

WOLVERHAMPTON CLINICAL COMMISSIONING GROUP COMMISSIONING COMMITTEE

Minutes of the Commissioning Committee Meeting held on Thursday 29th August 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	Yes

Patient Representatives ~

Malcolm Reynolds	Patient Representative	Yes
Cyril Randles	Patient Representative	No

Management ~

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

In Attendance ~

Helen Pidoux	Business Operations Support Team Manager	Yes
Vic Middlemiss	Head of Contracting & Procurement	Yes
Philip Strickland	Governance & Risk Coordinator	Yes (part)
Yvonne Higgins	Deputy Chief Nurse	Yes
Mags Courts	Children's Commissioning Manager	Yes (part)
Sarah Fellows	Head of Mental Health	Yes (part)

Apologies for absence

Apologies were received from Sally Roberts and Cyril Randles.

Declarations of Interest

CCM821 There were no declarations of interest.

Minutes

CCM822 The minutes of the last committee meeting, which took place on 25th July 2019 were agreed as a true and accurate record.

RESOLVED: That the above is noted.

Matters Arising

CCM823 There were no matters arising

Committee Action Points

CCM824 There were no current actions to review.

Better Care Fund – Carers Budget

CCM825 Mags Courts, presented this report on behalf of Andrea Smith, Head of Integrated Commissioning. It was explained that there is a budget within the Better Care Fund Programme allocated to supporting carers, which has to be aligned to schemes involving supporting carers. Two schemes were proposed to support the population of Wolverhampton, over and above the duties of the existing Carers support team;

- Carers 'Information Pop-ups' – currently provided at RWT sites to provide information for patients, their families and carers when visiting the hospital which can help them learn about the support that may be available to them. The additional investment will be used to increase capacity to hold more sessions and in different locations across the area by funding 2 additional members of staff.

How productivity gains would be assessed was discussed and it was agreed that this would be confirmed with Andrea Smith.

- Emergency Home Based Respite Care – An area had been highlighted as a gap across Wolverhampton, which may be required when the carer is no longer able to care for the patient for a period of time, for example if they are ill or have an accident. Confirmation was given that the aim is to keep the individual in their own home if something happens to their carer.

RESOLVED: The Committee approved both schemes with two caveats relating to the Carers 'Information Pop-ups';

- the detailed costs are still to be confirmed but will not, in totality, exceed the budget available.
- how productivity gains are to be assessed is confirmed.

Fixed term investment for Autism Spectrum Disorder (ASD) over 5s pathway to reduce waiting times of those on existing waiting list and assurance around training of staff in Children and Young People (CYP) Improving Access to Psychological Therapies (IAPT).

CCM826 Mags Courts reported that funding had been provided on a permanent basis to BCPFT for an administrative post to support the development and implementation of an ASD diagnostic pathway. Work undertaken had identified that there was an outstanding waiting list for assessments to be undertaken which had not been clearly visible.

It was proposed that addition funding be provided to RWT, BCPFT and WCC to

provide additional clinical psychology, educational psychology and SLT to support the diagnostic process for ASD for those CYP on the waiting list. It was noted that this will allow the new diagnostic service to have clear understanding of future demand for referrals.

Clarification was given that the money for the one off support was from money already received from NHSE and this would not compromise IAPT Training CYP. Clearer data would ensure that a hidden waiting list would not reoccur. The new diagnostic service, which is in line with NICE guidance, will give a clear understanding of future demand for referrals to ensure this does not happen

RESOLVED: The committee endorsed the additional funding with the caveat;

- this would not affect training
- the extent of how the investment will address the backlog is shown

Investing in Speech and Language Therapy (SLT) to provide a service to Youth Offending Team (YOT)

CCM826 Mags Courts informed the committee that research had shown that a high percentage of young people in the justice system have speech, language and communication needs. There is currently no speech and language provision for CYP who are part of the YOT as this is currently not a commissioned service. The proposes provision will not duplicate the current commissioned provision as the existing service accepts referrals for children within a set criteria and is likely that the young people in the criminal justice service will not necessarily be diagnosed with any of these conditions and therefore the referral in to the already commissioned service will not be accepted.

The role of the SLT, who will be specially trained in this area, will work within the multi-agency group in the YOT to work in partnership to prevent re-offending and support young people and their families to support the co-horts emotional mental health and wellbeing. The funding will come from the CAMHS transformational funding.

It was queried how the success of the investment will be monitored and clarification was given that this is through individuals completing rehabilitation programmes, engaging with health teams and health and care plans.

RESOLVED: The committee approved the additional funding as proposed with an update report to be brought back after 1 year.

Mags Courts left the meeting

Yvonne Higgins, Phil Strickland and Sarah Fellows joined the meeting

Trauma Counselling Business Case

CCM827 Sarah Fellows presented the service specification which aims to reduce spot purchasing high cost very specialised intervention from out of the area providers.

Trauma Counselling and Psychological Interventions is a critical gap in terms of the CCG's commissioning and there is an increasing focus on the provision of all mental health services becoming trauma informed trauma aware and trauma responsive across the whole mental health model as per the NHS Long Term Plan.

Trauma informed and Trauma aware staff training commissioned by the CCG commences in November and December, 200 plus places available.

It was queried whether this service was to meet unmet demand or to provide local provision and how a reduction in the use of the providers used at present could be ensured. It was stated that work is being carried out by the BI team to understand the current patient pathways and level of intervention required to inform the service redesign. Clarification was given that all referrals will go through BCPFT.

Cost was discussed and it was highlighted that there is a need to provide a cost comparison between spot purchasing out of area and the new provider. The Finance Team will also need to agree a forecast spend as finances are currently based on budget availability which may be exceeded.

The redesign plans to be reviewed and a risk to be added to the register if appropriate.

RESOLVED: The committee agreed the business case in principle based on an update of financial envelope and provider performance before the end of the year.

Eating Disorder Service

CCM828 Sarah Fellows presented this service specification which had been developed following a joint programme of work managed through the STP Mental Health work programme. The aim of the new specification was to provide a higher quality service for the population and in line with STP footprint partners. This had been collaboratively developed with provider clinicians. It requires sign off by all Black Country CCGs. It is anticipated that the new Eating Disorder Service can be provided within the current joint financial envelope. If this is not the case then consideration will be given to where compromise needs to be affected on a service by service consideration.

It was clarified that this is a well-known service in the Wolverhampton area and self-referrals can be made. The numbers of both urgent and routine referrals are reported to NHSE on a monthly basis.

RESOLVED: The committee approved the Eating Disorder Service Specification.

Contracting Update

CCM829 The Committee was presented with an update for the period August 2019.

Royal Wolverhampton NHS Trust

Performance Targets

Referral to Treatment (RTT) – performance saw further deterioration during June. The issues are being discussed through a number of forums. This includes the Finance and Performance Committee where it is included on the risk register. A Finance and Activity Group had been set up to assess risk mitigation.

A Remedial Action Plan (RAP) had been received including specific departmental actions and speciality level improvement plans to which the CCG had responded as additional information was required..

Contract Performance

Cancer – most significant and concerning issue remains 2 week wait performance for breast cancer patients (and those referrals for breast cancer symptomatic patients). Referrals continue to be greater than the capacity the Trust has to manage them, however, conversion rate are in line with the national rate indicating referrals are appropriate. There are some pathway issues which the Trust is addressing which are being impacted by consultants not covering additional clinics due to national pension issues.

The situation is being closely monitored locally and at an STP level. At the Contract Review meeting it had been clarified that the wait had reduced slightly but was still at 51 days.

RWT is being assisted by other Trusts taking patients that live nearby. GPs are being strongly encouraged/recommended to refer patients to other Trusts where the waiting time is nearer to the standard required.

GPs are also to be made aware that a reiteration of the breast pain pathway is due to comment at the beginning of September.

Other Contractual Issues

Dermatology – the procurement is complete and the contract award has gone to Circle Health. A first meeting had been held and will continue through to the commencement of the new service on 1st December 2019. The issue of stranded costs is close to resolution and are significantly lower than initially stated and at a manageable scale. As these are no longer a risk to the procurement it was recommended that this risk was closed.

Phoenix Walk In Centre – A formal letter had been sent to the Trust confirming acceptance of the business case to expand the service to meet the requirements of transitioning to an Urgent Treatment Centre by 1st December 2019.

The main caveat of the investment is a requirement to make available to the CCG information for all attendances, based on the national dataset for Emergency Care. This will be included as part of normal reporting from Month 9 onwards.

Black Country Partnership Foundation Trust (BCPFT)

Performance/Quality Issues

Improving Access to IAPT

The Trust is still failing to achieve the monthly IAPT target. The Trust has recruited additional staff and is working with the CCG to source accommodation in local GP Practices for new staff. The CCG is in discussion with Primary Care Networks regarding clinical space availability. The Remedial Action Plan will be monitored through the Contract Review Meetings.

Transfer of the non-contract activity funding to the provider – the NHS Long Term Plan states that there should be no out of area placements by March 2021. The Trust has to undertake a considerable amount of due diligence before they accept the budget. To aid this, the CCG had issued a Partnership Agreement outlining the responsibilities of the two parties, the service scope and the risk/gain share agreements.

Other contracts

Accord Housing Association Ltd – Victoria Court

A proposal had been put forward to the provider to change the current bed utilisation by commissioning more step-down beds and less rehabilitation beds. The details of this proposal were to be considered within the private section of this meeting.

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

Review of Risk

CCM830 The Committee was presented with the current corporate and committee level risks. The recommendations to close the following two committee level risks were agreed as discussed earlier in the meeting;

CC15 – Stranded costs within Dermatology

CC14 – Acute Dermatology Provision

RESOLVED – That the above has been noted and the two committee level risks closed

Any Other Business

CCM827 There were no items raised for discussion.

Date, Time and Venue of Next Meeting

Thursday 26th September 2019 at 1pm in the CCG Meeting Room 1

