

Agenda Item: 18.50

**MINUTES OF THE FINANCE & PERFORMANCE MEETING
HELD ON FRIDAY 19th APRIL AT 10.00 AM
AT MEETING ROOM, KING'S COURT, CHAPEL STREET, KING'S LYNN**

Members:	Rob Bennett (RB) Lay Member (Finance) (Chair) Dr Imran Ahmed (IA) GP Member Mark Wheeler (MW) Interim CFO Melvyn Peveritt (MP) Practice Representative (Vida Healthcare) Rev Hilary De Lyon (HDL) Lay Member (Audit Chair & WNCCG Deputy Chair) John Webster (JW) Accountable Officer (<i>item 18.45 only</i>)
Non-voting participants:	Ross Collett (RC) Director of Operations (<i>Item 18.43 only</i>)
Attendees:	Kate Wing (KW) Admin Support (Governance)

		ACTION
18.34	<p>APOLOGIES</p> <p>Ross Collett (RC) - Director of Operations – part attendance Michelle Barry (MB) – Lay Member Emma Kriehn-Morris (EKM) - Deputy Chief Finance Officer John Webster (JW) - Accountable Officer – part attendance</p> <p>A wider review of committee members to take place. HDL to take this forward for further discussion with Governing Body members.</p>	
18.35	<p>REGISTER OF INTEREST</p> <p>The Chair reminded committee members of their obligation to declare any interest they may have on any issues arising at committee meetings which might conflict with the business of West Norfolk Clinical Commissioning Group.</p> <p>The register of interests for members of the Committee was made available as a paper and NOTED by the committee.</p> <p>Declarations of interest from today's meeting No additional declarations were required beyond those on the register.</p>	
18.36	<p>CONFIRMATION OF ANY PART OF THE AGENDA THAT IS EXEMPT UNDER THE FREEDOM OF INFORMATION ACT</p> <p>None</p>	
18.37	<p>MINUTES OF THE PREVIOUS MEETING HELD ON 22nd MARCH</p> <p><u><i>Item 18.33 – 2nd paragraph to be amended</i></u></p>	

	<p><i>RB to stand down as Lay Member (Finance) at the end of May to enable the CCG to appoint someone with financial expertise to the Governing Body as recommended in the Deloitte report.</i></p> <p>Subject to the above amendment the minutes were AGREED.</p> <p>HDL expressed concern that RB will be standing down as Chair at the end of May but there are no current plans in place for his replacement. Action: HDL to discuss concerns with JW.</p>	HDL
18.38	<p>FOI MINUTES FOR 22nd MARCH 2018</p> <p>FOI minutes AGREED</p>	
18.39	<p>ACTION LOG / MATTERS ARISING</p> <p>01/18 – agreed to re-date action for next meeting</p> <p>04/18 – external audit due to take place w/c 30/4. Agreed to re-date action for next meeting</p> <p>05/18- BMI – Sandringham Hospital RC is chasing BMI regarding contract. Further update from RC required. Re-date for next meeting.</p> <p>Surgical Contracts (Southgates, Vida & St James) – MP declared an interest and confirmed contract meeting has been arranged with Vida for 2/5 and St James at the end of May.</p>	
18.40	<p>FOI ACTION LOG</p> <p>All actions closed.</p>	
	RISK REGISTER (GBAF and CRR Review)	ACTION
18.41	<p><u>GBAF</u></p> <p>2.1 – ACO to be amended to ICS (Integrated Care System).</p> <p>HDL raised a concern that discussion rather than action is taking place and pace on achieving development towards an ICS is too slow. Action: MW to discuss with JW and SMT.</p> <p>4.1 – HDL asked for an update on developments for embedding QIPP schemes in provider contracts. Target date 30/6. MW confirmed schemes are now in place and a series of meetings to be arranged with providers to discuss in more detail. Block contract to start from 1/7 by when all QIPP schemes should be embedded.</p> <p><u>Corporate Risk Register</u></p> <p>1.13 – Risk that there could be a breach in the IAPT access and recovery target. Discussed at last meeting, however risk not updated. AGREED not to remove until recovery and access targets have been reached. Action: RC to review and re-word action</p>	RC

	STRATEGIC FINANCE	ACTION
	<i>Not scheduled for April 18</i>	
	FINANCIAL MANAGEMENT	ACTION
18.42	<p>Update on expected year-end position 2017/18</p> <p>The M12 Finance report was not available for the meeting. MW referred to Financial summary paper produced by EKM circulated at the meeting (see attached).</p> <p> NHSE submitted Draft Financial Outtur</p> <p>MW referred to the 'Financial Summary – NHSE Approved Position' section on page 1. Approved variance to annual plan deficit figure of £10.9m. MW explained the return to Central NHSE of 50% of the 1% non-recurrent reserve of £1.2m which is taken off the year end position, and £200k for the increased benefit of Cat M drug, ending the year on a deficit figure £9.5m.</p> <p>Under the 'Programme Expenditure' section, MW stated the Acute commissioning year end figure is slightly better than initially thought and the CHC spend has reduced by £300k following a review of accruals.</p> <p>Concerns were raised in relation to the lack of resource in the prescribing team and the high figure for GP Prescribing that cannot be explained. MW confirmed that Senior Management are aware of the lack of resource and the need for the same prescribing service with Arden & Gem CSU and as a high prescribing CCG being able to understand the data and work with GP practices to see where the issues are.</p> <p>MP raised a concern in relation to the presentation of the Primary Care Local Enhanced Services overspend of £653k and that this could potentially reflect badly against GP practices. MW explained the plan had been set incorrectly at the beginning of the year and that going forward into 2018/19 has been set more accurately.</p> <p>MW informed the committee of the risks that could impact the year end figure although these are not considered to be significant and confirmed there has been no financial support from other CCGs.</p> <p>The finance team are in the process of finalising draft accounts which will be subject to an external audit. The accounts will be reviewed by the Audit Committee at the meeting in May prior to Governing Body approval.</p>	
18.43	<p>Performance Targets – Mental Health, A&E, RTT & 62 day cancer waits</p> <p><u>62 day cancer waits</u></p> <p>Data not available for the meeting, however Recovery Plan in place. RC to provide and update to F&P committee by email.</p>	

Mental Health – IAPT & Dementia

Contract meeting has now taken place. RC to provide update to F&P committee by email.

A&E

Jon Green, QEH and JW were summoned to a meeting with NHSE on 18/4. Focus remains very much on Performance, particularly A&E discharges. Detailed plan to be provided to NHSE on how position will be recovered, particularly linked around discharges that will then impact on performance. This has become a bigger issue for NHSE as QEH are currently undergoing CQC inspection. The CQC visiting team have uncovered a number of beds currently open but have insufficient staff to manage these beds. The initial report proposed immediate closure of 40 beds, however following discussions with CQC, NHSE and NHSI agreed it was not safe to close beds immediately as this would mean pushing the risk elsewhere and although there was a need to close beds, it should be done in a planned way. In line with this CCG have been in discussion with QEH regarding a new 'discharge to assess' model.

A&E performance continues to fluctuate; when CCG staff attend QEH to support staff and increase the sense of urgency, discharge rates improve, but is not sustainable for the CCG.

RC explained the CCG have been given 2 weeks to produce a detailed plan underpinned by analysis by both CCG & QEH, looking at the number of medically fit for discharge and capacity in the community, leading to the closure of 40 beds but still maintain performance.

RC confirmed the 40 beds would not be reopened and the rationale behind this is patient safety and staff shortages. The financial implications are that QEH are using premium rate staff due to not being able to recruit nurses which is also a national problem.

HDL gave some feedback from the CQC inspection where one of the issues raised was that staff felt they were not being listened to. RC stated he felt this message is getting through to Trust management, however due to pressures on the A&E department where patients are required to be offloaded from ambulances in 15 minutes, escalation wards are being opened leading to staff being spread more thinly. The staff are informing management this is more risky, however have no choice but to open up escalation wards. RC confirmed the CCG are putting mitigating actions in place to try and support the system to manage flow better.

RC explained with the complicated contracting environment, the strategy will be to address the environment through the Integrated Care Model and a move to a systemic way of working. The first step to this is moving to a different contracting arrangement (block contract) with the QEH that will immediately change the way of working together, and joint responsibility for removing cost and sharing the risk.

18.44

Policy – 'Managing Primary Care Rebate Schemes Offered by the Pharmaceutical Industry'

IA declared an interest as a prescribing GP.

Policy approved by CLEX and the Governing Body; for noting at this meeting only.

	Contractual Performance including CSU	ACTION
18.45	<p>Contract update</p> <p>NSFT contract still outstanding. A meeting is scheduled for 20/4 with the provider to agree final points of the contract.</p> <p>STP Update</p> <p>Proposals to work toward a single management team for the whole of Norfolk & Waveney that will mean a single Accountable Officer. JW stated that he does not intend to apply for the position and wishes to remain with West Norfolk. JW will be attending the STP Executive meeting on 20th April where there will be further discussion with the AO's to get more clarity for the Board Development session in the next couple of weeks. JW has been asked to lead on this and will update staff and issues to be brought back and discussed with Governing Body members. He said over the next 6-12 months, there is likely to be a rapid change over the commissioning landscape.</p> <p>HDL to speak to Head of Corporate Affairs to arrange access to the Sharepoint site in order for members of the Finance and Audit committees to access case studies relating to ways in which people have improved their financial position. Action: HDL</p>	HDL
	COMMITTEE GOVERNANCE	ACTION
18.46	<p><u>Reflection on the meeting</u></p> <p>MWs last meeting as leaving the CCG at the end of April. On behalf of the committee, RB thanked MW for all his hard work in a challenging role and expressed how the CCG have benefitted from a more open and constructive approach. He wished MW luck in his new role.</p> <p>RBs last meeting as Chair of the committee. HDL thanked RB for the huge contribution he has made and expressed how much he has been valued by many colleagues.</p> <p>RB stated he has enjoyed working with this committee and wished the CCG every success in the future.</p>	
	<p>Meeting closed at 12.00 noon</p> <p>The next meeting of the Finance and Performance Committee will take place on Thursday 22nd June – 10 am – meeting room 2, Kings Court, Chapel St, Kings Lynn</p>	