

**Wiltshire Clinical Commissioning Group
 Governing Body Meeting – Public Session
 Paper Summary Sheet
 Date of Meeting: 26 November 2013**

For: Decision Discussion Noting

Agenda Item and title:	GOV/13/11/24 Finance Committee Minutes – 10 September 2013
Author:	Simon Truelove, Chief Finance Officer
Lead Director/GP from CCG:	Simon Truelove, Chief Finance Officer
Executive summary:	The NHS Wiltshire CCG Governing Body is asked to note the Minutes of the Finance Committee.
Evidence in support of arguments:	The Minutes support the NHS Wiltshire CCG Governing Body's adoption of open and transparent processes.
Who has been involved/contributed:	Chief Finance Officer and Senior Managers of the Finance Committee.
Cross Reference to Strategic Objectives:	
Engagement and Involvement:	This paper will form part of the framework for public engagement.
Communications Issues:	Not exempt under FOI.
Financial Implications:	Further over performance of the CCG's contracts will create additional financial risk in 2013-14. This can be mitigated in year but has a recurrent impact for 2014-15
Review arrangements:	Bi-monthly Finance Committee Meetings.
Risk Management:	

National Policy/ Legislation:	
Equality & Diversity:	
Other External Assessment:	
What specific action re. the paper do you wish the Governing Body to take at the meeting?	The Governing Body is asked to note the minutes of the Finance Committee.

FINANCE COMMITTEE MEETING

Held on 10 September 2013

At Southgate house

Present:

Stephen Rowlands (SR)	Chair
Deborah Fielding (DF)	Chief Officer
Simon Truelove (ST)	Chief Finance Officer
Steve Perkins (SP)	Deputy Chief Finance Officer
Mike Relph (MR)	Group Director WWYKD

Doreen Wiltshire (notes)

Apologies: Peter Lucas, Toby Davies, Mark Harris, Ted Wilson

Meeting Not Quorate:

FIN/10/09/01 Welcome and Apologies

SR welcomed the members to the meeting.
Apologies were received from Peter Lucas and Toby Davies.

FIN/10/09/02 Declaration of Interest: There were no declarations of interest noted.

FIN/10/09/03 Minutes of the last meeting

The minutes of the last meeting held on the 9 July, were agreed and will be going to the Governing Body meeting on the 24 September 2013.

FIN/10/09/04 Headline on the Financial position

ST presented the previously circulated paper which set out the Month 4 financial position M4 Financial position summary paper which had been circulated prior to the meeting.

The M4 income and expenditure position is in line with the planned surplus of £5m, and the CCG is currently forecasting operating within its cash limits. M4 has shown a lower than plan drawdown against the anticipated cash limit, this is in respect of timing impact of the prescribing cash adjustments which have yet to be notified. The residual cash balance £1.2m shows a reduction in cash contingencies from last month.

Better payment practice target for both NHS and non NHS suppliers is being achieved both by value and number of invoices.

WCCCG is still awaiting final confirmation and transfer of capital grant funding and the finalisation of the specialist services funding adjustment.

QIPP shortfall has been factored in.

WCCCG are significantly under in activity but over financially, the impact on tariff reduction is not being realised in provider position

Financial Performance by 3 main Acutes: forecast end of year overspend

- GWH - £600k. The ytd data activity position is awaiting validation, which is being worked on jointly with the CSU. A revised contract plan is currently with GWH.

awaiting agreement, and reflects further updates in respect of specialised commissioning

- SFT - £2.3m. SFT activity is 347 spells down on plan, equal to 8% reduction in activity, 1% over on costs. More activity reported with complications, hence higher tariff.
- RUH - £2m. Several areas of challenge are currently being investigated with the CSU.

Tertiary Providers

SUHT, emergency is reporting over performing especially in trauma. Clarification is needed on PbR excluded chemotherapy drugs, WCCG's view is that these should be attributed to specialised commissioning .

BMI, (no yet validated) M1 and 2, activity shows higher than anticipated activity at the Ridgeway.

Circle Healthcare, M4 ytd underspend is reported against the contract, due to lower than anticipated activity. The position will be continually reviewed.

Learning Disabilities placements have the usual fluctuations, and there is confidence that and spikes in Continuing Health Care can be funded. Funded Nursing Care also indicates an underspend against budget.

Medicines Management prescribing continue to underspend.

Q1 data reveals that the Average length of stay emergency is up around the 3 Acutes. Delays in receiving information from providers, may mask any underlying activity issues and delay the CCG response.

3 key areas are:

- Baseline adjustments – rebase around specialists commissioning risk of £1.8m.
- Area Team overspend of £1.6m. Further work is being done to resolve the funding issues, Primary Care have already received their share of reserves. SR enquired if there was adjudication facility which the CCG could use. There is no official process only the ombudsman.
- £3.5m Capital Grant, there is still uncertainty on the allocation to be received, financial value figure then payable to Wiltshire Council

The Area Team were impressed by the CCG at Checkpoint.

Views are required on how best to present the non-automated report to NHS England.

There are recurrent QIPP issues, is M4 estimates a shortfall of £3m against the target £11.8m. All 3 groups need to move faster with their existing schemes and develop additional schemes.

QIPP discussion followed: A win win situation would be to have a few good schemes which could be jointly worked up and rolled out quickly, across all three groups.

Positive discussions have been held with the discharge teams, JCC suggested that more use could be made of the interactive white boards, and a sustained approach to Urgent Care.

JCC suggested that may be the good work by medicines management prescribing could be capitalised on by offering their services to other providers.

FIN/10/09/05 Financial Consequences of Provider Access at M4 – there was nothing to report as JD was off sick.

FIN/10/09/06 Update on Headroom Bids

ST presented the paper to the committee.

Bids received have been assessed against a prioritisation framework developed with Attain, ensuring synergy between strategic needs and deliverable benefits. The bids are assessed on business impact and ease of implementation.

The three groups have engaged with their main providers to identify schemes which could be funded through the utilisation of headroom monies. To date bids in respect of community services are still outstanding from the provider. Some of the bids put forward may require associated headroom within community services for success.

The Community Nursing bid needs enhancing, gaps need filling and new paperwork associated with Community IT, paper work has not been amended. Leverage is required to push forward and potentially part fund. Groups need to sell it to the GPs to warrant investment, as it is currently self-funding.

Mobile technology, at present the savings cannot be seen, a full business case is still awaited.

The Executive meeting yesterday agreed to take 3 areas, only agreed by NEW, and comment by the end of the week.

The list will be handed over to the PMO for monitoring of delivery.

£150k extra care for NEW/SARUM needs to be factored in, JoC had a meeting with Andrew Cowie, and will report back to the Executive Meeting on Monday.

Anything above £0.5m need to go before the Governing body.

The Finance committee was asked to note the contents of the report.

FIN/10/09/07 High Level Benchmarking message

Review of High Level Benchmarking to be added to the agenda going forward.

ATTAIN, ideas for next year going forward.

This paper will go to the Clinical Executive meeting to confirm which bids they endorse from the headroom funding.

FIN/10/09/08 Any Other Business

SR suggested that in future a second key person be invited to join the finance committee meetings,

Action Christine Reid be invited to future finance meetings