

NHS NORTH CUMBRIA CLINICAL COMMISSIONING GROUP
Finance & Performance Committee
Wednesday 19 September 2018 at 13:00
The Conference Room, Rosehill

Present:	Jon Rush	Lay Chair (Chair) JR
	Carole Green	Lay Member - Quality and Performance (CG)
	Denise Leslie	Lay Member – Public Engagement (CG)
	Peter Rooney	Chief Operating Officer (PR)
	Charles Welbourn	Chief Finance Officer (CW)
	Kevin Windebank	Lay Member - Secondary Care Doctor (KW)
	John Whitehouse	Lay Member – Finance and Governance (JW)
In Attendance:	Brenda Thomas	Governing Body Support Officer (BT)

FP 99/18 **AGENDA ITEM 1: Welcome and Apologies**

The Chair welcomed everyone to the meeting. Apologies received from David Rogers, Interim Accountable Officer/Medical Director.

FP 100/18 **AGENDA ITEM 2: Declarations of Interest**

The Chair reminded Members of their obligation to declare any interest they may have on any issues arising at committee meetings which might conflict with the business of NHS North Cumbria Clinical Commissioning Group.

Interests declared by member of the Governing Body are listed in the CCG's Register of Interests. The register is available either via the Governing Body Support Officer or the CCG website at the following link:

<http://www.northcumbriaccg.nhs.uk/about-us/how-we-make-decisions/declaration-of-interests/index.aspx>

Declarations made at this meeting:

There were no declarations of interest made.

FP 101/18 **AGENDA ITEM 3, 4 & 5: Minutes & Action Log of 18 July 2018**

Resolved: The above minutes were approved as a true record and there were no outstanding actions.

Matters Arising:

FP 088/18 – PR confirmed that the £80k detailed in the minutes was accurate.

FP 090/18 – It was advised that the court case decision was due by 21 September

2018.

FP 095/18 – PR advised that the replacement Freedom to Speak up Guardian was yet to be determined.

FP 098/18 – Discussion ensued around the requirement for this meeting to take place monthly. Given that there were a number of meetings scheduled for 18 October 2018, it was agreed this meeting would go ahead. Consideration as to whether or not the November 2018 meeting was required would be considered at the next meeting.

It was agreed that Michael Smillie (MS), Director of Finance & Strategy, Cumbria Partnership Foundation Trust (CPFT) should be invited to future meetings.

ACTION: CW to liaise with Pauline Berry (PB), Business Support Assistant, to advise when MS should attend. PB to send diary invites.

FP 102/18

AGENDA ITEM 6: Incident Response Plan

PR presented the report advising that the incident response plan outlines the procedures that enables the CCG to respond, when required, in their role as Category 2 responder. It will provide a framework by which the CCG will prepare for, and undertake, its role in a major incident.

In response to a question from CG, PR confirmed that the plan had been modelled on another CCG's plan which was deemed to be in line with 'best practice'.

PR confirmed that once the plan was approved, a session with relevant individuals in the CCG (on call officers) would meet to discuss operationalising the plan. In addition all on call staff would be reminded of their role and responsibilities.

In response to a question from DL, PR advised that all on call staff had undertaken the required mandatory and that the CCG had been involved in a number of exercises arranged by NHS England. He also confirmed that he was the Accountable Emergency Officer (AEO) referred to in section 1.5.1 of the plan.

Proposed by Denise Leslie, seconded by Carole Green;

Resolved: The Incident Response Plan appended to the report be approved.

FP 103/18

AGENDA ITEM 7: Emergency Preparedness, Resilience & Response (EPRR) Annual Self Assessment 2018/19

PR advised that NHS England had a statutory requirement to formally assure itself of both its own, and NHS organisations readiness to respond effectively to major, critical and business continuity incidents whilst, maintaining services to patients. This was provided through the EPRR annual assurance process. He confirmed that the CCG had undertaken a full assessment against all the relevant core standards set by NHS England (attached to the report) and two areas had been changed from partially to fully compliant.

Proposed by Denise Leslie, seconded by Carole Green;

Resolved:

1. The CCG's role and compliance of its responsibilities as stated in the report be
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- noted; and
2. The CCG's self-assessment against NHS England's core standards for EPRR for 2018/19 (as detailed in Appendix 1 of the report) be approved.
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FP 104/18

AGENDA ITEM 8: Performance

8.1 Elective Waiting Times:

PR highlighted the key areas detailed in the report. In relation to the increasing number of patients waiting over 40 weeks at North Cumbria University Hospitals Trust (NCUHT), PR confirmed that further work was being undertaken to find out how many of those patients had been scheduled for treatment. This would also include assessing the risk of the potential of 52 week breaches in the near future.

Discussion ensued and in response to a question it was confirmed that a higher number of people were being referred. It was also anticipated that the waiting time figures would increase during the winter period.

PR advised that this report had been presented to flag the current situation and regular reports would be presented to the Governing Body commencing in October 2018.

Resolved: The update be noted.

8.2 Performance Report:

PR presented the report highlighting some improvement areas such as Dementia diagnosis and Improving Access to Psychological Therapy (IAPT) access. Although it was acknowledged that there was still further work required to achieve the required standard for Dementia diagnosis.

PR advised that the percentages around Children and Young People's Mental Health (CYPMH) NHS treatment were misleading as the figures were not up to date. He also confirmed that the CCG was awaiting data on urgent eating disorders and treatments. NHS England was also chasing this data, but to date there was no estimate of when CPFT would be able to provide this information. In response to a question, PR confirmed that he was working with Gregg Everett, the CCG's Senior Commissioning Manager, Childrens and Families, to understand the issues and what action was being undertaken to resolve this issues.

PR advised that A&E figures for August and September had improved. It was acknowledged that whilst NCUHT were still not achieving the required standard its performance was higher than most of the country.

In response to a question, CW advised that North West Ambulance Service (NWAS) was not performing to the required standard. However, they were working with NHS Improvement (NHSI) on a Performance Implementation Plan. CW also confirmed that if someone dialled 999 and, an ambulance was not readily available, a first responder could be sent to administer treatment whilst waiting for it to arrive.

Resolved: The update be noted.

8.3 Update from Programme Review Group

PR provided an overview of what had been discussed at the Programme Review Group on Tuesday 18 September 2018. He confirmed that the organisational milestones from this group would be fed into this meeting.

Resolved: The update be noted.

FP 105/18

AGENDA ITEM 9: Finance Report 2018/19

CW presented the report outlining both the CCG and wider system financial position.

In terms of the CCG, CW advised that as at August 2018, it was broadly in line with the plan. He confirmed that this reflected the phasing of the cost improvement programme and ran through the cost improvements and risks detailed on page 5 of the report.

Discussion ensued and in response to a question on the CCG's Continuing Health Care retrospective claims, CW confirmed that these were being worked through and it was anticipated the backlog would be cleared by the end of October 2018. He confirmed that the CCG was working in conjunction with the North of England Commissioning Support (NECS) team. However, there had been some issues and the way the claims were being handled had been changed. Concerns were expressed in the ability to deliver on the specified deadline. CW confirmed Louise Mason Lodge, Deputy Director of Nursing and Designated Nurse for Safeguarding was taking the lead and, the CCG had put its own processes in place to work in parallel with NECS systems to ensure control was maintained.

CW advised that he and the finance team was actively working with colleagues at NCUHT and CPFT to ensure that the systems financial position and overall risk to the combined economy control total becomes embedded into system reporting. CW highlighted key areas of the report presented to the Finance Investment and Performance Committee of the CPFT. He advised that the system plan was based upon the delivery of the transformation agenda (including transformation funding identified in the business case) and ran through the assumptions, risks and steps being taken to mitigate the system risks (as detailed in the report). It was also acknowledged that NHSE and NHSI were working constructively with the system to ensure long term financial recovery in Cumbria.

CW confirmed that work was ongoing to try and achieve further savings across the system.

Resolved: The update be noted.

FP 106/18

AGENDA ITEM 10: Commissioning Oversight Group

PR advised that the work regarding the Mental Health changes within the NHS Morecambe Bay and NHS North Cumbria CCG commissioning intention documents were still ongoing. As they hold Foundation Trust status CPFT can work in strategic partnership with other providers and, in the case of Cumbria they are currently looking at partnership with Lancashire Care and Northumbria Tyne & Wear NHS Foundation Trust. It was envisaged that a full business case would be produced in

October 2018 with a view for implementation of the changes in January/February 2019.

Resolved: The update be noted.

FP 107/18

AGENDA ITEM 11: Health & Safety Quarterly Report

PR presented the report advising that this report was provided to give assurance to the Committee that the CCG is meeting its statutory duties in regards to Health & Safety. In relation to outstanding work station assessments it was confirmed that these would be followed up to ensure that all staff had a DSE (Display Screen Equipment) assessment.

Resolved: The report be received and noted.

FP 108/18

AGENDA ITEM 12: HR Performance Quarterly Report

PR presented the report advising that there was nothing major to note other than the sickness absence which was higher than the regional average for Cumbria and the North East.

Discussion took place and concerns were expressed that at the top of the sickness absence box on page 5 it stated 2.64% however the absence % (FTE) in the box and graph below state 4%. It was also noted that the appendices specified in the report were missing.

Resolved: The report be received and noted.

FP 109/18

AGENDA ITEM 13: Estates & Technology Transformation Report

CW advised that a report was going to be presented to a Part 2 of the Primary Care Committee around Estates & Technology Transformation Funding regarding the Keswick scheme.

Resolved: The update be noted.

FP 110/18

AGENDA ITEM 14: Any Other Business

There were no other items of business.

FP 111/18

AGENDA ITEM 15: Date and time of next meeting:

It was confirmed that the next meeting was scheduled to take place on Wednesday 17 October 2018. However, it was advised that CW would liaise with the Chair to establish whether a formal meeting would be required or whether the Finance & Performance reports could be circulated for information only.

Meeting closed: 15:45