

WOLVERHAMPTON CLINICAL COMMISSIONING GROUP

Finance and Performance Committee

**Minutes of the meeting held on 28th March 2017
Science Park, Wolverhampton**

Present:

Mr P Price	Independent Committee Member (Chair)
Mr J Oatridge	Independent Committee Member
Mrs C Skidmore	Chief Finance and Operating Officer
Mr S Marshall	Director of Strategy and Transformation
Mr M Hastings	Associate Director of Operations
Dr D Bush	Governing Body GP Finance and Performance Lead

In regular attendance:

Mrs L Sawrey	Deputy Chief Finance Officer
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In attendance

Mr M Duhra	Contract Portfolio Manager
Mrs H Pidoux	Administrative Team Manager

1. Apologies

Apologies were submitted by Mr Middlemiss and Mr Bahia.

2. Declarations of Interest

FP.143 There were no declarations of interest.

3. Minutes of the last meetings held on 28th February 2017

FP.144 The minutes of the last meeting were agreed as a correct record.

4. Resolution Log

FP.145

- Item 100 (FP.16.127) – Consideration to be given to how the key areas of performance are reported to Governing Body - work is on-going and the report will be aligned to assurance meeting agenda where appropriate. The Committee asked that consideration is given to highlighting areas of concern which can be influenced by the Committee. Progress in other areas should be reported, these can then be considered and noted by the Committee.

- Item 101 (FP.16.135) – Quality and Safety Committee minutes to be reviewed re level of discussion re Safeguarding training at RWT and decision required as to which Committee takes the lead for monitoring the uptake of Safeguarding training – this is to be taken to the Executive meeting to discuss with the Executive Director of Nursing and Quality.
- Item 102 (FP.135) – The lack of information re Safeguarding Training for Board Level Staff at RWT to be checked to ensure that the training is being undertaken at that level – it was noted that this should be widened to include all providers. This will also be picked up with the Executive Director of Nursing and Quality and a statement requested relating to all providers.
- Item 103 (FP.136) – A view from the Quality Team to be requested of the perceived clinical risk of BCPFT's failure to achieve the CQUIN for the flu vaccine – The Quality Team had stated that the staff are encourage to have the vaccine to reduce the risk of catching flu from patients in order to keep staff absence levels low. There is little clinical risk to patients. It was noted that there has been a significant improvement in the uptake over the last 18 months. It not possible for the provider to collect data for staff who may have had the vaccine elsewhere so this cannot be included in the figures.

5. Matters Arising from the minutes of the meeting held on 28th February 2017

FP.146 The following matters were raised from the previous minutes;

- FP.137 – Outstanding data queries with RWT – it was clarified that this is being discussed at the Contract Review meetings. As a number of different logs are kept, work is taking place to review how and where information is kept and whether this can be collated more efficiently and effectively.
- FP.138 – it was clarified that the information collected in the Drugs Volume Comparison table related to items and not scripts. The title of the table has been changed to reflect this.

6. Finance Report

FP.147 Mrs Sawrey reported on the Month 10 financial position and stated that the CCG is still on track to achieve financial targets and there have been no material changes.

Mrs Sawrey highlighted that NHS England (NHSE) has recently issued guidance as to the treatment of the 1% Reserve as part of the national system-wide risk management plan. In line with the guidance the CCG must release the full amount of the 1% non-recurrent reserve to its bottom line. Therefore, in month 12, the CCG will increase its planned surplus by the value of the 1% reserve. The outcome will be that the CCG will have delivered £6.979m over target plus £3.375m, being the release of the 1% reserve.

Mrs Skidmore gave an update regarding the invoice issued by RWT in relation to Physician A for the value of £4.8m. The relevant paperwork was forwarded to NHSE as instructed by them. NHSE and NHS Improvement (NHSI) are yet to reach resolution of the issue and this is being escalated further and more information about this is awaited.

Mrs Sawrey noted that the issues of the difference in reporting through SLAM/SUS by Nuffield Hospital has now been reconciled. Reporting is now in line with other NHS providers which should overcome reporting and billing issues.

Mrs Sawrey commented that a challenging session had taken place at the last RWT Contract Review meeting due to the increase in the robustness of monitoring. Responses to all queries have been requested for the next meeting.

Mrs Skidmore informed the Committee that a meeting had been held with NHSE following a letter received from Alison Tonge, Director of Commissioning Operations – NHSE West Midlands, in respect of new guidance relating to QIPP. The guidance states that there must be no unallocated QIPP or unmitigated risk in the plans. The 2017/18 plan is to be resubmitted to reflect this. An Executive review of the 2017/18 budgets has reduced the net QIPP to £10.62m. The Executives and Programme Managers have considered plans and schemes have been identified at a high level to cover the unallocated QIPP of £1.6m. Narrative has been given to emerging plans to substantiate the numbers.

The high risk areas have been highlighted, however the level of risk reported has slightly reduced due to the level of QIPP reducing.

The Executive Team will review the budgets at Quarter 1 and reallocate surplus against QIPP. Contracts, including costing and coding, will be reviewed and elements taken out where possible. A 'stretch' has been applied to the Primary Care work programme.

Mrs Skidmore reported that NHSE are comfortable with the approach taken.

The CCG's Senior Management Team have been reminded that there is a need to continually identify schemes as this is an ongoing process.

7. Monthly Performance Report

FP.148 Mr Hastings highlighted that of the indicators for Month 10, 40 are green rated, 25 are red rated, 28 have no submissions and 1 is awaiting target.

Mr Hastings brought to the Committee's attention the Remedial Action Plan (RAP) Log included in the report and this was considered and noted.

The following key points from the report were discussed;

- RTT - work is on-going in primary care around Demand Management and Referral Management. Analysis of data has shown that GP referrals remain flat, however, consultant to consultant referrals have increased. It was agreed to bring a short report about this to the April meeting to show the impact of the on-going work.
- Diagnostics – RWT are reporting this will recover by April 2017 and are committed to achieving this. This is difficult for the CCG to manage as the Trust discussions and agreements with NHSI regarding recovery trajectory are different to those with the CCG, Further work is required to resolve this.
- A&E – there is now a national expectation of a month on month 1% increase in performance towards recovery. It was noted that this would be a particular challenge for RWT to achieve.
- 62 day cancer waits – Additional Urology clinics are being held through April 17 to process the backlog of patients, however, as all patients taken on from the backlog will already have breached this will impact on the overall performance.
- Zero tolerance RTT waits over 52 weeks – on trajectory to date for Orthodontic patients.
- EIS Referrals – it was noted that performance was affected due to the Consultant being on annual leave. It was considered whether this can be influenced as a service is being commissioned, this would be picked up through the Contract Review Meeting, to ascertain what learning has been taken from the situation so that it does not happen again.
- Delayed Transfer of Care – BCPFT have hit target for the first time for combined results.
- Discharge Summary – it has been identified that the issues are people related as there are no problems with the system and further training is to be arranged to improve this.
- Percentage of Service Users referred urgently with suspected cancer by a GP waiting no more than two weeks for first outpatient – performance improvements have been seen for the third consecutive month.
- Delayed Transfers - % occupied bed days – to exclude social care delays – continues to achieve the threshold of 2.8%.

It was noted that for an indicator where the target is not yet confirmed the reporting defaults to red rated.

Resolved: The Committee

- Noted the content of the report
- A brief report to be brought to the next meeting outlining on-going work around Demand Management and Referral Management.

8. Monthly Contract and Procurement Report

FP.149 Mr Duhra presented this report based on Month 10 information and highlighted the following key points;

Royal WolverhamptonTrust (RWT) -

- Exception Reporting Proposal – as discussed at the last meeting, the CCG is introducing a new mechanism to discuss underperformance against targets (national and local contractual standards). The intention is that an exception report for deviation against agreed contractual standards will be requested. The exception reports will be required monthly on the 10th working day in line with the agreed timescales for SQPR as these will be used by the Commissioner for assurance and reporting purposes. The process will also require the Trust to submit RAPs to a defined timeframe. The proposal has been sent to the Trust with the view of finalising it at the April CRM.
- Sanctions – it was noted that an increase in ambulance breaches have been seen in Month 10.
- Business cases for fines/MRET/readmissions – The Trust informed the CCG that it would not be completing business cases for MRET and readmissions. The Trust has been advised by the CCG that this is not acceptable. In line with PbR guidance for MRET and re-admissions, the CCG requires information and a clear audit trail for how the money is reinvested. Following discussion it was agreed to hold the line that appropriate business cases are required which need to evidence value for money.

Black Country Partnership Foundation Trust (BCPFT) –

- Safeguarding Adults Level 3 dropped in performance from 85% to 81% (against a target of 85%). The Trust has agreed to the £5,000 sanction that will be applied, this is the first financial sanction that has been applied for this indicator. Assurance has been given by the Trust that February performance will be above 85%.
- Routine EIS referrals within 10 days – performance has dropped from 90% to 53% and failed to meet target. The Trust have been asked to provide assurances around their consultant cover when

the EIS consultant is on leave or off sick as part of the RAP. A positive meeting had been held to discuss this issue and the RAP is expected shortly.

Nuffield –

- An issue has arisen with the Activity reports being submitted by the provider and the data submitted via SUS. As discussed earlier in the meeting this issue has now been rectified.

Other Contracts/Significant Contract Issues

WMAS Non-Emergency Patient Transport –

- A performance issue has been raised by RWT with respect to patients that have had to be rebedded due to the unavailability of timely transport. The CCG has written to WMAS requesting a formal response. This response has been received and will be reviewed at the next CRM.

Urgent Care Centre (UCC) –

Due to the performance issues identified at the UCC this has been escalated to director level meetings.

Due to the significant under plan activity the CCG will be clawing back the financial difference for the 2016/17 year as supported by this Committee at the February meeting and a letter has been issued to Vocare stating this.

Vocare has also been sanctioned in relation to breaches for Duty of Candour (DoC) and SI reporting. The provider has contested that they should not be sanctioned at £10,000 for DoC as the 'cost of the episode of care' in each case is less than this amount. It is the CCG's view, that in light of the severity of each of the breaches to DoC, the breach amount of £10,000 should be paid.

Both of the above issues are due to be discussed at a forthcoming meeting.

Resolved – The Committee:

- noted the contents of the report and actions being taken.
- Supported the need for business cases from RWT for MRET and re-admissions

9. Draft Annual Report

FP.150 Mrs Skidmore reminded the Committee that an Annual Report is produced to provide details of how the Committee has discharged its duties in the year. It was noted that there have not been any concerns raised and all the aims set out in the terms of reference have been met.

It was asked that any comments were directed to Peter McKenzie, Corporate Operations Manager, who is compiling the report to feed into the Governance Statement

The Committee;

- Agreed to feedback any comments to Peter McKenzie.
- Noted that the Committee has discharged it's duties as set out in its terms of reference.

10. Any Other Business

FP.151 There were no items raised under any other business.

11. Date and time of next meeting

FP.152 Tuesday 25th April 2017 at 3.15pm, CCG Main Meeting Room

Signed:

Dated: