

**Minutes of the
WMAHSN Board Meeting
held in the Board Room, Institute of Translational Medicine
on Wednesday 25th January 2017**

Present: Michael Sheppard (MS, Chair), Chris Parker (CP), Kevin Dunn (KD), Neil Mortimer (NM), Amy Boulton (AB), Lucy Chatwin (LC), Andy Hardy (AH), Mandy Shanahan (MS2), Richard Devereaux-Phillips (RDP), Jeremy Kirk (JK), Andy Williams (AW), Helen Carter (HC), Tim Jones (TJ), Peter Lewis (PL), Dion Morton (DM), Tony Davis (TD), Laura Boddy (LB, minutes)

Apologies: David Adams (DA), Richard Lilford (RL), Gavin Russell (GR), Sue Ibbotson (SI), Pauline Walsh (PW)

Agenda Item 1: Welcome/opening remarks/apologies

MS and CP introduced LB to the Board. LB is the new Officer Supervisor in the WMAHSN Executive team. Those present introduced themselves to LB.

Apologies were extended on behalf of SI, with MS noting that HC was representing her. Apologies were also relayed on behalf of DA, RL, and GR.

It was noted that Andy Garner had resigned from the board as he is leaving the region. Pauline Walsh, Head of Nursing and Midwifery at Keele, will be welcomed as his replacement.

Agenda Item 2: Minutes of the last meeting

The minutes of the previous meeting were reviewed and agreed as an accurate record.

Agenda Item 3: Actions arising

ACTION: Ruth Chambers to make contact with MS2. Completed.

ACTION: TD to provide further details re return on investment for the W Midlands region. Completed as an enclosure to the Executive update sent out prior to this Board.

ACTION: SI to liaise with PM to explore links with WMAHSN. Completed. It was noted that this had been overtaken by a lot of events as plans are increasingly aligned.

ACTION: KD to circulate YouGov survey. Completed.

ACTION: TD and TJ to provide update at January Board meeting. Ongoing. TJ informed the Board that until they receive more clarification regarding Centre of Digital Excellence and until the Treasury have released money for this, there is not much that can be added other than it is anticipated that the money will be used to

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improve the digital maturity of 'fast followers'; also that the intention would be to support one of the region's mental health trusts to do the same in the anticipated Tranche 2. Once TJ/TD have further information they can relay this.

Agenda Item 4: Meridian live demonstration

LC presented the Meridian Live demonstration on behalf of Tammy Holmes. See Enc. 1 A point discussed by the Board was whether Meridian would remain exclusive to WMAHSN or whether it would be available to other AHSNs who wanted to use it. The point in favour of Meridian becoming a national network was based on the recent AAR request that all AHSNs have an innovation exchange and the need for one easily accessible portal rather than 15 separate portals. As a negative, Meridian is labour intensive and resources would need to be in place to ensure that it still works and flows at a much larger scale. There would also need to be discussions regarding who would pay for this and the service. It was also noted that enhanced members get additional functionality, but they pay for that and this has implications for making Meridian national.

A second issue raised by the board was how data is captured regarding outcomes on Meridian. It was noted that possibly WMAHSN struggled with its capture element. This led to the point that adoption and delivery was critical going forward and capturing outcomes that proved successful would aid with this. The forthcoming Meridian LIVE event on 15th Feb was advertised as part of this process.

There was discussion relating to the level of user engagement with Meridian.

ACTION: AW to approach fellow commissioners about WMAHSN and sponsor a Meridian presentation to increase awareness and further engagement with the service.

HC is also arranging a joint post between Public Health England and Coventry, which is a good opportunity to get some leverage on Meridian, once that person is in place.

Agenda Item 5: Executive Team Update

CP spoke to the Executive Team Update. CP updated on the topic of relicensing and business planning, as since 16th January Chief Officers at all AHSNs have received very positive messages from NHS England in regard to future intentions for AHSNs and their relicensing. The network is cautiously optimistic as a result of this and CP said he would copy this message to the Board members when he shares it with the Executive team.

ACTION: CP to copy message about relicensing to Board members.

The main issue discussed was if there was a sense of areas in which the network might need to develop further. It was considered that many AHSNs mainly focus on improvement and innovation forms only a small part, whereas WMAHSN is more balanced and other AHSNs may want to move in line with this. Other weak points were considered to be poor adoption of innovation, multiple innovation exchanges instead of one gateway and poor understanding of the services that AHSNs provide.

TD spoke around WMAHSN's seven point growth plan covered in the Executive Team Update. The main points addressed were the Accelerated Access Review, sustainable energy, and development around social enterprise work.

Agenda Item 6: Q3 Assurance and metrics

A Matrix of Metrics abbreviated handout was given to the board (see Enc. 2). CP noted that of the 72 programmes only 6 were RED (representing 8% of total programme activity) and AMBER programmes represented only 11% of programme activity. CP informed the board that the AMBER programmes were largely temporary setbacks, which the network anticipated correcting during Q4 and he stressed that 81% of programmes remained GREEN. It was noted that due to reduction in funding in EIT, “Share to Care” is now not going ahead. However, there is the possibility to restart it if funding is found from elsewhere.

Agenda Item 7: Business plan framework and intent

The Business Plan proposed content and was circulated to the board (see Enc. 3) and the intent articulated verbally. CP explained that he hoped to get approval or direction from the Board on the basic framework for the business plan so that he and the Executive team could produce a draft for circulation out of committee before the next meeting, then incorporate any necessary amendments with a view to sign off at the March Board.

There was a general discussion about areas to focus on in the Business Plan. It was agreed that as Meridian is such a successful part of how the network operates, it should be contextualised in the Business Plan. NM provided a short presentation with regard to this. KD suggested adding a section on Risk Management and split out a specific section for financial analysis.

Concerns were raised by TJ about whether the business plan covers gaps highlighted from the YouGov survey. The Business Plan in its current form does not talk about the context WMAHSN is working in, that of a highly fluid, congested environment. CP clarified that the Introduction will cover this and ‘set the scene’ and show that WMAHSN has adapted to be in line with the Five Year plan. TJ would feel less concerned if the maturing process of WMAHSN is highlighted in terms of what has gone well, what has not worked, what lessons have been learnt, where priorities have changed and why, and whether the case is the same with enabling themes. TJ considered there needed to be more of a narrative. The Chair agreed and clarified that no longer do WMAHSN need a basic intro (e.g. area covered, population demographics etc.), but there should be context.

The timeline of the Business Plan was reiterated, with a final review as a formal agenda item at the 22nd March WMAHSN Board Meeting. The submission date for the Business Plan is April.

ACTION: Draft Business Plan will be circulated to the board via email by the end of February for comments for the 22nd March Board Meeting.

Agenda Item 8: 2016/17 Annual Report – recommendations from Editorial Board

CP briefed that the first editorial board for the next Annual Report had taken place just prior to the Board and since the paperwork for the meeting had been distributed. An issue note was handed out to Board members (Enc. 4) and CP discussed that the Annual Report aims to be the right length, and have the right impact. There will be a web version as well as traditional hard copy. The intent is to keep to 32 pages or less with

maximum use of infographics and key major headlines that have been achieved throughout the year. The aim is to show that the AHSN movement has got real traction, and what WMAHSN specifically has achieved throughout this year. It was noted that the Annual Report is an opportunity for WMAHSN to distinguish itself. AHSNs are different and the Annual Report is an opportunity to highlight this. As with the Business Plan, the Annual Report can be drafted with the relicensing bid in mind. Board members also encouraged the executive team personnel to balance their priorities as necessary but also to see if anything could be learnt from other sectors in terms of presenting the annual report in as dynamic, interesting, compelling and informative manner as possible.

The draft annual report will be presented to the Board at the 26th April meeting.

ACTION: CP to circulate draft annual report to board before then so comments and observations can be responded to. Update for March board.

Agenda Item 9: Risks and Issues

A new risk was highlighted concerning the fact that the WMAHSN Innovation and Adoption manager post is filled as a secondment. The concerns revolve around the fact that Meridian is central to the WMAHSN's business and that filling this position through a secondment is not a sustainable option; neither is it the wish of the providing Trust, nor is it desirable for the individual concerned. This was discussed and it was explained that the hope is to advertise for this position. The current incumbent is aware of this, that there would be a requirement to apply for the post if and when advertised, and it is believed that she would wish to do so.

Agenda Item 10: AOB

The issue was raised of increasing links with Kieran Patel by bringing him into the fold of the AHSN to facilitate further connectivity with him and his office. The Board considered various options, the pros and cons of each were discussed and the possibility of potential conflicts of interest was noted. The consensus of the Board was to maintain the status quo and maintain regular informal dialogue as well as formal engagement through the medium of the West Midlands Partnership group as well as through other meetings.

Agenda Item 11: Date and venue of next meeting

Wednesday 22nd March, 09:00 – 11:00 in the Board Room, ITM.

Enclosures:

1. Meridian presentation slides.
2. Matrix of Metrics abbreviated handout.
3. Proposed Business plan contents.
4. WMAHSN Issue Note re Annual Report 2016-17.