# WOLVERHAMPTON CLINICAL COMMISSIONING GROUP GOVERNING BODY

Minutes of the Extraordinary Governing Body Meeting held on Tuesday 10 January 2017 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	Yes
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
Dr H Hibbs	Chief Officer	Yes
Mr S Marshall	Director of Strategy and Transformation	Yes
Ms C Skidmore	Chief Finance Officer/Chief Operating Officer	Yes
Lay Members/Consultant	t~	
Mr J Oatridge	Lay Member	Yes
Mr P Price	Lay Member	Yes
Ms P Roberts	Lay Member	Yes
Ms H Ryan	Lay Member	Yes

#### 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

## Apologies for absence

Apologies were received from Mr D Watts.

## **Declarations of Interest**

WCCG.1690 Dr D De Rosa declared an interest as currently discussions are taking place with his practice and the Royal Wolverhampton Trust with a view to GMS services being sub-contracted to the Trust as part of the vertical integration project. There was not a conflict between this interest and any of the items on the agenda so Dr De Rosa remained in the Chair throughout the meeting.

RESOLVED: That the above is noted.

## Minutes

## WCCG.1691 Minute WCCG 1651 – Chairman's update

Ms P Roberts commented that the minutes provided a clear record of the discussion but suggested that it would be helpful to add a note to highlight that a serious and lengthy discussion had taken place in view of the potential risk to the Wolverhampton Clinical Commissioning Group (CCG). Mr J Oatridge also commented on the importance that the record of this discussion was clear as it demonstrated that the Governing Body had identified the issue and discussed and agreed the most appropriate course of action to take.

# Minutes WCCG 1664 – Finance and Performance Committee

Ms C Skidmore reported the first paragraph should read "currently negotiations are taking place with Mr Kevin Stringer at RWT. We have stabilised the position for this year and next year. Good progress is still taking place in order to stop mediation".

#### RESOLVED:

That the minutes of the Wolverhampton Clinical Commissioning Group Governing Body meeting held on the 13 December 2016 be approved as a correct record subject to the above amendments:-

#### Matters arising from the Minutes

WCCG.1692 There were no matters arising from the minutes.

RESOLVED: That the above is noted

#### **Committee Action Points**

WCCG.1693 RESOLVED: That the progress report against actions requested at previous Board meetings be noted.

Dr De Rosa welcomed Dr Helen Hibbs back to the Governing Body meeting. Dr Hibbs stated she will be returning to work at the beginning of February 2017 and thanked Ms T Curran, Executive team and staff for taking Wolverhampton CCG forward.

#### Contracting 2017 – 2019 update

WCCG.1694 Mr Marshall confirmed that all the major contracts have been signed. There had been some delay regarding the RWT contract as a number of items required ironing out and considerations given. Authority had been delegated by the Governing Body for Ms Curran, Ms Skidmore and himself to carry out the final sign off.

> Dr De Rosa congratulated the team on an excellent performance. It has been a difficult contracting year and thanked all the staff on behalf of the Governing Body.

> Ms Skidmore reported that details of the finance plan will go to the Finance and Performance Committee in January 2017 and there will be a paper for sign off at the Governing Body in February 2017. There are still some areas of high risk which could be particularly challenging. The greatest concern is the extent of the Quality, Innovation, Productivity and Prevention (QIPP) we are carrying over to next year. The target is £12m which is 3.4% of our overall allocation. She pointed out that £9m represents contracts which give us a good start to the next financial year.

Dr S Reehana arrived

Mr Oatridge asked if there is anything in the current year outcomes in QIPP to carry forward. Ms Skidmore stated that we are not meeting our target where we have handover built into the contracts. Ms Curran added that it had been a challenging process to obtain signed contracts by the 23 December 2016. There has been a huge achievement with the level of negotiation led by Mr Marshall and Ms Skidmore. NHS England were kept involved at all times to achieve positive outcomes. Mr Marshall thanked Dr J Morgans for his negotiations for a £4.1m of cost reduction through the Better Care Fund. Dr Morgans gave a considerable amount of clinical engagement and support for the contracting process.

RESOLVED: That the finance plan to be submitted to the Governing Body in February 2017 for sign off.

## Finance and Operating Plan

WCCG.1695 Mr Marshall thanked Mr P McKenzie for his help. Following feedback from NHS England, some minor amendments had been made to the version submitted to the Governing Body in December and this was approved on 6 January 2017. The document has been submitted and published on the website. The final document will come to the Governing Body in February.

RESOLVED: That the final Finance and Operating Plan be submitted to the Governing Body in February 2017.

#### Future Commissioning across the Black Country

WCCG.1696 Ms Curran presented the report. The document is in line with the outline of discussions between Wolverhampton, Dudley, Sandwell and West Birmingham and Walsall CCG's. The report is available on the website. Wolverhampton CCG staff are aware that this is being discussed today at the Governing Body. The outcome of today's meeting will be discussed at a staff meeting taking place on the 11 January 2017.

The report is going to each Governing Body in January 2017 – all meetings are being held in public session. It is intended to facilitate discussion in each of the four CCGs on the future of commissioning arrangements. The paper set out the context for developing new commissioning arrangements for the Black Country, including the ambitions set out in the STP and contained recommendations for a collaborative approach to commissioning to be agreed by each Governing Body.

Ms Curran gave an overview of the proposals for Joint Commissioning for Dudley, Sandwell and West Birmingham, Walsall and Wolverhampton CCG Governing Bodies on pages 6 – 14 of the report. This included a series of steps and proposed timescales that were discussed in depth by the Governing Body. Ms Roberts queried whether the dates on page 12 – April 2018 and on page 14 under section 7 (b) April 2019 were consistent. Ms Curran confirmed the dates are correct and referred to a series of actions within the process.

Mr Oatridge asked whether the direction of travel set out in the paper reflected the ambitions of the other CCGs. Ms Curran stated that the paper was the outcome of discussions between the Accountable Officers and Chairs of the four CCGs who had agreed to bring the paper to Governing Bodies for discussion.

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Mr Marshall expressed a number of concerns about the conclusions drawn within the paper, which had then been used to make specific recommendations. In particular, he commented on the overall intention to move to a dual approach to commissioning on both a Black Country and local level where appropriate. The paper suggested that the local level of commissioning would need to be consistent across all four areas, which failed to recognise both local need, relationships with local authorities and other partners and existing commissioning strategies. He also pointed out that the developing multispecialty community providers (MCP) contract arrangements already presented a number of options as there were three distinct forms of contract open to use. It was not yet clear which of these was most appropriate for Wolverhampton and the other CCGs would be taking a view based on their individual strategies. He also commented on the risk to our financial position and staff as a result of additional demands on time as a result of greater collaboration.

Ms Skidmore endorsed Mr Marshall's comments and highlighted that, whilst she recognized the need to do something different, it was important to ensure that the function of new arrangements were agreed before existing structures were dismantled. In particular, she highlighted the importance of ensuring there was clarity around the authority delegating to any joint committee. She also expressed concern about the potential pressure on CCG running costs, highlighting that, two of the other CCGs were significantly larger and that Wolverhampton did not enjoy the same flexibility in running costs.

Dr Morgans stated that he found the paper disjointed and that, whilst he had concerns about some of the specific recommendations, he recognized the need to work more closely together. In particular, he did not support the proposal to move to joint board meetings, we have a separate identity.

Ms R Jervis stated we do need to do things differently however we need to proceed with caution. She expressed concern regarding the pace of change, we need a clear understanding of what change is aiming to achieve.

Mr Oatridge agreed with Ms Jervis' points commenting that the rationale for the change did not come through strongly in the paper. He highlighted the importance of the CCG engaging with the process of change to influence the direction of travel, stressing the importance of engagement, collaboration, commitment and leadership in taking this forward.

Ms Roberts supported Mr Oatridge's comments and highlighted the role of the Governing Body in making a strategic decision how we are going to serve the patients and public in Wolverhampton and the impact on care in the future. Whilst she recognized the concerns about the timescales set

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out in the paper, she highlighted the importance of setting a clear trajectory.

Dr D Bush stated that there is an existing track record of other approaches to collaboration which have been successful and that the proposals set out in the paper seemed rushed. Ms Curran agreed that the narrative felt rushed but it was based on a more lengthy discussion and that, whilst there were issues with the detail it was helpful to have a written document that recognized that there are certain things we have to collaborate on. She also highlighted the importance of engaging early to shape engagement.

Dr Morgans commented on the CCG's existing strategy and plans and the need to do what is right for Wolverhampton patients, public and staff. Ms Curran recognized the importance of bringing staff along with the transformation, stating that as a small organisation with good staff was important to retain and provide opportunities for development, some of which would be through greater collaboration. Mr Hastings added the importance effective communication in managing change, we need to know where we are going in order to communicate correctly.

Ms H Ryan drew the parallel between this discussion and those that had taken place in GP practices around new models of care. This had included staff concerns regarding the challenges around the different options. Dr Hibbs pointed out that the British Medical Association has released some information regarding MCP contracts and explains the three contracts. The Local Medical Council has forwarded this to practices.

Mr Price reemphasised the importance of having a clear rationale for change, recognising the uncertainty that would be created. Mr Oatridge added if we engage we need this to include encouraging involvement of staff across the CCG to fully engage to influence the agenda. Mr Hastings commented on ongoing work under the auspices of the STP to look at how we can involve staff in the change across the Black Country. Ms Curran stated we are here to serve our population. The issue is how much we collaborate on. Ms Roberts reiterated it is not about us around the table it is about the population and how we serve them in the future. Dr Hibbs emphasised the importance of recognising that that there is a lot more work to refine the proposals which needs further discussion. Ms Roberts emphasised the importance of all four CCGs having an equal say in collaborative arrangements.

Ms Curran pointed out that a further meeting with Accountable Officers and Chairs from all four CCG's is scheduled to take place on the 9 February 2017. The Governing Body went on to consider the next steps and recommendations outlined in the paper. Ms Curran outlined the next steps set out in the paper  $\sim$ 

- It was agreed at the meeting between Chairs and Accountable Officers that this paper would be taken to each public board in January 2017.
- Chairs and Accountable Officers would meet again as a group in February 2017 to review comments from each Governing Body.
- A workshop with Executive and senior staff will be arranged in February 2017 to explore logistics.
- A further paper will be taken to each respective Governing Body in March 2017 which sets out the discussions from each Governing Body in January, and if agreed as a next step, the details developed from the senior workshop in February 2017.

The Governing Body supported these next steps and recognised that it was not possible to support the specific recommendations without the further discussion that would take place at the meetings agreed.

# RESOLVED:

- 1) That the Governing Body recognise the urgency of moving forward with greater collaboration across the Black Country.
- That the Chair and Accountable Officer meet their colleagues from the other CCGs in February to review comments from the Governing Body meetings.
- 3) That the Executives and Senior staff participate in the workshop to further discuss the recommendations in February 2017.
- 4) That a further paper be brought to the Governing Body in March 2017, setting out the discussions from each Governing Body in January and the outcomes of the workshop.
- 5) That the following comments be made on the recommendations made in the paper:-
  - **Recommendations 1 & 2 –** The Governing Body believe that further work is needed on clarifying the intention of these recommendations before they can be endorsed. This should be

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discussed at the meetings of both Accountable Officers and Chairs and the Executive Workshop

- **Recommendations 3-5** The Governing Body supports the principle of establishing a Joint Committee and Clinical Board but further work is required on the detail of the work that is to be undertaken and the Terms of Reference before it will be possible to commit to a timescale. The draft Terms of Reference are not supported and required significant further work.
- Recommendation 6 The Governing Body support the intention, provided that it is recognised that the establishment of new contractual frameworks reflects local needs and existing plans
- **Recommendation 7** The Governing Body is not able to commit to either recommendation 7a or 7b without significant further discussion as outlined above.

## Any Other Business

WCCG.1697 Mr Price noted that Ms Skidmore had been shortlisted for the HFMA National Director of Finance award and, whilst she had not been successful in winning the award it was a significant achievement to be shortlisted. The Chair led the Governing Body in congratulating Ms Skidmore.

Mr McKenzie advised that he had received notification that our application for constitution variation submitted in December 2016 has been approved by NHS England.

The Governing Body noted that it was Trisha Curran's final Governing Body meeting as interim Accountable Officer. Dr De Rosa thanked Ms Curran for her support and help to the CCG in Dr Hibbs' absence.

RESOLVED: That the above is noted.

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

WCCG.1698 There were no questions.

#### Date of Next Meeting

WCCG.1699 The Board noted that the next meeting was due to be held on **Tuesday 14 February 2017** to commence **at 1.00 pm** and be held at Wolverhampton Science Park, Stephenson Room.

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The meeting closed at 3.30 pm

Chair.....

Date .....