

WOLVERHAMPTON CLINICAL COMMISSIONING GROUP GOVERNING BODY

Minutes of the Governing Body Meeting held on Tuesday 13 December 2016
Commencing at 1.00 pm at Wolverhampton Science Park, Stephenson Room

VOTING MEMBERS ~

Clinical ~		Present
Dr D De Rosa ~ Chair	Board Member	Yes
Dr D Bush	Board Member	No
Dr M Kainth	Board Member	Yes
Dr J Morgans	Board Member	Yes
Dr R Rajcholan	Board Member	Yes
Management ~		
Ms T Curran	Interim Chief Officer	Yes
Ms M Garcha	Executive Lead for Nursing and Quality	Yes
Mr S Marshall	Director of Strategy and Transformation	Yes
Ms C Skidmore	Chief Finance Officer/Chief Operating Officer	Yes
Lay Members/Consultant ~		
Mr J Oatridge	Lay Member	No
Mr P Price	Lay Member	Yes
Ms P Roberts	Lay Member	Yes
Ms H Ryan	Lay Member	No

In Attendance ~

Ms K Garbutt	Administrative Officer
Mr M Hastings	Associate Director of Operations
Mr R Jervis	Public Health Director
Mr P McKenzie	Corporate Operations Manager
Mr P Strickland	Administrative Officer (Observer)
Mr D Watts	Wolverhampton Council

Apologies for absence

Apologies were received from Dr D Bush, Mr J Oatridge and Ms H Ryan

Declarations of Interest

- **Chairman's update**

WCCG.1651 Dr D DeRosa presented the report which is to advise the Governing Body of a potential Conflict of Interest being Chairman in relation to discussions taking place between his practice and the Royal Wolverhampton Trust (RWT) in relation to entering into an arrangement for GP services to be sub-contracted to the Trust and for the Governing Body to discuss how this conflict will be managed. In response to a question, Dr De Rosa confirmed that the discussions between RWT and the practice were focused on any sub-contracting arrangement beginning in April 2017 and that this was the earliest date this would occur. In line with the process for agreeing such subcontracting arrangements, this decision was likely to come before the Primary Care Joint Commissioning Committee in February 2017.

Dr De Rosa left and Ms P Roberts took the Chair

The Governing Body considered two key questions, whether the potential conflict outweighed the advantages of Dr De Rosa remaining as Chair of the Clinical Commissioning Group (CCG) and, if it did not, how the conflict would be managed. During the discussion, the Governing Body noted that Dr DeRosa had updated his entry in the Register of interests and discussed the steps Dr DeRosa had suggested for managing the conflict of interest:-

- The conflict would be actively declared at the beginning of each meeting.
- With the support of the Conflict of Interest Guardian and the Corporate Operations Manager, the Governing Body would determine if the conflict of interest in any item relating to RWT required any action to take place to mitigate the conflict.
- Action would potentially include Dr DeRosa taking part in the discussion but stepping down from the chair for that item of business or leaving the meeting for particular items of business.
- This would apply to discussions of RWT's Finance and Quality Performance and in particular to any discussions of action to be taken by the CCG in relation to RWT's performance.

- Dr DeRosa would not take part in discussions which relate directly to RWT's delivery of Primary Care Services or any approval or assurance process that they or the practices they are working with are conducting.

During the discussion, it was highlighted that not participating in activity relating to contracting or contract negotiations should also be added to the above list. The Governing Body recognised that such conflicts of interests were likely to continue to be a feature of future work as new models of care developed and more services were provided in Primary Care settings. Robust approaches to managing these conflicts would be required to ensure the CCG maintained clinical leadership whilst taking appropriate action to ensure its business was conducted with the highest standards of integrity and that public confidence in its work was maintained.

It was noted that the general provisions of the CCG's policy for declaring and managing conflicts of interest would apply to any action taken to manage conflict of interest, this would include ensuring that Dr De Rosa did not receive copies of papers which contained confidential or privileged information in relation to matters in which he was conflicted to the extent he would be excluded. It was also noted that Mr J Oatridge, in his role as Conflict of Interest Guardian would play an active role in providing advice and guidance to support both the Governing Body and Dr De Rosa in managing the conflict and determining when action needed to take place. In line with the CCG's Policies and Procedures, clear records of the advice given and actions taken would be maintained. A vote was taken and, with the understanding that the action outlined would be put into place it was agreed that Dr De Rosa would be able to remain in place as Chair of the CCG pending a final decision being made on the practice entering into a sub-contracting arrangement with the Trust by consensus of the eight Governing Body members present.

Dr De Rosa returned to the meeting

Ms Roberts reported the agreed position to Dr De Rosa who thanked the Governing Body and agreed to give updates on a regular basis. It was noted that no matters on the agenda would require Dr De Rosa to take any action to mitigate the conflict during this meeting.

There were no further declarations of interest made.

RESOLVED:

- 1) That the Governing Body agrees that the potential conflict related to Dr De Rosa's practice discussing a sub-contracting arrangement with

Royal Wolverhampton Trust does not, at this stage outweigh the benefits of him remaining as Chair of the Governing Body

- 2) That the potential conflict of interest will be managed in accordance with the following general approach:-
 - The conflict of Interest will be actively declared at the beginning of each meeting
 - With the support of the Conflict of Interest Guardian and the Corporate Operations Manager, the Governing Body will determine if the conflict of interest in any item relating to RWT requires any action to take place to mitigate the conflict (such action to potentially include Dr De Rosa vacating the chair and taking part in discussions or leaving the meeting for particular items of business)
 - This action is to apply to discussions of RWT's Finance and Quality Performance and in particular to any discussions of action to be taken by the CCG in relation to RWT's performance.
 - Dr De Rosa not to participate in activity relating to contracting or contract negotiations with The Trust or in discussions which relate directly to their delivery of Primary Care Services or any approval or assurance processes that they or the practices they are working with are conducting
- 3) That the Governing Body continue to review this position up to and including the point when a final decision is made in relation to Dr De Rosa's practice.

Dr De Rosa resumed the Chair

Minutes

WCCG.1652

RESOLVED:

That the minutes of the Wolverhampton Clinical Commissioning Group Governing Body meeting held on the 8 November be approved as a correct record. However the following item was noted ~

Minute 1619 – Action plan on the CCG Board Assurance Framework following the Governing Body Development Session on 27 September 2016

Ms Roberts pointed out that the third sentence in the second paragraph should read “Ms Roberts added that a regular risk register could also be included as a stand-alone item on the agenda”.

Minute 1620 – Outcome on Pond Lane Consultation

Mr Marshall stated that the second paragraph should read “Mr Marshall confirmed a proportional consultation had taken place”.

Minute 1624 – Quality and Safety Committee

Mr P Price stated he raised at the meeting that “the number of Never Events should be reported to Care Quality Commission (CQC) regarding our concerns”.

Matters arising from the Minutes

WCCG.1653 There were no matters arising from the minutes.

RESOLVED: That the above is noted

Committee Action Points

WCCG.1654 RESOLVED: That the progress report against actions requested at previous Board meetings be noted with the following updates ~

Minute 1553 – Emergency Preparedness, Resilience and Response (EPRR)

A progress report is on the agenda for today’s meeting.

Minute 1619 - Action plan on the CCG Board Assurance Framework (BAF) – update on the progress of the action plan

Ms Garcha reported that a mock BAF has been forwarded to the Governing Body and this will be discussed at the Governing Board Development session on the 24 January 2017.

Minute 1621 – Equality Delivery System 2

Ms Garcha reported this is progressing and this will be completed by the end of March 2017.

Minute 1623 – Commissioning Committee, The Children and Young People’s Mental Health and Wellbeing Local Transformation Plan

Mr Marshall confirmed this has been completed and distributed. This is also available on the website.

Chief Officer update

WCCG.1655 Ms T Curran presented the report. She highlighted that the CCG has received a 'Green Star' rating from NHS England for Quarter 1 assurance assessment.

Ms Curran stated that the formal contract negotiation processes have been put into place with the 3 main contracts which the CCG is lead commissioner for. She reported that Black Country Partnership Foundation Trust and Nuffield Health have agreed. She stated that the CCG are confident that the negotiations with the Royal Wolverhampton Trust can be resolved.

The Health Service Journal (HSJ) Awards took place on the 23 November 2016. Wolverhampton CCG's Primary Eye Care Assessment and Referral Services (PEARS) service was shortlisted as a finalist under the category of Best Adoption and Diffusion of Best Practice. Unfortunately the CCG was competing against a number of strong contenders and lost out to Belfast Health and Social Care Trust.

Ms Curran pointed out the Proactive Media Plan will be presented to the Governing Body for comment and approval in February 2017.

She updated colleagues on the work being done on 'demand management' regarding referral diversion to other providers of choice to ensure referrals to treatment times are met. A dedicated project manager is in place to support GP practices and the CCG with this work.

RESOLVED: That the Proactive Media Plan will be presented to the Governing Body for comment and approval in February 2017.

Operating Plan 2017 - 2019

WCCG.1656 Mr P McKenzie gave an overview of the Operating Plan. NHS England are broadly happy with the document with some minor amendments and additional detail to be included in the large table within the document. He pointed out the key priorities for delivery under 2.3 of the report. Ms Roberts pointed out the wording on the first page of the DRAFT Operating Plan – "The STP, agreed in November 2016 aims to materially improve the health, wellbeing and prosperity..." She felt the word "prosperity" should be amended. It was agreed that some additional words should be included.

Mr McKenzie confirmed there are clear links with the Health and Wellbeing Board and sharing with partners will take place in the New Year.

RESOLVED: That the Governing Body approved the working draft of the Operational Plan and authorise the Executive team to make the necessary amendments to the plan and submit the final version to NHS England.

Delegation of Authority to sign 2017 – 2019 Contracts

WCCG.1657 Mr Marshall presented the report to request the Governing Body to authorise the Interim Accountable Officer, supported by the Chief Finance and Operating Officer and the Director of Strategy and Transformation, to sign contracts with providers on the required date. Mr Marshall confirmed this is for permission only to sign if agreement is achieved.

RESOLVED: That the Governing Body authorises the Interim Accountable Officer, supported by the Chief Finance and Operating Office and the Director of Strategy and Transformation, to sign contracts with providers on the required date.

Emergency Preparedness, Resilience and Response (EPRR)

WCCG.1658 Mr M Hastings presented the report. He highlighted the Risks and Implications within the report.

Ms C Skidmore arrived

RESOLVED: That the above is noted

Update on Black Country Sustainability and Transformation Plan

WCCG.1659 Ms Curran presented the report. A public event took place in December which was attended by Mr Marshall which was around the Sustainability Transformation Plan (STP). Mr Marshall reported there were approximately 200-250 attendees from a variety of settings. There were a number of breakout sessions and items to consider.

Attendees were reassured the need to move on from this planning. STP is in line with our plans as a CCG and the Governing Body will receive further updates.

Mr Watts stated he presented STP to the Council Executive Board and the feedback from them was that all partners from each organisation are involved. Discussions took place regarding having a simpler document, as yet this is not available. However further updates will be provided to the Governing Body in March 2017.

RESOLVED: That the Governing Body agreed to receive a further update in March 2017.

Update of Future Commissioning across the Black Country

WCCG.1660 Ms Curran presented the report. Following a meeting of the Accountable Officers across the Black Country in October it was agreed that a single version of a paper would be taken to each of the four CCG Governing Bodies to discuss potential future commissioning arrangements. The objective is to establish, if possible, a common consensus for collaboration between the four CCGs. She pointed out that staff have been fully briefed and are aware that this does not change the CCGs statutory duties or considerable local (Wolverhampton) place based agenda.

Ms Curran reported that Dr De Rosa and herself attended a meeting which was useful. Discussions took place around working together. Dr De Rosa pointed out the importance of concentrating on local models initially and then working collaboratively.

RESOLVED: That a draft update of Future Commissioning will go to the Governing Body in January 2017.

Update on New Care Models

WCCG.1661 Mr Marshall gave an overview of the report which provides an update with regard to current new models of care configuration and supporting activities to deliver against this. He highlighted there remains an as yet un-quantified risk to services and outcomes as a result of the adoption of new models of care. The CCG intends to mitigate this by instituting a structured development programme of capacity and capability enhancement with the new practice Groupings/Collaborations/Federations in line with the transfer of services to the new models. By learning from early adoption or concurrent activity taking place in other health economies, the CCG will minimise disruption to the effective functioning of services in the Wolverhampton health economy as a whole.

RESOLVED: That the above is noted.

Commissioning Committee

WCCG.1662 Dr J Morgans presented the report and highlighted 2.1 Care Pathway Clinical Decision Support System. The CCG pays for the DXS clinical decision support system in all 45 GP practices in Wolverhampton, however, the system is used by only 8 practices. Mr Marshall added that this system is too complex to use day to day in practices. A full needs and operational assessment needs to be developed and decommission the current service. The Governing Body supported this decision.

Dr Morgans congratulated the prescribing advisers for their work regarding the success of the decommissioning of Glucosmine.

RESOLVED: That the above is noted.

Quality and Safety Committee

WCCG.1663 Dr R Rajcholan presented the report and highlighted the key issues of concerns within the report. Mr D Watts referred to the pressure injury incidents and how confident are the CCG that the correct work is being carried out. Ms Garcha confirmed that the Trust are carrying out training/education and dashboards are in place. Mr Watts asked if the trend in the graphs could be over a longer period of time and Ms Garcha agreed this could take place.

Mr McKenzie requested that the downgraded changes are made clear in the report. Ms Garcha agreed.

RESOLVED: That the above is noted.

Finance and Performance Committee

WCCG.1664 Ms C Skidmore reported that currently contract negotiations are taking place with Mr Kevin Stringer at RWT. We have stabilised the position for this year and landed a number of contracts with the Trust for next year. Good progress is still taking place in order to stop mediation.

She reported that the Quality, Innovation, Productivity and Prevention (QIPP) programme performance is similar to previous months.

RESOLVED: That the above is noted.

Audit and Governance Committee

WCCG.1665 Ms Skidmore presented the report and confirmed the recruitment of a new lay member has been successful, Mr Dean Cullis, Lay Member.

RESOLVED: That the above is noted.

Primary Care Joint Commissioning Committee

WCCG.1666 Ms Roberts presented the report and highlighted the key points. A CCG members Meeting took place in October 2016 to focus upon how practices will be commissioned from 1 April 2017. An application was presented to the Committee to close a branch site of Dr M K Pahwa and Partners at Park Street South, Wolverhampton. The Committee approved the steps

that will be required for the CCG to make an application for full delegation of Primary Medical Services in line with the intention set out in the Primary Care Strategy.

RESOLVED: That the above is noted.

Primary Care Strategy Committee

WCCG.1667 Mr Marshall gave assurance on progress made towards implementation of the CCGs Primary Care Strategy.

RESOLVED: That the above is noted.

Communication and Engagement update

WCCG.1668 Ms Roberts gave an brief overview of the report.

RESOLVED: That the above is noted.

Minutes of the Quality and Safety Committee

WCCG.1669 RESOLVED: That the minutes are noted

Minutes of the Commissioning Committee

WCCG.1670 RESOLVED: That the minutes are noted.

Minutes of the Finance and Performance Committee

WCCG.1671 RESOLVED: That the minutes are noted.

Minutes of the Primary Care Joint Commissioning Committee

WCCG.1672 RESOLVED: That the minutes are noted.

Minutes of the Primary Care Strategy Committee

WCCG.1673 RESOLVED: That the minutes are noted

Minutes of the Audit and Governance Committee

WCCG.1674 RESOLVED: That the minutes are noted.

Minutes of the Health and Wellbeing Board

WCCG.1675 RESOLVED: That the minutes are noted.

Any Other Business

WCCG.1676 There were no matters.

RESOLVED: That the above is noted.

Members of the Public/Press to address any questions to the Governing Board

WCCG.1677 **Question**

Date of Next Meeting

WCCG.1678 The Board noted that the next meeting was due to be held on **Tuesday 10 January 2017** to commence **at 1.00 pm** and be held at Wolverhampton Science Park, Stephenson Room.

The meeting closed at 3.30 pm

Chair.....

Date