

**WOLVERHAMPTON CCG**

**Governing Body**  
12<sup>th</sup> November 2019

**Agenda item 11**

<b>TITLE OF REPORT:</b>	<b>Commissioning Committee – November 2019</b>
<b>AUTHOR(s) OF REPORT:</b>	Dr Manjit Kainth
<b>MANAGEMENT LEAD:</b>	Mr Steven Marshall
<b>PURPOSE OF REPORT:</b>	To provide the Governing Body of Wolverhampton Clinical Commissioning Group (CCG) with an update from the Commissioning Committee in November 2019
<b>ACTION REQUIRED:</b>	<input type="checkbox"/> <b>Decision</b> <input checked="" type="checkbox"/> <b>Assurance</b>
<b>PUBLIC OR PRIVATE:</b>	This Report is intended for the public domain.
<b>KEY POINTS:</b>	This report is submitted to meet the Committee's constitutional requirement to provide a written summary of the matters considered at each meeting and to escalate any significant issues that need to be brought to the attention of the Governing Body.
<b>RECOMMENDATION:</b>	That the report is noted.
<b>LINK TO BOARD ASSURANCE FRAMEWORK AIMS &amp; OBJECTIVES:</b>	
<b>System effectiveness delivered within our financial envelope</b>	<u>Meeting our Statutory Duties and Responsibilities</u> This report is submitted to meet the Committee's constitutional requirement to provide a written summary of the matters considered at each meeting and to escalate any significant issues that need to be brought to the attention of the Governing Body.

## 1. BACKGROUND AND CURRENT SITUATION

- 1.1 The purpose of the report is to provide an update from Commissioning Committee to the Governing Body of Wolverhampton Clinical Commissioning Group (CCG) from the November 2019 meeting.



## 2. MAIN BODY OF REPORT – November 2019

### 2.1 Medicines of Limited Clinical Value

The Committee were presented with a report for approval to NHS guidance on 7 new additional items which should not be routinely prescribed in Primary Care. This is an addition to the presentation of a report in June 2019.

An engagement exercise took place in October 2019 via survey monkey. The results show that patients agreed that reviews should be conducted by a health care professional for these medicines. A defined communication programme is planned

The Committee noted the contents and gave approval

**Action - That Governing Body notes the decision made by the Committee.**

### 2.2 Contracting Update Report

#### *Royal Wolverhampton NHS Trust (RWT)*

##### Activity/ Performance

The Committee was updated on the overview and key contractual areas for November 2019.

##### Contract Performance

- Referral to Treatment –performance continues to deteriorate. a recovery action plan has been put in place with a focus departmental actions. This is overseen weekly by a newly appointed oversight group within the Trust and reviewed monthly by the CCG during contracting meetings.
- Diagnostics - The service failed to achieve targets in August and September 2019 due to an increase in referrals for Endoscopy service. Performance deterioration was also compounded by compounded additionally by capacity issues in the Neurophysiology department.
- Cancer – Performance has improved Breast Cancer area as a result of the STP referral diversion programme. Additionally, a recovery plan is



addressing a number of additional factors, main one being workforce recruitment in radiology.

### RWT Planning Round for 2020/21

The planning round has now commenced with first meeting on the 24<sup>th</sup> October 2019, the CCG has expressed the desire to continue with the approach of an open and collaborative process

### Other Contractual issues

Dermatology – the CCG has agreed with the current provider to continue services from the 1 December 2019 to 31 March 2020 by extended contract, the new service will take over from 1 March 2020. The additional contractual month will include the scope of minor surgery to continue for patient referred prior to the end of the extended contract.

Phoenix Walk in Centre – investment has been provided for the migration to an Urgent Treatment Centre.

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

### Performance/ Quality Issues

- Improving Access to IAPT – This service has shown a decline in the month of August. The Trust has advised that July was an usually successful month and also there were a high number of appointment cancelations in August

## ***Nuffield***

### Contractual Issues

This service is currently running under plan at month 6 period in Orthopaedics. A new pathway has been introduced for MSK referrals requiring patients access the service via single point of access to Connect.

Contract negotiations and intentions are currently ongoing with the first meeting taking place on the 15 November 2019.



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

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

This contract has been awarded to WMAS for 5 years with an option to extend for a further 2 years and will commence April 2020.

#### 111 Service

This integration transferred on the 5 November 2019 to WMAS. With the associated planned reduction in conveyances, there exists a potential for a significant saving for the CCG.

#### ***Other contracts***

- Termination of Pregnancy Service– The drafting/finalising of the contract with the new provider is now being completed. The new provider service will commence on 1 January 2020.
- Assisted Conception Service – Invites to tender for this service have been issued. Issues for re-procurement and evaluation will commence on the 20 November 2019.

Resolved: The Committee noted the contents of the update

**Action - The Governing Body notes the updates provided**

### **2.3 Review of Risks**

The Committee received an update of the risk register highlighting the current risks.

The Committee noted the update report

**Action - The Governing Body notes the updates provided**

### **3. RECOMMENDATIONS**

- Receive and discuss the report.
- Note the action being taken.

**Name: Dr Manjit Kainth**

**Job Title: Lead for Commissioning & Contracting**

**Date: 28<sup>th</sup> November 2019**

