

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

Tuesday, 22 March 2016 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 23 February 2016		Tim Dalton	1 - 14	Approve
5.	Actions/Decisions Log from Previous Wigan Borough Clinical Commissioning Group Governing Body Meeting		Tim Dalton	15 - 16	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	Patient Engagement Briefing and Patient Forum Attendance		Frank Costello/Claire Roberts	17 - 24	Receive
	8.2	Wrightington, Wigan & Leigh NHS Foundation Trust Deaths Audit Identified Themes March 2016		Julie Southworth	25 - 32	Receive
	8.3	Information Governance Framework		Julie Southworth	33 - 48	Approve
	8.4	Locality Plans I. Final Locality Plan II. Transformation Fund Proposals III. Better Care Fund		Tim Dalton/Trish Anderson/Mike Tate	49 - 124	Receive
	8.5	Wigan Borough Clinical Commissioning Group Financial Plan 2016/17		Mike Tate	125 - 170	Receive
9.	Current Business Items					
	9.1	Corporate Report Month 11		Mike Tate	171 - 220	Receive
10.	Governing Body Committee Updates					
	10.1	Healthier Together Shadow Joint Committee Meeting 16 March 2016		Tim Dalton		No Minutes Yet Available
	10.2	Chairperson's Report - Audit Committee		Maurice Smith		No Meeting
	10.3	Chairperson's Report - Clinical Governance Committee		Ashok Atrey	221 - 226	Approve
	10.4	Chairperson's Report - Corporate Governance Committee		Tony Ellis		No Meeting
	10.5	Chairperson's Report - Finance and Performance Committee		Mohan Kumar	227 - 230	Approve
	10.6	Chairperson's Report - Service Design and Implementation Committee		Peter Marwick	231 - 234	Approve
	10.7	Minutes - Primary Care Commissioning Committee		Gary Cook		No Meeting
11.	Locality Executive Updates					

	11.1	Atherleigh - Joint Report		Gen Wong	235 - 238	Receive
	11.2	Patient Focus - Joint Report as at 11.1		Mohan Kumar		Receive
	11.3	Tyldesley Atherton Boothstown Astley		Ashok Atrey		No Meeting
	11.4	Wigan Central		Tony Ellis	239 - 240	Receive
	11.5	North Wigan		Peter Marwick	241 - 244	Receive
	11.6	United League Collaborative		Sanjay Wahie	245 - 248	Receive
12.	Any Other Business - To be accepted at the Chairman's discretion					
13.	Date and time of next meeting					
	Tuesday 26 April, 2016 at 13.30 in Room 17, Wigan Life Centre					

This page is intentionally left blank

OPEN MEETING (*Unratified*)

**Meeting of Wigan Borough Clinical Commissioning Group (WBCCG) Governing Body
 Held on Tuesday 23 February 2016 at 1.30pm in Meeting Room 17, Wigan Life Centre**

Present:

Dr Tim Dalton, Chair (TD)
 Trish Anderson, Chief Officer (TA)
 Julie Southworth, Director of Quality and Safety (JS)
 Mike Tate, Chief Finance Officer (MT)
 Frank Costello, Lay Member (FC)
 Dr Tony Ellis, Clinical Lead for Wigan Central (TE)
 Dr Pete Marwick, Clinical Lead for Wigan North (PM)
 Dr Ashok Atrey, Clinical Lead for TABA (AA)
 Dr Mohan Kumar, Clinical Lead for Patient Focus (MK)
 Dr Gary Cook, Secondary Care Consultant Governing Body Member (GC)

In Attendance:

Tim Collins, Assistant Director of Governance (TC)
 Angela Cullen, Executive Assistant to Chief Officer - Minute Taker (AC)
 Alexia Mitton, Head of Communications

	AGENDA	ACTION
1.	Chairman's Welcome	
	<p>The Chairman opened the meeting at 1.30pm formally welcoming all attendees and members of the public to the February meeting of the Wigan Borough Clinical Commissioning Group Governing Body meeting.</p> <p>1 member of the public was present.</p>	
2.	Apologies for Absence	Record
	<ul style="list-style-type: none"> • Helen Meredith, Nurse Governing Body Member (HM) • Canon Maurice Smith, Lay Member (MS) • Dr Sanjay Wahie, Clinical Lead for United League Collaborative (SW) 	
3.	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</p>	

	<p>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>	ALL
4.	Minutes from the Previous Wigan Borough Clinical Commissioning Group Governing Body Meeting held on 26 January 2016	Approve
	The minutes were agreed as a true and accurate account of the meeting and subsequently signed by the Chair.	
5.	Actions/Decisions Log from Previous Wigan Borough Clinical Commissioning Group Governing Body Meetings	Approve
	<p>To be read in conjunction with the action log:</p> <p>26.1.16, item 7.1: complete.</p> <p>26.1.16, item 8.1: April 2016.</p> <p>26.1.16, item 8.2: 16 March 2016.</p> <p>26.1.16, item 8.4: April 2016.</p> <p>26.1.16, item 9.2: complete.</p>	
6.	Questions From Members of the Public	
	There were no questions raised by members of the public.	
7.	Key Messages	
7.1	<p>Chair's Key Messages</p> <p>TD opened the meeting by focusing on business as usual and the transformational agenda.</p> <p>There have been a series of meetings held in localities to look at how Primary Care can be delivered in a different way.</p> <p>Meetings have also taken place with the Acute Trust and Local Authority to discuss plans going forward.</p> <p>TD referenced the 'doing' and confirmed that it was inspirational to see how managers, clinicians and staff across the economy have united to place patient quality and safety foremost.</p>	

		<p>Resolved: 1. The Governing Body received the item.</p>	
	7.2	<p>Chief Officer's Key Messages</p> <p>TA tabled a report updating Governing Body members on the below areas of interest.</p> <p><u>National</u></p> <p>Specialised Services:</p> <p>NHSE launched a 30 day consultation on a number of proposed new products for specialised services including service specifications and clinical commissioning policies. It is the first of a series of consultations that will be taking place in the coming months.</p> <p>Obesity Surgery:</p> <p>From the 1st April responsibility for commissioning severe and complex obesity services for adults will transfer from NHS England (NHSE) Specialised Commissioning to Clinical Commissioning Groups. Technical and best practice guidance will be circulated.</p> <p>FC said that he hopes the obesity service will attract an appropriate finance allocation.</p> <p>MT stated that nothing had been confirmed to date.</p> <p>Improvement and Assessment Framework 2016/17:</p> <p>NHSE is introducing a new CCG improvement and assessment framework in 2016/17 which will align with the NHS mandate and planning process. An engagement document and technical annex have also been launched. There will be work carried out at a GM level to develop proposals for how the system will assure itself and develop mutual accountability.</p> <p>The Carter Report:</p> <p>An independent review has been completed for the Department of Health (DoH) led by Lord Carter. The review finds unwarranted variation in running costs, sickness absence, infection rates and prices paid for supplies and services. It argues that hospitals must standardise procedures, be more transparent and work more closely with neighbouring NHS Trusts and that implementing the</p>	

	<p>recommendations will help end variations in quality of care and finances that cost the NHS billions.</p> <p>IT:</p> <p>The DoH has launched a review of computer systems across the NHS. The review will look at places where IT has worked well and those areas that need improving along with different ways to implement IT in healthcare as the NHS works towards being paperless by 2020. Recommendations are due in June.</p> <p>Care Quality Commission (CQC):</p> <p>The CQC have issued a third document to contribute to the development of their strategy for the next 5 years. The document covers their vision for regulating the quality of health and adult social care services, proposals for how the CQC aim to achieve this and the equality, diversity and human rights impacts which have been considered. The consultation ends on 14th March.</p> <p>Monitor – Voluntary Sector Roundtable Event:</p> <p>During February TA was invited to attend a roundtable event on working with the voluntary sector, hosted and chaired by Monitor. The session was organised between commissioners and voluntary sector providers and covered a range of issues. Detailed notes from the session have been shared with our Patient and Public Engagement Leads with a view to exploring the good practice raised at the session.</p> <p><u>Regional</u></p> <p>GM Devolution:</p> <p>Work continues on putting in place the necessary governance and operating infrastructures to deliver the devolved responsibilities from the 1st April. Key GM wide meetings as an Association of Greater Manchester CCG's representative include:</p> <ul style="list-style-type: none"> • Joint Commissioning Board • Joint Commissioning Board Executive • Implementation Working Group • Strategic Partnership Board • Strategic partnership Board Executive 	
--	----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--

	<p>Resilience/Trauma – Working Group:</p> <p>As the lead Chief Officer for emergency planning and resilience in the Association of Greater Manchester CCG's TA has been contributing to a work stream focusing on the trauma/resilience issues linked to the implementation of the Healthier Together decisions. The task and finish group is scoping the impact of the changes with single services across Greater Manchester in its impact to respond to an emergency situation.</p> <p>Healthier Together Programme Board:</p> <p>Following the successful conclusion of the legal challenge into the Healthier Together decision on Stockport Hospital, the Healthier Together Programme Board has recommenced meetings to focus on the detailed planning for the implementation of the decisions. Reports on progress will be brought on a regular basis and will also be fed back through the Committee in Common to which it reports.</p> <p><u>Local</u></p> <p>Clinical Lead Interviews</p> <p>Following the sad and untimely death of Dr Deepak Trivedi, it was necessary to begin the process of securing a Clinical Lead to Atherleigh. Two candidates expressed an interest in the role. A process of formal assessment and interview was followed to confirm candidates were eligible for the role, which was subsequently followed up by an election from peers in the locality. Dr Gen Wong has been confirmed as the elected representative for the locality.</p> <p>Voluntary Sector Assembly:</p> <p>Representatives from the CCG attended the Third Sector Assembly to outline the proposals and ambition in the locality plan as part of a series of presentations from ourselves, the Local Authority and Healthwatch.</p> <p>FC referenced the Carter Review with £5 billion worth of savings being identified over 22 pilot sites (Salford and Bolton included) and asked if there was a North West Sector opportunity for efficiency gains.</p> <p>FC asked if further clarity had been received in respect of the Greater Manchester Devolution Transformation Fund (£450 million) and the Vanguard Bids.</p>	
--	---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--

		<p>TA confirmed early feedback that the existing vanguards will be accessing this fund. There is further debate underway in respect of new vanguard bids.</p> <p>TD referenced the Carter Review with £335 million worth of savings identified for Greater Manchester.</p> <p>MK welcomed the Carter Report which recognises income rather than expenditure. MK added that there was a 28 page summary document available online.</p> <p>Resolved:</p> <ol style="list-style-type: none"> 1. The Governing Body received the item. 	
8.	New Business Items		
	<p>8.1</p>	<p>Quality Safety and Safeguarding Report, Quarter 3</p> <p>JS presented the report.</p> <p>The purpose of the report is to provide Wigan Borough CCG Governing Body with an overview on the Quality, Safety and Safeguarding activities in the Quarter 3 2015/2016 reporting period.</p> <p>The report is structured to highlight any areas of concern relating to our Providers and seeks to evidence the actions that are being taken to drive the required improvements in quality and safety.</p> <p>Areas to highlight are:</p> <p><u>Summary Hospital-level Mortality Indicator (SHMI)</u></p> <p>JS stated that there had been concern raised following a presentation delivered by Dr Martin Farrier, Wrightington, Wigan and Leigh NHS FT in respect of SHMI. The CCG has asked WWL NHS FT to provide a detailed action plan.</p> <p><u>Safer Staffing Levels</u></p> <p>JS highlighted recurring themes, from both WWL NHS FT and Bridgewater Community Healthcare NHS Foundation Trust, regarding Nurse recruitment. This is a local challenge and questions are being asked of providers in relation to recruitment plans.</p>	

	<p><u>Intermediate Care (IC) and Community Bed (CB) Providers</u></p> <p>There is a common issue in relation to IC and CB beds. JS confirmed that the Local Authority lead this area, the CCG is working alongside and supporting them to provide higher quality care.</p> <p>JS confirmed that there will be a report on outcomes and roll out to future Governing Body meetings.</p> <p>The Quality Surveillance Subgroup for Social Care and the Continuing Healthcare; Mental Health and Learning Disabilities Contract Performance Group have identified the following four providers for inclusion in the current monitoring framework.</p> <p>Introductory visits to all providers have now been completed and the CHQA Lead is attending bi - weekly were practicable.</p> <ol style="list-style-type: none"> 1. Westleigh Lodge Care Home 2. Dean Wood Manor 3. St Georges Care Home 4. High Peake Lodge Care Home <p>The following providers have been identified as having significant areas of concern:</p> <ol style="list-style-type: none"> 5. Dean Wood Manor 6. St Georges Nursing Home <p><u>Safeguarding</u></p> <p>JS referenced a detailed report (<i>section 16, page 20 refers</i>) and confirmed that she was willing to take any questions outside of this meeting.</p> <p>TD referenced the serious incidents and never events (<i>item 9, page 13 refers</i>) putting into context when compared to the national picture.</p> <p>GC made an observation around the issue with nursing homes stating that this issue does not bode us well in establishing what level of nursing home will be required to manage the transformation from an acute to community setting.</p> <p>TA explained that this links back to the 'Bed Capacity Review' being conducted by Attain on behalf of the CCG. A report on the outcomes of this work will be brought to the March or April Governing Body meeting to update members. Phase two of the project is centered on the creation of a model which will give us a</p>	
--	----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--

	<p>sense of the beds that are required.</p> <p>The Governing Body passed on their appreciation to authors of the report for the breadth, narrative and detail contained within.</p> <p>Resolved:</p> <ol style="list-style-type: none"> 1. Quality Improvement Plan (Westwood Lodge) to be used as a model for nursing homes – progress report to be provided to a future Governing Body. 2. Safeguarding: JS to address any questions outside of the meeting. 3. Bed Capacity Review: a report on the outcomes of this work will be brought to the April Governing Body meeting to update members. 	<p>JS</p> <p>JS</p> <p>MT</p>
8.2	<p>Greater Manchester (GM) Devolution Update</p> <p>TA presented the item.</p> <p>The consultation is now formally open and the GM Strategy has been launched.</p> <p>TA urged staff to respond to the consultation and suggested that it be disseminated to the Patient Groups.</p> <p>The transformation fund is the biggest issue at present.</p> <p>Price Waterhouse Coopers (PWC) will be conducting an evaluation of the plans over the next six to eight weeks.</p> <p>Resolved:</p> <ol style="list-style-type: none"> 1. The Governing Body received the update. 	
9.	Current Business	
9.1	<p>Corporate Report, Month 10 (January 2016)</p> <p>MT presented the item.</p> <p>The report is designed to give the Governing Body a regular monthly update on how the CCG is performing against its local priorities. The report also summarises CCG performance against the Everyone Counts Planning Guidance Indicators.</p> <p>Each directorate has identified key areas to inform the report which are highlighted below:</p>	

		<p>Emerging Challenges</p> <ul style="list-style-type: none"> • The emerging Greater Manchester (GM) Devolution agenda and potential fund transfers to the devolution budget. • Identify additional opportunities to address the CCGs cumulative shortfall in funding identified in the Locality Plan submitted as part of GM devolution. • Fully meeting the requirements of Winterbourne. • Managing demand in the acute sector in particular over performance on the acute contract. • Community care providers developing sufficient capacity to receive patients and services deflected from Acute Hospital care. <p>Challenges for 2016/17 include:</p> <ul style="list-style-type: none"> • The resources (Commissioner and Provider) necessary to support the service transformation in 2016/17 detailed in the GM Strategic Plan. Delivery will require major commitment from all stakeholders. • Further developing the QIPP programme to meet 2016/17 requirements and beyond. • Increasing cost pressures on the CCG. • Potential cuts to local authority budgets as a result of the new Comprehensive Spending Review (CSR) for the five years following 2016/17 and its impact on health costs. • The need to return the local system to 'aggregate financial balance'. • It is anticipated that Nursing Homes and Domiciliary care providers who support Continuing Health Care (CHC) patients will be reviewing their charges due to the impact of the increase in living wage is implemented. This could place a challenge on the CHC budget over the next two to three years. A 5% increase has been placed within the financial plan and this will need to be closely monitored in year. Nationally the DH is reviewing the fee paid by CCGs for Funded Nursing Care Patients to allow for the increase in living wage. It is not yet known the scale of the increase. <p>MT updated the Governing Body on the Year to Date Performance and Monthly Performance Tracker: Latest 13 months (<i>page 62 & 63 refers</i>). The reduction in the performance of the ambulance service (NWAS) was noted, however there was an increase of 20% in calls to NWAS during November and December. Work is being conducted at present to establish if the implementation of NHS 111 service has had an impact upon performance.</p>	
--	--	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--

		<p>PM informed the Governing Body of an evening patient visit he recently conducted where a 20 minute response was necessary. The only option NWAS could offer was to upgrade to a 999 response.</p> <p>The GM team has raised the concerns with Blackpool CCG who control the NWAS contract.</p> <p>MT highlighted the increase in cardiology spend which is having an impact upon performance/waits.</p> <p>TD asked if it was possible to split the 6 week waiters by speciality.</p> <p>MT confirmed that further work would be conducted and emailed to Governing Body members for information.</p> <p>FC referenced the WBCCG Key Strategic Priorities Progression 2016/17 and the reporting of the programme areas that are linked to the delivery of the Locality Plan through the System Transformation Group with reports to the Tactical Programme Board, Wigan Leaders Executive Board, Health & Wellbeing Board and potentially a Wellness Organisation.</p> <p>FC noted that the potential for duplication within a busy governance structure could pose a real issue and may require review.</p> <p>FC sought clarity on the axis of the graph showing Key Programmes of Work in line with the Locality Plan 2016/17.</p> <p>TA confirmed that the governance structures remain the subject of much debate at a GM level.</p> <p>Resolved:</p> <ol style="list-style-type: none"> 1. The Governing Body received the item. 	
	<p>9.2</p>	<p>Finance Report, Month 10 (January 2016)</p> <p><u>Executive Summary</u></p> <ul style="list-style-type: none"> Underlying Recurrent Surplus The CCG is on target to achieve a 1.0% recurrent surplus at the end of 2015/16. Surplus: Year To Date Performance The year to date surplus (£3.99m) is in line with the planned surplus at month 10. 	

	<ul style="list-style-type: none"> • Surplus: Full Year Forecast At month 10 the CCG has total allocations of £490.05m. The CCG is forecasting to achieve its statutory duties in 2015/16 and achieve the planned surplus of £4.5m. • Surplus: Risk Adjusted Full Year Forecast The CCG previously reported a net risk adjusted position of £3.03m surplus, a net risk of £1.5m. However, the CCG has managed this position within Greater Manchester (GM) and have reached an agreement, allowing the CCG to report a net risk of zero. This has been made possible with CCG access to the GM Risk Fund. • Running Costs The running cost target of £7.1m has increased to £7.45m due to the quality premium monies of £359k .The running cost expenditure at month 10 is lower than budget by £775k which will be transferred to programme budgets which is consistent with last year's treatment. <p>MT confirmed the current contract position with the Wrightington, Wigan and Leigh NHS Foundation Trust.</p> <p>The agreed quarter 1 position with WWLFT is an over performance of £1.0m, and the agreed quarter 2 position is an over performance of £2.4m giving a cumulative over performance of £3.4m. The contractually unresolved performance data from WWLFT relating to the quarter 3 period shows further over performance of £3.9m. The unchallenged cumulative year to date position to the end of December is therefore an over performance of £7.3m.</p> <p>The CCG made a successful range of contractual challenges in quarters 1 & 2 that significantly reduced the position originally reported by the Trust. Current indications suggest the performance can be reduced to a net forecast over performance of £5.0m as a result of a further range of contractual challenges being made in quarter 3. The CCG continues to pursue strategies to reduce this position further.</p> <p>As part of agreeing the quarter 2 position a range of audit work has been agreed to be completed to help better understand some areas of activity challenged by the CCG. This includes understanding unusual and significant increases in activity, and assessing whether all Trauma & Orthopaedic activity has correctly followed the correct Musculoskeletal (MSK) referral pathway. Discussions are also continuing around the expansion of Ambulatory Assessment Area (AAA) which the Trust had originally agreed would be up and running from July 2015 but as yet is still to be put in place, this was</p>	
--	-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--

		<p>raised at the recent Board to Board meeting.</p> <p>MT confirmed that the expansion of the AAA must happen next year in order for the CCG to remain financially viable.</p> <p>GC sought clarity on the reduction in activity to be achieved by WWL in the next year.</p> <p>MT confirmed that Acute Medicine, Elective Day Cases, Outpatients and High Cost Drugs were currently the biggest area of concern.</p> <p>MK added that the CCG invested in AAA last year and that the first task is the billing exercise. Data is showing that 20% - 40% of patients are being deflected back to Accident and Emergency (A+E) due to AAA being at capacity. This theme appears each day at around 15:00hrs.</p> <p>TD referred to the underspend in Primary Care (<i>page 17 refers</i>) and asked why we had not taken this up as we want to expand Primary Care Services.</p> <p>MT explained that the budget granted was larger than expected. At the end of month 7/8 the under-spend could not be featured and would require returning to NHS England (NHSE). NHSE, in November, specifically agreed a change to retain this. MT confirmed that this year the money is contributing to the CCG's surplus and would be spent in the planning process for next year.</p> <p>Resolved:</p> <ol style="list-style-type: none"> 1. The Governing Body received the report and noted the financial risks attached. 	
10.	Governing Body Committee Updates		
	<p>10.1/ 10.7</p>	<p>Chairpersons' reports were circulated as below:</p> <p>10.1 Shared minutes of the Healthier Together Shadow Joint Committee meeting, 16 December 2015.</p> <p>10.2 Chairperson's Report: Audit Committee – no meeting.</p> <p>10.3 Chairperson's Report: Clinical Governance Committee.</p> <p>10.4 Chairperson's Report: Corporate Governance Committee.</p> <p>10.5 Chairperson's Report: Finance and Performance Committee.</p>	

		<p>10.6 Chairperson’s Report: Service Design and Implementation Committee.</p> <p>10.7 Ratified Minutes: Primary Care Commissioning Committee.</p> <p>Resolved:</p> <p>1. The Governing Body approved the above listed reports/minutes.</p>	
11.	Locality Executive Updates		
	<p>11.1/ 11.6</p>	<p>Locality Executive updates were circulated for January 2016:</p> <p>11.1 Atherleigh 11.2 Patient Focus 11.3 Tyldesley Atherton Boothstown Astley 11.4 Wigan Central 11.5 North Wigan 11.6 United League Collaborative</p> <p>Resolved:</p> <p>1. The Governing Body received the above listed reports.</p>	
12.	Any Other Business – to be accepted at the Chairman’s discretion		
		<p>There were no items of any other business for discussion.</p> <p>The meeting closed at 2.45pm.</p>	
13.	Date and Time of Next Meeting		
	Tuesday 22 March 2016 at 1.30pm in Room 17, Wigan Life Centre		

Signed
Dr Tim Dalton, Chair

Date:22.3.16.....

This page is intentionally left blank

**DRAFT ACTIONS FROM WIGAN BOROUGH CLINICAL COMMISSIONING GROUP GOVERNING BODY
OPEN MEETINGS 2016**

Meeting Date	Agenda Item	Agreed actions from meeting	Action By	Deadline	Update
26.01.16	8.1	Greater Manchester Strategic Plan Final plan including financial projections to be brought back to Governing Body.	TA	26/04/16	
26.01.16	8.2	Healthier Together Judicial Review TD to relay back to the Committee in Common the omission of the Primary Care Sector from the conditions paper.	TD	16/03/16	
26.01.16	8.4	Governing Body Assurance Framework An assessment to be undertaken of the risk associated with the financial viability of care homes in the borough and the contingency plan if one or more failed.	JS	26/04/16	
23.2.16	8.1	Quality, Safety and Safeguarding Report, Quarter 3 <ul style="list-style-type: none"> Quality Improvement Plan (Westwood Lodge) to be used as a model for nursing homes – progress report to be provided to a future Governing Body. Safeguarding: JS to address any questions outside of the meeting. 	JS JS	24/05/16 Ongoing	

**DRAFT ACTIONS FROM WIGAN BOROUGH CLINICAL COMMISSIONING GROUP GOVERNING BODY
OPEN MEETINGS 2016**

		<ul style="list-style-type: none">• Bed Capacity Review: a report on the outcomes of this work to be brought to the April Governing Body meeting.	MT	26/04/16	
--	--	-----------------------------------------------------------------------------------------------------------------------------------------------------------------	-----------	-----------------	--