

MINUTES OF FINANCE AND PERFORMANCE COMMITTEE MEETING
HELD ON TUESDAY 16 MAY 2017 AT 11:15hrs
AT SOUTHGATE HOUSE, DEVIZES

Present:

Dr Peter Jenkins	PJ	Chair, CCG
Steve Perkins	SP	Chief Financial Officer
Tracey Cox	TC	Interim Accountable Officer (<i>until 12.30hrs</i>)
Peter Lucas	PL	Vice Chair, Lay Member
Christine Reid	CR	Lay Member
Dr Mark Smithies	MS	Secondary Care Doctor
Dr Richard Sandford-Hill	RSH	GP Chair, West
Dr Toby Davies	TD	GP Chair, Sarum (<i>until 12.30hrs</i>)
Dr Anna Collings	AC	GP Vice Chair, NEW
Mark Harris	MH	Chief Operating Officer
Jo Cullen	JCu	Director of Primary Care and Urgent Care/Group Director West
David Noyes	DJN	Director of Planning, Performance and Corporate Services (<i>until 12.30hrs</i>)
Rob Hayday	RH	Associate Director of Performance, Corporate Services and Head of PMO
John Dudgeon	JD	Associate Director of Information
Sharon Woolley	SW	Board Administrator

Apologies:

Ted Wilson	TW	Director of Community and Joint Specialist Commissioning/Group Director NEW
Dr Andrew Girdher	AG	GP Co-Chair, NEW
Lucy Baker	LB	Acting Director of Acute Commissioning
Dr Helen Osborn	HO	Medical Advisor

Item Number	Item	Action
FIN/17/05/01	Welcome and apologies for absence PJ welcomed attendees, the above apologies were noted.	
FIN/17/05/02	Declarations of Interest Members were reminded of their obligation to declare any interests they may have at the beginning of the meeting, or any issues arising during the meeting, which might conflict with the business of Wiltshire CCG. (This included any relevant interests previously declared on the Register of Interests). No declarations were made.	
FIN/17/05/03	Minutes of the meeting 14 March 2017 The minutes of the meeting held on the 14 March 2017 were agreed as a true record. Action Tracker:	

	<ul style="list-style-type: none"> • FIN/16/10/08 QIPP Report Format – MH and DJN reported that the new format to be live in June 2017. ONGOING 	DJN/MH
FIN/17/05/04	<p>Matters arising No matters arising.</p>	
FIN/17/05/05	<p>Financial Position The paper was tabled.</p> <p>The paper included a review of the year end position. SP reported that there had been some common themes in relation to activity issues over the last few months which had continued. The 1% surplus had been delivered and the 1% programme budget headroom had been released in line with NHS England requirements. It was advised that this headroom monies would be received back to use in the future. Rules of access and timescales for receiving this back were unknown, although it was anticipated it may be phased in. 2016/17 saw the headroom monies used as system risk reserve. In 2017/18 half of the monies (£2.9m) would be as a system risk reserve. The remaining half would be available for use. Some had already been committed. QIPP delivery would be reviewed first before the remainder was allocated.</p> <p>SP talked the committee through some of the key year end issues which were reported in the accounts in respect to provisions. The process, actions and escalation route associated with CHC disputes were covered.</p> <p>A subsequent provision for backdated costs associated with FNC and CHC had been included.</p> <p>SP advised Members that the accounts included a provision of allocated monies against HMRC's payroll and engagement review of GP Executive Members and other off payroll engagements. This follows a change in HMRC's review of previously allowable engagement routes. SP advised that the Internal Auditors, PwC, had been engaged to provide support in this area in relation to the liability and relevant rules associated with it. The CCG would complete a self-certification process by 31 May 2017 to HMRC in relation to this matter A further discussion on the risk of duplication of payment to HMRC took place. If there was an opportunity to challenge the outcome, GP colleagues would be supportive in providing additional evidence if required.</p> <p>SP reported there were no other residual risks and issues to note. Finance reporting may be changing, an update would be provided at the July meeting.</p> <p>ACTION: FIN/17/05/05 – Update on finance reporting to be provided at the July Finance and Performance Committee meeting.</p> <p>At the Quarter 4 Assurance meeting held on 10 May 2017, WCCG were congratulated by Rachel Pearce and NHS England on meeting the financial targets.</p> <p>On reviewing the SLAMs, TC questioned the figures associated with non-elective and elective activity and the problematic areas, and how these compared nationally. JD explained that Wiltshire was out of kilter, but the trends compared to the national position.</p>	SP
FIN/17/05/06	<p>Status on CCG Project Milestones for QIPP Delivery 2016/17 and 2017/18 QIPP Programme DJN reported that the CCG had been £7.8m below its 2016/17 QIPP target, largely due to urgent care activity pressures. The prescribing and planned care workstreams had been successful, especially through changes in clinical policies, but due to the scale of other areas, planned overall savings had not been seen.</p>	

	<p>The 2017/18 QIPP schemes had derived from the Operational Plan. The Planned Care programme savings were seen as high risk, but MH would be leading on this to ensure more control across the STP. MH stated that 2017/18 non-elective activity savings had been set before this year's winter peak. This may need to be revised. The trend of growth needed to be identified, not just the difference year on year. The QIPP non-elective workstream had been set as £3m but the value of delivery from plans may be less.</p> <p>There was confidence in achieving the QIPP targets, but a review was required to ensure it was accurate and realistic to mitigate the risk of underachieving. The overall QIPP aim was one of transformation. QIPP targets were set during the planning process, which used national profiles to inform the position.</p> <p>PL felt that the process needed to be rolled out further to help increase achievements; improve management of the QIPP and to give it greater credibility and support. The reported GP overspending in the QIPP report was raised as an issue to address. It was acknowledged that the transformation work would help, but engagement of Members was needed to ensure that messages were passed onto surgery's to encourage support of the QIPP targets. GP Members felt that sustainability was a key issue to surgeries at present, but they were encouraged to monitor referrals. Where possible, the requirements of each individual surgery should be considered when rationing policies. MH suggested that clearer information about QIPP workstreams and requirements should be included in practice packs to inform surgeries of potential outcomes and savings to encourage engagement and best practice.</p> <p>ACTION: FIN/17/05/06 - Clearer information about QIPP workstreams and requirements should be included in practice packs to inform surgeries of potential outcomes and savings to encourage engagement and best practice.</p> <p>The proposed Performance Management Framework for future reports had been included at the end of the paper to indicate what would be monitored. This would be implemented in June 2017.</p>	<p>MH</p>
<p>FIN/17/05/07</p>	<p>Delivery of Constitutional Targets Delivery Update</p> <p>JD reported on the March highlights against the constitutional targets.</p> <ul style="list-style-type: none"> • Referral to Treatment (RTT) had dipped below the standard with 91.5%, largely due to SFT's reporting issues following their PAS replacement. Validation work continued to correct the increased waiting list. • The diagnostic 6 week standard had been breached in March, but recovery plans were in place and improvements were being seen. • 2 week cancer appointments had been breached over the last 3 months (especially at GWH). Lucy Baker would raise this during the RTT and contract meetings. NHS Improvements dashboard was now to be used. A significant portion of breaches were related to patient choice delays and workforce capacity. • ED A&E continued to show breaches. The Minor Injuries Unit (MIU) attendances and performance had been included but not improved figures. If this was removed from GWH's figures, they would be within the bottom 10% nationally. These concerns would be fed into the clinical concerns of governance at GWH. 2017/18 plans would be revisited with GWH. • DTOC reporting from Wiltshire Health and Care had been inconsistent • There were no mixed sex breaches in March • C.difficile figures were under plan at the year end • Non Elective spells were over plan • Endoscopy activity and Cancer referrals had seen a high growth. Classification and counting were to be looked at. <p>The SFT waiting list had increased significantly since October 2016. An improvement plan looking at facts and remedial actions would be requested from</p>	

	<p>SFT. Support was required from GP's, Practices and the Local Medical Council to encourage the use of the Referral Support Service (RSS). The two-week referrals were not currently actioned through the RSS, but this could be progressed. The RSS would be able to direct patients, provide up to date waiting time information and give specific treatment related guidance to patients. This would bring an immediate benefit. It was suggested that the cancer referral template be unified as well to use with the Trusts and Arden's systems. The possibility of standardising the TEP form would also be looked at.</p> <p>ACTION: FIN/17/05/07.0 – ED A&E performance to be raised as a concern with GWH.</p> <p>ACTION: FIN/17/05/07.1 – Activity plans for 2017/18 to be revisited with GWH.</p> <p>ACTION: FIN/17/05/07.2 – Waiting list improvement plan containing facts and remedial actions to be requested from SFT.</p> <p>ACTION: FIN/17/05/07.3 - Cancer referral template be unified to use with the Trust's and Arden's systems. The possibility of standardising the TEP form would be looked at.</p>	<p>LB</p> <p>LB</p> <p>LB</p> <p>LB / MH</p>
FIN/17/05/08	<p>Finance and Performance Committee Work Plan 2017/18 There was no paper to accompany this item. The work plan would be reviewed and brought back to the Committee for approval if any amendments were to be made.</p> <p>ACTION: FIN/17/05/08 - Finance and Performance Committee Work Plan 2017/18 to be reviewed and updates made if required. To be brought back to the Committee for approval if any amendments made.</p>	SP/SMcN
FIN/17/05/09	<p>For information: Minutes from the Information Management and Technology Steering Group meeting held on 21 March 2017 The minutes from the Information Management and Technology Steering Group meeting held on 21 March 2017 were noted.</p> <p>Following the recent national cyber-attack, SP assured Members that there had been no local breaches. The CSU had since been rolling out server patches to ensure stability and increased security of our system.</p>	
FIN/17/05/10	<p>For information: Minutes from the Estates Steering Group meeting held on 9 February 2017 The Committee noted the Minutes from the Estates Steering Group meeting held on 9 February 2017.</p>	
FIN/17/05/11	<p>Any Other Business There were none.</p> <p>The meeting was closed at 12.35hrs</p>	

**Date of next Finance and Performance Committee Meeting:
Tuesday 11 July 2017 11.15 – 13:15hrs**