for a partner to be in place by October 2019. This is a very important piece of work which will also help shape the Long Term Plan.</p> <p>KK enquired if there were any asks from the Board to enable this piece of work to move forward. HCM confirmed that at this time all parties are engaged, so currently no asks of the Board. She did however confirm there is a requirement to review how communications regarding the Embrace project are being handled as a number of staff felt it was their job being removed when the reality is the job remains, it may just be in a different setting, i.e.</p>		

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	within the community rather than an acute hospital, say.		
7.	<p>Building market capacity – care homes and care at home services</p> <p>HCM recognised the importance of completing the Long Term Plan, but also questioned how we accurately capture those aspects of services which we are locally trying to achieve? Building high quality care at home and care home services are an essential part of this.</p> <p>HCM advised of the work which had commenced in April 2019 which allowed Cornwall Council to purchase an additional 1000 hours of care per week and which included a specific focus on those areas which have frequently proved difficult to provide care in.</p> <p>Finally, she advised the reference to “DBS” on the slides should be DPS (dynamic purchasing system). There were now 65 DPS providers which was an increase from the 53 in July 2019.</p> <p>The long term issue is workforce and how to attract people. Conversations have already taken place with Julie Gripton, Academy Principle, around how to make the career of caring a desirable one with longevity. Seasonal working is also part of the issue. The trends that require a solution for these workers are:</p> <ul style="list-style-type: none"> • 16 hour cap on hours due to impact on benefits • 9-2 working pattern • Reluctance to work at night and over night • Requirement to engage Government • Is there a possibility they could privilege care workers as they did Doctors? TL questioned whether an issue like this could be a Devo ask? It was considered that this could perhaps sit with Devo. 		
8.	<p>Delayed Transfers of Care (DToC): What it’s like for patients and families’</p> <p>This report was requested in the January 2019 Transformation Board as a result of University Hospitals Plymouth highlighting work they undertook with Livewell South West and Healthwatch Plymouth. The Transformation Board requested a similar piece of work be undertaken in Cornwall.</p> <p>Natalie Swan took the Board through the report reminding people about the Section 48 report.</p> <p>Natalie Swan referenced the Newton Europe report and how this focused on patients medically fit for discharge. All patients and families reported the good care they had received, regardless of discharge process. Key points to note were highlighted as:</p>		

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	<p>There are four key issues. As a position statement the long term plan has moved on significantly and the Embrace work is critical to its development. Prevention through to end of life care is a wide-ranging fundamental aspect of the planning process but we acknowledge that we cannot focus on every aspect and so service improvements will need prioritising. There are 126 deliverables across services.</p> <p>The ask of the Transformation Board and other boards is to consider the questions asked from slide 12 – 20. These areas are starting to take shape and identify some of the areas where Cornwall needs to focus on.</p> <p>The next Transformation Board is scheduled for 21 November 19. Prior to the next meeting there is a requirement to understand the engagement that needs to take place and what process to use in order to fulfil submission expectations.</p> <p>Over the coming weeks there is a requirement to map where we are against different deliverables over a 4 year period.</p> <p>Members were reminded the Embrace project will deliver a subset of what is required as it focuses on the over 65 population. All agreed that each Executive Team would need the opportunity to comment prior to the 21st September.</p>		
11	<p>Any other business</p> <p>Acknowledgment of the recent announcement that RCHT is to receive additional capital funding for a women and children’s centre which is significant for Cornwall’s residents and enables continued improvement in many aspects of care.</p> <p>NHS Kernow has had its legal directions lifted and Cornwall Partnership Trust have received a CQC rating of Good.</p> <p>Additional meeting date for Long Term Plan required in order for this document to be signed off by the system.</p>		
	<p>Date of Future Meetings</p> <p>To be confirmed</p>		

Action tracker

Transformation Board Meeting

Action		Lead	Progress / Date completed	Status
9th May 2019				
A77	PC suggested raising the issue in discussions with the Cabinet Office, and ensuring it is on the agenda for discussion at the Council's Scrutiny Committee.	Mark Boden	This item relates to care home and hospital facilities on the Isles of Scilly. Propose close as discussion being taken outside of this meeting.	Propose close
A78	PC asked that the use of Statistical Process Control Charts be considered for reporting system performance in future.	Karl Simkins	Performance dashboard simplified in accordance with discussions at System Leaders meetings	Close
15 th August 2019				
A84	The November meeting to be bought forward to accommodate the Long Term Plan being signed off at the November meeting.	Wendy Vincent	11 th November, 2.00- 4.00pm, St Austell Rugby Club, St Austell. Meeting cancelled. In accordance with NHS England and Improvement's requirements, Long Term Plan submissions are unable to be discussed in public at present.	Close
A85	New guidance has been issued relating to NHS Property Services. KK requested that information be shared with the Transformation Board and System Leaders Board	Mark Boden	Information shared with System Leaders see: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/804009/dhsc-guidance-for-transfers-of-nhs-property.pdf	Close
A86	SB will provide the link to the Green paper and welcomes any comments from members before 14 th October 2019.	Steve Brown	The link to the Green Paper (Advancing our Health) https://www.gov.uk/government/consultations/advancing-our-health-prevention-in-the-2020s Circulated 24.9.19	Closed
A87	One Vision executive to review the messaging and to link in with Caroline Righton to ensure a joined-up message is being communicated.	Trevor Doughty/ Caroline Righton	Completed.	Close
A88	Bring agreed Embrace workstreams to November meeting and outline of implementation plan	Helen Charlesworth-May	Embrace workstreams form part of the Community Services Design and Delivery Group as well as the Urgent and Emergency Care Board. As part of proposed working	Close

Key

Grey shading = Closed action

Pink shading = Action on agenda

Action tracker

Transformation Board Meeting

Action		Lead	Progress / Date completed	Status
			arrangements, these two groups will provide a deep dive report every six months to the Transformation Board.	
A89	Mental Health Strategy consultation document to be circulated	Wendy Vincent	http://doclibrary-kccg.cornwall.nhs.uk/DocumentsLibrary/KernowCCG/OurServices/StrategicReportsAndPlans/MentalHealthStrategySummary.pdf Circulated 17/10/19	Closed
A90	A set of slides and video to be produced so the learning from the case studies can be shared with Health and Social Care providers.	Helen Charlesworth-May		Open
A91	TC agreed to work with system board SROs to develop a new system performance dashboard in time for the November meeting.	Trudy Corsellis	The revised performance dashboard will be presented at the March meeting	Closed
A92	PC and HCM to respond to recommendations on behalf of the Chief Officers regarding the Healthwatch report.	Phil Confue and Helen Charlesworth-May		Open
A93	Update to be provided at November meeting as it is important to keep abreast of patient and family feedback in respect of Delayed Transfers of Care (DTOCs)	Amanda Stratford	Verbal update of concerns we have received or a recent case study demonstrating any issues experience. DTOCs continue to be a key area of the Embrace Care work programme.	Closed
A94	CR to look at how this document is communicated out to the wider audience	Caroline Righton	Relates to the Embrace Care programme of work and communication messages. Considerable engagement undertaken since last Transformation Board.	Closed

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