

WOLVERHAMPTON CLINICAL COMMISSIONING GROUP

Finance and Performance Committee

Minutes of the meeting held on 29th November 2016
Science Park, Wolverhampton

Present:

Mr P Price	Independent Committee Member (Chair)
Mr M Hastings	Associate Director of Operations (part meeting)

In regular attendance:

Mr G Bahia	Business and Operations Manager
Mr V Middlemiss	Head of Contracting and Procurement
Mrs L Sawrey	Deputy Chief Finance Officer

In attendance

Mrs H Pidoux	Administrative Team Manager
--------------	-----------------------------

1. Apologies

Apologies were submitted by Mrs Skidmore, Mr Marshall, Dr Bush and Mr Oatridge

Quoracy of the meeting was raised and it was clarified that the meeting would be quorate once Mr Hastings arrived. As there were no decisions to be made the Chair commenced the meeting.

2. Declarations of Interest

FP.16.112 There were no declarations of interest.

3. Minutes of the last meeting held on 25th October 2016

FP.16.113 The minutes of the last meeting were agreed as a correct record.

4. Resolution Log

FP.16.114

- Item 93 (FP.16.102) – Membership details on back of agenda to be amended to reflect recent changes – completed – action closed.
- Item 94 (FP.16.102) – Change to Constitution includes removing Mr Oatridge's name from the Membership and adding Mr Price – confirmed that the Constitution does not include members names only the role titles– action closed
- Explanation of £2.3m movement in receivables to be circulated to Committee members – outstanding action

- Indicators to be shown under 2 separate headings, 'unvalidated' and 'target awaited' – included in report on agenda – action closed
- Clarified to be given as to why there are 2 measures awaiting submission – included in report on agenda – action closed
- Submission made to NHSE relating to RTT to be shared with Committee – this had been circulated – action closed
- An updated draft Finance Plan to be presented at the next meeting – on agenda – action closed.

5. Matters Arising from the minutes of the meeting held on 25th October 2016

FP.16.115 There were no matters arising from the previous minutes.

Mr Hastings joined the meeting and it was noted that it was now quorate.

6. Finance Report

FP.16.116 Mrs Sawrey reported on the Month 6 financial position, stating that whilst the financial target had been achieved, this had been difficult and there is no more flexibility in the financial position.

Mrs Sawrey stated that discussions have commenced with RWT to agree the Year End settlement, however, there is a £5m gap in forecast outturn. The Committee considered the concerns raised if RWT activity increases and RTT goes over and above the 92% agreed. (It was noted that adjustments have already been factored in to reflect the closure of a ward at West Park and recruitment slippage in the Rapid Response Nursing Team). RWT are not willing to negotiate and would prefer the contract to run which would have significant financial issues for the CCG.

Mr Price queried what controls were in place to prevent activity at RWT increasing. Mr Hastings clarified that a Demand Management Plan has been developed to divert activity away from RWT to alternative providers. This had been submitted to NHS England (NHSE) who were happy with the plan. NHSE had issued guidance that the plan should not remove patients from the waiting list but should prevent additional patients joining the waiting list. Mrs Sawrey commented that even with this intervention RWT still has sufficient activity in waiting lists to achieve over 92% activity.

It was agreed to ask Mrs Skidmore to speak to Mrs Curran, the CCG's Interim Accountable Officer, and for a letter to be sent to RWT stating that the CCG will not reimburse for activity over and above 92% and for a response to the letter to be requested.

Mr Hastings shared 2 business cases being developed by the CCG Primary Care Team, noting that these will not impact on the 2016/17 financial year;

- Consultant Connect – direct telephone consultation with secondary care consultant whilst the patient is at the GP practice. The aim is to keep patients out of hospital.
- Improving access to Primary Care in Wolverhampton – the business case included options currently being reviewed which will need to be worked up.

Mr Price asked if an incentive scheme, similar to enhanced services, could be considered. It was suggested that incentivising the use of ESR/Choose and Book may be possible which would help attain the Quality Premium target, however the financial implications would require review.

Mrs Sawrey highlighted that QIPP delivery has increased with the unallocated QIPP plan reduced to £0.71M.

Resolved: The Committee;

- Noted the contents of the report and the current position.
- Mrs Skidmore to be asked to raise with the Interim Accountable Officer writing to RWT stating that the CCG will not reimburse for any activity over and above 92% and for a response to be requested.
- Mr Hastings to review possibility of an enhanced service or incentive scheme for acute activity.

7. Performance Report

FP.16.117 Mr Bahia highlighted that of the indicators for Month 6, 43 are green rated, 28 are red rated, 22 are have no submissions and 1 is awaiting target.

In response to a query from the last meeting Mr Bahia explained that indicators are classified as 'target to be confirmed' if data is received but there is no target set and 'no submission' if there is no data.

The following key points from the report were discussed;

- RTT - continues to fail to meet headline. RWT are challenging the non-achievement of the STF trajectory with NHS Improvement (NHSI). At RWT's request, the CCG has sent a letter of support.
- A&E – although target has been missed in line with the STF trajectory an improvement in performance has been seen, with the performance in September the highest seen year to date.
- 62 day cancer waits – below trajectory and against STF target. It is unlikely to achieve target by the end of Quarter 4. A Breach allocation policy has been received by RWT and was discussed

at the Clinical Quality Review Meeting. The current situation of tertiary referrals is impacting on performance. There are significant challenges which are being discussed with the cancer network. As this indicator is part of the STF the CCG does not have any sanctions.

- Waits over 52 weeks for incomplete pathways – all breaches relate to orthodontics. An action plan has been developed and the Trust is currently ahead of trajectory.
- EIS referrals – this indicator has breached since May and a number of actions are being undertaken to improve, including addressing 'did not attends'.
- Mixed Sex Accommodation breaches – there have been no breaches in Month 6
- C Diff – The Trust breached the national threshold in September. There were 3 breaches in September against a target of 3. Year to date there have been 31 cases.
- Delayed Transfers – the September performance for this indicator has been reported as 5.90% via the Month 6 SQPR, however, this has been queried with the Trust as the Integrated Quality and Performance Report confirm the total performance for September as 5.66%, with excluded social care delays as 1.17% which is below the 3.2% threshold. The Trust has confirmed that the September SQPR was incorrect and have given the correct numbers.
- IAPTS – hitting all targets.

The Committee's attention was brought to the inclusion in the report of indicators which, following horizon scanning, are close to failing target.

Resolved: The Committee

- Noted the content of the report, including the changes made to the format of the document, and the updates given.

8. Monthly Contract and Procurement Report

FP. 16.118 Mr Middlemiss presented this report based on Month 7 and highlighted the following key points;

- E-discharge – The Trust has ceased issuing draft discharges as requested by the CCG.
- Performance Sanctions – for month 6 this was £64.44k for the whole contract.

- Query Log – this has been introduced to supplement the contract review process and to provide an audit trail of queries and responses.
- Contract Negotiations –
 - RWT – In line with planning guidance the Trust was issued with an initial offer on 4th November and responded within the required timeframe of 11th November. There is a significant financial gap of circa £17m and negotiations are very challenging. Much of this related to QIPP which is not recognised in the Trust offer. Negotiation meetings are occurring on a weekly basis at officers' level supplemented with fortnightly executive meetings. It was clarified that business cases form part of the discussions and the CCG is expecting schemes to be cost neutral and in line with the Strategic Roadmap. Any schemes not aligned will need to demonstrate a gain share.
 - BCPFT – negotiations are progressing relatively well. 1 issue has been escalating relating to learning disability beds.
- Associate arrangements for Nuffield contract – The Commissioning Committee has supported a request from Sandwell West Birmingham CCG to become an associate to the Nuffield contract.
- Urgent Care Centre – an analysis of activity has identified that Vocare is performing significantly under plan. The CCG is planning to claim back money in line with the contract. Vocare is contesting this decision on the basis that diversion of activity from A&E is only partially within their control and that staging costs have not reduced. Vocare have also stated that all the activity has not been captured. The CCG have requested that this information is provided for validation.

Concerns relating to Safeguarding training were raised and clarification was requested as to whether the e-learning had commenced as this was due to be rolled out in November. It was agreed that this should be checked.

Resolved – The Committee:

- noted the contents of the report and actions being taken.
- Mr Middlemiss to check if Safeguarding e-learning has commenced.

Mr Middlemiss left the meeting.

9. Draft Finance Plan 2017/18 – 2020/21

FP.16.119 Mrs Sawrey gave an overview of the latest draft finance plan which was submitted to NHSE on 21st November 2016. A response has not been received from NHSE and they have not requested any updates to date.

It was highlighted that the risks relating to 2018/19 can all be mitigated against however in 2017/18 there is £1.3m unmitigated risk.

The net QIPP savings for 2017/18 is £12.5m which is 3.6% of notified allocation. Previously the highest allocation has been 3.1% in 2016/17. In 2018/19 there is a reduction in QIPP savings required to £10.6m, however, due to the nature of the savings required this will need to be achieved from service transformation.

Mr Price, as Chair of the Committee, reported that he has been briefed by Mrs Skidmore on the position reported to NHSE prior to the submission and is comfortable with the proposed presentation of both the plan and associated risks.

Resolved – The Committee:

- noted the latest position of the finance plans submitted to NHSE.

11. Any Other Business

FP.16.120 There were no items raised under any other business.

12. Date and time of next meeting

FP.16.121 Tuesday 31st January 2017 at 2.00pm, CCG Main Meeting Room

Signed:

Dated: