

HARROGATE AND RURAL DISTRICT CLINICAL COMMISSIONING GROUP

Minutes of the Meeting of the Harrogate and Rural District Clinical Commissioning Group

Finance, Performance and Commissioning Committee

27 March 2014

9:15 – 12:15

**Boardroom, 1 Grimbald Crag Court,
St James Business Park, Knaresborough, HG5 8QB**

Present

Bernard Chalk, Chief Finance Officer, HaRD CCG (Chair)
Dr Alistair Ingram, Clinical Chair, HaRD CCG
Alec Cowell, Head of Finance and Contracting, HaRD CCG

Apologies

Amanda Bloor, Chief Officer, HaRD CCG
Dr Rick Sweeney, GP Member, HaRD CCG
Jane Baxter, Head of Commissioning, HaRD CCG

In Attendance

Alison Simm, Corporate Affairs Officer (Secretariat), HaRD CCG
Annie Macleod, Relationship Manager, NY&H CSU

1.0 Introductions and Apologies

Apologies were received, as above.

The Finance, Performance and Commissioning Committee:

Noted the above.

2.0 Minutes of the Meeting held on 27 February 2014

The minutes for the meeting held on 27 February 2014 were accepted with no amendments.

The action log was reviewed by the Committee and the following was noted:

- Annie Macleod and Amanda Bloor are continuing to have discussions on the HaRD intranet, therefore the action is to remain on the action log.
- Bernard Chalk will draft a proposal on a process for the monthly review of individual selected specialities with a GP Governing Body member. This draft proposal to be taken to the Clinical Executive meeting on 22 April for discussion.
- Bernard Chalk informed the committee that he had been in further talks with Specialist Commissioning over BMI the Duchy. Agreement has now been reached for 2013/2014. Bernard Chalk is having ongoing discussions about the transfer of activity back to HaRD CCG in 2014/2015, this being subject to the Area Team agreeing to the transfer of resources back to HaRD CCG from Specialist Commissioning. HaRD CCG would then commission from BMI the

Confirmed

Duchy but not as Specialist Commissioning. Bernard Chalk will update the Governing Body on 3 April.

- Alistair Ingram clarified that the information that he wanted was not a list of procedures covered by specialist commissioning but clarification of the actual activity done by BMI the Duchy to explain HaRD CCG spend under specialist commissioning. Alec Cowell can provide details of the HRG's.
- A Better Care Fund approval process had been written and approved by the Integrated Commissioning Board. Bernard Chalk to provide Alistair Ingram with a copy.

The Finance, Performance and Commissioning Committee:

Noted the above.

3.0 Monthly Report on Financial Performance

Alec Cowell presented the report to the committee, the purpose of which is to update the committee on the financial performance of the CCG for the period ended 28 February 2014.

At the end of February the CCG is reporting a surplus of £1.158 million, which is slightly ahead of plan (£1.121 million). Forecast outturn continues as planned, namely a surplus of £1.8 million (1% of the CCG's recurrent resource allocation).

The HDFT contract continues to overtrade. It is critical that the referral gateway system is implemented as soon as possible to bring activity back down to sustainable levels.

The North Yorkshire and York 4 CCG risk share is continuing for 2014/2015. The current risk share contracts are:

- Out of Hours
- Healthcare at home
- Yorkshire Ambulance Service
- Mental Health out of area placements
- Neuro-rehab
- Non Contracted Activity
- Continuing Health Care/Funded Nursing Care

HaRD CCG need to understand the implications of Vale of York CCG giving HDFT notice to retender for the Out of Hours Service. Alec Cowell to undertake an analysis on the likely impact.

4.0 Contract Finance and Performance Reports

Bernard Chalk informed the meeting that formal written offers had been sent with year end reconciliation payment to all of the HaRD CCG providers. Room for negotiation has been built into figures.

The Finance, Performance and Commissioning Committee:

Noted the above.

5.0 Business Cases/Investments

Autism Assessment Service

Bernard Chalk presented the paper to the committee.

This paper provides an update following a request from the Governing Body to fully understand the current position and to explore options to meet current demand and to resolve any waiting list issues.

The paper recommends that the Governing Body approve the following proposals.

1. To increase the recurrent funding for Autism Assessment by £179,000 to provide a fit for purpose autism assessment service able to meet annual demand
2. Allocate non-recurrent funding of £280,000 for the financial year 2014/15 to clear the existing waiting list.

HaRD CCG would require HDFT to provide regular updates on the progress being made against the investment. Bernard Chalk recommended that these updates were presented to the Quality & Clinical Governance meeting on a monthly basis and then to the Governing Body Quarterly. The Governing Body to agree on 3 April the appropriate progress reporting.

Alec Cowell to request that the Partnership Commissioning Unit liaise with HDFT to identify what data would need to be received each month.

The Finance, Performance and Commissioning Committee:

Noted the above.

Urgent Mental Health Care (including Section 136 suite)

Bernard Chalk presented the paper to the committee.

The objectives of the service:

- Provision of a suitable environment for the delivery of a S136 Place of Safety for Harrogate & Rural District areas.
- To have the person assessed as quickly as it is possible to do so and within legislation (currently 72hrs).
- To ensure that during the assessment period risks to the individual, general public; and all those involved in the assessment, care and detention process, are kept to a minimum.
- Together with the police, AMHP, medical staff and other relevant parties, make any necessary arrangements for the persons treatment or care including the persons safe return to the community, with appropriate support.
- To discharge the person from detention or other powers provided by the act as soon as it is clear that their application is no longer justified
- To proactively discuss with partners including the police actions to prevent people being detained under S136
- To support the Crisis service and assessments within A&E

Confirmed

The paper recommends that the Governing Body agrees to the recurrent investment of £450,000 to improve the urgent mental health pathway. This resource includes an estimate of the capital charges implications of the additional capital investment.

The Finance, Performance and Commissioning Committee:

Noted the above.

Improving Access to Psychological Therapies (IAPT)

The paper was unavailable to be presented to the meeting but the committee discussed and agreed what needed to be reflected in the paper that was to be presented to the Governing Body. In summary the new service will:

- Have one point of access
- Be responsive and accessible, with an aim of waiting times of no more than 2 weeks
- Offers choice of therapies (1-1/groupwork/use of technology)
- Provide timely and informative feedback to primary care (GPs) on the outcomes of the treatment provided.

The paper will recommend that the Governing Body is asked to agree to an additional recurrent investment in IAPT services of £250,000. This resource will only be released once the details of the service transfer and service redesign have been finalised with the new service provider.

The Finance, Performance and Commissioning Committee:

Noted the above.

IVF

Bernard Chalk presented the paper 'Draft Governing Body paper for assisted conception commissioning' written by Dr Gareth Roberts.

In November 2013 the Governing Body reviewed its current commissioning policy for assisted conception & decided the CCG was unable to change its policy in 2013/14, but that it wished to review the situation and if possible relax commissioning restrictions from 2014/15. This would depend on the CCG's developing financial position and a recently updated regional IVF commissioning policy.

1. This paper will look at treatment options to consider, number of cycles of treatment commissioned and eligibility criteria that could be applied.

Options

1. **Continue commissioning by exception only** – this would continue to significantly control the financial risk to the CCG related to IVF commissioning, but would continue the current situation where a NICE recommended treatment is unavailable to the majority of the local population who might benefit from it.
2. **Commission one cycle of IVF up to age 42** – this option would allow the CCG to start making treatment available, but would reduce the financial risk associated with fully implementing NICE recommendations at this stage.
3. **Commission two cycles of IVF up to age 39, & one cycle for age 40-42** – this would make CCG policy consistent with NHS England commissioning policy. It would have greater financial risk attached compared with option 2.

4. **Commission three cycles of IVF up to age 39, & one cycle for age 40-42** – this policy would be consistent with NICE guidance. It would require the greatest commitment of the CCG's finances at this stage and also the greatest level of financial risk.

The paper recommends that the Governing Body is asked to consider the following proposal:

1. If the CCG is in a position to commission assisted conception for its population that option 2 (one cycle) is chosen with a fixed budget of £120,000 allocated in 2014/15.

The suggested referral pathway would be for requests to go through the Individual Funding Review panel (IFR). The Governing Body would need to agree the referral criteria and pathway.

Annie Macleod will update the IFR panel about the proposal going to the Governing Body.

If the proposal is approved, communication will need to be circulated to the Practices immediately after the Governing Body.

The extra investments in Mental Health and IVF are all positive news stories for The CCG to communicate to the public. Annie Macleod to liaise with Paul Widdowfield to draft a media statement on the business cases for release after the Governing Body. Draft statement to Alistair Ingram for review.

The Finance, Performance and Commissioning Committee:

Noted the above.

5.1 Proposal for New Drugs and NICE guidance.

None this month.

The Finance, Performance and Commissioning Committee:

Noted the above.

6.0 Monthly Report from the Partnership Commissioning Unit (PCU).

None this month.

The Finance, Performance and Commissioning Committee:

Noted the above.

7.0 Monthly Report from the Commissioning Support Unit (CSU).

Annie Macleod asked the meeting what reporting does the FPCC need from the CSU?

It was agreed that reporting needed to be done against the Service Level Agreement.

Annie Macleod informed the meeting that a draft copy of the proposed Service Improvement Plans had been provided to the CCG and would value any feedback that the CCG could provide.

HaRD Senior Management Team to agree a process for reviewing the proposals and giving feedback to the CSU.

Once the Key Performance Indicators (KPIs) have been finalised the CSU will report on progress against these (KPIs) on a monthly basis.

Confirmed

The meeting discussed the need for a formal contract management process between the CSU and the CCG.

Annie Macleod confirmed that the following meetings were now set up:

- Quarterly board to board meetings.
- Monthly CSU meeting chaired by Annie Macleod, to be rotated across the patch.
- Annie Macleod and Amanda Bloor have time booked on a monthly basis to discuss CSU scoring results.

Bernard Chalk felt that there was still a need for a senior management meeting to discuss any concerns that either the CCG or the CSU had.

Annie Macleod talked about establishing a live 'issue log' on the "Y" drive to enable the recording and progress tracking of any issues.

Annie Macleod will meet with Amanda Bloor and Jane Baxter for further discussions around the contract and contract requirements.

8.0 Quality and Performance Dashboard

This month the FPCC are asked to receive the dashboard for March 2014.

Alistair Ingram asked where the mixed sex accommodation breach had occurred.

Alistair Ingram queried what was the work being undertaken in partnership between PCU and Asthma UK regarding reduction in emergency admissions for children with lower respiratory infections.

Bernard Chalk expressed concern that the Quality and Outcomes report and Dashboard was not providing the FPCC with assurance that any concerns or issues that had been identified in the previous report had been acted upon. The meeting felt that there needed to be an action plan to provide that assurance.

Alistair Ingram agreed to have a discussion with Sarah Hay about producing an action plan from the comments made in the Dashboard.

The Finance, Performance and Commissioning Committee:

Noted the above.

9.0 Reports from Transformation Groups

9.1 Transformation Committee

No feedback to note this month

9.2 Urgent Care Board

Bernard Chalk told the meeting that the plan of 2 main streams of work, Urgent care Centre and Out of Hospital is going forward.

The next meeting is being held on 13 May 2014.

Bernard Chalk told the meeting that he was drafting a paper recommending that the Urgent Care Working Group take on responsibility for the entire budget for Urgent Care.

The Finance, Performance and Commissioning Committee:

Noted the above.

10.0 Finance Policies & Procedures

Alec Cowell gave the meeting a verbal update on the expenses approval procedure as per the payroll audit recommendation.

Confirmed

11.1 Financial Plan for 2014/2015

Bernard Chalk presented the paper 'Two Year Financial Plan 2014/15 – 2015-16'. The paper is being presented to the Governing Body to provide details of the financial plan for the CCG for the years 2014-15 and 2015-16.

The paper recommends that:

- The Governing Body is asked to **NOTE** the current issues with finalising a contract with our main provider (HDFT); and
- The Governing Body is asked to **APPROVE** the 2014/15 Financial Plan as set out in the paper, subject to there being no material changes.
- The Governing Body is asked to **NOTE** the 2015/16 Financial Plan.

The Finance, Performance and Commissioning Committee:

Noted the above.

11.2 Prescribing Incentive Scheme

Due to quoracy issues the meeting agreed that the paper should be carried forward to the next FPCC meeting on 29 April 2014.

The Finance, Performance and Commissioning Committee:

Noted the above.

12.00 Next Meeting

Tuesday 29 April 2014

9.15 – 12.15

Boardroom

Grimbald Crag Court

Knaresborough

Actions from the Finance, Performance and Commissioning Committee on 27 February 2014

Meeting Date	Item	Action	Responsibility	Action Completed / Due to be Completed (as applicable)
		To update time		
27.3.2014	2.0 Minutes of Last Meeting	Talk to Annie Macleod about CSU setting up the HaRD intranet.	Amanda Bloor	29.4.2014
27.3.2014	2.0 Minutes of Last Meeting	Draft a proposal for the monthly review on individual selected specialities with a GP Governing Body member for the next Clinical Executive meeting.	Bernard Chalk	22.4.2014
27.3.2014	2.0 Minutes of Last Meeting	Provide Alistair Ingram details of HRG's for BMI the Duchy and Leeds covered by specialist commissioning	Alec Cowell	29.4.2014
27.3.2014	2.0 Minutes of Last Meeting	Provide Alistair Ingram with a copy of the Better Care Fund Approval process	Bernard Chalk	29.4.2014
27.3.2014	3.0 Monthly Report on Financial Performance	Undertake an analysis of the likely impact of Vale of York giving HDFT notice to retender Out of Hours Service	Alec Cowell	29.4.2014
27.3.2014	5.0 Business Cases/Investments	Alec Cowell to request that PCU liaise with HDFT to identify progress data for the Autism Assessment Service.	Alec Cowell	29.4.2014
27.3.2014	5.0 Business Cases/Investments	Paul Widdowfield to draft a media statement on the business cases.	Annie Macleod	3.4.2014
27.3.2014	7.0 Monthly report from the CSU	Meet with Amanda Bloor and Jane Baxter to discuss Contract requirements	Annie Macleod	3.4.2014
27.3.2014	8.0 Quality & Performance Dashboard	Alistair Ingram to meet with Sarah Hay about the production of an action plan.	Alistair Ingram	29.4.2014

Confirmed