

**WOLVERHAMPTON CLINICAL COMMISSIONING GROUP  
COMMISSIONING COMMITTEE**

Minutes of the Commissioning Committee Meeting held on Thursday 27<sup>th</sup> June 2019 commencing at 1.00 pm in the CCG Meeting Room 1, Wolverhampton Science Park

**MEMBERS ~**

**Clinical ~**

**Present**

Dr M Kainth (Chair)	Lead for Commissioning & Contracting	Yes
Dr Gulati	Deputy Lead for Commissioning & Contracting	No

**Patient Representatives ~**

Malcolm Reynolds	Patient Representative	Yes
Cyril Randles	Patient Representative	No

**Management ~**

Steven Marshall	Director of Strategy & Transformation	Yes
Tony Gallagher	Chief Finance Officer	Yes
Sally Roberts	Chief Nurse & Director of Quality	No
Andrew Wolverson	Head of Service People - Commissioning - WCC	No

**In Attendance ~**

Alison Lake	PA	Yes
Vic Middlemiss	Head of Contracting & Procurement	No
Philip Strickland	Governance & Risk Coordinator	Yes
Hemant Patel	Head of Medicines Optimisation	Yes
Alicia Wood	Commissioning Manager - WCC	Yes

**Apologies for absence**

Dr Gulati, Sally Roberts, Vic Middlemiss and Andrew Wolverson

**Declarations of Interest**

CCM807 None.

**Minutes**

CCM808 The minutes of the last Committee meeting, which took place on 30<sup>th</sup> May 2019 were agreed as a true and accurate record.

RESOLVED: That the above is noted.

## Matters Arising

CCM809 None

## Committee Action Points

CCM810 None to review.

RESOLVED: That the above is noted

## Repeat Prescription Management Project in General Practice

CCM811 The Committee was presented with a report to discuss the findings of a repeat prescription audit and a plan to reduce waste and minimise variation between primary care practices by means of planned management programme to medicines optimisation.

RESOLVED: That the above is noted and the plan was approved.

## Contracting Update

CCM812 The Committee was presented with a report update for the period June 2019.

### Royal Wolverhampton NHS Trust

Performance Targets

Contract Performance

The CCG financial position for April 2019 shows an over performance of £700K, an analysis is being carried out to establish the cause. The outcome is based solely on one month of data and a more robust activity pattern will emerge throughout the financial year.

**Diagnostics** – the Trust continues to see a high numbers of referred patients into Radiology. The department is working closely with the Cardiac ? cardiology to fully utilise current capacity. Additional capacity has been made available for April and May (2019) to ensure target is maintained.

**Referral to Treatment** – Target for April 2019 was missed. The Trust has moved to an electronic referral system however, due to technical issues the Trust has put in place a manual system to ensure information for each patient is entered onto the system on a daily basis.

## **Cancer Targets –**

RWT continues to predict failure of the following indicators:

- 2 week wait,
- 31 Day Sub-surgery target
- 62 Day Screening
- 62 Day wait for first treatment.

The Trust has seen a steady rise in Breast referrals over a short period of time; that being an average of 84 per week to an average of 105 per week (19.75% growth). Whilst additional capacity has been made available, performance is now at its lowest ever position, with only 3.77% of patients being seen within 2 weeks for breast symptomatic.

A pilot has been agreed for Urology with the introduction of a new referral form and pathway. This will run for a 6 month period with Wolverhampton GPs.

## Other Contractual Issues

### **Dermatology**

Meetings with RWT are focused on mobilisation and transitions of the service. Further discussions with the Trust are ongoing.

### **Phoenix Walk in Centre**

The contract between RWT and the CCG has been finalised and signed. Discussions continue around CQUIN which remains to be agreed.

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

### Performance/Quality Issues

#### **Improving Access to IAPT**

The Trust has underperformed in April and May 2019 and not met the IAPT target. The CCG has requested a plan of action to aid the Trust in recovery of performance.

#### **Data Quality Improvement Plan (DQIP)**

The CCG has requested a project plan with milestones for the implementation of Graphnet to ensure progression. Meetings will be taking place and the Trust will be asked to work collaboratively to identify Personal Health Budgets with Sandwell and West Birmingham CCG.

## Other contracts

### **Accord Housing Association Ltd – Probert Court**

Contract terms have not been reached between the CCG and Accord; therefore the contract will end 31 June 2019. Arrangements are currently underway to wind down the service and other providers are currently being sourced to take up this service.

### **Acorn Children's Hospice**

The CCG has received correspondence from Acorn stating their intentions to terminate the hospice at home service and the hospice in Walsall.

Patients are currently being consulted and work is underway to assess the impact of the closure and determine alternative provision.

RESOLVED – The Committee noted the updates and actions being undertaken.

## **Review of Risk**

CCM813 The Committee was presented with the current corporate risks and noted that there were no changes but needed updating.

A new addition to the register is –

CC15 – Monitoring of cost concerns after transfer of the Dermatology service.

CC14 – Monitoring to continue on the Acute Dermatology provision.

RESOLVED – That the above has been noted and agreement given to add additional risks linked to dermatology to the risk register and to monitor the new risk.

## **Any Other Business**

There were no items raised under any other business.

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

Thursday 25 July 2019 at 1pm in the CCG Meeting Room 1