

**WOLVERHAMPTON CLINICAL COMMISSIONING GROUP  
COMMISSIONING COMMITTEE**

Minutes of the Commissioning Committee Meeting held on Thursday 28<sup>th</sup> April 2016  
Commencing at 1 pm in the Main CCG Meeting Room, Wolverhampton Science Park

**MEMBERS ~**

<b>Clinical ~</b>		<b>Present</b>
Dr J Morgans (JM)	Chair	Yes

**Patient Representatives ~**

Malcolm Reynolds (MR)	Patient Representative	Yes
Cyril Randles	Patient Representative	No

**Management ~**

Steven Marshall (SM)	Director of Strategy & Transformation	Yes
Claire Skidmore (CS)	Chief Financial Officer	Yes
Manjeet Garcha (MG)	Executive Lead Nurse	No
Viv Griffin (VG)	Assistant Director, Health Wellbeing & Disability	No
Juliet Grainger (JG)	Public Health Commissioning Manager	No

**In Attendance ~**

Vic Middlemiss (VM)	Head of Contracting & Procurement	Yes
Ranjit Khular (RK)	WCC Public Health	Yes
Claire Morrissey (CM)	WCCG Solutions & Development Manager	Yes (Part)
Dr J Burrell	The Royal Wolverhampton Trust	Yes (Part)
Liz Hull	CCG Admin Officer	Yes

**Apologies for absence**

Apologies were submitted on behalf of Manjeet Garcha, Viv Griffin, Sarah Southall and Cyril Randles.

**Declarations of Interest**

CCM477                      None.

RESOLVED:              That the above is noted.

## Minutes

CCM478 Minutes of Commissioning Committee held on Thursday 24<sup>th</sup> March 2016 were accepted as a true record with the following amendment:

### *CCM 471 Community Neighbourhood Team Specification*

**RESOLVED:** *It was agreed to report back to the Committee in May with an indication of the overarching service specification. It was acknowledged that demand profiles will form part of the on-going program of work.*

**RESOLVED:** That the above is noted.

## Matters Arising

CCM479 There were no matters arising.

**RESOLVED:** That the above is noted.

## Committee Action Points

CCM480 (CCM471) Community Neighbourhood Team Specification – An update to be provided to the Committee in May with an indication of the overarching service specification.

(CCM472) Dementia Services & Older Adults Mental Health – Included as an agenda item for the private session of Commissioning Committee.

(CCM473) Learning Disability Community Service - Included as an agenda item for the private session of Commissioning Committee.

(CCM474) Commissioning Committee Draft Annual Report - Progress to be reviewed following an action outstanding from the Committee held in March, whereby it was agreed to update the annual report, to include a future plan and details to demonstrate how the Committee has made a difference. SM to follow up with Peter McKenzie.

**RESOLVED:** That the above is noted.

## **Contracting & Procurement Update**

CCM481

The Committee was provided with an update report relating to Month 11 (February) activity and finance performance and includes commentary and key actions from the Clinical Quality Review and Contract Review meetings conducted in March 2016.

### **Contracting 2016-17**

- The Contract with Black Country Partnership Foundation Trust has been signed.
- The Royal Wolverhampton NHS Trust contract has been signed and arbitration avoided. The following has been agreed:
  - A compromise was agreed on growth
  - Urgent Care Centre – agreed a phased introduction and recognised 2016/17 as a transitional year

The following was not agreed:

- End of Life reduction – A compromise to be agreed and a holistic specification developed
- BCF reduction in non-elective activity - £1.5m diverted into community nursing
- Troponins – A service development improvement plan to be included in the contract
- Money for critical care
- West Midlands Ambulance Service – offer received and agreed as £9.6m. A contract has now been formalised.

### **Royal Wolverhampton NHS Trust**

#### **Percentage of A&E Attendances where the patient was admitted transferred or discharged with 4 hours.**

The Trust's monthly performance has decreased since January from 89.31% to 85.39%, and the RAP trajectory of 95% was not achieved. Commissioners have been asked to withhold 2% of the A&E budget for February and to retain 2% for the month of January, in line with General Conditions of the contract.

#### **Cancer Targets**

Three cancer wait targets did not achieve their targets in February.

The percentage of Service Users waiting no more than one month (31 days) from diagnosis to first definitive treatment for all cancers breached in February achieving 95.65% against a target of 96%.

The percentage of Service Users waiting no more than two months (62 days) from urgent GP referral to first definitive treatment for cancer has increased as expected, following a dip over the Christmas period, from 71.34% in January to 77.85% with an overall Q3 breach of 80.48%. This is directly linked to patients choosing not to have appointments during the holiday period.

The RAP target of 78.0% was not achieved 70.37%.

The percentage of Service Users waiting no more than 62 days from referral from an NHS screening service to first definitive treatment for all cancers dipped from 83.78% in January to 72.00% in February against a 90% target. This was due to bed capacity issues.

### **Referral to Treatment within 18 weeks (January – Unify))**

Overall, throughout the year the Trust has been achieving against this target. However, at speciality level the Trust is failing to achieve in the following areas, for which an updated action plan is in place:

- General Surgery – recovery plan in place
- Gynaecology
- Oral surgery
- Trauma and Orthopaedics
- Urology

### **E- Discharge - RWT**

Wards - The Trust breached this target and achieved 94.59% against 95%.

Assessment Areas –The Trust achieved 84.17% against a target of 95%.

The Trust has acknowledged that they are unable to achieve the target for this year and a bid has been agreed to enable them to progress, which the CCG are reviewing.

### **Performance/Sanctions**

The 2015-16 total sanctions levied to RWT to date equates to £1,402, 080.00 across the whole contract.

The CCG has received thirteen bid applications from RWT; which were agreed at the Clinical Quality Review Meeting in March.

## **Activity & Finance - Acute**

### **Overall Position by Commissioner**

- Over performance for the total contract equates to £9.6m
  - Cannock continues to be the top over performer at £9.9m
  - South Staffs & Seisdon
  - Walsall
- Under performance
  - Stafford & Surrounds
  - Wolverhampton

### **Speciality Performance**

- The Top 10 Specialties equate to £10m of over performance
- General Surgery - £3.3m above plan
- Accident & Emergency - £1.5m above plan

### **Community Services by commissioner**

- RWT - £203k under plan.
- Dudley CCG - £14k above plan
- Shropshire - £78k below plan
- Wolverhampton CCG - £71k below plan
- Walsall - £27k below plan

### **Community – Specialties**

- Community Matrons – £187k above plan (top over performer)
- District Nursing - £167k above plan
- CICT Rehab - £88k
- 14 specialties are under plan equating to £818k of under-performance. The top underperforming specialty is care of the elderly (£329k below plan)

### **Black Country Partnership Foundation Trust**

Action plans are in place for the following areas which are being monitored through the Contract Quality Review Meeting. The action plans are joint plans for both Wolverhampton and Sandwell & West Birmingham CCG with the exception of the early intervention services action plan which is for Wolverhampton CCG only.

- Early Intervention Services
- CPA
- Safeguarding training. A remedial plan is now in place.

## **Performance issues**

There are two open Contract Performance Notices and these were discussed in detail at the February Clinical Quality Review meeting and action plans are being monitored.

## **Other Contracts**

Vocare (Urgent Care Centre Provider) – The service commenced on 1<sup>st</sup> April 2016 and a draft contract has been issued.

Non-Emergency Patient Transport (NSL) – The contract is due to run through until September 2016. There are on-going problems with non-payment of invoices from certain associate commissioners which the CCG is helping NSL to resolve.

RESOLVED: That the above is noted.

## **Business Case Proposal: Provision of a Direct Access Diagnostic Spirometry Service (Wolverhampton and South Staffordshire GP Surgeries)**

CCM482

The Committee was presented with a report requesting approval of the Direct Access Diagnostic Spirometry Service Business Case received from RWT.

- Spirometry is an essential investigation for diagnosis and severity assessment for people living with respiratory conditions such as COPD and Asthma. Nationally, most COPD cases are undetected and it is estimated that there are approximately 2.2 million people living with COPD that do not have a confirmed diagnosis.
- Locally, there are circa 5,000 patients currently on a primary care COPD register, and it is estimated on average that there are approximately 40 new cases diagnosed each month.
- Analysis from the Right Care Commissioning for Value kit (January 2016) demonstrates that Wolverhampton CCG underperforms against the mean of its peer group by 20%.
- National and local evidence indicates that there is a vast increase in admissions related to respiratory conditions. Locally, the CCG has an admission rate for COPD of 2.48/1000 which is above the regional and national means.
- Data provided by the CSU indicates that for Wolverhampton CCG respiratory spend was £8,642,664 against the RWT contract for 2014/15.
- The CCG has a local quality premium target for 2016/17 to improve recorded prevalence by 10% against estimated prevalence, this equates to circa 500 patients being added to primary care registers.

- The CCG is currently working with clinical leaders and Graphnet business intelligence analyst embedded within the CCG to develop a case finding algorithm utilising prognostic indicators to provide practices with a list of patients who may benefit from an enhanced review and further diagnostic testing.

RESOLVED: The Committee agreed to approve the Business Case in principle with the view that a clearer financial position is reported on next month.

### **Aiming High Agenda Business Case**

CCM483 Deferred until the Committee meeting in May.

RESOLVED: That the above is noted.

### **Any Other Business**

CCM484 None to discuss.

RESOLVED: That the above is noted.

### **Date, Time & Venue of Next Committee Meeting**

CCM485 Thursday 26<sup>th</sup> May 2016 at 1pm in the CCG Main Meeting Room.