

**WIGAN BOROUGH CLINICAL COMMISSIONING GROUP
GOVERNING BODY - OPEN MEETING**

Tuesday, 25 November 2014 1.30 pm

Wigan Borough CCG Boardroom - Wigan Life Centre

AGENDA

Agenda Item		Time	Presenter	Pages/ Verbal	Action Required
1.	Chairman's Welcome	1.30 pm	Tim Dalton		
2.	Apologies for Absence		Tim Dalton		Record
3.	Declarations of Interest		All		Record
	Individuals will declare any interest that they have, in relation to a decision to be made in the exercise of the commissioning functions of Wigan Borough Clinical Commissioning Group, in writing to the governing body, as soon as they are aware of it and in any event no later than 28 days after becoming aware.				
4.	Minutes of Previous Wigan Borough Clinical Commissioning Group Governing Body Meeting held on 28 October 2014		Tim Dalton	1 - 20	Approve
5.	Actions/Decisions Log from Previous Wigan Borough Clinical Commissioning Group Governing Body Meeting		Tim Dalton	21 - 24	Approve
6.	Questions from Members of the Public				
7.	Key Messages	1.40 pm			
7.1	Chair's Key Messages		Tim Dalton	Verbal Report	Information

	7.2	Chief Officer's Key Messages		Trish Anderson	Verbal Report	Information
8.	New Business Items		1.55 pm			
	8.1	Mental Health Strategy		Gary Cook	25 - 60	Approve
	8.2	Antibiotic Prescribing Report		Julie Southworth	61 - 76	Receive
	8.3	Emergency Preparedness Resilience and Response Assurance Report		Julie Southworth	77 - 84	Approve
	8.4	CCG Constitution Amendments		Julie Southworth	85 - 100	Approve
9.	Current Business Items					
	9.1	Association Governing Group meeting Summary Notes November 2014		Tim Dalton	To Follow	Receive
	9.2	Healthier Together Update		Tim Dalton/Trish Anderson	Verbal Report	
	9.3	Corporate Report		Mike Tate	101 - 152	Receive
10.	Governing Body Committee Updates					
	10.1	Healthier Together Committee in Common		Tim Dalton	153 - 162	Approve
	10.2	Chairperson's Report - Audit Committee		Maurice Smith		No Meeting
	10.3	Chairperson's Report - Clinical Governance Committee		Ashok Atrey	163 - 168	Approve
	10.4	Chairperson's Report - Corporate Governance Committee		Tony Ellis		No Meeting
	10.5	Chairperson's Report - Finance and Performance Committee		Mohan Kumar	169 - 176	Approve
	10.6	Chairperson's Report - Service Design and Implementation Committee		Peter Marwick	177 - 180	Approve
11.	Locality Executive Updates					
	11.1	Atherleigh - October 2014		Deepak Trivedi	181 - 184	Receive
	11.2	Patient Focus - October 2014		Mohan Kumar	185 - 188	Receive
	11.3	Tyldesley Atherton Boothstown Astley - October 2014		Ashok Atrey	189 - 192	Receive

	11.4	Wigan Central - October 2014		Tony Ellis	193 - 196	Receive
	11.5	North Wigan - October 2014		Peter Marwick	197 - 200	Receive
	11.6	United League Collaborative - October 2014		Sanjay Wahie	201 - 204	Receive
12.	Any Other Business - To be accepted at the Chairman's discretion					
13.	Date and time of next meeting					
	Tuesday 16 December 2014 at 13.30 in Room 17, Wigan Life Centre					

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OPEN MEETING – Unratified

**Meeting of Wigan Borough Clinical Commissioning Group (WBCCG) Governing Body
 Held on Tuesday 28th October 2014 at 1.00pm in Meeting Room 17, Wigan Life Centre**

Present:

Dr Tim Dalton, Chair (TD)
 Frank Costello, Lay Member – Deputy Chair (FC)
 Trish Anderson, Chief Officer (TA)
 Mike Tate, Chief Finance Officer (MT)
 Julie Southworth, Director of Quality and Safety (JS)
 Dr Tony Ellis, Clinical Lead for Wigan Central (TE)
 Dr Mohan Kumar, Clinical Lead for Patient Focus (MK)
 Dr Pete Marwick, Clinical Lead for Wigan North (PM)
 Dr Sanjay Wahie, Clinical Lead for United League Collaborative (SW)
 Dr Gary Cook, Secondary Care Consultant Governing Body Member (GC)
 Dr Rao Gude - on behalf of Dr Ashok Atrey TABA (RG)
 Canon Maurice Smith – Lay Member (MS)
 Helen Meredith – Nurse Governing Body Member

In Attendance:

Tim Collins, Assistant Director of Governance
 Angela Cullen, Executive Assistant to Chief Officer - Minute Taker
 Alexia Mitton – Head of Communications
 Professor Kate Ardern, Head of Communications (*for item 3 & 4 – from 13:10*)

	AGENDA	ACTION
1.	Chairman’s Welcome	
	<p>The Chairman opened the meeting at 1.00pm formally welcoming all attendees and members of the public to the October meeting of the Wigan Borough Clinical Commissioning Group Governing Body meeting.</p> <p>Dr Rao Gude was in attendance at the meeting on behalf of Dr Ashok Atrey, Clinical Lead for TABA.</p> <p>Three members of the public were in attendance.</p>	
2.	Apologies for Absence	
	<ul style="list-style-type: none"> • Dr Deepak Trivedi, Clinical Lead for Atherleigh (DT) • Dr Ashok Atrey, Clinical Lead, TABA (AA) 	

3.	Equality & Diversity Presentation (Clive Taylor)	Information
	<p>Clive Taylor from Indigo You attended the meeting to deliver an Equality and Diversity Presentation to the Governing Body members.</p> <p> E & D Governing Board presentation O</p> <p>Key areas to note included:</p> <ul style="list-style-type: none"> • Legal, business and moral cases. • Diversity and Inclusion issues to consider in terms of unconscious bias and its impact, broad cultural competence across services and supporting the CCG Values and the ‘community of purpose’ – embedding this into everything we do. • The Equality and Delivery System (EDS2) Goals rolled out by NHS England, focusing on inclusive leadership and the importance of gathering evidence to demonstrate that we are addressing the goals across the 9 protected characteristics of the Equality Act along with scrutinising the evidence in order to provide feedback to stakeholders and ourselves. • The outcomes the CCG could expect to receive upon delivery of the above. • CT stated that if people are treated with respect and are allowed to be authentic at work they are generally better performers. <p>The CCG is in the process of planning Equality, Diversity and Scrutiny events with external stakeholders early in the new year.</p> <p>Key comments by Governing Body members included:</p> <ul style="list-style-type: none"> • TC confirmed that the CCG is in the process of planning Equality, Diversity and Scrutiny events with external stakeholders early in the new year. • If we encounter negative assumptions we must challenge them. • Reference was made to the CCG currently having no representative female Clinical Leads but not for reasons of exclusion rather that the most appropriate and experienced people are recruited for the roles via our robust recruitment process. • MS added that in his opinion the nation was still confused with meritocracy and positive discrimination and that we soften it by offering individuals equal opportunities to develop. • TA made reference to older people as a disadvantaged group, this is often not recognised against other protected groups. 	

	<p>JS thanked Tracie Smith for her drive in this area along with the work conducted to date.</p> <p>Resolved:</p> <ol style="list-style-type: none"> 1. A scrutiny process to be developed. 2. Senior CCG Managers to explore further the presentation delivered today to take forward the Equality agenda. 	<p>ALL ALL</p>
9.1	New Business Item – Wigan Borough Health Profile	
	<p>Wigan Borough Health Profile</p> <p>Professor Kate Ardern attended the meeting to present the report to the Governing Body members. The Governing Body were asked to note the update on Wigan’s Health profile and updated progress on the Start Well, Live Well, Age Well priorities and the work being undertaken to invest in Making Health Everyone’s Business as part of the transformation agenda for Well-being across the Borough.</p> <p>The report sets out the key findings of the recently published 2014 Wigan Health profile and potential implications for the Borough in terms of joint health and well-being investment on preventable deaths and ill health.</p> <p>Public Health England published the latest Health Profiles in Oct 2014. There is encouraging news within this year’s health profile for Wigan Borough as All Cause Mortality Rates continue to fall.</p> <p>The overall health of people in the Wigan Borough continues to improve. The rate of smoking related deaths is falling but considerable work needs to continue to face new challenges related to diet, exercise and alcohol.</p> <p>It is worth noting that a number of indicators have not been refreshed since 2012 due to current unavailability of some datasets.</p> <p>Key areas highlighted were:</p> <ul style="list-style-type: none"> • The welcoming of additional funding received for drugs/alcohol and fuel poverty via the Joint Commissioning Group. • The excellent take up from dentists as part of the Dentistry Programme with 17 out of 40 dentists now fully engaged. The Healthy Living Dentistry Prospectus is now available to view if required. • The Public Health Grant from Public Health England and the Department of Health which has been confirmed as £23.6m plus 2.5% inflation uplift for 2015/16 which is helpful in service planning and re-commissioning for the next financial year. 	<p>Receive</p>

- The success of the Lose Weight Feel Great programme and the fashion event held recently at the DW Stadium where between the 30 models who participated a total of 87 stone had been lost between them.

GC commended the report and welcomed a future update containing the outcomes linked to targets.

GC referenced his concern around smoking related deaths remaining the main cause of death in the Borough.

KA confirmed that we are potentially still dealing with a legacy issue and explained that we are focusing on smoking cessation services geographically but realise the demographic target with female smokers could be better.

GC further referenced the smoking prevalence in women with young babies.

KA confirmed that smoking prevalence in women has decreased but this is not to say that we don't do more, for example, there is a need to look at maternity services and getting midwives involved more over the next 12 months.

FC noted that some venues are allowing the use of e-cigarettes and asked if we knew of the long term health impact yet.

KA explained that there is an e-cigarette policy across the borough which Trading Standards are monitoring. E-cigarettes are not currently covered by the existing smoking ban. Legislation is currently being looked at to prevent the advertising of e-cigarettes to children and work is underway with e-cigarette companies to have responsible trader policies in place ahead of national policy. The Health and Wellbeing Board and the Health and Overview Scrutiny Committee are actively looking at this area.

SW congratulated KA on the figures of the Lose Weight Feel Great programme with the borough being in the top half of performers in the region.

SW highlighted his concern with melanoma rates and the amount of outlets where people can pay for UV exposure.

KA confirmed that a lot of work has been conducted in this area with Trading Standards and offered to bring a paper to a future meeting to update Governing Body members.

	<p>Resolved:</p> <ol style="list-style-type: none"> 1. The Governing Body received the report. 2. The Governing Body welcomed a future Health Profile update report containing outcomes linked to targets. 3. A further report to be brought to a future meeting on melanoma rates linked to UV exposure. 	<p>KA</p> <p>KA</p>
4.	Declarations of Interest	Record
	<p>Other than the previously recorded declarations of interest there were no additional declarations of interest for any items on this agenda.</p> <p>The Chairman reminded Governing Body members that apart from the standing declarations of interest individuals must declare any interest that they have, in relation to a decision to be made in the exercise of the commissioning functions of Wigan Borough Clinical Commissioning Group (WBCCG) in writing to the Governing Body, as soon as they are aware of it and in any event no later than 28 days after becoming aware.</p> <p>Where an individual is unable to provide a declaration in writing, for example, if a conflict becomes apparent in the course of a meeting, they will make an oral declaration before witnesses, and provide a written declaration as soon as possible thereafter.</p>	
5.	Minutes from the Previous Wigan Borough Clinical Commissioning Group Governing Body Meeting held on 23 September 2014	Approve
	<p>The minutes of the previous meeting were agreed as a true and accurate record, subsequently approved and signed by the Chair.</p> <p>It was noted that Dr Pete Marwick was in attendance at the September meeting.</p>	
6.	Actions/Decisions Log from Previous Wigan Borough Clinical Commissioning Group Governing Body Meetings	Approve
	<p><u>September 2014</u></p> <p>Item 8.3 - Patient Engagement Briefing and Patient Forum Attendance:</p> <ol style="list-style-type: none"> 2. Complete - The Annual Engagement report 2013-14 was listed on the October agenda. 3. Ongoing – to be deferred to January 2015 4. Complete – ongoing discussions being held with the Trust. 5. Ongoing. 6. Complete. 	

7.	Questions From Members of the Public	
	There were no questions raised by members of the public.	
8.	Key Messages	Receive
7.1 / 7.2	<p>Chair’s & Chief Officer’s Key Messages</p> <p><u>Chair’s Report</u></p> <p>TD verbally updated the Governing Body on the key messages highlighting:</p> <p><u>QIPP Event</u></p> <p>The CCG Annual ‘QIPP’ Event took place last week, led by Dr Tim Dalton and Dr Mohan Kumar. The event had high attendance from all practices and focused specifically on the development of primary care.</p> <p><u>Chief Officer’s Report</u></p> <p>TA verbally updated the Governing Body members on current key areas of work:</p> <p><u>National</u></p> <ul style="list-style-type: none"> • NHSE published the ‘Five Year Forward View’ which sets out a vision for the future of the NHS – which is broadly in line with the CCGs Five Year Plan. • CQC has published a report detailing the results from CQC’s first comprehensive inspections of NHS Out of Hours services ‘Our new approach to the inspection of NHS GP out of hours services: findings from the first comprehensive inspections’. • NHSE published ‘Commissioning Intentions 2015/16 for prescribed specialised services’ which highlights changes and priorities for the coming year for specialised services. • DH published ‘Achieving better access to mental health services by 2020’. The report shows what action the government is taking to provide better access to care in mental health services including national waiting times. 	

		<ul style="list-style-type: none"> NHSE has published a 'Never Events Policy Framework Review – a consultation which is designed to provide clarity about responsibilities and the principles of never events. The consultation is running until the 31st October 2014. <p><u>Regional</u></p> <p>The Association of Greater Manchester CCG's met on the 7th October 2014. Key items discussed at the meeting included:</p> <ul style="list-style-type: none"> - The Healthier Together Budget Report. - Paper on the broader Health and Social Care reform work which is taking place across Greater Manchester, with a particular emphasis on the joint work with AGMA (Association of Greater Manchester Authorities). - Update from the Local Area Team on the 'Organisational Alignments Capability Programme' – the restructure of NHS England. - Discussion on the development of Primary Care across Greater Manchester and the establishment of cross CCG work groups. - Discussion on potential future 'service transformation' projects for the future. - Review of a number of clinical work programmes. • An extraordinary meeting of the Local Health Resilience Partnership was held on the 23rd October 2014 to review emergency preparedness arrangements in relation to the current concerns of the Ebola virus. • The North West Sector Leadership Group met last Friday to review progress being made between the acute hospitals in Bolton, Salford and Wigan to develop specific proposals for the delivery of the standards of care outlined in the Healthier Together Case for Change. <p><u>Local</u></p> <ul style="list-style-type: none"> • Successful follow on meeting with the local voluntary sector took place on the 9th October 2014. We worked through the proposed draft strategy for working with the sector and discussed priorities for action. 	
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		<ul style="list-style-type: none"> • The formal opening of the ‘Sanctuary’ took place on the 10th October 2014 based in Leigh at the ‘Compassion in Action’ building. The Sanctuary Manchester self-help services have been jointly commissioned by the CCG and the 5 Boroughs Partnership. Operating all night, every night, the Sanctuary will be a place of safety and support welcoming people experiencing anxiety, panic attacks, depression and/or suicidal thoughts outside of usual office hours providing an important alternative to people who, may otherwise, attend A+E when experiencing a crisis. • Wigan Children’s Safeguarding Board took place last week. The Board will shortly receive the Annual Report on its progress and actions over the last year. <p>SW asked how the NW Sector Leadership Group is being funded and how relevant the outcomes are to the Healthier Together Programme.</p> <p>TA explained that the programme is jointly funded by the three providers Salford, Bolton and Wigan.</p> <p>TA confirmed that she was now in receipt of the slides from the last meeting and that these would be circulated to Governing Body members for information. Further detailed discussions will be held at the November Governing Body meeting.</p> <p>MS asked if this was known by Healthier Together and noted that the consultation had been opened up until 24th October 2014 asking would they then hear from the providers also.</p> <p>TA confirmed that Healthier Together reflects the North East and South Sector responses but there is a gap in our sector due to us having the most stable Trusts.</p> <p>TA confirmed that she would circulate notes from the last meeting to Governing Body members.</p> <p>MK asked why Healthier Together would not fund this enterprise.</p> <p>TA explained that this was the Trusts’ formal response to the consultation to demonstrate the ability to meet the standards.</p> <p>Resolved:</p> <ol style="list-style-type: none"> 1. The Governing Body received and noted the reports. 2. TA to circulate Power Point slides to Governing Body Members regarding the progress of the North West Sector arrangements. 	<p>TA</p>
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9.	New Business Items		
	9.2	<p>Wigan Borough Resilience Plan 2014-2015</p> <p>MT presented the paper to the Governing Body members.</p> <p>The Wigan Borough System Resilience Plan development has been led by the System Resilience Group. The plan intends to achieve the following outcomes:</p> <ul style="list-style-type: none"> • Additional measures to improve patient flow from the Emergency Department to maintain the 4 hour target; • Defined escalation plans for each operational provider and service; • Clear system-wide day to day management structures through an escalation policy, urgent care meetings, teleconferences and reporting systems; • Implementation of additional arrangements to cover the Christmas and New Year periods; and • Enhanced robustness of plans to manage admission avoidance and discharge systems. <p>The System Resilience Plan has been in circulation for a while now and has been successfully tested by the System Resilience Group via a desktop exercise. The System Resilience Group has formally signed off the Winter Resilience Plan. MT confirmed that Wigan Live is now a key element to the plan.</p> <p>Following sign off of the Wigan Borough Winter Resilience Plan by the Governing Body, the CCG will formally write to each provider Trust who has responsibility for providing care to Wigan CCG patients to request formal Board assurance that they have accepted the implementation requirements of the Plan.</p> <p>MT talked the Governing Body through the content of the Executive Summary.</p> <p>MT referenced the resilience funding being made available this year. Wigan Borough has been allocated £2,340,008 non-recurrently for 2014/15 to support winter resilience in urgent care. In addition to this the CCG has invested a further £825,000 from the contingent reserve. A full analysis of all schemes is detailed within the plan (<i>page 25 refers</i>). The additional funds mean that we enter the winter period in a good position with approximately three times as much funding than in previous years.</p>	Approve

		<p>SW welcomed the report and asked that as new ideas or schemes become available that they are disseminated appropriately to the GPs to ensure that they are fully aware of what is available and are able to fully utilise the services we have to offer.</p> <p>MT agreed to take this back to Kim Godsman and the team to link in with localities.</p> <p>GC shared his experience of extreme weather conditions in other parts of the country and asked if the CCG had plans in place for the additional storage of bodies should this be needed.</p> <p>JS confirmed that she would seek assurances from the Health Economy Resilience Group (HERG).</p> <p>TC added that there was an Excess Deaths Policy in place in Greater Manchester which the CCG was signed up to.</p> <p>MK welcomed the detailed plan and suggested that in future reports it may be helpful to see how individual groups respond to winter with a very short summary of the lessons learned from previous winters.</p> <p>PM added that it was nice to see the clear escalation plans.</p> <p>Resolved:</p> <ol style="list-style-type: none"> 1. The Governing Body approved the report and congratulated the authors on the content and level of detail contained with the plan. 2. JS to check the position with the additional storage of bodies with the HERG. 3. A summary of lessons learned to be included within future plans. 	<p style="text-align: right;">JS MT</p>
	<p>9.3</p>	<p>Annual Engagement Report 2013/14</p> <p>Frank Costello presented the paper to the Governing Body members.</p> <p>Wigan Borough CCG has a duty to report on engagement activities relating to commissioning decisions. The Annual Public and Patient Engagement report covers the period 1st April 2013- 31st March 2014, but includes planned engagement activity for 2014-15. The report is the CCG's opportunity to present the work undertaken, catalogue the activities and present any changes as a result of the work.</p>	<p style="text-align: right;">Receive</p>

		<p>The report will be circulated to all our Patient Participation Groups (PPGs), Patient Forum members and will be made available via the CCG website.</p> <p>FC conveyed his appreciation to both Alexia Mitton, Head of Communications and Claire Roberts, Assistant Director along with the public who are committed to improving the services in the borough.</p> <p>FC referenced ‘How We Engage’ (<i>page 5 item 4 refers</i>) and the difficulty with the role of the CCG as we only touch people when they use a service. We now need to reach those people who may utilise services in ten or twenty years’ time.</p> <p>FC confirmed that section 5 (<i>page 10-15 refers</i>) will need to eventually translate into outcomes.</p> <p>FC suggested that Wigan is possibly ill served as part of the Big Lottery Funding and there is a process progressing at present at how we might make a bid.</p> <p>MS highlighted a cross report relationship with the Friends and Family Test conducted in hospital and the response rates being up and down.</p> <p>FC confirmed that actual testing, on patch, of what the Friends and Family Test is saying is being conducted. This is being assisted greatly by the Ulysses system capturing patient feedback.</p> <p>Out of Hours testing is to take place on the 19th November.</p> <p>Resolved:</p> <p style="padding-left: 40px;">1. The Governing Body received the report.</p>	
	<p>9.4</p>	<p>Better Care Fund Submission</p> <p>TA presented the paper to the Governing Body members.</p> <p>The Governing Body meeting endorsed the original Better Care Fund submission in April 2014. The Better Care Fund articulates the joint financial arrangements between the CCG and Wigan Council to support Integrated Care. The submission draws upon the Wigan Borough Integrated Health and Care Strategy and sets out a programme of jointly agreed transformational initiatives, which build on strong existing foundations of economy-wide working. It describes the joint investment programme for 2014/15 and 2015/16.</p>	<p>Approve</p>

	<p>In the same way as all local areas in England, Wigan Borough was required to resubmit its Better Care Fund proposals on 19th September 2014. The principal difference between this and the earlier submission is the setting of a local target for the reduction in non-elective admissions of 3.5% in 2015/16 – the performance element of the revised Better Care Fund.</p> <p>The document was endorsed by the Health and Well Being Board at its September meeting and the admissions reduction target has been signed off by Wrightington, Wigan and Leigh NHS Foundation Trust.</p> <p>TA confirmed that this fits with local strategy, the CCG’s Five Year Plan and the Health and Wellbeing Strategy.</p> <p>Resolved:</p> <p style="padding-left: 20px;">1. The Governing Body approved the additional Better Care Fund submission.</p>	
10.	Current Business Items	Receive
10.1	<p>Greater Manchester Association of CCGs Governing Group (AGG) Meeting Summary Notes for October 2014</p> <p>Summary notes of the meeting of the AGG held on 7 October 2014 were shared for the information of Governing Body members.</p> <p>FC raised his concern about some of the elements of the minutes in respect of service transformation and the budget which did not reflect discussions and corrections were to be issued.</p> <p>TA agreed and confirmed that there would need to be a further debate at the November meeting.</p> <p>TA drew attention to the Wider Leadership Programme which is a programme of work across the Association of Greater Manchester Authorities (AGMA) and the Association of Greater Manchester CCGs and how we may wish to develop some governance around that.</p> <p>SW referred to the Organisational Alignment Capability Programme (<i>page 6 item 3 refers</i>) and asked who would be responsible for the GP Appraisal element.</p>	

		<p>TA explained that this has not yet been decided and is still being debated by NHS England. TA added that there ought to be further debate on this item. If NHS England retracts there is no alternative plan at present. TA confirmed that the key message from Dr Mike Burrows was there would be no transfer of resource.</p> <p>Resolved:</p> <ol style="list-style-type: none"> 1. The Governing Body received the summary notes. 2. The service transformation and budget element of the Healthier Together Programme to be discussed at a future meeting. 3. Organisational Alignment Capability Programme to be discussed at a future meeting. 	<p style="text-align: center;">ALL</p> <p style="text-align: center;">ALL</p>
	<p>10.2</p>	<p>Performance Report</p> <p>Mike Tate, Chief Finance Officer, shared the Performance Report as at September 2014 with Governing Body members to update them on how the CCG is performing against its local priorities.</p> <p>Headline outcomes as at September 2014:</p> <p><u>Outcomes Ambitions: Headline Indicators</u></p> <p>6 Indicators: white. Performance cannot yet be assessed.</p> <p>2 Indicators: green. IAPT Access Rate and Avoidable Admissions.</p> <p>1 Indicator: Amber. Friends and Family A+E – 0.70 points lower than plan at 69.77.</p> <p>1 Indicator: red. August A+E Inpatient – 76.16, 2 points lower than the plan.</p> <p><u>NHS Constitution</u></p> <p>1 indicator: White.</p> <p>13 Indicators: Green.</p> <p>3 Indicators: Amber. Diagnostic Waits – just 0.7% of patients waiting longer than 6 weeks at the end of August 2014. Ambulance Response times for Red incidents – Red 1 and 2 Calls.</p>	

	<p><u>Acute Activity</u></p> <p>Of the eleven activity indicators that can be assessed only two achieved plan in August, these being Day Cases and Total Elective Admissions.</p> <p>2 indicators: Green.</p> <p>5 indicators: amber. Non-Elective Admissions, A+E Attendance at WWL, All First Outpatient Attendances, First Outpatient Attendances Following a GP Referral and Elective Ordinary Admissions.</p> <p>4 indicators: red. GP Referrals, Other Referrals, Total Referrals and Subsequent Outpatient Attendances.</p> <p><u>Better Care</u></p> <p>The headline metrics used to measure performance against the Better Care Fund Initiative are comprised of both health and social care indicators. With the exception of the local pink metric (Readmissions) all indicators measure performance at a local authority (LA) level.</p> <p>It is not yet possible to assess performance against the Care Home Admissions, Reablement and Avoidable Admissions indicators.</p> <p>2 indicators: red. Delayed Transfer Days – although numbers reduced performance remains above plan in August, resulting in a similar impact on the year to date figure.</p> <p>Readmissions – the number has reduced and moved closer to plan in July, however, the year to date position remains more than 7% above plan.</p> <p>MT highlighted the significant pressure on the acute contractors and stressed that if the acute sector targets are not met the CCG will not hit its annual target. There are pressures and tensions which need to be resolved, if we fail to get back on plan the CCG will not achieve its financial savings.</p> <p>MT added that work is currently being undertaken to triangulate the data contained within the Performance, Finance and QIPP reports.</p>	
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		<p>GC confirmed that this would be helpful in assisting the Governing Body to understand the relationship of trends and patterns of emergency re-admissions.</p> <p>MT confirmed that the only way we would be able to remove money from the acute sector would be to close beds.</p> <p>MT added that A+E activity is not increasing greatly but WWL are able to take on extra referrals and elective work.</p> <p>TA reinforced the importance of any investment shift taking place outside of the hospital.</p> <p>SW sought clarity on the Maternity: Antenatal Assessment By 13 Weeks figure of 101.2% (<i>page 11 refers</i>).</p> <p>MT confirmed that this was overplan.</p> <p>SW queried the Diabetes: Referred for Structured Education Within One Year asking if this had been incorporated within the diabetes redesign.</p> <p>MT confirmed that he would double check this point.</p> <p>SW referenced the use of Smartphones and asked if WWL were now utilising this technology.</p> <p>JS stated that it had been confirmed at the last Exec to Exec meeting that this technology was now being used.</p> <p>SW noted the two differing figures within the Ambulance: Handover Delays Over 60 Minutes at WWL FT section, within the performance comments the figure states 30 minutes.</p> <p>MT agreed to conduct a further check.</p> <p>It was agreed that at the next Exec to Exec meeting the facilitation of the Friends and Family Test would be discussed.</p> <p>Resolved:</p> <ol style="list-style-type: none"> 1. The Governing Body received the report. 2. MT to check the Diabetes: Referred for Structured Education Within One Year to establish if this has been included within the redesign. 3. MT to check the two differing figures of 30 and 60 minutes within the Ambulance: Handover Delays Over 60 Minutes at WWL FT section. 	<p>MT</p> <p>MT</p>
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		<p>4. The facilitation of the Friends and Family Test to be an agenda item for the next WWL Exec to Exec meeting.</p>	<p>Execs</p>
	<p>10.3</p>	<p>Finance Report</p> <p>Mike Tate, Chief Finance Officer, shared the Finance Report September 2014 with Governing Body members to update them on how the CCG is performing against the CCGs Financial Plan and the required savings of £20m through QIPP.</p> <p><u>Underlying Recurrent Surplus</u></p> <p>The CCG is on target to achieve a 2.5% recurrent surplus at the end of 2014/15.</p> <p><u>Surplus: Year to Date Performance</u></p> <p>The year to date surplus (£2.7m) is in line with the planned surplus.</p> <p><u>Surplus: Full Year Forecast</u></p> <p>At month 06 the CCG has total allocations of £424.0m. The CCG is forecasting to achieve its statutory duties in 2014/15 and achieve the planned surplus of £5.4m.</p> <p><u>Running Costs</u></p> <p>The running cost target is £7.9m which equates to approximately £25 per head of the population and at month 06 the forecast outturn is in line with the budget.</p> <p>MT directed the Governing Body through the Key Messages 2014/15 and 2015/16 (<i>page 4, 5 & 6 refers</i>).</p> <p>MT highlighted the areas contained within the report where performance has dropped since the last reporting period and confirmed that a full narrative was contained to fully inform the Governing Body members.</p> <p>MT confirmed that pressures are building with the acute sector, the continuing healthcare budgets (which are now forecasting a £900k overspend) and Orthopaedics. There has been a significant increase in respect of Orthopaedic referrals from a large number of Practices.</p>	

		<p>MT added that the Continuing Health Care criteria is set nationally and therefore is unlikely to change, it will be for the CCG to find the money to fund the levels of service being requested by the population of Wigan.</p> <p>TA added that due to having an ageing population which is living longer there will be a need to look at how we fund this in the future.</p> <p>Resolved:</p> <p>1. The Governing Body received the report.</p>	
	<p>10.4</p>	<p>QIPP Report</p> <p>Mike Tate, Chief Finance Officer, shared the Month 6 QIPP Report with Governing Body members to update them on how the CCG is performing against the QIPP target savings year to date.</p> <p>QIPP Savings so far this year are £9,842k, which equates to 49% of the original target of the full year forecast of £20m, which is still in line with plan.</p> <p>Successful achievement of this target is critical to the delivery of the organisation’s financial position and statutory duties.</p> <p><u>QIPP Forecast Scheme Summary</u></p> <p><u>In Hospital</u></p> <p>2 Indicators: Green. 10 Indicators: Amber.</p> <p>A number of the schemes in this section focus on reducing demand via the reduction of non-elective emergency admissions. These have previously been classed as ‘amber’ medium risk to achieving their forecast savings. This is due to an initial reported over performance in Trauma & Orthopaedics (T&O) (£0.7m). The CCG are working closely with WWL and have a range of contractual challenges in place to reduce the potential overspend. Any overspend would have a negative impact upon the QIPP achievement.</p> <p><u>Out of Hospital and Joint Commissioning</u></p> <p>4 Indicators: Green. 4 Indicators: Red.</p>	

		<p>Community Nursing Therapy and Community Paediatrics recommissioning will not achieve the savings due to delay in implementation and commencement will now be in April 2015/16. The Extended INT and Children's integrated pilots have not progressed on the expected timescales. The four remaining schemes are forecast to achieve their financial savings.</p> <p><u>Medicines Optimisation</u></p> <p>12 Indicators: Green.</p> <p>Overall prescribing is forecasting an over spend of £1,037k as at month 06. The early indicators are that this is due to an increase in the cost per item rather than the number of items prescribed. A number of schemes are behind plan however they are expected to achieve their full year QIPP target. A full review of the schemes will be undertaken for month 08 reporting.</p> <p><u>All Other Schemes</u></p> <p>3 Indicators: Green. 5 Indicators: Red.</p> <p>Many of the small projects were initially delayed. The implementation of schemes is now underway, however the schemes are unlikely to deliver their full planned savings in year. We aim to take a position on these in Quarter 4. The small projects team are currently looking into new business case areas to develop.</p> <p>MT drew attention to the amber related items on the scorecard (<i>page 6 refers</i>) explaining that the CCG is making the assumption that QIPP will be achieved and they will stay in financial balance. MT added that this will be triangulated for future reports.</p> <p>MT confirmed that notification to Acute Trust colleagues is required to take place where the removal of capacity in the system will happen.</p> <p>Resolved:</p> <p>1. The Governing Body received the report.</p>	
	<p>10.5</p>	<p>Healthier Together Update</p> <p>TD confirmed that the only point to note at present related to the timing of the decision making process.</p>	

		<p>This discussion is to form part of the closed meeting later today.</p> <p>Resolved:</p> <p>1. The Governing Body received the update.</p>	
11.	Governing Body Committee Updates		Approve
	<p>11.1/ 11.5</p>	<p>Chairpersons' reports for September 2014 were circulated as below:</p> <p>11.1 Healthier Together Committee in Common 17 September 2014.</p> <p>FC confirmed that the amendments requested by the CCG were accepted. The revised copy is yet to be received.</p> <p>11.2 Chairperson's Report: Audit Committee, 9 September 2014.</p> <p>11.3 Chairperson's Report: Clinical Governance Committee, no meeting held.</p> <p>11.4 Chairperson's Report: Corporate Governance Committee, 9 September 2014.</p> <p>11.5 Chairperson's Report: Finance and Performance Committee, 22 September 2014.</p> <p>11.6 Chairperson's Report: Service Design and Implementation Committee, 16 September 2014.</p> <p>Resolved:</p> <p>1. The Governing Body approved the above listed reports and noted the comments of FC.</p>	
12.	Locality Executive Updates		Receive
	<p>12.1- 12.6</p>	<p>Locality Executive updates were circulated for September 2014:</p> <p>11.1 Atherleigh 11.2 Patient Focus 11.3 Tyldesley Atherton Boothstown Astley 11.4 Wigan Central – <i>no meeting held.</i> 11.5 North Wigan – <i>no meeting held.</i> 11.6 United League Collaborative</p> <p>Resolved:</p> <p>1. The Governing Body received the above listed reports.</p>	

13.	Any Other Business – accepted at the Chairman’s discretion		
	13.1	There were no items of any other business raised. The Chair closed the meeting at 15.15pm.	
14.	Date and time of next meeting		
	Tuesday 25 November, 13.30pm in Room 17, Wigan Life Centre		

Signed
Dr Tim Dalton, Chair

Date:25.11.14.....

**ACTIONS FROM THE WIGAN BOROUGH CLINICAL COMMISSIONING GROUP GOVERNING BODY
OPEN MEETINGS 2014**

Meeting Date	Agenda Item	Agreed actions from meeting	Action By	Deadline	Update
23.9.14	8.3	<u>Patient Engagement Briefing and Patient Forum Attendance</u>			
		2. A self-assessment will be undertaken of current activity and plans using the Framework for Excellence in Commissioning. This will be presented to the Governing Body at the December 2014 meeting.	FC/CR	January 2015	Added to forward plan.
		5. The case of the 103 year old lady to be investigated further.	FC/CR	Ongoing	
		6. An update, at a future meeting, from members of the Wigan Youth Cabinet on the findings of the work being conducted around depression among young people.	FC/CR	Ongoing	Added to the forward plan.
28.10.14	3.0	<u>Equality and Diversity Presentation</u>			
		A scrutiny process to be developed.	ALL	Ongoing	
		Senior CCG Managers to explore further the presentation delivered today to take forward the Equality agenda.	ALL	Ongoing	

**ACTIONS FROM THE WIGAN BOROUGH CLINICAL COMMISSIONING GROUP GOVERNING BODY
OPEN MEETINGS 2014**

28.10.14	7.1/7.2	TA to circulate Power Point slides to Governing Body Members regarding the progress of the North West Sector arrangements.	TA	ASAP	
28.10.14	9.1	<u>Wigan Borough Health Profile</u>	KA	Ongoing	Add to forward plan.
		The Governing Body welcomed a future Health Profile update report containing outcomes linked to targets. A further report to be brought to a future meeting on melanoma rates linked to UV exposure.	KA	Ongoing	Add to forward plan.
28.10.14	9.2	<u>Wigan Borough Resilience Plan 2014-2015</u>	JS	Ongoing	
		JS to check the position with the additional storage of bodies with the HERG. A summary of lessons learned to be included within future plans.	MT	Ongoing	
28.10.14	10.1	<u>Greater Manchester Association of CCGs Governing Group (AGG) Meeting Summary Notes for October 2014</u>	ALL	November 2014	
		The service transformation and budget element of the Healthier Together Programme to be discussed at a future meeting.			

**ACTIONS FROM THE WIGAN BOROUGH CLINICAL COMMISSIONING GROUP GOVERNING BODY
OPEN MEETINGS 2014**

		Organisational Alignment Capability Programme to be discussed at a future meeting.	ALL	November 2014	
28.10.14	10.2	<p><u>Performance Report</u></p> <p>MT to check the Diabetes: Referred for Structured Education Within One Year to establish if this has been included within the redesign.</p> <p>MT to check the two differing figures of 30 and 60 minutes within the Ambulance: Handover Delays Over 60 Minutes at WWL FT section.</p> <p>The facilitation of the Friends and Family Test to be an agenda item for the next WWL Exec to Exec meeting.</p>	<p>MT</p> <p>MT</p> <p>Execs</p>	<p>November 2014</p> <p>November 2014</p> <p>5 November 2014</p>	

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