

WOLVERHAMPTON CLINICAL COMMISSIONING GROUP GOVERNING BODY

Minutes of the Governing Body Meeting held on Tuesday 10 April 2018
Commencing at 1.00 pm at Wolverhampton Science Park, Stephenson Room

Attendees ~

Dr S Reehana

Chair

Clinical

Dr D Bush

Board Member

Dr R Gulati

Board Member

Dr M Kainth

Board Member

Dr J Parkes

Board Member

Dr R Rajcholan

Board Member

Management

Mr T Gallagher

Chief Finance Officer – Walsall/Wolverhampton

Mr M Hastings

Director of Operations

Mr S Marshall

Director of Strategy and Transformation

Ms S Roberts

Chief Nurse Director of Quality

Lay Members/Consultant

Mr A Chandock

Secondary Care Consultant

Mr J Oatridge

Lay Member

Mr P Price

Lay Member

Ms H Ryan

Lay Member

Mr L Trigg

Lay Member

In Attendance

Ms H Cook

Engagement, Communications and Marketing Manager (part)

Ms S Gill

Health Watch representative

Ms K Garbutt

Administrative Officer

Mr M Hartland

Chief Finance Officer – Dudley CCG (Strategic Financial Adviser)

Mr P McKenzie

Corporate Operations Manager

Ms S Southall

Head of Primary Care (part)

Apologies for absence

Apologies were received from Ms S McKie, Mr D Watts, Dr H Hibbs, Mr J Denley and Dr Asghar.

Declarations of Interest

WCCG.2069 There were no declarations of interest declared.

RESOLVED: That the above is noted.

Minutes of the meeting of the Wolverhampton Clinical Commissioning Group Governing

WCCG.2070 **WCCG.2044 Quality and Safety Committee**

Dr R Rajcholan pointed out that the third paragraph should read “Dr Rajcholan highlighted that there had been a delay in A&E at the Royal Wolverhampton Trust (RWT) regarding fast track referrals. A revised process has been established for fast track referrals with cancer services which will be dealt within A&E without the need for a GP to action.

RESOLVED:

That the minutes of the Wolverhampton Clinical Commissioning Group Governing Body meeting held on the 13 February 2018 be approved as a correct record.

Matters arising from the Minutes

WCCG.2071 There were no matters arising.

RESOLVED: That the above is noted.

Committee Action Points

WCCG.2072 RESOLVED: That the progress report against actions requested at previous Board meetings be noted.

Chief Officer Report

WCCG.2073 Mr S Marshall presented the report. He highlighted that the Wolverhampton Clinical Commissioning Group (WCCG) have launched a recruitment campaign to attract GPs and general practice staff to come and work in Wolverhampton.

He pointed out that the Black Country Sustainability and Transformation Plan continues to meet and is currently reviewing its governance. He added that the CCG is working in partnership with our local GPs, The Royal Wolverhampton Trust, Black Country Partnership Foundation Trust and the Local Authority to agree how we will work in a more integrated way in Wolverhampton.

Dr R Gulati asked if the governance arrangements relating to the proposed integrated arrangements had been agreed. Mr Marshall confirmed the Clinical Commissioning Group (CCG) is working in partnership with our local GPs, RWT, Black Country Partnership Foundation Trust and the Local Authority to agree how we will work in a more integrated way in Wolverhampton. Clinicians have been meeting together to agree the pathways of care that we will look at in the first instance.

RESOLVED: That the above is noted

Commissioning Committee

WCCG.2074 Dr M Kainth gave an overview of the report. He pointed out the service specification for online counselling service for Children/Young People (CYP). The Committee approved the service specification and agreed for the procurement of the service to commence.

Dr Kainth highlighted that the CCG Medicines Optimisation Team wishes to continue to offer a prescribing incentive scheme to its GP practices for 2018/19. The Committee approved the amendments to the Quality Prescribing Scheme for 2018/19 and supported the Work Plan.

RESOLVED: That the above is noted.

Quality and Safety Committee

WCCG.2075 Ms S Roberts presented the report and highlighted the key issues. Vocare has been rated inadequate for the March 2017 Care Quality Commission (CQC) visit. A further announced focused inspection was carried out by CQC on the 26 October 2017 in relation to the warning notices issued in July 2017. An unannounced visit by WCCG in January 2018 highlighted further concerns, pertaining to triage, performance and paediatric triage arrangements. The CQC re-visited Vocare in February 2018 and whilst the full report is awaited some improvements were noted. She confirmed that a meeting had taken place between Dr Reehana, RWT and Vocare and assurances have been provided.

Ms Roberts highlighted that mortality increased over the winter period and further work needs to be carried out to understand any reasons for this. She referred to the cancer waiting times as detailed on page 21 of the report. RWT are undertaking harm reviews, to ensure that patients having to wait for treatment are not clinically impacted. The CCG have written to RWT regarding concerns about the potential impact on patients' treatment and their wellbeing and also asking if patients are supported to make fully informed choices about their treatment. A meeting is scheduled to take place relating to harm reviews and the Governing Body will be kept informed. Mr A Chandock suggested a report be submitted detailing information relating to the internal harm review.

Mr Chandock pointed out that RWT will be picking up some work from Birmingham City Hospital around gynecology oncology patients.

Mr T Gallagher and Mr M Hartland arrived

Mr P Price pointed out a non-clinical issue, relating to health and safety had been raised around the reception area within the Science Park undergoing a refurbishment and this is not due to be completed until July/August 2018.

RESOLVED: That the above is noted.

Finance and Performance Committee

WCCG.2076

Mr Gallagher presented the reports. He referred to the report from the 27 March 2018 and pointed out the table on page 3 detailing the position against key financial performance indicators. They are all rated green with the exception of Quality, Innovation, Productivity and Prevention (QIPP). However we have a non-recurrent support to ensure deliver of the QIPP target.

He pointed out the key areas of variance on page 4. RWT is giving concern as the month 10 activity is indicating a potential forecast outturn of overspend of £2.8m as a result of higher than expected activity in January for non-elective activity. Mr Gallagher referred to the table on page 5 of the report and confirmed the audit is progressing well.

The CCG continually reviews its levels of risk and as anticipated, as the financial year progresses the level of risk diminishes as issues are built into the financial year progresses the level of risk diminishes as issues are built into the financial position. As a result the level of reported risk for month 11 has reduced to £500k which is mainly within the acute portfolio.

Mr L Trigg expressed concerns around the worsening performance and increasing costs around complex cases and asked if this is the real issue. Mr Gallagher confirmed the acute sector is focused on the complex cases.

Mr Gallagher referred to the Finance Plan and Budget for 2018/19 and gave an overview. He referred to page 3 of the report which outlines the allocation allocated to Wolverhampton CCG. All commissioners need to purchase acute activity which is outlined on page 5. Our contract with RWT has been agreed.

The CCG has identified risks included within the 2018/19 budgets which totally £3.5m and highlighted the key risks on page 9 of the report.

RESOLVED: That the Governing Body received and agreed the Finance Plan and Budget for 2018/19.

Audit and Governance Committee

WCCG.2077 Mr Price referred to the report and gave an overview. He pointed out that the Senior Internal Audit Manager had met with the Executive Team to discuss the Annual Internal Audit plan and any concerns they may have. Information collated would be used to draft the plan. The final plan will be considered for approval at the next meeting. The Audit Manager reported that good progress on the CCG's risk management arrangements had been made since the last Audit and Governance Committee meeting.

RESOLVED: That the above is noted.

Primary Care Commissioning Committee

WCCG.2078 Mr Hastings presented the report. He pointed out the Out of Area Registration Scheme. There is a gap in commissioning services for patients living in the Wolverhampton area but who live outside their practice boundary and are therefore deemed out of area.

Mr Hastings highlighted that the Care Navigation face to face training took place on the 24 January 2018 and the programme has now launched. The second cohort of pathways is currently being identified.

The plans for Extended Access/Winter Opening were noted as being in place and offered appointments to patients every day except Christmas Day and New Year's Eve. Dr D Bush stated that the ambition is to offer more appointments in future years. Mr Hastings added that a full review will be carried out. Ms S Gill asked if the templates to be used are fully operational within practices. Mr Hastings confirmed all practices have the

templates and training has taken place. Ms H Ryan confirmed all the relevant information is available on the templates and if a template is not suitable for a patient an appointment is made.

RESOLVED: That the above is noted

Communication and Engagement update

WCCG.2079 Ms H Cook gave a brief overview of the report. She referred to the Minor Eye Conditions Services (MECS) campaign which has continued its web and social media presence following its launch in autumn last year. She stated that an evaluation report will be carried out regarding the service in June/July 2018.

Ms Cook stated that the winter campaign has continued its national focus on stay well messages. Unfortunately due to snowy weather our planned engagement with youth membership of Health Watch Wolverhampton was cancelled. This has now been rescheduled for the 19 April 2018.

She stated that we are working with our colleagues in Primary Care and Pharmacy to promote their extended opening hours for cover over the Easter holidays. She reported that it was clear that the information on the website was being used as it received several hits in a short space of time. Dr Bush asked which advertising is most effective. Ms Cook confirmed there has been a multi campaign regarding advertising.

Ms Gill stated patients are not kept informed which model of care their GP practice is operating in. This is a real issue and work needs to be carried out with GP practices to ensure that patients are aware of the work taking place and how this affects them. Dr Rajcholan confirmed this is advertised within her practice. Over Easter all the clinics were full and it was a good experience for patients.

RESOLVED: That the above is noted.

CCG Annual Equality Report

WCCG.2080 RESOLVED: That the above is noted.

CCG Equality Objectives

WCCG.2081 RESOLVED: That the above is noted.

Minutes of the Quality and Safety Committee

WCCG.2082 RESOLVED: That the minutes are noted.

Minutes of the Finance and Performance Committee

WCCG.2083 RESOLVED: That the minutes are noted.

Minutes of the Primary Care Commissioning Committee

WCCG.2084 RESOLVED: That the minutes are noted.

Minutes of the Commissioning Committee

WCCG.2085 RESOLVED: That the minutes are noted.

Minutes of the Audit and Governance Committee

WCCG.2086 RESOLVED: That the minutes are noted.

Black Country and West Birmingham Commissioning Board Minutes

WCCG.2087 RESOLVED: That the minutes are noted.

Any Other Business

WCCG.2088 RESOLVED: That the above is noted.

Members of the Public/Press to address any questions to the Governing Board

WCCG.2089 RESOLVED: That the above is noted.

Ms S Southall arrived

Primary Care Programme Milestone Review

WCCG.2090 Ms S Southall presented the report. The CCG has developed two programmes of work to enable implementation of the Primary Care Strategy and General Practice Forward View. Both programmes have been in place since 2016 the content of both is largely attributed to national direction and local improvement that seeks to achieve a sustainable primary care for the future.

Ms Southall highlighted the General Practice Forward View programme of work on page 5 of the report. Appendix 1 provides a more detailed assessment of the full programme of work by chapter, in a self-assessment format providing an indication of individual project status and progress being made. She referred to the live project updates detailed on pages 5 to 7 of the report.

Mr Marshall referred to the draft Primary Care Workforce Strategy and queried the number of patients per Clinical Pharmacist in Dudley. Ms Southall confirmed she will check and amend the document. Ms Ryan referred to the peer group formed in March 2018 what the projects are. Ms Southall stated these are ~

- Mapping the patient pathway
- Working together on an ongoing basis and appreciate what is taking place in each work place
- One message to all, consistent messages to pharmacists and patients, a range of resources they could all use.

RESOLVED: That the above is noted.

Date of Next Meeting

WCCG.2091 The Board noted that the next meeting was due to be held on **Tuesday 8 May 2018** to commence **at 1.00 pm** and be held at Wolverhampton Science Park, Stephenson Room.

The meeting closed at 2.30 pm

Chair.....

Date