

**WOLVERHAMPTON CLINICAL COMMISSIONING GROUP GOVERNING BODY**

Minutes of the Governing Body Meeting held on Tuesday 14 February 2017  
Commencing at 1.00 pm at Wolverhampton Science Park, Stephenson Room

**VOTING MEMBERS ~**

<b>Clinical ~</b>		<b>Present</b>
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
<b>Management ~</b>		
Ms M Garcha	Executive Lead for Nursing and Quality	Yes
Dr H Hibbs	Chief Officer	Yes
Mr S Marshall	Director of Strategy and Transformation	No
Ms C Skidmore	Chief Finance Officer/Chief Operating Officer	Yes
<b>Lay Members/Consultant ~</b>		
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 H Cook	Communications and Engagement Manager
Ms K Garbutt	Administrative Officer
Mr M Hastings	Associate Director of Operations
Mr R Jervis	Public Health Director
Mr P McKenzie	Corporate Operations Manager
Ms E Reade	Observer
Ms S Southall	Head of Primary Care

## **Apologies for absence**

Apologies were received from Mr D Watts and Mr S Marshall

*Ms P Roberts chaired the meeting*

## **Declarations of Interest**

WCCG.1700 Ms Roberts reported that agreement is required from the Governing Body regarding Dr De Rosa continuing as Chair of the Governing Body until the 31 March 2017. She pointed out that the Clinical Commissioning Group (CCG) will manage any conflict of interest. Dr H Hibbs supported this as it is important for a smooth transition to take place. There was total support from the Governing Body. Ms Roberts added that plans are in place regarding succession. Mr P McKenzie will be submitting a report in March 2017.

*Dr D De Rosa now chaired the meeting*

Dr D De Rosa declared an interest as currently his practice have signed the necessary papers to support vertical integration 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.

Dr Hibbs declared an interest in connection with Estates contained within the Chief Officer report.

Mr J Oatridge welcomed Dr Hibbs back to the Governing Body.

RESOLVED:

- (1) That the Governing Body agreed for Dr D De Rosa to continue as Chair of the Governing Body until 31 March 2017.
- (2) That Mr McKenzie will be submitting a report to the Governing Body in March regarding the succession of Chair from April 2017.

## **Minutes**

### **WCCG.1701 Minute WCCG.1694 Contracting 2017 – 2019 update**

Dr De Rosa stated that Ms Skidmore has pointed out that the third paragraph, final sentence should read “she pointed out that around £9m has been agreed as part of contract negotiations and was therefore deemed to be ‘low risk’ which puts the QIPP programme in a firm place to start the next financial year”.

She also added that the next paragraph second sentence should read “Ms Skidmore stated that we are not meeting our target where there is slippage in recruitment to community posts. There will be some part to full year impact of 2016.17 schemes that occurs in 2017/18”

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.

Ms C Skidmore arrived

## **Matters arising from the Minutes**

WCCG.1702 There were no matters arising from the minutes.

RESOLVED: That the above is noted

## **Committee Action Points**

WCCG.1703 RESOLVED: That the progress report against actions requested at previous Board meetings be noted.

## **Chief Officer Report**

WCCG.1704 Dr Hibbs presented the Chief Officer report which has been jointly prepared with Ms T Curran. She pointed out that the NHS England Performance team have informed us that the CCG and the Royal Wolverhampton Trust (RWT) jointly supported appeal for non-attainment of the Sustainability and Transformation Fund (STF) Trajectories for both A&E and Referral to Treatment (RTT) have been upheld.

Dr Hibbs added that a Governing Body Strategy session took place on the 24 January 2017 and the recommendations are being taken forward. A workshop with the executive team has been arranged for the 2 March 2017 relating to future commissioning across the Black Country and West Birmingham. The Governing Body will receive a further report on Collaborative Commissioning at the March meeting.

Ms H Cook referred to the proactive media strategy which has been developed to provide a more structured approach for the CCG around public relations planning

Mr M Hastings reported that the CCG made a joint bid with the Local Authority, RWT and Black Country Partnership Foundation Trust (BCPFT) for One Public Estate funds to support a feasibility study across the City for existing estate prioritisation of need and requirements for health and social care “Hub” in line with the Better Care Fund strategy. This bid has been successful and the Local Authority have appointed a full time project lead to take this work forward. Dr De Rosa emphasised the importance of this process.

Mr Oatridge commented that the strategy session was well carried out and this should be planned on a half yearly basis. He also asked whether more in depth media training could be made available for likely spokespeople. Mr Hastings confirmed that he will raise media training with the Commissioning Support Unit (CSU). Mr P Price commented that Wi-Fi in the CCG, GP practices and the Acute Trust is a good initiative.

RESOLVED: That the above is noted.

### **Revised Board Assurance Framework and Risk Register update**

WCCG.1705

Ms Garcha gave an overview of the report which shows how future reports will be presented. She highlighted Appendix 1 on page 39 confirming that the columns will be expanded and this will be on A3 paper in the future to allow for expansion. Ms Garcha talked through the risk, Nursing Home in Suspension as an example. Going forward once we have aligned the risks to the sub committees it is likely that quite a significant number will be closed. She confirmed this is what the risk register will look like and will be brought back to the Governing Body. Senior members of staff will receive technical training regarding the risk register.

RESOLVED: That the above is noted.

**Emergency Preparedness, Resilience and Response (EPRR)**

WCCG.1706 Mr Hastings presented the report which is to assure the Governing Body of the EPRR status. He pointed out that each EPRR Core Standards self-assessment is comprised of a number of key standards accompanied by a “deep dive” into a particular area. He referred to Appendix 1 relating to the timelines and confirmed a further report will be brought back to the Governing Body in May/June 2017 for sign off.

RESOLVED: That a final report will be brought back to the Governing Body in May/June 2017.

**Equality Delivery System2 (EDS2) update**

WCCG.1707 Ms Garcha presented the report. The framework has been designed by the NHS to support NHS commissioners and providers to meet their duties under the Equality Act 2010. The EDS has four goals that are supported by 18 outcomes, the four goals are:

1. Better health outcomes
2. Improved patient access and experience
3. A representative and supported workforce
4. Inclusive leadership

Ms Garcha pointed out that at present goals 1 and 2 are 90% complete and 3 and 4 70% completed and that the work will be completed on time. Ms Roberts stated that this is a good piece of work and has been managed well.

The next report will be submitted to the Governing Body for sign off in March 2017.

RESOLVED: That a further report for final sign off will be submitted in March 2017.

**Commissioning Committee**

WCCG.1708 Dr Morgans gave an overview of the report. He pointed out that a review of the existing services specification written in 2011 is taking place relating to the Heart Failure Service. Dr De Rosa commented that patients who have right sided heart failure receive a poor service with referrals difficult to place. Dr Morgans stated this will be one of the issues which will be looked at. Ms Andrea Smith is conducting the review and would welcome feedback from clinicians. Ms H Cook confirmed she will add this to the GP newsletter.

Ms Skidmore pointed out for clarification that the total contract value for 2017-18 of £328.7m represents the total value negotiated on behalf of the commissioners not just Wolverhampton CCG

RESOLVED: That the above is noted.

### **Quality and Safety Committee**

WCCG.1709 Dr R Rajcholan presented the report. She went through the key issues of the report highlighting the Never Events May 2015 – January 2017. The trust has reported 4 Never Events in the current year. Of these there was another wrong eye injection making this the third incident of the type since September 2015.

Ms S Southall arrived

Mr Price enquired why there were 31 safeguarding referrals this quarter a large increase on previous quarters Ms Garcha felt that the raised awareness and extra work being carried out with care homes has resulting in increased reporting however not all referrals are substantiated and the number that are has not significantly increased

RESOLVED: That the above is noted.

### **Finance and Performance Committee**

WCCG.1710 Ms Skidmore presented the report stating at month 9 there have been no fundamental changes and we are still on track to deliver our control totals. In relation to performance we are aware that RWT are struggling with the Referral to Treatment (RTT) target. It is extremely difficult to maintain the elective list due to high volumes of non-elective patients. The CCG team is in regularly dialogue with RWT and discussions are also ongoing through the A&E Delivery Board.

Ms Skidmore gave an overview of the latest plans for 2017/18-2018/19 and the risks contained with the final position.

The main challenge and risk is the scale of Quality, Innovation, Productivity and Prevention (QIPP) target of £12.1m. Programme Boards continue to develop and agree schemes to deliver the target as there is currently a gap of approximately £3m where there are no plans identified. It was felt that this may take some time identifying ways of achieving the unidentified QIPP, however, more information would be known after the next Programme Board meetings. The outcome from this will be reported

to the QIPP Board and in future reports to the Finance and Performance Committee.

The impact of full delegation of Primary Care to the CCG on 1 April 2017 was highlighted as no additional money will be received to support the increase in staff time to manage this area and work is underway to identify what is required to deliver future work agendas.

Whilst the CCG financial plan for 2017/18 meets all the planning requirements and can withstand the mitigation of a certain level of risk there are still a number of variables that, without their resolution, place additional risk on the position that may make it undeliverable. In summary these are

- Scale of QIPP target given that an element is yet to be attributed to specific schemes.
- Identification Rules (IR) presents a large risk to the CCG.

Ms Skidmore recommended to the Governing Body that it signs off the budget, noting the inherent risk and support the CCG's Executive Team to continue to pursue avenues to close the QIPP gap and therefore reduce financial risk. Mr Price confirmed he supported this.

RESOLVED: That the Governing Body agreed to sign off the budget for 2017/18.

### **Primary Care Joint Commissioning Committee**

WCCG.1711 Ms P Garcha gave an overview of the report. She highlighted the Primary Care updates. She pointed out that there was a Practice Manager Network Events. Helen Ryan attended an event which took place in Birmingham. She confirmed the slides have been circulated to all practice managers.

RESOLVED: That the above is noted.

### **Primary Care Strategy Committee**

WCCG.1712 Ms S Southall presented the report which covers the months of December and January. She pointed out the Task and Finish Groups highlighted on pages 2-5. She referred to the New Models of Care pointing out there are only 5 practices in the city who have not yet aligned with a new model of care, discussions continue to take place with practices to support them in aligning with their preferred model of care.

Since the report has been prepared a further meeting has taken place there are now only 2 practices who have not aligned with a new model of care.

Ms Roberts asked if there was a timeline for practices to decide. Ms Southall stated this hopefully will take place within the next 2 to 3 months and the practices will be supported. Ms Southall stated that discussions will continue to take place regarding back office functions.

RESOLVED: That the above is noted.

### **Communication and Engagement update**

WCCG.1713 Ms P Roberts referred to agenda item 15 which updates Governing Body on the key communications and participation activities in December 2016 and January 2017. She gave an overview of the report.

RESOLVED: That the above is noted.

### **Finance and Operating Plan**

WCCG.1714 RESOLVED: That the plan is noted.

### **Minutes of the Quality and Safety Committee**

WCCG.1715 RESOLVED: That the minutes are noted

### **Minutes of the Commissioning Committee**

WCCG.1716 RESOLVED: That the minutes are noted.

### **Minutes of the Finance and Performance Committee**

WCCG.1717 RESOLVED: That the minutes are noted.

### **Minutes of the Primary Care Joint Commissioning Committee**

WCCG.1718 RESOLVED: That the minutes are noted.

### **Minutes of the Primary Care Strategy Committee**

WCCG.1719 RESOLVED: That the minutes are noted.

### **Joint Negotiating and Consultation Committee**

WCCG.1720 RESOLVED: That the report is noted.



**Minutes of the Health and Wellbeing Board**

WCCG.1721           RESOLVED: That the minutes are noted.

**Any Other Business**

WCCG.1722

RESOLVED: That the above is noted.

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

WCCG.1723           There were no questions.

**Date of Next Meeting**

WCCG.1724           The Board noted that the next meeting was due to be held on **Tuesday 14 March 2017** to commence **at 1.00 pm** and be held at Wolverhampton Science Park, Stephenson Room.

The meeting closed at 2.45 pm

Chair.....

Date .....