

MINUTES

NHS Scarborough & Ryedale Clinical Commissioning Group
 Governing Body Committee in **PUBLIC**
 Wednesday 28 November 2018, 9.30am
 The Royal Hotel, Scarborough
Chair: Dr P Garnett

Present:

Dr Peter Billingsley	GP Member
Mr Simon Cox	Chief Officer
Dr Phil Garnett	Chair, GP Member
Dr Omnia Hefni	GP Member
Mr Philip Hewitson	Lay Member
Mr Andy Hudson	Lay Member
Mrs Carolyn Liddle	Primary Care Manager
Dr Jenni Lawrence	Associate GP Member
Mr Ken Readshaw	Lay Member
Dr Ian Woods	Secondary Care Doctor
Dr Greg Black	GP Member
Dr Kath Halloran	GP Member
Dr Chris Ives	GP Member
Mr Richard Mellor	Chief Finance Officer
Mrs Carrie Wollerton	Executive Nurse

Apologies:

Ms Louise Wallace	NYCC
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In Attendance:

Mrs Barbara Buckley	Associate Director of Commissioning
Mrs Julie Hardiment	Communications and Engagement Manager
Mrs Karen Mazingham	Head of Specialist Delivery
Ms Emma Parker	Corporate Services Manager
Mr Tim Readman	Communications and Engagement Manager
Ms Julia Scoles	Executive Assistant

Minutes		
Agenda	Item	Action
GB/18/545	<p>Welcome and Apologies</p> <p>The Chair welcomed members and non-members and noted the above apologies.</p> <p>Seven members of the public were in attendance. Seven distinct questions were received from members of the public. Responses were provided, see appended document.</p>	
GB/18/546	<p>Minutes of the previous meeting 25 July 2018</p> <p>The minutes were agreed as a true and accurate record.</p>	

GB/18/547	Matters arising There were no matters arising.	
GB/18/548	Declarations of Interest None declared or recorded.	
GB/18/549	Declarations of gifts and hospitality None declared or recorded.	
GB/18/550	Quoracy The Quoracy of the meeting is confirmed. The Chair confirmed that the meeting is quorate and therefore business can be transacted under the terms and conditions of the Constitution.	
Chief Officer and Chair's Report		
GB/18/551	Updates from: <ol style="list-style-type: none"> a. Joint Acute Commissioning Committee (JACC) The next meeting of the JACC is 3pm on 28th November 2018; feedback will be given prior to the next meeting of the Governing Body Committee. b. System Transformation Board Focus is on the 2019-20 medium term plans and to return the whole system to financial balance. c. NYCC Joint Commissioning Committee The Committee met last Thursday and the focus was the medium term planning for commissioning; the next meeting will be dedicated to undertaking a "stock-take" for mental health services in the locality and to identify gaps in service provision. Pressures remain with regard to IAPT and children's mental health services. The outcome will feed into the Accountable Care Partnership. Dr Billingsley gave an update on progress to date. d. Accountable Care Partnership Nothing to report. <p>The Committee noted the updates above.</p>	
GB/18/552	North Yorkshire Reconfiguration A briefing was circulated to partners and staff last week with regard to the process of merging the three North Yorkshire CCGs – Scarborough and Ryedale CCG (SRCCG), Hambleton, Richmondshire and Whitby CCG (HRWCCG) and Harrogate and Rural District CCG (HaRDCCG). One single Accountable Officer was appointed and will commence in post on 1 st December 2018. The successful candidate was Amanda Bloor. Congratulations were recorded on her appointment to post. The Committee noted the update above.	

GB/18/553	<p>Review of Acute Services – Scarborough</p> <p>An initial briefing session will be held on Thursday 29th November 2018 by representatives from Mckinsey. Wider engagement and consultation will then be set in train with stakeholders and partners. It was noted clinical members have been involved in devising the future clinical models. Any communications will be circulated post meeting to Governing Body members.</p> <p>The Committee noted the comments above.</p>	
GB/18/554	<p>EPPR Assurance</p> <p>SRCCG is a category two responder and is required to undertake an assessment annually; this was submitted to NHS England in September and SRCCG has achieved “substantial compliance”. The outcome of the ratification process is still awaited. Once ratified this will then be uploaded to the SRCCG website.</p> <p>The Committee noted the achievement of substantial compliance awarded by NHS England.</p>	
Report from the Finance and Contracting Committee		
GB/18/555	<p>Finance and QiPP Update Report</p> <p>The CCG is reporting a deficit position. Following discussions with NHS England SRCCG has declared a total deficit of £7.5m. SRCCG will not now meet the control totals and thus will not receive the sustainability funds relevant to quarter 2. Pressures continue to be reported on unplanned activity in the acute sector. Concerns were noted in SRCCGs ability to achieve the mental health investment standard. Discussions took place regarding the consequences of failures to provide mental health services.</p> <p>The main area of overspend is around continuing health care; the process of which has been brought back in-house over the last year. A Director of CHC and Vulnerable People was appointed last year to ensure due process if followed and efficiencies are made. The increase in the CHC workload was duly noted. Processes have been set in train to ensure case workload is streamlined and Internal Auditors have been appointed to undertake an audit of CHC processes.</p> <p>An additional area of under-performance is with the acute contract. All factors listed above contribute to the deficit financial position; any additional spend is now to be avoided.</p> <p>Reasonable assessments have been made regarding the trajectory of spending and the end of year financial position and delivery of QiPP schemes. Mitigating actions have been identified to restrain the position; NHS England is aware of areas of pressures and management plans.</p> <p>The Committee noted the comments above.</p>	

GB/18/556	<p>AIC Governance Update</p> <p>The Chief Officer gave an overview of the financial position to date and reported his disappointment in the lack of improvement in the financial position. One area of QiPP with regard to the acute services deteriorated when the contract moved from PBR to AIC. However, the commencement of the AIC contract has meant that the risk has reduced but SRCCG has seen significant opportunity for clinical engagement. A review of the AIC in the York system has been requested and feedback will be received at the JACC.</p> <p>Concerns were noted that YFT might expect work to be carried out in primary care in the future due to financial restraints. Discussions were held regarding alternative aligned incentive contract types. An explanation was given with regard to re-procurement of services should a provider not fulfil their commitments under their contract and subsequently their performance is poor.</p> <p>The Committee noted the comments above.</p>	
Report from Communication and Engagement Committee		
GB/18/557	<p>Committee progress and Exceptions Report</p> <p>Customer Services Excellence – the assessment took place on 21st November 2018 and an interim report has been received. The reports shows continuous improvement against 64 criteria assessed. Additional 2 criteria have achieved compliance plus. There are 15 compliance plus awards.</p> <p>The development of key KPIs shows that SRCCG are leaders in this area. A full report will be drafted for the January 2019 meeting of the Governing Body.</p> <p>Acknowledgements were noted to the communications and engagement team for their input and with the preparation of the evidence.</p> <p>Commissioning Maze – a further event has been held at Malton and good feedback has been received from attendees. The event included supper for those attendees and team tasks were completed. A review has been undertaken on the commissioning maze activity.</p> <p>Acute Services Review – work is ongoing and focus group meetings have been held and were attended by members of the public.</p> <p>Patient Representatives Group – additional feedback has been received from Hunmanby and Eastfield; one theme was widening participation. Methods of improving input from patients have been reviewed and it is anticipated that additional avenues will be available for public feedback.</p> <p>Adult ADHD service – see annex B.</p> <p>The Committee noted the comments above.</p>	

GB/18/558	<p>Social Media and Website Update</p> <p>A presentation was given by Tim Readman, Engagement Manager, regarding the development of the website and social media. See appended document.</p> <p>The Committee noted the comments above.</p>	
GB/18/559	<p>Patient Choice Policy</p> <p>The statement is appended for Committee members to approve. The Chief Finance Officer gave an explanation regarding the contracting of services and the patient’s opportunity to exercise their choice options. It was noted, however, that some services are single choice only as there is only one provider and site available.</p> <p>APPROVED: The Committee approved the Patient Choice Policy.</p>	
Report from Primary Care Co-Commissioning Committee		
GB/18/560	<p>Committee Progress and Exceptions Report</p> <p>Areas of significant improvement and progress since the last meeting includes:</p> <ul style="list-style-type: none"> ○ Extended Access ○ Healthy Child Programme – North Yorkshire County Council ○ GP Patient Survey ○ Primary Care Development Group ○ Primary Care Workforce Briefing ○ Productive General Practice ○ Transformation Fund <p>The Committee noted the progress and exceptions report.</p>	
Report from Public Health		
GB/18/561	<p>Update Report from Public Health NYCC</p> <p>The North Yorkshire Health and Wellbeing Board have continued to take a thematic approach to the business of the Board. The most recent theme considered at a workshop in September was Health and Housing. The workshop was supported by a range of partners and identified how important good quality, accessible housing is to health and wellbeing. The Board meeting in November also received an update on progress made since the Mental Health Summit in May, as well as an update on progress made towards delivering a digital strategy across partners. The Board also considered winter preparedness across the County with a focus on the work of the four A&E Boards as many of the partners are key to supporting people through the winter months. The flu vaccination campaign is well under way as this is also a key part of winter preparedness.</p> <p>It was reported that the new District Level Profiles have now been published.</p> <p>The Committee noted the update from North Yorkshire County Council.</p>	

Report from Quality and Performance Committee	
GB/18/562	<p>Performance Exceptions Report</p> <p>A&E performance continues to fluctuate. Additional ambulatory capacity has been provided to support the flow in the A&E department at the Scarborough site.</p> <p>SRCCG has achieved 5 of the 8 targets – the remaining 3 not achieved are:</p> <ul style="list-style-type: none"> ○ 2 week wait ○ 62 days ○ Dermatology. <p>The 62 day position is impacted by Urology in Hull. A number of patients who remain on the pathway are marked as “PSA”.</p> <p>Additional areas to note are:</p> <ul style="list-style-type: none"> ○ Dermatology ○ Ophthalmology ○ Maternity ○ Serious Incidents – in the Quality and Outcomes Report. ○ Workforce ○ Infection Control – concerns with e-Coli ○ Flu Vaccine – new improved vaccines have been dispensed and this should impact on patient attendance due to the flu virus. <p>The Committee noted the progress and exceptions report.</p>
GB/18/563	<p>Commissioning for Quality and Outcomes Quarter 1 Report 2018-19</p> <p>As above.</p>
GB/18/564	<p>Children’s Safeguarding Succession Planning Business Case</p> <p>The Executive Nurse gave an overview of the proposal which is to increase the capacity of the team. The proposal for an additional Band 7 post (NHS Agenda for Change scale). It was reported that two current Designated Professionals in Safeguarding have both notified their intention to take retirement within the next 18 months. It was noted that recruitment proves very difficult in this area. The financial commitment for SRCCG is approximately £10k per year as the costs are spread across the North Yorkshire CCGs. The proposal is for the successful candidate to start in post in the 2019-20 financial year. A suggestion was made by the CFO is to employ a member of staff in a development role.</p> <p>Discussions took place regarding the financial implications. It was noted this has been approved at two of the North Yorkshire CCGs to date.</p> <p>PROPOSAL: the Committee is asked to consider and approve the proposal to permanently increase the capacity of the Safeguarding team from April 2019.</p> <p>APPROVED: The Committee approves the recruitment and appointment of</p>

	a Band 7 member of staff to support the work and continuity of the Safeguarding team.	
GB/18/565	Annual Reports: a. Adults Safeguarding NOTED: The Committee noted the report. b. Children’s Safeguarding NOTED: The Committee noted the report.	
	Service Development	
GB/18/566	Business Committee – Progress and Exceptions Report – November 2018 The Chair of the Business Committee gave an update as follows: <ol style="list-style-type: none"> 1. Business committee continues to update the prescribing formulary in line with NICE guidance to support safe, cost effective prescribing for the benefit of the local community. 2. There is ongoing work to support the successful development referral for expert opinion. 3. Extended access program has commenced from 1st October and is being delivered by primary care across the CCG area. 4. The Business Committee reviewed the care home support service and agrees that this should focus on education for staff and remain under review until such time as the Committee can be assured good services are provided. 5. There has been a lot of work done looking at community paediatrics but the Committee have been unable to gain absolute clarity regarding the service so it is proposed that a joint working group be set up with partners to develop this service. 6. After York Teaching Hospital Foundation Trust advised that they could not provide the enablement service another provider has been identified at short notice and the service continues. 7. The business committee has looked again at the ‘health optimisation’ period which is imposed on those being referred to surgical specialties. The clinical thresholds apply to those who are obese or smoke. The Committee are looking for a more consistent fair policy, with neighbouring CCGs. 8. The Committee are developing a mental health strategy to feed into work across north Yorkshire with procuring mental health services. 9. Business committee has considered proposals to adjust follow ups after breast cancer and for dermatology clinics. 	

	<p>10. Committee approved the extension of the community Rheumatology pathway.</p> <p>11. The Committee has had updates regarding the Scarborough Acute Services Review – areas to be looked at (Quality, access, workforce, deliverability, value for money)</p> <p>12. Also updates from A&E delivery board, System transformation Board, NYCC SRCCG Joint Commissioning Board. The Committee also received updates from the emergency care network.</p> <p>The Committee noted the comments above.</p>	
Report from Corporate Services		
GB/18/567	<p>Audit and Governance Committee – Chair’s Report</p> <p>The Chair of the Audit and Governance Committee gave an overview of work and progress to date. The report includes detail on:</p> <ul style="list-style-type: none"> ○ National Fraud Initiative - A member of the Committee had attended a conference and one focus is on the national fraud initiative as the total cost to date is £1.17b. ○ Internal Audit Progress Report ○ Finance Report ○ Community Services Contract Update ○ Corporate Services Report ○ Quality and Performance Exceptions Report ○ Joint Committees ○ Risk Management ○ Scarborough Acute Services Review ○ Research and Development ○ Primary Care Internal Audit Arrangements <p>The Committee noted the update from the Chair of the Audit and Governance Committee.</p>	
GB/18/568	<p>Audit and Governance Committee – Minutes</p> <p>The Committee noted the approved minutes from the meeting of the Audit and Governance Committee which took place on 20th July 2018.</p> <p>The Committee noted the minutes as above.</p>	
GB/18/569	<p>Constitutional Briefing</p> <p>It was noted there is a new model Constitution and this will be discussed at the next meeting of the Council of Clinical Representatives. It is anticipated this new model will be utilised once adopted. The new model takes into account the legislative changes and recognises that the pace of change is increasing in many areas and CCGs are finding the task of keeping everything in their constitution up to date to onerous. Discussions took</p>	

	<p>place regarding the updates included therein. A suggestion was made to harmonise the Constitution for the newly merged North Yorkshire CCGs and implement Handbooks to cover any differences in the original Constitutions of each CCG.</p> <p>The Committee noted the Constitutional Briefing</p>	
GB/18/570	<p>GDPR – Update An offer has been received from the Embed IG Officer to deliver a presentation updating the Governing Body on GDPR; this would take approximately 45 minutes. If Governing Body members feel sufficiently assured then this additional update would not be necessary</p> <p>ACTION: EP to circulate the reminder briefings to Governing Body members.</p> <p>The Committee noted the comments above.</p>	EP
GB/18/571	<p>Corporate Risk Register The SRCCG Corporate Risk Register is compiled from the risk registers of each committee and is currently undergoing a period of review which will enhance the management of each risk and be managed on a more regular basis.</p> <p>It was reported there are 10 risks rated at 15 or over. Risk number 115/18 has now been increased to 25 because of the finance deficit position. This will be discussed in detail at the private meeting of the Governing Body. The Quality and Performance Committee review of risks is outstanding.</p> <p>The Committee noted the information recorded in the report and above.</p>	
GB/18/572	<p>Health and Safety and Estates Report A number of reviews have been undertaken and any issues that have been highlighted have now been resolved. Discussions took place regarding the Amy Johnson Way Site and it was noted that the lease expires in 2019 and alternative accommodation is being identified.</p> <p>The Committee noted the above and await detail on alternative sites.</p>	
Papers for Ratification		
GB/18/573	<p>Terms of Reference – Joint Commissioning Committees JACC – awaiting amendment by the Legal Services Manager. NYCC JCC – agreed at the meeting last week.</p> <p>ACTION: AC and EP to provide a covering paper to summarise what meetings have made decisions and when. The two TORs to be recirculated to SC and PH for approval prior to circulation to the wider Governing Body Committee members.</p>	AC/EP

GB/18/574	<p>Any other business</p> <p>The Chair thanked the Chief Officer for his input and hard work and the success of SRCCG.</p>	
	<p>Date of next meeting: 23 January 2019.</p> <p>Venue: To be confirmed.</p>	

2018-19				
Job Title	23 May 18	25 July 18	26 Sept 18	28 Nov 18
Chair	PG	PG	PG	PG
Deputy Chair/Lay Member	PH	PH	PH	PH
Chief Officer	SC	SC	SC	SC
Chief Finance Officer	RM	RM	VB	RM
Executive Nurse	CW	SP	SP	CW
Governing Body GP1	GB	GB	X	GB
Governing Body GP2	KH	KH	X	KH
Governing Body GP3	CI	CI	X	CI
Governing Body GP4	PB	PB	PB	PB
Governing Body GP5	OH	OH	OH	OH
Secondary Care Doctor	IW	IW	IW	IW
Primary Care Manager	CL	CL	CL	CL
Lay Member	AH	AH	AH	AH
Lay Member	KR	KR	KR	KR
LMC representative	X	LW	X	X
NYCC representative	X	X	X	X