

**WOLVERHAMPTON CLINICAL COMMISSIONING  
GROUP COMMISSIONING COMMITTEE**

Minutes of the Commissioning Committee Meeting held on Thursday 26<sup>th</sup> April 2018  
commencing at 1.00 pm in the Main CCG Meeting Room, Wolverhampton Science Park

**MEMBERS ~**

**Clinical ~**

**Present**

Dr M Kainth (Chair)	Lead for Commissioning & Contracting	Yes
Dr Gulati	Deputy Lead for Commissioning & Contracting	Yes

**Patient Representatives ~**

Malcolm Reynolds	Patient Representative	Yes
Cyril Randles	Patient Representative	Yes

**Management ~**

Steven Marshall	Director of Strategy & Transformation	Yes
Tony Gallagher	Chief Finance Officer	Yes
Sally Roberts	Chief Nurse & Director of Quality	Yes
Sarah Smith	Head of Commissioning - WCC	Yes

**In Attendance ~**

Liz Hull	Administrative Officer	Yes
Vic Middlemiss	Head of Contracting & Procurement	Yes
Jeff Love	Development Manager	Yes (Part)
Maxine Danks	Head of Individual Care Team	Yes (Part)

**Apologies for absence**

Apologies were submitted on behalf of Peter McKenzie.

**Declarations of Interest**

CCM683 None.

RESOLVED: That the above is noted.

## **Minutes**

CCM684 The minutes of the last Committee meeting, which took place on 29<sup>th</sup> Marchy 2018 were agreed as a true and accurate record.

RESOLVED: That the above is noted.

## **Matters Arising**

CCM685 Urgent Care Centre – Sally Roberts gave an update and advised the Committee that improvements are being seen in performance, triage, capacity and leadership. Assurance was given that the contract is being monitored very closely.

RESOLVED: That the above is noted.

## **Committee Action Points**

CCM686 None to review.

RESOLVED: That the above is noted.

## **Review of Risks**

CCM687 Corporate level risks – there were no issues to bring to the Committee's attention.

Committee level risks:

CC08 RITS Capacity - The Committee approved a recommendation to close the risk.

RESOLUTION: That the above is noted and the Risk Register is updated to reflect CC08 being closed.

## **Community Falls Service Redesign**

CCM688 The Committee was provided with an assurance report and an update regarding the redesign of the Community Falls Prevention Service. No issues were identified.

RESOLVED: That the above is noted.

## Night Repositioning Service Pilot

CCM689 The Committee was presented with a business case for the commissioning of a 6 month pilot of a service to provide night-time interventions for patients living at home affected by pressure injuries.

The Committee approved the business case and requested that the pilot should be for a period of 12 months to allow a more robust evaluation process.

RESOLVED: That the above is noted.

## Contracting Update

CCM690 Contract Performance (activity and finance)

Month 10 finance and activity data was presented at the March 18 Contract Review Meeting (CRM).

The main issues with RWT activity discussed at the CRM were as follows:

Over-performance – the contract is over performing by £2.1m at Month 10; this is a significant movement from Month 9 which was £674k over for all commissioners.

The Wolverhampton CCG element of the Month 10 over-performance equates to £1.17m.

Contract Performance (key performance indicators/quality)

Referral to Treatment – For February 18 this was reported at 90.38% which is below the agreed trajectory (91.81%). The Trust has failed to meet the operational standard relating to the percentage of service users on an incomplete RTT pathway waiting no more than 18 weeks from referral since April 2016. Discussions are being undertaken with clinical staff to increase capacity and reduce backlog to support the achievement of the recovery trajectory

Cancer 62 Days - Cancer 62 days has not achieved throughout the financial year and is presently being reported at 64.12% in February 18 which is the lowest it has been in all the financial year. Further details regarding this are referenced in the Performance report.

Ambulance Handovers – The Trust reported an unprecedented increase in delayed Ambulance handovers during January 18 (199 reported 15 minutes delays in January 18; the highest of the contract year). The February 18 position remains in contractual breach, but is an improvement from the previous month i.e. 102 reported 15 minute delays.

Performance Sanctions

Sanctions have been agreed for Month 10 (January 18) at £113,800, this was predominately due to Ambulance Handovers (as above).

## ***Black Country Partnership Foundation Trust (BCPFT)***

### Service Development Improvement Plan (SDIP)

The STP is working on reviewing specifications and some (particularly CAMHS specs) are in the final review stage. There is a timetable for review as part of this work and it was agreed to align local SDIP meetings with the STP timetable.

Sandwell and West Birmingham (SWB) CCG have shared a plan for reviewing the mental health specs in line with the STP but more locally for both CCGs. This has been shared with all commissioners from both CCGs to update on their current status with specific specifications. Once this has been reviewed a further meeting will be required to discuss the further development of those specs that remain out of date.

### Data Quality Improvement Plan (DQIP)

Work with the DQIP is progressing well and the CCG have been informed (verbally) that the Trust have achieved 16.8% of their IAPT access rate target (against a target of 16.5%) This is a massive achievement as the Trust has attended a number of community events over the past few weeks to approach as many people as possible. This has required extra hours to be put in from staff during evenings and weekends and the service has worked hard to achieve this at the last minute. Formal figures will be available on the 15<sup>th</sup> working day of this month (23<sup>rd</sup> April 2018).

The Trust has agreed to implement advice and guidance for GPs and clinicians and has opened dialogue with primary care regarding this and e-referrals. SWBCCG have advised that they have additional investment that they would like to give to BCPFT to fund DOCMAN for all CCGs across the STP. The Trust has welcomed this and will work with SWBCCG to implement this by October 2018. WCCG has also welcomed this as the system can be used for e-referrals, e-discharge and sharing documents, for example clinical letters.

### Contract Performance Notice - Infection Prevention Training

There is a joint Remedial Action Plan for Infection Prevention training. The indicator has failed for Q3. Performance for January was 87% against a target of 85% and 90% in February. We have received verbal assurance that March is also above target, therefore the Trust should achieve Q4 target.

### Finance - Over performance (inpatients)

There is an over performance issue on Adults/ Older Adults inpatient beds. A number of meetings have been held to reach an agreement that is cost effective for both organisations but the issue is still outstanding. The Trust put forward a proposal that included a tolerance, cap and marginal rate. The CCG has agreed to apply a 2% tolerance and 5% cap with any under/ over-performance to be processed at a marginal rate of 60% to the Acute inpatient and Older adult inpatients. The maximum exposure for both organisations under this arrangement would be £143k.

The CCG has sent a counter offer to BCPFT to include beds at the MacArther Unit and agreed to apply the above principles to the MacArthur Ward with the caveat that we remove one bed from the plan. This is on the basis that we have not fully utilised the beds on this ward and therefore wish to commission based on current activity. BCPFT are yet to respond to this and a further meeting has been scheduled.

## **Nuffield**

### 2018/19 Contract changes

Focus continues to be on agreeing the 2018/19 contract. The draft contract has been shared with the Provider and the CCG is currently awaiting comment/agreement. The main basis of the CCG's offer is a rebased activity plan which reflects 17/18 outturn (increased plan value is £3.277m). This year's contract massively over-performed and a more accurate plan will therefore enable more robust activity monitoring.

### ***Urgent Care/ Ambulance/ Patient Transport***

#### Urgent Care Centre

The Provider has been given a revised two month timeframe which ceases in April 18 by which certain improvements are expected. As part of the two month improvement plan weekly updates are provided by Vocare. This covers areas such as:

- Relocation of Home visit despatchers
- Home visit breach audit
- Review of Demand Capacity

A meeting has taken place between RWT, Vocare and CCG representatives to discuss how more patients can be triaged from ED to the UCC. Subsequent to this a further process mapping meeting has been arranged with all stakeholder to commence a pathway review.

#### WMAS Emergency & Urgent Ambulance Service

At the Commissioners Meeting held on 1<sup>st</sup> March 2018, it was noted that performance has been maintained despite the contract being 11% over plan. Performance for category 2 is exceptional and categories 3 and 4 are also being achieved well within the required response standards.

It was further noted that the Ambulance Improvement Group are conducting a national Spring review into ARP and this will be fed back into the Commissioners Meeting in order to gauge a national viewpoint as well as a local one.

For Wolverhampton CCG, month 11 YTD over performance is £325,000.

#### WMAS – Non-Emergency Patient Transport Service (NEPTS)

In December 2017 West Midlands Ambulance Service raised concern regarding the contract and performance management process with Wolverhampton and Dudley CCGs for the Non-Emergency Patient Transport Service. In response to this, the CCGs welcomed a proposal by WMAS, received in February 2018, suggesting a number of changes; financial payment process (no funding change), data processing, quality reporting, contract review meeting terms of reference, exception reporting and key performance indicators. Both Dudley and Wolverhampton CCG teams considered the proposals in detail and were in the main supportive.

Further correspondence and discussion has since taken place including a letter from the CCG to WMAS acknowledging their latest letter and outlining agreed items to be provided, closure of the Information Breach Notice, and the CCG's intention to draft a Contract Variation Agreement to reflect the changes that have been agreed.

## **Other Contracts**

### Staffordshire and Stoke on Trent Partnership Trust (SSoTP)

There is still significant over performance with the SSoTP contract in particular within the district nursing service. This has been raised with the provider at their CQRM in March and the CCG are awaiting a response from the host CCG as the provider requested time to investigate.

### Accord Housing Association – Victoria Court

Contractual and financial terms have been agreed between the CCG and Accord for a new contract arrangement for Victoria Court. This agreement centres on 8 inpatient beds for specialist rehabilitation and 3 beds for step down (following admission in Penn Hospital). The Local Authority has agreed to pay an increased top up amount for the 8 beds, based on actual usage, whilst the step down beds are fully funded by the CCG. A contract has been drafted and we are on track to have this finalised by the end of March.

In parallel with this, Accord has put forward a proposal to the CCG for void losses incurred during the 2017/18 year; the claim is for circa £95k. The CCG has agreed to pay £75,000 of these void losses as Victoria Court confirmed that in order to provide a 24 hour service they must remain fully staffed regardless of the number of patients that they have in the unit. Their current staff mix includes a manager and deputy and 4 nurses, 3 of which are backfilled by agency staff. There is only 1 current vacancy for support staff.

Accord also requested for the CCG to cover all redundancy costs should they not be awarded the contract beyond March 2019. The CCG has agreed to cover only statutory redundancy costs under this scenario, however if Accord advise that they will no longer offer the service and wish to terminate the contract the CCG will not be liable for any redundancy costs. Accord is yet to respond to this proposal.

### Cygnet Health Care

It has recently come to light that BCC CCG does not have any agreement in place for us to be associates to their contract and we have not been included on any of their contracts in previous years.

The approximate spend with Cygnet is £2 million and arrangements from 1<sup>st</sup> April 2018 will need to be discussed and considered as we do not have any contractual agreements in place currently. A meeting has been arranged with the provider to discuss and agree next steps. This is anticipated to take place before the end of April.

RESOLVED: That the above is noted.

## **Any Other Business**

### **Annual Report – Commissioning Committee 2017/18**

CCM691 A copy of the annual report was circulated with a request to send any comments to Peter McKenzie by 10<sup>th</sup> May 2018.

RESOLVED: That the above is noted.

**Date, Time and Venue of Next Meeting**

CCM692 Thursday 31<sup>st</sup> May 2018 at 1pm in the CCG Main Meeting Room

RESOLVED: That the above is noted.