

**Minutes of the Executive Committee, meeting held on**  
**5 September 2018 at West Offices, York**

**Present**

Phil Mettam (PM)	Accountable Officer
Michelle Carrington (MC)	Executive Director of Quality and Nursing
Simon Bell (SB)	Chief Finance Officer
Denise Nightingale (DN)	Executive Director of Transformation
Dr Kev Smith (KS)	Director of Primary Care and Population Health

**In Attendance**

Andrew Bucklee (AB) for item 5	Head of Commissioning and Delivery
Natalie Fletcher (NF) for items 6 and 17	Head of Finance
Fiona Bell (FB) for items 6 and 7	Deputy Director of Transformation and Delivery
Karen Mazingham (KM) for items 6 and 7	Head of Transformation and Service Delivery
Michael Ash-McMahon (MAM) for item 8	Deputy Chief Finance Officer
Shaun Macey (SM) for item 8	Head of Transformation & Delivery
Jo Baxter	Executive Assistant

***The agenda was discussed in the following order:***

**STANDING ITEMS**

**1. Apologies**

There were no apologies to the meeting.

**2. Declaration of Interests**

There were no Declarations of Members' Interest in relation to the business of the meeting. All declarations were as per the Register of Interests.

**3. Minutes from the previous meeting**

The minutes of the Executive Committee held on 15 August were approved.

**4. Action Tracker/Matters Arising From The Minutes**

The Action Tracker was updated by the Committee.

*Adult Autism / ADHD Current Contract Extension and Option for Future Commissioned Activity:* DN provided an update and advised that the preferred option would be to discuss with the current provider if they would extend the contract whilst at the same time working with another provider to stream less complex cases to them

in order to get maximum reduction in the waiting list at the best value. The Committee supported this approach.

*Psychology Services Review Paper:* Meetings had taken place with York Teaching Hospital Foundation Trust with a further meeting planned on Children's psychology services. The review paper would be finalised for the Executive Committee late September/October.

## **CORPORATE**

*AB joined for this item*

### **5. Health Optimisation Options Appraisal re Vale of York CCG and Scarborough and Ryedale CCG Standardisation**

AB presented the options report which had been completed following a request from the Financial and Performance Recovery Board to determine if a standardised approach to Health Optimisation between the two CCG's could be established.

The committee discussed the report noting the potential risks and investment required behind each option and agreed the time was not right to consider the changes. The committee therefore agreed Option 4, to continue with the current approach.

### **6. Emergency Department Front Door Review Paper**

*NF, KM and FB joined the meeting*

KM introduced the paper and provided a background to the review of the service model which had taken into consideration the entire front door model including the pathways to the Urgent Care Centre (UCC) and GP Out of Hours Service. The approach for the review had involved meetings with key stakeholders, observational studies and pathway mapping.

The committee held a long discussion around the paper and raised a number of concerns including the value for money of the service.

Appreciation for the work was acknowledged however the Committee were unable to approve the recommendation to procure a future service and agreed a respecification was needed. KM was therefore asked to reflect on the discussion and points made by the Committee and consider how the specification could be changed to make it more cost efficient and how this may be achieved under an aligned incentives framework.

KM to report back to the Executive Committee by the end of October.

## **7. Urgent Care Review**

The committee agreed the Urgent Care Review should be placed on hold with more focus being prioritised for the Emergency Department Front Door Review.

*NF, KM and FB left the meeting*

## **8. HR Policies: Probationary Period Policy**

The committee approved the new policy which allowed the option to make posts subject to a probationary period when specified at recruitment.

## **10. Individual Funding Request (IFR) Policy and Standard Operating Procedure**

The committee reviewed and approved the updated IFR Policy and Standard Operating Procedure. The committee clarified that the financial limit per IFR case as per the Terms of Reference would remain as a maximum of £250,000 for the Vale of York CCG, with requests for treatment over this limit requiring Governing Body approval.

A query was raised on the IFR policy when advice is sought by the North of England Commissioning Support team outside of the panel, MC to investigate and bring back to the Executive Committee.

## **11. Continuing Healthcare (CHC) Fast Track**

An internal audit of the Fast Track pathway completed in June 2018 demonstrated the pathway was not being used appropriately in line with the National Framework for CHC and Funding Nursing Care (FNC).

DN presented the paper which outlined the recommendations to improve the Fast Track referrals being made, in line with the new National Framework criteria from the 1<sup>st</sup> October 2018 and contribute to QIPP delivery for 2018/19.

The committee discussed the options and supported option 2, to fund a nurse on a 12 month non recurrent secondment from St Leonard's Hospice. The nurse would be specialised in end of life care and would work as a coordinating function alongside a seconded social worker from the hospice to improve the process for referral.

## **12. Humber Coast and Vale Estates and Capital Investment**

The committee noted the Humber Coast and Vale capital investment schedule and discussed the importance of having representation from the CCG at future meetings. It was agreed the Deputy Chief Finance Officer would be the strategic lead to establish the use of the channel to optimise “place” working alongside the Deputy Director of Estates and Capital Programmes.

## **9. Digital Transformation Programme Board Terms of Reference**

*MAM and SM joined for this item*

MAM and SM presented the paper which sought approval to the Terms of Reference for the reestablishment of the Digital Transformation Programme Board.

The committee discussed and acknowledged the crucial work of the Board however felt that further thought should be given to the senior leadership and membership of the Board. The committee proposed greater clinical involvement and more focus on service transformation than indicated in the papers.

MAM to take forward and bring back to the Executive Committee.

*Meeting halted 11.45-12.10*

## **13. Commissioning Capability Programme (CCP) Peer Learning Events**

The committee agreed the 2 nominees for the CCP Peer Learning Event option 2 “Becoming the best partner – preparation for system working”

## **14. Expression of Interest: Humber, Coast and Vale Statement of Intent**

The committee noted the letter sent from Humber Coast and Vale Health & Care Partnership to the National Association for Primary Care (NAPC) confirming their expression of interest in the NAPC support offer.

## **BUSINESS CASES AND COMMISSIONING STATEMENTS**

## **15. Pilot Tier 3 Obesity Management Service – Funding for Evaluation**

SB presented the paper which provided clarification to the queries raised at the previous meeting regarding the available funding.

The committee therefore confirmed their approval for evaluation of the service.

## **Funding for City of York School Wellbeing Service**

The committee were asked to ratify a discussion held at the May 2018 Governing Body meeting regarding the continuation of funding for the City of York School Wellbeing Service beyond 2020.

At the meeting, the Acting Chief Finance Officer had confirmed that the CCG had recurrently budgeted for its commitment/contribution to the service and as there had been no changes to the commissioning intentions in that area, the recurrent commitment remained the same.

The committee confirmed their approval again for clarity.

## **16. General Practice Pay Awards for Personal Medical Services (PMS) Practices**

The outcome of the 2018/19 General Medical Services contract negotiations had secured a 1% pay increase from April 2018 which had been included in the delegated commissioning budget setting. The Government had however, subsequently reviewed the recommendations made by the Doctors and Dentists Review Body and agreed to award GP's and practice staff a 2% pay uplift in 2018/19 from April 2018.

The committee discussed the paper and agreed it was equitable that the PMS practices should also receive the additional 1% pay award. It was noted that this was not in the financial plan and would therefore put further pressure on costs and risk to the delivery of the plan to the value of £342,000.

*NF joined for this item*

## **17. Dermatology Indicative Budgets – 2018/19 Options Paper**

NF presented the paper which provided the options on the future of the Dermatology Indicative Budgets scheme in the context of Aligned Incentive Contract for 2018/19.

The committee discussed and agreed that as savings could no longer be realised based on a Payment by Results (PBR) tariff, the scheme would cease from September 2018. The £70k included in the financial plan would be reinvested in Primary Care.

## **FINANCE AND PERFORMANCE UPDATE**

### **18. Finance Update**

The committee discussed the pressures in the system at month 5 and the work required to remain on an improving trajectory. It was agreed that further discussions would take place at the next Governing Body and Executive Committee meetings.

#### **Unity Practice – District Valuer’s (DV) Report following completion of New Build**

A discussion was held around the proposed changes to the notional rent reimbursement compared to that which the CCG had previously approved. Following the 2<sup>nd</sup> DV report after the new practice had been built, there was a variance of 150m<sup>2</sup> between the assessments of the two reports meaning that the DV was now unable to say the scheme represented value for money.

The committee approved the additional floor area and associated £20k revised notional rent but reinforced the requirement for future learning.

## **ASSURANCE AND RISK**

### **19. Elective Care Expectations letter**

The letter was received by the Committee and CA would be preparing a response.

*PM left the meeting*

#### **NHS Leadership Academy ILM5 Accredited Coaching Course**

The committee approved the request for a member of the team to secure a place on the NHS Leadership Academy programme at a cost of £850.

#### **Cholesterol Management in Primary Care**

Approval was given by the Committee in July 2018 of £3750 to allow a cholesterol management pilot to progress. Quotes received from agencies to manage and implement the project had now been received at a higher cost. The committee therefore approved the request for an additional £1250 to secure an agency to deliver the pilot and adequately test the proposed concept.

## **Moorlands Nursing Home Strensall**

MC notified the committee of the closure of Moorlands Nursing Home in Strensall.

### **20. Update on Government Preparations for EU Exit**

- . The committee noted the update on the Government's preparations for a March 2019 "no deal" Brexit scenario. The Emergency Preparedness, Resilience and Response for the CCG would be reviewed alongside the Business Continuity Plans.

**Next meeting Wednesday 19th September**