

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

Present

Phil Mettam (PM)	Accountable Officer
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

Jenny Brandom (JB) for MC	Deputy Chief Nurse
Michael Ash-McMahon (MAM) for item 5	Deputy Chief Finance Officer
Jo Baxter	Executive Assistant

Apologies

Michelle Carrington (MC)	Executive Director of Quality and Nursing
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The agenda was discussed in the following order:

STANDING ITEMS

1. Apologies

Apologies were as above

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 5 September were approved.

4. Action Tracker/Matters Arising From The Minutes

The Action Tracker was updated by the Committee.

Mental Health Individual Funding Requests: Additional sessions were now in the diary to review and clear the outstanding requests. DN raised concerns around the administrative delay in issuing decision letters and the Committee requested

assurance. PM/DN to take forward. An update on the process review being undertaken would be provided at the next meeting.

FINANCE AND PERFORMANCE UPDATE

5. Options for Financial Recovery 18/19

MAM joined for this item

In presenting the paper to the committee, SB reiterated the increasing financial pressure within the health system and the relative likelihood of maintaining the financial position in line with plan. Trends and pressures identified at Month 4 had continued into Month 5 and without additional actions the CCG would struggle to continue the journey of stabilisation and improvement of the year on year position.

Meetings had taken place with NHS England with further meetings planned.

An improvement of £3.6m was required just to maintain the same in year deficit as previously and the paper provided a number of potential actions that could be taken to try and achieve this.

The committee reviewed and agreed to the proposals/actions within the paper, with the exception of the Health Navigator credit and York Teaching Hospital Foundation Trust repatriation proposal. These 2 items would not be progressed.

Further discussions would now take place at Finance and Performance Committee.

Corporate Focus on Primary Care

Time had been allocated on the agenda to discuss upcoming changes within the Primary Care team, this included the final 6 months secondment of the Director of Primary Care and Population Health and the support from NHS England which was likely to end in January 2019.

The committee acknowledged the good work that had already been seen in Primary Care and the importance of maintaining momentum. KS advised that a number of roles were being considered and a job description was almost complete for the new role of Lead Officer, Primary Care who would be responsible for leading the development of Primary Care York on behalf of the CCG.

Further time would be allocated at the next Executive Time Out to discuss the Primary Care structure and vacancies.

Mental Health

The contract with Tees, Esk and Wear Valleys Foundation NHS Trust (TEWV) had now been in place for 2 years and both parties had acknowledged improvements could be made on performance and relationship. DN advised that MAM had recently discussed opportunities with TEWV around working in an Aligned Incentive type way which TEWV had been keen to explore.

Complex Care

DN had requested a number of roles be considered to support the Continuing Healthcare Team (CHC). The committee discussed the pressures within the team and confirmed support for a Band 7 post to support operational management and clinical leadership. A further 2 administration roles at Band 4 were supported. In addition, changes would be made to the job description for the transformation role associated with CHC.

DN advised that further CHC pressures would need to be considered in the future.

PM left the meeting

BUSINESS CASES AND COMMISSIONING STATEMENTS

6. North Locality – Extension of Macmillan Support

The committee discussed the request to extend the current 0.5wte care coordinator role for the North Locality. The incumbent is also working 0.5wte for Macmillan Cancer Care as a fixed term advisor and Macmillan had approached the CCG regarding an extension to the fixed term post and assurance regarding future support funding.

A 12 month extension to the Macmillan contract had been negotiated to the end of 2019 and it was proposed that the North locality would continue to support the care coordinator during the last quarter of 18/19 and during 19/20. If required, future PMS funding or £3 per head or equivalent primary care support would be utilised to maintain the existing level of input into the area.

The committee supported the proposal acknowledging the added value the role had brought. A final decision would be made at the North Locality Delivery Board on the 20th September.

Post-meeting note; North Locality Delivery Board also approved this proposal on 20/09/18.

CORPORATE

7. Update on Stoma and Continence Appliances Spending Across Vale of York CCG and York Teaching Hospitals NHS Foundation Trust (YTHFT)

The committee reviewed the findings so far regarding the spend on stoma and continence appliances across the CCG and YTHFT. An initial meeting between key stakeholders had taken place to complete a process mapping exercise however further information was still required on several issues and approval was sought to continue with the project alongside other priorities.

The committee approved the continuation of the project, however this would need to be managed within the scope and priorities of the team.

8. North East Commissioning Support Unit (NECS) SLA Contract Variations for 2019/20 and 2020/21

The committee reviewed and approved the extensions of the Lead Provider Framework services provided by NECS for:

- Individual Funding Requests Case Management
- Controlled Environment for Finance of Non Contracted Activity Services
- Data Services for Commissioners Regional Office and Data Management Services

9. Unity Health GP Practice

KS provided an update on Unity Health.

10. HR Matters

SB notified the committee of a proposed grade 4 to grade 5 re-banding within the Finance team. The Committee supported the re-banding.

11. Preparations for Winter Letter

The committee noted the letter from NHS England and NHS Improvement which would be dealt with as part of the winter plan.

12. Health Care Worker Flu Vaccination

The flu vaccination letter was discussed and noted. It was also confirmed that a CCG staff flu vaccination session would be held again in November and publicised via staff communications.

13. Improving Access to General Practice Services

The report provided an update on the progress towards NHS England's target go-live date of 1st October for Improving Access to GP services at evenings and weekends, and the associated risks to successful mobilisation by this date.

KS provided a further update to the report regarding the South locality where significant progress had been made which was hoped would be finalised in time for the 1st October deadline.

ASSURANCE AND RISK

14. Tier 3 Obesity Management Service – Quality Impact Assessment (QIA)

The committee noted the final QIA for the Tier 3 Obesity Management Service

15. Joint Targeted Area Inspection (Child Sexual Abuse in the Family Environment)

The joint targeted area inspection was currently taking place. JB advised that Karen Hedgley, Designated Nurse Safeguarding Children and Children in Care was supporting the inspection and providing assurance. JB would be attending update meetings and would ensure the committee were kept informed.

16. Telephony Billing Arrangements

SB presented the paper which followed a comprehensive update brought to a previous meeting on the latest telephony solution. The financial reconciliation of the billing arrangements between NIMBUS and the practices who had taken up the BT / Teleware solution had now been completed and were provided within the paper.

The committee were asked to consider the current outstanding debt position with the practices concerned and select a preferred course of action for recovery based on the suggested options within the paper.

The committee discussed the options and agreed that strict application of the contract and £0 write off was the right option in the financial context. However, given the reasonable stance taken by NIMBUS to date, a further conversation should take place with practices in order to establish a best possible position.

17. Medicines Commissioning Committee Recommendations September 2018

The committee approved the September Medicines Commissioning Committee Recommendations.

Next meeting Wednesday 3rd October