

NOTES OF WILTSHIRE CLINICAL COMMISSIONING GROUP
FINANCE MEETING
HELD ON 13 January 2015 IN THE CONFERENCE ROOM,

Present:

Dr Steve Rowlands	SR	Chair WCCG
Deborah Fielding	DF	Accountable Office
Simon Truelove	ST	Chief Financial Officer
Steve Perkins	SP	Deputy Chief Financial Officer
Peter Lucas	PL	Lay Member (Vice Chair)
Christine Reid	CR	Lay Member
David Noyes	DN	Director Planning, Performance and Corporate Services
Jo Cullen	JC	Group Director WWYKD
Mark Harris	MH	Group Director SARUM
Ted Wilson	TW	Group Director NEW
Dr Toby Davies	TD	GP Chair SARUM Group

Apologies:

Jacqui Chidgey-Clark

FIN/15/01/01	Welcome and apologies for absence	ACTION
	SR welcomed everybody to the meeting noting the apologies above.	
FIN/15/01/02	Declarations of Interests	ACTION
	<p>Members were reminded of their obligation to declare any interest they may have on any issues arising at the meeting which might conflict with the business of the Wiltshire Clinical Commissioning Group (CCG).</p> <p>No declarations of interest were raised.</p>	
FIN/15/01/03	Previous Minutes of the meeting held on 11 November 2014	ACTION
	<p>The minutes were agreed as an accurate record.</p> <p>ST informed the committee that following this meeting he has a meeting with James Drury NHSE. NHSE have raised concerns about the CCG not delivering the QIPP plan for 14/15 and that there had not been enough acknowledgement of actions to close the gap. Given the actions and challenges had not been captured in the minutes of the finance committee it was felt by NHSE that the CCG may not recognise the current financial position.</p> <p>The Chair of the committee (SR) felt that this criticism was very unfair. The financial position is reported monthly to the Governing Body and included into the integrated performance report. The Finance meeting holds the Executives to account for performance against the finance and activity budget. At present, meetings are being held monthly to enable further scrutiny of recovery activities</p> <p>PL stated that the Audit and Assurance Committee always reviewed the risks and outputs on delivery and that the minutes of the AAC were reviewed and agreed by the Governing Body.</p> <p>Programmes and projects including QIPP plans are monitored through PMO and Group monthly reviews which were reported to the Governing</p>	

	<p>Body via the Integrated Performance report. PL also confirmed that the Accountable Officer (DF) and group GP representatives had attended the November Audit Committee for the committee to gain assurance with regard to the CCG's performance, in particular achievement of our QIPP target, Acute Hospitals' over-performance and implementation and pace of the CCGs Transformation Programme.</p> <p>The members of the finance committee felt that robust discussions and challenges resulting in actions associated with the non-delivery of QIPP was being undertaken throughout the organisation and that there was complete confidence in what the Chief Financial Officer has been reporting and the challenge he has set.</p> <p>It was agreed that the minutes of the finance committee need to reflect the richness of the debate and the challenges that are being taken. Clear actions for the committee to be captured on a committee action tracker.</p> <p>ACTION Produce a meeting Action Tracker.</p>	
<p>FIN/15/01/04</p>	<p>Month 8 and 9 Financial Position</p> <p>SP presented the previously circulated paper which set out the forecast outturn as at month 8 reporting the CCGs intention to reduce its planned surplus position by £2m for 2014/15. SP stated that since the finalisation of the month 8 position a number of mitigations had come to fruition which has would enable the CCG to move its surplus back towards the planned requirement of £5.3m by £1.8m. ST and SP went through the detail of the month 8 financial report outlining the key shifts in the financial position, linking the pressures to the shortfall in the CCG QIPP plan and significant overperformance in acute care. ST went through with the committee the residual risks in the current financial position and the committee discussed accordingly. Concern was raised by the continued operational challenges associated with Adult Social Care and the continued problems with Help to Live at Home in the south of the county.</p> <p>In support of the CCG financial position the CCG has been required to produce a financial recovery plan which would seek to improve the 2014/15 position and how it would deliver the 2015/16 financial position. This would be presented under agenda item FIN/15/01/05.</p> <p>At month 9 the CCG is reporting that it will deliver a surplus of £5.1m (planned surplus requirement £5.3m).</p> <p>Residual other net risks £1.4m are linked to confirmation of funding flows and the success of ongoing discussions with providers.</p> <p>Action: The Committee were asked to note the financial position and to support the monitoring and delivery of the Financial Recovery Plan</p> <p>ACTION: The Finance Committee are asked to note the M9 financial position</p>	
<p>FIN/15/01/05</p>	<p>2014/15 Recovery Plan</p> <p>ST presented the previously circulated draft Financial Recovery Plan (FRP) for 2014/15. The FRP also described the impact of the financial pressures on the 2015/16 financial plan and how they would be mitigated. In respect to 2014/15 ST described the actions and opportunities that</p>	

	<p>were being assumed and the committee asked from the attendees whether they could provider assurance on the delivery of the FRP. All attendees confirmed their commitment to the delivery of the FRP.</p> <p>Action: The Committee were asked to note the financial position and to support the monitoring and delivery of the Financial Recovery Plan.</p> <p>The committee requested an update on the FRP for the next meeting</p>	ST
FIN/15/01/06	<p>2015/16 Resource Allocation Implications</p> <p>SP presented the paper which had been circulated prior to the meeting: In December NHSE Board had agreed the allocation for 2015/16.</p> <p>Allocation settlement for WCCG. The indicative allocations for 2015/16 attributed 1.7% allocation growth (£8.7m). Despite this additional investment WCCG would have been 2.46% under its target allocation (£13.1m). Following the Autumn statement WCCG received 4.45% allocation growth (£22.6m). This left a residual distance from target of 2.28% (£12.4m)</p> <p>The CCG will continue to see a reduction in its running costs funding of c10% for 2015/16.</p> <p>Within the allocation the CCG will have to ring-fence recurrently funding for Operational Resilience and mental health. The committee requested that the draft budget for 2015/16 be presented to the next committee which identified these specific amounts.</p> <p>Action: The Finance committee are asked to note the allocations update summary.</p> <p>Action: The committee to receive a draft budget at the March meeting which clearly identifies the ring fenced resources.</p>	ST
FIN/15/01/07	<p>QIPP Delivery Plan</p> <p>Good progress has been made in formulating the Delivery Plan for FY 15/16, and the Governing Body will be updated later this month. Included in the Delivery Plan will be a number of QIPP projects which will address the financial challenge.</p> <p>Savings Opportunities Identified include Reduction of unplanned care from TCOP schemes, reduction of unplanned care from BCF, reshaping of follow up outpatient appointments. Reduction and management of care home admissions, secondary care diagnostics to reduce unplanned activity to planned, and communication between Secondary and Primary Care, restrictions on interventions with no clinical benefit to over 75s. Change of day cases to regular day attenders, reduction on follow up appointments and emergency admissions treated as outpatients.</p> <p>A lot of 2014/15 work will continue into next year. The CCG need to commence the delivery work immediately. The message to be relayed to the GPs is ‘these are your ideas and plans, ensure what we have delivers’</p> <p>Action Full presentation of direction of travel and work in progress to be presented to the Clinical Executive meeting this afternoon.</p>	

FIN/15/01/08	Any Other Business Commissioning Intentions DN presented the revised draft Commissioning Intentions Paper which has discussed at the 3 locality meetings. The document links with WCCG's five year strategy and the overall objective to deliver care closer to home. The document will go the Clinical Exec for approval before being uploaded onto the CCG website. Action: Draft Commissioning Intentions paper to be presented to Clinical Exec for approval prior to uploading onto the website.	
	Date of the Next Meeting 17 March 2015	