

WOLVERHAMPTON CCG

Governing Body Meeting – 13th September 2016

Agenda item 10a

Title of Report:	Commissioning Committee – Reporting Period July 2016
Report of:	Dr Julian Morgans
Contact:	Steven Marshall
Governing Body Action Required:	<input type="checkbox"/> Decision <input checked="" type="checkbox"/> Assurance
Purpose of Report:	To provide the Governing Body of Wolverhampton Clinical Commissioning Group (CCG) with an update from the Commissioning Committee in July 2016.
Public or Private:	This Report is intended for the public domain.
Relevance to CCG Priority:	
Relevance to Board Assurance Framework (BAF):	
<ul style="list-style-type: none"> • Domain 1: A Well Led Organisation 	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.
<ul style="list-style-type: none"> • Domain 2a: Performance – delivery of commitments and improved outcomes 	N/A
<ul style="list-style-type: none"> • Domain 2b: Quality (Improved Outcomes) 	N/A

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• Domain 3: Financial Management	N/A
• Domain 4: Planning (Long Term and Short Term)	N/A
• Domain 5: Delegated Functions	N/A



1. PURPOSE OF REPORT

- 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) for the period of July 2016.

2. MAIN BODY OF REPORT

2.1 Contracting & Procurement Update – Month 2/May 2016

The Committee was provided with an update report relating to Month 2 (May) activity and finance performance. It also included commentary and key actions from the Clinical Quality Review and Contract Review meetings conducted in July 2016.

Royal Wolverhampton NHS Trust

Sustainability and Transformation Fund (STF)

The Trust has formally signed up to this incentive scheme and access to £10.5m. The Trust must deliver against financial control targets (70%) and contractual targets (30%). The implications are that the CCG cannot apply withholds or sanctions in the following areas:

- A&E 4 hour waiting times
- 62 day cancer waiting times
- Referral to treatment incomplete pathways
- Over 6 week diagnostic waiting times

Activity figures will continue to be performance managed by the CCG .

Performance Sanctions

Financial sanctions for Month 2 are £28,250.

A&E coding

An issue relating to coding in A&E has been identified as there is a significant shift of activity re categorisation. A meeting has taken place with the Trust and a response is expected by 29th July 2016. If the response received is not satisfactory a formal activity query will be raised and an independent external audit will be initiated.



Other Contracts

Vocare (Urgent Care Centre provider) – The contract is still awaiting signature. This is a formality but is a risk to the CCG given the service has been delivered since 1st April 2016. The situation has been flagged to the provider and a resolution is being sought as a matter of urgency.

Procurement Schedule

Translation Services

The expected start date for the service has been revised to 1st December 2016, to allow the new provider time to mobilise.

It was unclear where this decision was made and clarity was requested.

Black Country Partnership Foundation Trust

Local Authority

Discussions have taken place regarding the Local Authority becoming an associate commissioner to the BCP contract. The aim is for this to take effect from 2017/18 rather than as an in year CVO. Also the issue of £1.3m Learning Disability funds, which is within the contract value but is money the CCG has to invoice the Council for each year needs to be resolved as the Local Authority does not want to include this.

Action – The Committee request that Governing Body note the above.

2.2 QIPP Outcomes & Lessons Learnt

The Committee was presented with a report that set out the achievements and lessons learnt in relation to QIPP.

In order to report via Non-ISFE reporting, the CCG reported its March 2016 position on 15th April 2016 to coincide with the production of annual accounts. Validation of activity for March was not possible, until after the end of the financial year i.e. early May, an estimate for BCF was incorporated in the QIPP figures in order to make the submission.

Total QIPP delivery (as per the M12 Non ISFE Return) was £10,309.00. The delivery was at 87% of the QIPP target which is the best performance since the CCG began.



The actual final reported position for BCF was an increase in savings of £180,988, giving a revised total savings of £1,516,988. The CCG is unable to amend the position reported in April but has subsequently reported the final position internally.

The achievements of all the Programme Boards have been considered to give an understanding of the reasons for the variations. The lessons learnt have been used to inform planning and modelling going forward.

An internal audit of the QIPP process was completed earlier in the year. Three recommendations were made in the report which was reviewed by the QIPP Board. It was felt that the changes had already begun to support a new QIPP process, before the circulation of the report. Therefore, the Board was assured that within 2016/17 the changes required were already identified and addressed.

Improvements have been made in the monitoring and management of projects. The development of a clearly defined process has allowed non-performance to be identified earlier and for projects to be stopped if not achieving the savings anticipated. There is now assurance of planning and the reporting of planning through defined project stages which are traced through the Programme Boards and QIPP board.

Action – The Committee request that Governing Body note the above.

3. RECOMMENDATIONS

- **Receive** and **discuss** this report.
- **Note** the action being taken.
- **Note** the recommendations made by Commissioning Committee

Name
Job Title
Date:

Dr Julian Morgans
Governing Body Lead – Commissioning & Contracting
28th July 2016

