

WOLVERHAMPTON CCG

Governing Body 12th September 2017

Agenda item 12

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TITLE OF REPORT:	Commissioning Committee – Reporting Period August 2017
AUTHOR(s) OF REPORT:	Mr Steven Marshall
MANAGEMENT LEAD:	Mr Steven Marshall
PURPOSE OF REPORT:	To provide the Governing Body of Wolverhampton Clinical Commissioning Group (CCG) with an update from the Commissioning Committee in August 2017.
ACTION REQUIRED:	□ Decision
PUBLIC OR PRIVATE:	This Report is intended for the public domain.
KEY POINTS:	This report is submitted to meet the Committee's constitutional requirement to provide a written summary of the matters considered at each meeting and to escalate any significant issues that need to be brought to the attention of the Governing Body.
RECOMMENDATION:	That the report is noted.
LINK TO BOARD ASSURANCE FRAMEWORK AIMS & OBJECTIVES:	[Outline how the report is relevant to the Strategic Aims and objectives in the Board Assurance Framework – See Notes for Further information]
Improving the quality and safety of the services we commission	
Reducing Health Inequalities in Wolverhampton	
System effectiveness delivered within our financial envelope	

WCCG Governing Body 12th September 2017





1. BACKGROUND AND CURRENT SITUATION

1.1. The purpose of the report is to provide an update from Commissioning Committee to the Governing Body of Wolverhampton Clinical Commissioning Group (CCG) for the period of August 2017.

2. MAIN BODY OF REPORT

2.1. Contract & Procurement Update

The Committee was presented with an overview and update of key contractual issues in relation to Month 3 (June 2017) for activity and finance.

Royal Wolverhampton NHS Trust

<u>Contract Performance</u> – underperformance in Elective Activity is being closely monitored.

<u>Exception Reporting Proposal</u> – the quality of reports received has increased and assurance was taken that the process is embedding leading to these improvements.

<u>CQUIN</u> – noted that due to capacity issues in the CCG's Quality Team the reconciliation for Quarter 1 has been delayed.

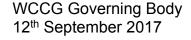
Business Cases

<u>Etanercept switch to Erelzi</u> – a gainshare switch alternative to Erelzi was agreed.

<u>Direct Access Diagnosis Spirometry</u> – recommendation to approve revised pathway was considered. The financial implications for the CCG to be brought back to the next Committee meeting for further scrutiny.

Black Country Partnership Foundation Trust

<u>LD Psychiatrists – Letter of concern</u> - extension until early September agreed with Provider for response to concerns raised by CCG over possible double payments for consultant activity.







Other contracts/Significant Contract Issues

WMAS- Non-Emergency Patient Transport (NEPT)

Assurance was taken that the Provider is responsive to addressing concerns and the actions in the Remedial Action Plan are being undertaken.

It was noted that the A&E Delivery Board had agreed to fund the use of a third party provider by RWT for Wolverhampton patients. This has been funded from system resilience funds as a short term investment to ease bed pressure whilst WMAS address the performance issues.

Urgent Care Centre

There continues to be a series of high level concerns which are managed through an Improvement Board which closely monitors the agreed Improvement Plan. The CCG has issued a Contract Performance Notice and is holding the Provider to account in line with the Contract. NHS England are also closely monitoring the situation and challenging the CCG on its actions to address the concerns.

Other Acute Associate Contracts

Community Eye Services -

The Committee supported the proposal for Midlands and Lancashire CSU to provide the essential pharmacy contract management which is essential for this service.

Action – The Committee request that Governing Body note the above.

3. RECOMMENDATIONS

- Receive and discuss the report.
- Note the action being taken.

Name: Steven Marshall

WCCG Governing Body 12th September 2017

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Job Title: Director of Strategy and Transformation

Date: 25th August 2017



