

Minutes of the NHS Rotherham Clinical Commissioning Group

Public Governing Body Meeting

Wednesday, 8 January 2020 at 1.00pm

ELM Room, G.04 Oak House, Bramley

Quorum

Governing Body has 13 voting members including 1 Lay member and 1 GP Members Committee Member or nominated representative, the Accountable officer or nominated representative and the Chief Financial Officer or nominated representative.

Quorum is 7 members

Present:

Dr R Cullen	GP & Chair, RCCG
Mr C Edwards	Chief Officer, RCCG
Mr I Atkinson	Deputy Chief Officer, RCCG
Mrs W Allott	Chief Finance Officer, RCCG
Mrs S Cassin	Chief Nurse, RCCG
Dr G Avery	GPMC Representative, RCCG
Mr J Barber	Lay Member, RCCG -Vice Chair
Mrs D Twell	Lay Member, RCCG
Dr S Mackeown	GPMC Representative, RCCG
Dr J Page	Lead GP, Finance and Governance, RCCG
Dr D Clitherow	Independent GP
Mrs J Wheatley	Lay Member, RCCG

In Attendance:

Mrs R Nutbrown	Assistant Chief Officer, RCCG
Ms Lindsey Hill	Minute Taker, RCCG

Participating Observers:

Councillor D Roche	Chair of Health & Wellbeing Board, RMBC
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Apologies

Dr N Leigh-Hunt	Public Health, RMBC
Dr R D'Costa	Secondary Care Doctor, RCCG

001/20	Quorum
	The Chair confirmed the meeting as quorate
002/20	Declarations of Interest
	<p>The Chair reminded members of their obligations to declare any interest they may have on any issues arising at meetings which might conflict with the business of the NHS Rotherham Clinical Commissioning Group (RCCG).</p> <p>Declarations declared by members are listed in the CCG's register of interests. The register is available on the CCG website at the following link: http://www.rotherhamccg.nhs.uk/about-us/declaration-of-business-interests_2.htm</p>
	No declarations were declared.
003/20	Patient & Public Questions
	None submitted
004/20	Patient Story
	Mrs Cassin shared a patient story of a person who was homeless with mental health problems leading to suicidal thoughts. After an initial reluctance to access a creative art group called Rotherham Flourish, the patient has found a new purpose in life, and has made friends with people who understand the day to day difficulties that living with mental health issues brings. The patient is now a published poet and although there are still difficult days, the staff at Flourish continue to support, understand and listen without prejudice. The patient thanked staff at Flourish for their support, guidance, genuine concern and friendship.
005/20	Declarations of Interest from today's meeting
	No declarations of interest were declared.
006/20	Draft minutes of the Public Governing Body Meeting dated 4 December 2019
	The draft minutes of the Governing Body meeting dated 4 December 2019 were agreed as a true and accurate record.
007/20	GOVERNING BODY ACTION LOG
	<p>Members reviewed the action log and noted progress.</p> <p>All items noted are deferred to the February agenda.</p>

	<p>Councillor Roche noted that item 57/19 – JSNA is now very much improved due to detailed work completed by Gilly Brenner, Consultant in Public Health, Rotherham Metropolitan Borough Council (RMBC).</p>
<p>008/20</p>	<p>CHIEF OFFICER REPORT</p> <p>Mr Edwards gave an overview of national/local developments in the past month highlighting the following:</p> <p>Vote of Confidence - The CCG constitution requires an annual vote of confidence in the commissioning arrangements, and this year has seen another really good response from members, with questions sent out to 30 practices receiving 22 responses.</p> <p>The responses received were 95% in agreement for confidence in the executive teams of the CCG, and 90% in agreement for confidence in the direction of travel.</p> <p>Mr Edwards added that Dr Cullen and Dr Avery have offered to visit practices who gave negative responses in order to understand their issues.</p> <p>Outcome of the joint RMBC/RCCG Home Care Procurement - In May 2019 the CCG Governing Body entered into a joint procurement exercise with RMBC, for the future delivery of Home Care provision. The procurement exercise concluded in November 2019, with the newly commissioned model of Home Care focussing on a Flexible Purchasing System (FPS) of care and comprises of two Tiers and 6 Lots as detailed in the report.</p> <p>Councillor Roche added that the RMBC Social Values Policy is met by this contract and praised officers in the CCG and RMBC for the negotiation of this contract.</p> <p>Mr Atkinson went on to say that further detail can be provided to members detailing how the service will be mobilised, if it is required.</p> <p>Action: March Agenda item - Full procurement report for Audit & Quality Assurance Committee (AQUA).</p> <p>Governing Body members noted: :</p> <ol style="list-style-type: none"> 1) This procurement process has led to the successful appointment of 13 organisations, who will work from the framework for the next 5 years. 2) The required capacity at Tier 1 across Lots 1, 2 and 3 has been achieved with additional support Borough-wide at Tier 2. 3) A number of incumbent providers who have long standing relationships with both the Council and CCG have successfully achieved appointment thus maintaining knowledge and experience of the Borough.

4) All rates submitted are in line with the rate range specified by RMBC and the CCG. AQUA will receive the full procurement tender evaluation report for assurance.

5) New services will commence from April 2020.

Patient and Community Engagement Indicator 2018/19 - RCCG have received an Integrated Assurance Framework (IAF) extremely positive rating again this year.

Mrs Twell added that Helen Wyatt, Patient and Public Engagement Manager, has used a mapping tool across the CCG which has been highlighted as best practice, and is a proposed model for other CCG's to use. The evidence that supports the framework which is constantly updated by Mrs Wyatt, has been particularly commended.

Governing Body members noted special thanks to Mrs Wyatt for her contribution.

Communications Update -

- 'Be the One', our joint suicide prevention campaign with Rotherham Council, recently received positive coverage in the Rotherham Advertiser.
- Winter communications activity increased through December into the Christmas period, focussing on self-care, pharmacy, NHS 111 and use of the extended access appointments.
- The Rotherham Health App currently has 11,000 people signed up, with further encouragement to improve uptake via the communications team to take place January/February.

PERFORMANCE UPDATES

009/20 Finance And Contracting Performance Report

Mrs Allott gave an update to provide members on the financial and contracting performance position as at 30 November 2019, also referred to as month eight..

In summary, cash is being well managed, invoices are being paid on time, and overall a balanced year to date and Forecast Outturn position is reported.

The most significant variances to plan remain the £2.4m overtrading on acute services, most notably those with Sheffield Teaching Hospital (STH), the Independent Sector, and on non-contract activity.

The Rotherham Foundation Trust (TRFT) contract remains subject to an aligned incentive block which substantially mitigates any in-year financial

	<p>risk.</p> <p>Six months of actual prescribing data is now available and, following the Category M price increases in August, a likely forecast overspend of around £300k is expected. However with the work being done locally between the Medicines Management Team (MMT) and our GP practices, the Rotherham cost growth benchmarks competitively compared to peer groups of demographically similar CCG's.</p> <p>Mrs Allott added that Continuing Health Care (CHC) and specialist placements are also currently projected to stay within budget overall based on current data and intelligence.</p> <p>In summary the in-year position is being managed, supported by the non-recurrent drawdown monies received in-year.</p> <p>Dr Avery commented that earlier in the year, prescribing data was unavailable in order to judge the risk, but now the current figures reflect less imminent risk.</p> <p>Mrs Allott added that as prescribing data is two months behind, it is a very uncomfortable to predict forward expenditure, but assurance is taken from the QIPP schemes and medicines management work with GP practices</p>
	<p>Governing Body members noted the content and progress in the report.</p>
010/20	Quality, Innovation, Prevention and Productivity (QIPP) Report
	<p>Mrs Allott updated members of the progress against achievement of the CCG's 2019/20 QIPP plans for the month eight year to date and forecast outturn position.</p> <p>In financial terms, £12.5m QIPP is required in total and year to date delivery is £579k behind that originally expected. The main causes of adverse variance remain as previously highlighted; in the areas of Meds Management and CHC. Both responsible officers continue to predict financial performance improving by year end, as remaining plans become fully operationalized.</p> <p>The report narrative has been updated at month eight to give a view of both financial and operational delivery of schemes.</p> <p>Dr Page asked if the year to date variance recorded as zero for acute services is correct in Appendix A.</p> <p>Mrs Allott informed members that that it is correct due to the aligned incentive and that financially the contract does deliver because of the schemes built into the contract.</p> <p>Mr Atkinson added that an update will be provided in the confidential governing body meeting in February. The aligned incentive with TRFT mitigates the financial risk for the in-year delivery of the services such as outpatient transformation and follow-up, but the last TRFT position reports</p>

	<p>some outpatient impact reduction. The update will include the current profile of activity.</p> <p>Dr Avery commented that by year end, we will need to balance the budget as in previous years, but asked if the performance variance figure for this year is a similar amount to previous years?</p> <p>Mrs Allott informed members that it is a very similar amount and that it is very manageable within the 0.5% contingency held.</p> <p>Mr Edwards added that when Rotherham CCG is assessed as a system at year end, we should also include the TRFT position. Mr Edwards asked Mrs Allott if recent information suggesting TRFT are forecasted to meet their plan is the current assumption. Mrs Allott confirmed that it is.</p> <p>Mr Edwards went on to say that as an Integrated care System (ICS) we are currently forecasting to meet our financial targets but there are risks, particularly for Sheffield Children's Hospital this year.</p> <p>Mrs Allott noted that a previous agreed action to report back system wide information is challenging due to the flow of the reports received.</p> <p>Action: Mrs Allott received Month 8 combined reports today and will circulate them after the meeting, for further discussion in February.</p> <p>Mr Edwards added that as a system, it would be useful to have sight of documents on activity elsewhere. Dr Avery asked why there is a reference to next year?</p> <p>Mr Edwards responded that for 2020/21, the current plans have a gap of between £25-35m in planning for South Yorkshire and Bassetlaw, it is unclear if we will receive commissioner drawdown and some of the hospitals in the area are forecasting deficits.. Until the plans are brought back into balance, CCG's will be 'involved' in the process.</p> <p>Mr Edwards added that for 2020/21, Mrs Allott has forecasted that the CCG will meet their target but the wider picture requires an understanding of the rules as early as possible.</p>
	<p>Governing Body members discussed and noted the content.</p>
<p>011/20</p>	<p>Delivery Dashboard</p>
	<p>Mr Atkinson shared the report for information reflecting a steady position overall, highlighting the following:</p> <p><u>Accident and Emergency</u> - December has seen challenges seeing high flu levels and high levels of norovirus in the hospital, with consistent levels of over 300 patients attending daily. Levels are improving and maintaining at 260 currently with winter bed availability when required. Feedback from GP colleagues also reports challenges for primary care relating to the flu virus.</p> <p><u>Delayed Transfer of Care</u> - numbers have increased slightly but remain in a positive position in line with the national position into January.</p> <p><u>Diagnostic Performance</u> - there is an action noted for the two week waits but performance on the 6 week target remains positive.</p> <p><u>Improving Access to Psychological Therapies</u> - remains positive with</p>

	<p>additional capacity coming on line expected mid-January to enable more patients through the Cognitive Behaviour Therapy (CBT) pathway through quarter four.</p> <p><u>Recruitment to Time and Target (RTT)</u> - the CCG has been challenged but the TRFT have delivered on target, with elective downtime having some effect during December.</p> <p><u>Cancer Performance</u> - remains challenging but is expected to improve.</p> <p>Dr Page added that validated December data shows 88% for 62 day performance based on 40/50 people breaching their 60 day wait, which then increased to 70 people over Christmas. There has been extra interest from Geoff Garner, Cancer Consultant at TRFT, who has taken up a number of tasks to encourage his colleagues to perform more efficiently.</p> <p>Dr Avery commented that resources and more hub activity should help performance, but winter pressures coming into general practice may affect patients being unable to access GP's, so they would then fall into acute services.</p> <p>Dr Avery also acknowledged that Rotherham is not part of the four hour wait review but the system is being reviewed, and currently, GP's have no access to information about any current patient wait times and patient experience going through A&E.</p> <p>Mr Atkinson responded that more funding is intended for winter capacity/primary care access. All six Primary Care Networks (PCN's) have agreed to cover additional capacity and the extended access hub through the Urgent and Emergency Care Centre (UECC).</p> <p>A meeting taking place today will to look at extended access availability commencing next week, which would allow the diversion of some primary care activity.</p> <p>Mr Atkinson went explain that NHS England (NHSE) have instructed that information on the pilot indicators is not yet to be disclosed in the public domain. However, some information on time to triage, time to see a doctor, average length of time spend in the department is available but remains unpublished.</p> <p>Dr Avery asked if this could be disclosed in a confidential governing body session?</p> <p>Action: Mr Atkinson stated that he would take an action to reflect this request and discuss it with NHSE colleagues.</p>
	Governing Body members noted the content of the report
	QUALITY AND PATIENT ENGAGEMENT
012/20	Patient Safety & Quality Assurance Report
	<p>Mrs Cassin shared the report to provide an update to members highlighting the following:</p> <p><u>Healthcare Associated Infection (HCAI)</u> - Clostridium Difficile work continues to undertake post infection reviews across the system on all cases within</p>

Rotherham. This very challenging target has been exceeded for both CCG and TRFT, and has involved intense joint working.

Collaborative work continues to increase the uptake of MMR and Diphtheria vaccines as a small number of cases of both Measles and Diphtheria have been reported.

A number of Flu and Norovirus cases have been reported in December in the hospital, primary care, care homes and schools. Currently the numbers are decreasing at TRFT, but GP colleagues have reported they have not yet seen a decrease in primary care cases.

On-going joint work is taking place for infection prevention control involving Public Health England, the CCG and TRFT Infection Prevention Control Nurses.

Serious Incidents (SI's) - At AQUA this week, discussion took place relating to the number of outstanding SI's. Mrs Cassin recently met with the Medical Director at TRFT to review the timeliness of reports, predominantly around safeguarding due to larger implications for those involving a serious case review, which are also submitted to the local authority and Safeguarding Partnership.

Reports are not being submitted to the CCG for Performance Management until the majority of the actions have been completed, which is not policy but is becoming practice. TRFT executives are taking steps to discourage this, and to ensure that the reports are shared as soon as the action plans are agreed.

Safeguarding - this section includes information shared across GP practices and an update on the current Serious Case Reviews, and a link to the National Referral Mechanism Framework for identifying and referring potential victims of modern slavery.

Care Home Concerns - links to Care Quality Commission (CQC) Reports for care homes of which one requires improvement.

Multi Agency Safeguarding Hub (MASH) Overview - includes an update on reported missing episodes.

Quality Premiums - continued achievement for both parts of the Quality Premium for CHC.

Personal Health Budgets (PHB) - over 50% of those eligible for PHB now have a budget in place and which now includes information from the social prescribing service.

Primary care - Summary details for quality visits to GP Practices.

Commissioning for Quality and Innovation (CQUIN) Update - details of CQC visits to main providers. The verbal feedback for RDaSH was very positive

	<p>and the final report is due this month. The CQC visit to TRFT Urgent and Emergency Care Centre Single Service visit was published 20 December 2019. The overall rating has improved from inadequate to requires improvement, noting that the caring 'tile' rating has improved which has improved department morale.</p> <p>Councillor Roche shared concerns about health and equality across Rotherham noting joint work taking place in central Rotherham, where child immunisation rates are far lower than average, and asked how this will make a difference?</p> <p>Mrs Cassin responded as Child Immunisation information is held within public health, she is unable to offer comment.</p> <p>Councillor Roche also questioned if the ICS national/regional changes where GP's will carry out ward round's in care homes will make any difference, as there is already a GP allocated to each care home.</p> <p>Mr Edwards explained that in late December, significant service specifications came down from the Primary Care Network (PCN) for consultation. The care home specification is a step up from what is currently expected of GP practices by offering an enhancement of existing services.</p> <p>Dr Avery added that currently, a clinician would visit a care home every two weeks, but the new service is very specific about a GP visit once a week which will impact on GP resources.</p> <p>Councillor Roche added that, in his opinion, visits to care homes should also include dental visits, which is now being considered by Sir Andrew Cash.</p>
	Governing Body noted the content and assurances provided in the report.
	Patient Engagement and Experience Report
013/20	<p>Mrs Cassin presented the report highlighting the following:</p> <p><u>What we are Hearing</u> - collated comments from GP practices and patient views on what could be improved.</p> <p><u>Friends and Family Test</u> - current local data, noting as in previous reports, a low response for A&E feedback which continues to be a challenge.</p> <p><u>Patient Participation Network Group</u> - Mrs Twell informed members that a recent session covering mental health was supported by Kate Tufnell and was well received, highlighting the Be The One Campaign.</p> <p><u>UECC</u> - work has been undertaken to look at reasons why patients attend and to identify awareness and understanding of other options other than A&E.</p>
	Governing Body noted the content and assurances provided in the report.
014/20	Health and Justice Board Sexual Assault and Abuse Strategy High Volume Fund Update

	<p>Mrs Cassin updated members on the successful funding for three years, to continue and increase health and therapy services, primarily for the Stovewood investigation but also for marking out and defining the evidence base for the commissioning and provision of mental health services.</p> <p>Mrs Cassin explained that guidance received outlined expectations of how the funding would be used. The team looked at how previous funding was used, the referral pathways and how the additional funding could be utilised and reported back to Health & Justice Board.</p> <p>The CCG has been asked to inform the Health & Justice Board what we can report on as there is no defined reporting schedule.</p> <p>Mrs Cassin added that this information would also assist in preparation of further funding applications at the end of the current three year period. The schedule will be submitted after this meeting if members have no concerns.</p> <p>No concerns were raised by members.</p> <p>Action: Mrs Cassin to submit the report to the Health & Justice Board.</p>
	Governing Body members received and noted the information.
	CORPORATE
015/20	Business Continuity Incidents
	<p>Mrs Nutbrown shared the paper to update members on issues/risks relating to two recent business continuity incidents.</p> <p>This information was also included as evidence in The Emergency Preparedness Resilience and Response (EPRR) Core Standards annual submission to NHSE.</p>
	Governing Body took assurance from the report and continues to support the RCCG teams in reviewing their business continuity plans, and to identify any further learning and gaps that need to be addressed.
016/20	Corporate Assurance Report
	<p>Mrs Nutbrown shared the quarterly report to provide assurance regarding risk management, external assessment, corporate governance, information governance and staffing governance highlighting the following:</p> <ul style="list-style-type: none"> • The annual EPRR annual risk assessment submission was accepted by NHSE and RCCG report full compliance. • EU Exit webinar take place this week, further updates will be fed back to members in February. • The Freedom of Information (FOI) update is included. AQUA took a further update yesterday which confirmed that the system is fit for purpose. • The current Organisational Development (OD) plan is included for information/evidence of on-going work.

	Mr Edwards noted the EU Exit risk for RCCG if no trade agreement is in place next December for the medicines management supply chain.
	Governing Body members noted the activity during the quarter.
	POLICIES AND TERMS OF REFERENCE
017/20	Access to Infertility Treatment Commissioning Policy
	<p>The chair informed members that this paper has been deferred until February.</p> <p>Action: February agenda item</p> <p>Mrs Twell went on to explain that at the AQUA meeting yesterday, the wording used i.e. 'a cycle or round' was questioned. AQUA asked for a resubmitted policy with clarity on what RCCG is actually providing.</p> <p>Mr Atkinson noted feedback that clarity is required for the cover page due to confusion by the use of the words 'round' and 'cycle'.</p> <p>The members of AQUA support the policy but suggested reworded narrative in the cover paper.</p> <p>The edited version of the cover paper will be shared with Mrs Twell and lay members, prior to the public Governing Body in February.</p> <p>Mr Edwards informed members that currently, Bassetlaw offer three cycles, Rotherham Doncaster and Barnsley offer two cycles and Sheffield offer one cycle. This difference is difficult to justify.</p> <p>Mrs Cassin added that there is a NICE Guidance definition on the full cycle in the policy at 5.3.</p>
018/20	Cryopreservation Policy
	<p>Mr Atkinson shared the new policy to seek approval for implementation in Rotherham CCG, supported by AQUA yesterday, in relation to cryopreservation for patients about to undergo medical or surgical procedures which may impair their future fertility. These patients are not included within the revised Infertility policy as this relates to patients with fertility issues who are attempting pregnancy.</p> <p>This policy will also assist with the individual funding request approach and is in line with NICE Guidelines.</p> <p>Mr Atkinson went on to say that he has taken feedback from AQUA that further consideration should be given to how this may impact children further down the line.</p>
	Governing Body members ratified the policy.

019/20	Portable Data Security and Smart Phone/Tablet Policy
	Mr Atkinson shared the updated policy to reflect changes in recent legislative and national standard changes to data protection, including the General Data Protection Regulation (GDPR), the Data Protection A017/20ct 2018 (DPA); and the National Data Guardian's 10 Data Security Standards. The changes to the policy are supported by AQUA.
	Governing Body members ratified the changes to the Portable Data Security And Smartphone / Tablet Policy.
020/20	Information Security Policy
	Mr Atkinson shared the reviewed policy to reflect minor changes to the annual cycle of review, adding that AQUA support the changes to the policy.
	Governing Body members ratified the amended Information detailed in the Information Security Policy.
021/20	Safeguarding Children & Adults Supervision Policy
	Mrs Cassin presented the policy, which has had a substantive rewrite and is supported by AQUA. The policy now includes safeguarding adults, after the finalisation of guidance and legislation. This policy is for the CCG and is offered to GP practices so they can utilise it as practice specific, adding the CCG will support them to do this.
	Governing Body members ratified the updated policy.
	MINUTES FROM OTHER MEETINGS
022/20	Rotherham ICP Place Board Public Meeting 6 November 2019
	Mr Edwards shared the minutes for information, adding that there will be the third iteration of the Rotherham Integrated Care and Social Care Place Plan will be coming on February 5 th 2020. The aim is to 'socialise' the document as much as possible to ensure that people are comfortable with it. Action: <ul style="list-style-type: none"> • The previous draft version will be circulated to members in order to be familiar with the document • February Public Governing Body Rotherham Integrated Care and Social Care Place Plan agenda item <p>Mr Edwards added that during 2020, the CCG will be developing the provider alliance across Rotherham, in addition to a members workshop</p>

	planned in January.
	Governing Body members received and noted the minutes.
023/20	A&E Delivery Board 13 November 2019
	Mr Edwards shared the minutes for information, which include planning for the winter period.
	Governing Body members received and noted the minutes.
024/20	Primary Care Committee 9 October 2019 and virtual November 2019 meeting
	<p>Mrs Twell updated members that telehealth and development of the Rotherham App were discussed at the October meeting, and that the committee approved the Shared Care Protocol for primary and secondary providers of health screening for serious mental illness patients.</p> <p>Discussion also took place around pressure on the UECC in using the right pathway for the patient to the hubs, and the re-investment of quality contract money into GP practices as an upfront payment for getting as many patients as possible on the Rotherham App.</p> <p>In November, the committee discussed changes to practice areas and future planned housing developments, a primary care network innovation fund where PCN's can bid to do collaborative work relating to innovating practice and agreed on payment of money to practices for the Dementia LES work.</p>
	Governing Body members received and noted the minutes.
025/20	Future Agenda Items
	No future agenda items identified.
026/20	Urgent Other Business
	None identified
027/20	Urgent Issues and Appropriate Escalation
	No urgent issues and appropriate escalation.
028/20	Risks Raised
	No risk identified.
029/20	Any Other Business
	None declared.
030/20	Exclusion of the Public
	The CCG Governing Body should consider the following resolution:

	<p>“That representatives of the press and other members of the public be excluded from the remainder of this meeting due to the confidential nature of the business to be transacted – publicity on which would be prejudicial to the public interest”.</p> <p>Section 1(2) Public Bodies (Admission to Meetings) Act 1960 refers.</p>
031/20	<p>Date and time of Next Meeting</p> <p>The next public Governing Body Meeting will take place at 1.00pm on Wednesday 5 February 2019 at Oak House, Rotherham.</p>

DRAFT