

### Strategic Collaborative Commissioning Committee Meeting

<b>Group members</b>	Alistair Ingram Amanda Bloor (Chair) Mark Hayes Bernard Chalk Debbie Newton Adrian Snarr Rachel Potts Simon Cox	HaRD CCG HaRD CCG VoYCCG HaRD CCG HRW CCG VoYCCG VoYCCG SRCCG
<b>Apologies</b>	Dr Phil Garnett Vicky Pleydell	SRCCG HRW CCG
<b>In Attendance</b>	Angela Pacey Janice Sunderland	VoYCCG – Secretariat CSU
<b>Date</b>	Thursday 9 <sup>th</sup> May 2013 Boardroom, Sovereign House, Clifton Moor, York, YO30 4AG	
No.	Action Lead	
1.	<b><u>Apologies</u></b>  As noted above	
2.	<b><u>Minutes from Thursday 14th March 2013</u></b>  Minutes were approved following minor amendments.  Simon Cox and Amanda Bloor agreed to discuss future meeting format <b><u>Minutes from Thursday 11<sup>th</sup> April 2013</u></b>  Point of accuracy. Item 4 – Action amended to read – Alistair Ingram agreed to send Vicky Pleydell a copy of Humber’s CCG letter.  Item 9 – Productive General Practice. Mark Hayes reported that there is £1 ½ million available nationally to fund this project. No formal discussion has taken place with the Area Team therefore this has not moved forward. Amanda Bloor asked what the issues were with regard to having a Pan North Yorkshire project. Mark clarified that due to legal directions, the Area Team may not offer this to all practices.	<b>Secretariat</b>  <b>Simon Cox</b> <b>Amanda Bloor</b>  <b>Secretariat</b>

	<p>Action - The SCCCM agreed to wait for a proposal to be submitted.</p> <p>Item 11 (b) – Age Related Macular Degeneration Service. Mark reported on his meeting with the Ophthalmologist at York FT. It is anticipated that agreement on changes will bring about savings. He also gave an update on his visit to Stockport to review Eylea and Lucentis. Mark is currently waiting for information to be forwarded to him from Tameside and Bolton.</p> <p>The CCGs have taken advice from Medicines Management Team. it was suggested the CCGs join together and discuss Service Specification with the Bayer and the Novartis representatives.</p> <p>Item 11 (e) – A discussion was held to practices moving across to other CCGs as any reduction in the size of CCG would have an impact on operational costs, Governing Body and staffing levels. The SCCC are awaiting national guidelines’.</p> <p>Action – Debbie Newton agreed to look through the National Guidelines as soon as they are available.</p>	<p>All</p> <p>Debbie Newton</p>
<p>3.</p>	<p><b><u>Matters Arising</u></b></p> <p>Neuro Rehab – AB reported on behalf of Airedale and Wharfedale CCG have Section 136 facilities. Discussion followed on whether Neuro Rehab is part of Specialist Commissioning. A document was tabled by John Pattinson which gave a breakdown of category of patient and the various rehabilitation needs - the actions the SCCC should take collectively were discussed. A total of 16 patients have been identified as having Specialist Neuro needs. The Specialist Commissioning Group are responsible for assessing and approving units.. The SCCC would prefer the CSU to manage these patients. Bernard Chalk said that there needs to be a debate on the assessment for neuro rehabilitation.</p> <p>Action – Amanda Bloor to speak to Melanie Bradbury to progress this piece of work on behalf of CCGs.</p> <p>Debbie Newton advised the meeting that if a patient is unable to be admitted to a Unit, the responsibility is with the CCG.</p> <p>Action – Debbie Newton agreed to raise issues at the next TEWV meeting.</p> <p>Community Equipment Services – The SCCCM gave consideration to the current position outlined in the report. The meeting were advised that work is progressing. Inefficiencies in the current service, funding and the 7 day turnaround on delivery of equipment were discussed. The meeting agreed that there is the potential to work in partnership with Local Authorities and Community Nursing and that this could form part of the Integrated Community Service.</p>	<p>Amanda Bloor/ Melanie Bradbury</p> <p>Debbie Newton</p>

	<p>Action Note –</p> <ol style="list-style-type: none"> <li>1. Fortnightly discussion to take place to discuss future intentions.</li> <li>2. Each CCG Governing Body to make a decision.</li> </ol> <p>NHS 111 – The SCCCM were in agreement that NHS 111 is not working well. LMC are looking at why NHS 111 is not working.</p> <p>Action – Agreed to take Directory Service Maintenance off future agenda.</p>	<p>All</p> <p>Secretariat</p>
<p>4.</p>	<p><b><u>IFR</u></b></p> <p>Gill Fox, CSU Policy Implementation and Assurance Manager updated the SCCC on Individual Funding Requests. GPs have completed their IFR Panel training and the rota is working well. Some cases have been difficult and challenging. Dr Alison Forrester has assisted by looking at evidence and the Senior Pharmacist has advised on complex drug issues. Gill Fox clarified that specialist drugs are the responsibility of the NHS Commissioning Board.</p> <p>Discussion followed regarding the ‘at risk’ principle and the decision around Clinically Urgent requests for consideration outside the fortnightly panel. The meeting were advised that ‘at risk’ is a rare occurrence. Simon Cox said that Clinical Leads need to have a view on this and suggested the need for a Memorandum of Understanding so that we go ‘at risk’ collectively.</p> <p>Action – Gill Fox agreed to look at the issue where a Lead Clinician has to make an urgent decision and how the costing will to be arranged with the Trust.</p> <p>Action - Gill to work with Mark to amend some of the language used in correspondence with patients to make this a more supportive process.</p> <p>The recommendations were considered and agreement was as follows:</p> <p>5.1 Proposal was agreed that a minimum of 2 GPs from the pool of IFR GP members to consider urgent case requests outside the panel.</p> <p>5.2 The SCCC recommended input from local CCG. The Appeals Panel to have appropriate training and a Governing Body GP to attend Appeals Panel. Each CCG to be responsible and arrange meetings independently.</p> <p>5.3 The recommendation that 4 NYY CCGs reconsider the co-option of lay member(s) to support both the IFR panel and Appeals Panel was agreed.</p> <p>Action – Gill Fox to progress the agreed changes.</p>	<p>Gill Fox</p> <p>Gill Fox Mark Hayes</p>
<p>5.</p>	<p><b><u>Vulnerable Adults and Children’s Commissioning Unit (VACCU)</u></b></p> <p>Simon Cox recommended discussing a separate focussed meeting and he, Bernard Chalk, Debbie Newton and Adrian Snarr to meet together to bring a more concise report back to the SCCCM.</p>	<p>BC/DN/AS/ SC</p>

	<p>Adrian Snarr gave an update on accommodation. The preferred option for the location of the VACCU team is Sovereign House. Adrian highlighted that staff consultation is in progress and that there may be excess travel issues for staff from Harrogate and Malton. Adrian to share costings with Bernard Chalk. Adrian advised that Hot-desking will be available at Sovereign House. An exit plan is in place for Family Health Services at Ryedale Building</p> <p>Adrian clarified that VACCU is part of the risk register and that high risks are to be escalated to the Governing Body. Simon Cox gave an assurance that the end of May deadline for patient review will be met.</p> <p>Confirmation was given that a response to the email from the Area Team regarding Winterbourne Report has been sent.</p> <p>Simon Cox reported that a job description and an informal agreement has been reached with regards to the vacant post. The post may be jointly funded and will be in the range of VSM salary level, Director of Nursing range. It was agreed an advert will go out nationally.</p> <p>Enc. 5 – The meeting were asked to agree the recommendations in the report on Implementation of Looked after Children Tariff. Rachel Potts reported that no financial risks have been identified and the efficiencies will be reinvested. The meeting is of the view that the Financial Leads need to agree best practice due to the major financial implications. The meeting agreed that in a large document of this type, it would be helpful to have a breakdown on the real financial risks and there needs to be an executive summary on a paper of this size.</p> <p>Enc. 6 – The meeting were asked to review the Project Charter (TESS) and agree what time period the CCGs wish the review to be carried out. The meeting preferred Option 2 – a 12 month retrospective audit.</p> <p>Action - Simon Cox to discuss to agree with Helen Billson the most sensible option.</p> <p>The meeting were advised that Airedale, Wharfedale and Craven CCG are not covered by the VACCU.</p> <p>Discussion followed regarding infection, prevention and control – Lead. Commissioning responsibilities and resources, budget transfer to LA</p> <p>Agreed - Janice Sunderland to forward details of the CSU specification being used by other CCGs.</p>	<p>Simon Cox</p> <p>Janice Sunderland</p>
<p>6.</p>	<p><b><u>North Yorkshire Carers Strategy Implementation Plan 2012 – 15</u></b></p> <p>The meeting were asked to agree the Implementation Plan.</p> <p>The Implementation Plan was agreed.</p>	

7.	<p><b><u>TEWV contract for consideration</u></b></p> <p>The meeting agreed to defer consideration of the TEWV contract until a later date.</p>	
8.	<p><b><u>Any Other Business</u></b></p> <p>Specialist Commissioning - Adrian Snarr reported a gap in financial plans and to review latest set of figures with Bernard Chalk and Debbie Newton.</p> <p>YAS Contract – Amanda Bloor reported that contract has not been signed as figures are inaccurate. YAS to send out revised figures.</p> <p>Enc. 11 - Venue times for LMC Future Meetings.</p> <p>Agreed - Amanda Bloor and Alistair Ingram to pick up venue and timings for meeting with LMC.</p> <p>Enc 12 - Meeting discussed the letter received from North Yorkshire County Council regarding the provision of the Medical Adviser role to Adoption Panels. Debbie Newton advised the meeting that this is not a statutory requirement and the CCGs are not obliged to contribute.</p> <p>Action - Debbie Newton to ask Elaine Willey for some clear guidelines. Elaine to draft document for the four CCGs to sign.</p> <p>Amanda Bloor suggested getting legal advice on the procurement process ie - Section 75, this would be in order to get a purely legal view.</p> <p>Action - Amanda agreed to progress this with Hempsons in order to get some guidelines.</p> <p>Amanda reported that AQP providers are now present on the patch and Rachel Potts agreed to follow up Governance of AQP with Angie Richards and Gareth Winter.</p> <p>Health and Wellbeing Board – CCG Prospectus to be agreed with Health and Wellbeing Board.</p> <p>Action – CCGs agreed to meet to discuss next year’s plan for the Health and Wellbeing Board. The SCCCM agreed to get plans for 14/15 on the Health and Wellbeing Board agenda.</p> <p>Telehealth, Tunstall – The meeting requested an update on activity on the contract. The meeting did not agree to speaking collectively to Tunstall.</p> <p>Mark Hayes confirmed that Judith Knapton had sent the figures relating to Winterbourne to the Area Team.</p>	<p><b>Amanda Bloor/ Alistair Ingram</b></p> <p><b>Debbie Newton</b></p> <p><b>Amanda Bloor</b></p> <p><b>Rachel Potts</b></p> <p><b>All</b></p>

	<p><b><u>Date of next meeting</u></b> <b>Thursday, 13<sup>th</sup> June 2013 10:00 14:00</b> Boardroom, Sovereign House, York, YO30 4GQ</p>	
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