

Approved 5 September 2017

Minutes of a Meeting of NHS Blackpool Clinical Commissioning Group Governing Body Held in Public on Tuesday, 4 July 2017 in the Boardroom, Blackpool CCG

Part I

- Present:
- Mr R Fisher, CCG Chairman
 - Dr M Williams, GP Member/Vice Chairman (From GB87/17)
 - Dr S Green, GP Member
 - Dr L Rudnick, GP Member
 - Dr M Martin, GP Member
 - Dr C Augustine, GP Member
 - Dr S Singh, GP Member
 - Dr S Fairhead, GP Member (Left during GB92/17)
 - Mr D Bonson, Chief Operating Officer
 - Mr C Brown, Lay Member
 - Dr A Rajpura, Director of Public Health
 - Mrs H Williams, Registered Nurse Member
- In Attendance:
- Mrs Y Rispin, Director of Ambulance and NHS111 Commissioning
 - Mr J Gaskins, Deputy Chief Finance Officer
 - Mrs J Harrop, Senior Commissioning Manager (For GB90/17 and GB91/17)
 - Mr J Bridge, Communications and Engagement Manager
 - Miss L J Talbot, Secretary to the Governing Body
- Public Attendees:
- Dr M McIlmurray, Non-Executive Director, Blackpool Teaching Hospitals NHSFT
 - Mr I Garforth, Bayer

Welcome – The Chairman welcomed Mrs Williams, CCG Governing Body Registered Nurse Member who was attending her first meeting of the Governing Body in public. She had taken up the interim post until 31 March 2018.

GB83/17 Apologies for Absence

Apologies for absence had been received from Dr Doyle, Mr Harrison, Mr Edmundson, Mrs McKenzie-Townsend, Mr Alizai, Mrs Barnsley and Mr Cain.

The Chairman informed members that Mrs McKenzie-Townsend had recently had an operation and he had visited her. Members conveyed their best wishes to Mrs McKenzie-Townsend.

GB84/17 Declarations of Interest/Conflicts of Interest Relating to the Items on the Agenda

RESOLVED: That the interests declared by members of the Governing Body as listed in the CCG's Register of Interests be noted. The Register is available either via the Secretary to the Governing Body or the CCG website at the following link:
<http://blackpoolccg.nhs.uk/about-blackpool-ccg/who-we-are/managing-conflicts-of-interest/>

Mr Bonson declared an interest in respect of the discussion relating to the Community Health Services of Blackpool Teaching Hospitals NHSFT as his partner Liz Holt is Director of Adult Community Services and Long Term Conditions.

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GB85/17 Minutes of the Meeting Held on 2 May 2017

RESOLVED: That the minutes of the meeting held on 2 May 2017 be approved as a correct record.

GB86/17 Matters Arising

- (a) **GB62/17(a) Pan Lancashire Care and Treatment/CTRR Policy** – The Secretary had been informed by the CCG's Head of Commissioning that in light of the new guidance, the CTR Policy had not yet been updated. Further advice was awaited from the Commissioners' Network meeting. **ACTION: HL-S**
- (b) **GB62/17(b) Information Governance Handbook and Subject Access Procedure** – It had been commented at the previous meeting that information can be lost if IOS updates are undertaken. Mr Harrison had been asked to raise this with IT colleagues and the Secretary had raised this with Mr Harrison outside of the meeting and was awaiting a response. Mr Gaskins would raise this with Mr Harrison accordingly. **ACTION: JG**
- (c) **GB64/17(c)** – At the previous meeting, Dr Rajpura had made reference to E.coli bacteremia and asked if it could be included in future performance reports. It was confirmed that this had been actioned by Mrs Barnsley. It would also be discussed at Health Committee Acquired Infection meetings.
- (d) **GB68/17 Clinical Policies – Policy for the Commissioning of Services with People with Erectile Dysfunction** – It had been commented at the previous meeting that GPs do not have access to psychiatrists whilst recognising that there are some psychosexual services available. It had been further commented that there were no psychiatrists available and no mental health support available. Dr Green commented that there are psychosexual services available through Whitegate Health Centre.

Dr Williams arrived at the meeting.

GB87/17 Chairman's Communications

- (a) **Healthwatch** – The Chairman informed members that at the current time there was no attendance from Healthwatch at both the Governing Body meetings and the Primary Care Commissioning Committee meetings as Mr Molyneux and Dr Davis had resigned from Healthwatch. The Chairman had written to Lancashire Healthwatch seeking clarification on the current position and he had asked the Chief Executive of Lancashire Healthwatch, who also run the Blackpool Healthwatch, if a meeting could be convened. A meeting was planned for 13 July 2017 and would also include Mrs Williams. The Chairman would report back to members in due course.
- (b) **Annual General Meeting** – A joint Annual General Meeting with Blackpool CCG, Fylde and Wyre CCG and Blackpool Teaching Hospitals NHSFT would be held on Thursday, 21 September 2017 from 5.00pm until 8.00pm at Blackpool Sixth Form College. Further information would be publicised in due course.
- (c) **Managing Conflicts of Interest** – The Secretary informed members that NHSE had issued revised guidance on Managing Conflicts of Interest. The CCG's Head of Corporate Business and the Secretary were currently reviewing the guidance to ascertain the changes and would submit an update report to the Governing Body in September and to the Audit Committee in October. **ACTION: HN/LT**

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GB88/17 Finance and Performance as Reported to the Finance and Performance Committee
(a) Performance Summary Reports

(i) 2016/17 Year End Report – Mr Bonson spoke to a circulated year end performance summary report for 2016/17 (Month 12). He explained that the main areas of pressure related to the emergency services and we continue to provide details throughout the year to the Finance and Performance Committee.

- Cancer 62 day wait was slightly under target at year end.
- IAPT recovery was improving and the access target was improving however, Dr Rudnick queried the access rate. Mr Bonson would check outside of the meeting. **ACTION: DB**
- There continued to be 12 hour waits in A&E in April resulting in breaches. Mental health was a contributing factor however, this was an issue nationally.

RESOLVED: That members receive the report.

(ii) 2017/18 Month 1 Report – Mr Bonson spoke to a circulated report which was provided for information. He thanked GP practices for the work they had undertaken and the focus on referrals within their own areas which had made significant improvements. Dr Williams asked if we could qualify the reduction in GP referral rates as they are being referred to the most direct provider with the most appropriate outcome. It was commented that we need to refer more appropriately which was recognised and this would be taken outside of the meeting to understand where the impact is.

Discussion had been held at the Finance and Performance Committee in looking at information and monitoring by GP practice.

Dr Rajpura made reference to the latest life expectancy figures. He was currently finalising a report for submission to the Governing Body in due course and commented that it did not make positive reading as he was now seeing life expectancy decreasing. This is also replicated in other deprived areas. The over 55's mortality had increased along with the 0-64 age groups.

RESOLVED: That members receive the report.

(b) GP Referrals – Month 1 – Mr Bonson spoke to a circulated report which provided an overview of GP referrals for Blackpool CCG. Work was being undertaken towards accounting for deflective referrals from trauma and orthopaedics, dermatology and ophthalmology. He explained that a lot of good work had been undertaken in respect of GP referrals across our local system also working with the Council to ensure we target the right areas. Thanks were conveyed to colleagues involved in contributing to the savings.

RESOLVED: That members receive the report.

(c) QIPP Programme Update - Mr Gaskins made reference to the discussions held at the Effective Use of Resources Group and it was recognised that whilst the work to be taken forward will be difficult to undertake, we do need to work across the health economy including the Council to make savings.

Dr Rajpura made reference to the Council's savings and anticipated a very difficult year to achieve £20m savings.

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- (d) **Financial Position – Month 2** – Mr Gaskins spoke to a circulated report. He pointed out an error on page 4 of the slide pack which stated that the financial position at Month 2 surplus was £0.46k. This was incorrect and should have stated a £46,000 surplus. He further explained the background regarding the surplus position in previous years and informed members that we were now reporting in year. He explained that in future, slide two which showed the health economy report would change to reflect the in year surplus position. If the cumulative surplus this year is the same as the previous year, CCGs will report a zero in year surplus. It was noted that this applied to Fylde and Wyre CCG also.

Mr Gaskins made reference to the key risks which related to:

- Continuing health care and complex cases
- Acute contract over performance
- QIPP delivery
- Net risk position - £1.29m/Gross risk position £12.5m.

More detailed discussion would be held on the increasing continuing healthcare spend at the next meeting of the Finance and Performance Committee.

Mr Gaskins also made reference to the Month 2 headlines:

- The CCG had met its planned financial target
- Financial position at Month 2:
 - £46,000 surplus which was on target with the plan
 - Year end forecast showed achievement of £0.27m surplus
- QIPP Position
 - Target of £6.5m
 - Reported £0.64m achieved year to date
 - £6.2m forecast for full year
- Running cost expenditure was £35,000 under budget
- Better Payment Practice Code – NHS 100% - non NHS 99.6% by number of invoices

RESOLVED: That members approve the report.

GB89/17 NHS Improvement Undertakings – Compliance Report

Mr Bonson spoke to a circulated report and reminded members of the discussions held at a recent Governing Body Development Session that the CCG had been subject to scrutiny by NHS Improvement (formerly Monitor) in relation to patient choice as a result of a complaint lodged with Monitor in September 2013. Whilst the complaint was not upheld, the CCG had been required to provide routine compliance updates in relation to ensuring patient choice as per the NHS Constitution pledge. The compliance update which was required to be submitted at the end of June was the final submission that the CCG had to make.

Mr Bonson explained that the updated document included the actions in relation to the undertakings that had been taken through the Executives and Deputies Team, regular report to the Quality and Engagement Committee, the Finance and Performance Committee and was agreed for submission at the Governing Body Development Session in June 2017.

RESOLVED: That members of the Governing Body note the contents of the compliance report and ratify the decision made at the Governing Body Development Session on 6 June 2017 and the subsequent submission of the report to NHS Improvement which was completed by the deadline of the end of June 2017.

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GB90/17 **Update on New Models of Care**

Mrs Harrop gave a presentational update on new models of care which provided information on the services provided by extensive care, enhanced primary care and episodic care. Mrs Harrop also made reference to the Fylde Coast End of Life Strategy.

Particular reference was made to the success of the health and wellbeing worker and a lot of work was taking place around this. It was stressed that it is important we have good communications around this as it is so successful.

Reference was made to the Directory of Services and seven test sessions had been undertaken with 12 members of the public taking part at each session. Colleagues were working towards a public launch date of 11 August 2017.

Dr Rajpura made reference to the Community Farm at Grange Park and explained that the City Learning Centre will revert back to a community facility and community hub which will include a farm, farm shop and other retail.

RESOLVED: That members receive the update.

GB91/17 **Fylde Coast End of Life Strategy 2017-2022**

Mrs Harrop spoke to a circulated document which had been taken through the CCG's committees (to be submitted to the Quality and Engagement Committee on 11 July 2017) and across the Fylde Coast organisations.

The strategy sets out the need for changes to end of life care across the Fylde coast. It describes the key areas that need to be addressed, identified by local organisations, when comparing local services to the North West Model of Care and the Ambitions for Palliative and End of Life Care. The principle that services should be accessible to all and of a consistent high standard for all residents of the Fylde coast underpins the strategy.

The strategy proposed a number of small groups (workstreams), addressing the key local areas identified. Each group will develop plans to reduced health inequalities, ensuring that health and care services are providing modern, patient-centered, high quality care in the most appropriate setting, increasing patient choice and knowledge and reducing inappropriate hospital admissions for end of life care. More people will be supported to die in the place they choose with an improved experience for them and bereaved relatives and loved ones.

RESOLVED: That members approve the Fylde Coast End of Life Strategy 2017 to 2022.

100 Acts of Kindness/Blackpool Culture of Kindness Town – Dr Rajpura made reference to the 100 Acts of Kindness which has been launched. Link to that is the Blackpool Culture of Kindness Town. He informed members that Blackpool has submitted a bid to become the first Culture of Kindness Town. The resort held its first Kindness Convention, hosted by the Blackpool Fairness Commission, set up by the Council and its partners. Its aim was to encourage people living in the town to use kindness and humanity to help build resilient communities and make Blackpool a happier place to live, work and play. Dr Rajpura would forward the link to the Secretary for circulation to members.

ACTION: AR/LIT

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GB92/17 Accountable Care System and Sustainability and Transformation Partnership

Mr Bonson made reference to the discussions held with Governing Body members on 2 May 2017 and on 6 June 2017. He explained that there are four areas of performance relating to

- Improving **A&E performance** – requiring the upgrade of the wider urgent and emergency care system to manage demand growth and improve patient flow in partnership with social care services
- Strengthening access to high quality **GP services and primary care**
- Improvement in **cancer services** (including performance against waiting time standards) and **mental health**.

Nine areas had been identified as likely candidates to develop faster into Accountable Care Systems as they have demonstrated progress through governance, shared decision making, contracting approach, financial management and performance with Blackpool and the Fylde Coast being one of these. This has recently been confirmed by the NHSE Chief Executive. Mr Bonson explained that this announcement would bring with it an amount of additional investment together with practical support from NHSE and NHSI to overcome some of the current barriers which exist between commissioners, providers and health and social care.

Mr Bonson explained that as part of our local plans, the first meeting of the Accountable Care System Steering Group was held on 15 June 2017 and the report provided information on the issues discussed.

Dr Fairhead left the meeting.

Mrs Rispin, the Director of Ambulance and NHS111 Commissioning would work with Mr Bonson as an exemplar site and would discuss this in more detail outside of the meeting.

Dr Williams had agreed to be the GP representative with Dr Martin as the Deputy on the Accountable Care System Steering Group.

Mr Gaskins commented that we will need to ensure we have performance monitoring mechanisms in place so that we do not miss the four key areas as the main improvement priorities 2017/18 as highlighted earlier in the report.

RESOLVED: That members receive the report and note that regular updates will be provided at future meetings.

GB93/17 Corporate Objectives and Risks – Governing Body Assurance Framework

Mr Bonson spoke to a circulated report and reminded members of the discussions held at the Governing Body Development Sessions on 4 April 2017 and 6 June 2017 regarding the update relating to the establishment of the CCG's corporate objectives which would enable a more strategic approach to risk management and the development of the new Governing Body Assurance Framework.

In light of the seven core objectives from NHS England which link to the priorities and ambitions of the NHS and are aligned to the CCG's Improvement and Assessment Framework, the review of the risks on the "old style" Risk Register had been undertaken and a "new style" Risk Register had been

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produced in line with the new corporate objectives. The “new style” report had been taken to the Development Session in June and had also been discussed at various committee meetings.

Also appended to the report was the CCG risk heat map to reflect the risks which were also aligned to the relevant corporate objectives including a risk summary. The heat map provided a graphical interpretation of the risks scoring 12 and above on the Governing Body Assurance Framework. Also appended was a historical risk movement schedule for 2017/18 which had been produced to show the initial risk score, current risk score and a diagram showing the direction of the risk movement.

The Secretary sought clarification as to how frequent members wished to receive the Governing Body Assurance Framework. Members wished to receive the document for any risks scoring 12 and above at each meeting. The Secretary also informed members that the full Risk Register (including risks scoring below 12) would be submitted to both the Quality and Engagement Committee and Finance and Performance Committee meetings as a first review of the “new style” register.

Clarification was sought in respect of Corporate Objective 5.1 which showed different risk scores. ***Post Meeting Update – The Secretary had checked this and the risk was scored at nine with an initial of nine and a current of six. The heat map and the covering report were correct however, the Risk Register was incorrect as it stated 16 and the score had changed to nine and had not been amended.***

Mrs Rispin also commented that one of her risks had not been updated as she had suggested and this would be taken back for updating.

RESOLVED: That subject to the amendments to be made, members receive the Governing Body Assurance Framework, heat map and historical movement schedule.

GB94/17 Clinical Policies Update

Mr Bonson spoke to a circulated report which provided an update in relation to the adoption of clinical policies by the CCG.

The Policy for Endoscopic Knee Procedures was reviewed and approved by the Clinical Leadership Team in July 2016 however, unfortunately due to an oversight it was not presented to the Governing Body for adoption. When the oversight was identified, the policy was sent to Dr Doyle for her to provide delegated approval which was received on 25 May 2017. Members were informed that the policy is live on the CCG’s website and providers who undertake these procedures are aware of the policy. Governing Body members were asked to ratify the approval of the policy.

Dr Green made reference to the abbreviation on page 3 of the policy which had not been corrected as advised at the Clinical Leadership Team. ACL should have been amended to ACI. The Secretary would inform colleagues and the amendment would be made. ACTION: LJT

RESOLVED: That members adopt the Policy for Endoscopic Knee Procedures.

GB95/17 Minutes/Action Notes of Meetings and Associated Documents

(a) Finance and Performance Committee:

(i) Ratified Minutes of the Meeting Held on 25 April 2017

(ii) Ratified Minutes of the Meeting Held on 30 May 2017

RESOLVED: That members receive the minutes of the meetings.

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(iii) Update From the Meeting Held on 27 June 2017 – Age UK Contract - Mr Gaskins informed members that the CCG is in contact with the receivers and have lodged a claim for monies that the CCG has paid to Age UK.

RESOLVED: That members receive the update.

(iv) Individual Patient Request Panel – Terms of Reference – Item deferred due to further review.

(b) Quality and Engagement Committee:

(i) Ratified Minutes of the Meeting Held on 14 March 2017 – Mr Brown commented that progress was being made against the Stroke Services Plan and discussions were being held at a Lancashire level.

RESOLVED: That members receive the minutes of the meeting.

(ii) Update From the Meeting Held on 9 May 2017 – Mr Brown confirmed that the actions from the meeting relating to items for the Governing Body agenda had been included.

(iii) Communications and Engagement Strategy 2017/19 – Mr Bridge spoke to a circulated document and reminded members that the CCG’s current Patient and Public Engagement Strategy which was written in 2014 required a refresh. The CCG did not have a clear and approved Communication Strategy in existence and the updated strategy document presented to members represented a refresh of the existing Patient and Public Engagement Strategy and also included the communication element into one combined strategy.

Mrs Williams commended the report however, commented that there did not appear to be sufficient information regarding consultation activities. Reference was made to the 360 degree stakeholder engagement and consultation and she sought clarification as to how we monitor our effectiveness. It was commented that consultation is one type of engagement and Mr Bridge informed members that information had been included in the document however, he would strengthen the wording. It was suggested that once the strategy had been amended, Mr Bridge would send it to Mrs Williams and Mr Brown to agree.

RESOLVED: That subject to the amendments to be made, the Communications and Engagement Strategy 2017/19 was approved.

ACTION: JB

(iv) Blackpool CCG Equality and Inclusion Annual Report 2016/17:

RESOLVED: That members receive the Annual Report.

(v) Patient Complaints and Feedback Annual Report 2016/17:

RESOLVED: That members receive the Annual Report.

(j) Primary Care Commissioning Committee:

(i) Ratified Minutes of the Meeting Held on 7 March 2017

RESOLVED: That members receive the minutes of the meeting.

(ii) Update From the Meeting Held on 6 June 2017 – The Chairman highlighted the issues discussed and the agenda was available on the CCG’s website under the Primary Care Commissioning Committee meeting held in public.

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(k) Audit Committee

(i) Update From the Final Accounts Meeting Held on 25 May 2017 – Mr Gaskins informed members that the CCG’s accounts for 2016/17 had been signed off and approved by the Audit Committee. There were no recommendations within the Audit Report which was an excellent achievement and congratulations were conveyed to staff.

RESOLVED: That members receive the update from the meeting.

(ii) Annual Report of the Audit Committee – Year Ended 31 March 2017

RESOLVED: That members receive the Annual Report.

(iii) Raising a Concern Policy (Whistleblowing) – The Secretary informed members that there was a requirement to update the policy and the Counter Fraud Specialist had also reviewed the policy in light of latest guidance received. The policy had been reviewed by the Audit Committee, the Quality and Engagement Committee and CCG staff and CSU embedded team colleagues. The only amendments related to the areas of involvement for Lay Members which had been incorporated into the document.

RESOLVED: That members approve the Raising a Concern Policy (Whistleblowing).

(l) Remuneration Committee – Terms of Reference and Membership – The Secretary informed members that the Remuneration Committee had undertaken an annual review of the Terms of Reference and Membership and that there were no amendments to be made.

RESOLVED: That members approve the Terms of Reference and Membership of the Remuneration Committee.

(m) Health and Wellbeing Board – 19 April 2017:

RESOLVED: That members receive the minutes of the meeting.

GB96/17 Any Other Business

There were no issues.

GB97/17 Date, Time and Venue of Next Meeting

The next meeting would be held on Tuesday, 5 September 2017 at 1.00 pm in the Boardroom, Blackpool CCG.

EXCLUSION OF THE PUBLIC

“That representatives of the press and other members of the public be excluded from the remainder of this meeting having regard to the confidential nature of the business to be transacted, publicity on which would be prejudicial to the public interest”.

(Section 1(2) Public Bodies (Admission to Meetings) Act 1960).

The meeting closed.

Minutes approved as a correct record.

CCG Chairman **Date**