

**DRAFT MINUTES OF WILTSHIRE CLINICAL COMMISSIONING GROUP (CCG)
ANNUAL GENERAL MEETING
HELD ON TUESDAY 26 JUNE 2018, 09.30HRS AT SOUTHGATE HOUSE, DEVIZES**

Voting Members Present:

Dr Richard Sandford-Hill	RSH	Clinical Chair of the CCG
Linda Prosser	LP	Interim Chief Officer
Steve Perkins	SP	Chief Financial Officer
Mark Harris	MH	Chief Operating Officer
Peter Lucas	PL	Lay Member and Vice Chair
Christine Reid	CR	Lay Member, Patient and Public Engagement
Dr Anna Collings	AC	GP, Vice Chair, North and East Wiltshire
Dr Toby Davis	TD	GP Chair, Sarum
Dr Chet Sheth	CS	GP Vice Chair, Sarum

WCCG Staff and Members of the Public in Attendance: 21

ITEM NUMBER	
AGM/18/06/01	<p>Welcome</p> <p>RSH welcomed everyone to the Wiltshire CCG Annual General Meeting. 2017/18 was a trying and financially challenging time for the NHS. Whilst Wiltshire CCG's financial position was positive compared to other areas of the country, the impacts of squeezes elsewhere across the system meant that it remained more difficult each year for Wiltshire CCG to operate at the level of delivery we wished to. Retention and recruitment of workforce remains a national issue, and is now having a local impact. The CCG's strategic agenda continues in the direction of commissioning services to treat and support patients closer to, or in, home.</p>
AGM/18/06/02	<p>Review of the Year – 2017/18</p> <p>LP first wished to note her thanks to the staff and all involved in the successful year for Wiltshire CCG. The CCG continued to perform well, the NHS England Quarter 4 Integrated Assurance assessment had confirmed green across all categories. Wiltshire was the only CCG in the region to be marked overall as 'good'.</p> <p>LP highlighted a number of areas:</p> <ul style="list-style-type: none"> • Cancer Targets – these were set as a national priority. The UK had not achieved against these as well as the rest of Europe. Increased early identification work was needed. The CCG achieved the 2 week cancer wait target for the majority of the year and has been above the 93% target every month since July 2017. The 62 day target had been more challenging, but concerted efforts by our hospitals meant the year finished having achieved the target for the final quarterly period. Patients being quickly processed between providers had supported this work. • Mental Health – The CCG's investment in this area was to ensure parity of esteem for mental health services, through the delivery of excellent mental health services. Access to care had been improved; targets for children and young people had been exceeded. It was acknowledged that there were still improvements to be made, but this was an area of focus. An effort was being made to reduce the stigma associated with mental health and youth mental health training was being provided to communities and workplaces. • GP Referrals - The CCG was working with providers to fill the gap in alternative

services available to GP's to reduce the need for hospital admissions. There had been a 7.2% reduction in avoidable admissions.

Ted Wilson, Community and Joint Commissioning Director, provided an update on the following:

- Children's Services – Virgin Care, the service provider, had been through a period of significant transformation. Electronic systems were now in place to enable real-time recording of information and easier sharing of patient records. There was now a good number of Co-located Teams in place across the county, based within the Clinical Hubs. A single point of access was in place for referrals. Working together with Wiltshire Council, the new Children and Adolescent Mental Health Service (CAMHS) had been established and implemented, building a good relationship with the education sector. GP's had already started to see the improvements made and the difference the new CAMHS was making.
- End of Life Services – Considerable public engagement had taken place as part of the refresh of the End of Life Strategy. It built on the national framework of six key ambitions. An implementation plan had been developed and signed off by the Health and Wellbeing Board. An advanced discharge service from the Royal United Hospital (RUH) was in place, working alongside Dorothy House. Salisbury Foundation Trust (SFT) had used Better Care Fund money to employ a dedicated End of Life Nurse. Wiltshire's performance was in the top quarter.

LP reported the following on the Quality and Efficiency aspect:

- As part of the Community Health services contract, Wiltshire Health and Care had introduced mobile technology devices to all staff to enable real-time recording and to free up time and resources.

Jo Cullen, Urgent and Primary Care Director, provided an update on the Medicines Management area:

- The Medicines Management Team monitored all prescribing activity across primary care.
- The notable 'Prescription Ordering Direct' service launched in May 2017 now served over 100,000 patients across Wiltshire, providing an easy way to order repeat prescriptions. This was due to be rolled out further amongst Practices and through specific service areas.

LP spoke of the major incident that had surrounded Salisbury in March. The Major Incident response had been followed, engaging all specialities to support the incident. SFT had handled the event with skill and alacrity. The CCG had been a member of the intense support group overseeing it, working and planning with Wiltshire Police. LP wished to note her thanks to all those involved.

A CQC System Review of Wiltshire Council and the CCG had taken place earlier in the year, reviewing how older people transitioned through the care pathways, in and out of hospital, and how services were planned and commissioned. The report from the review was now available upon the CCG's website. No urgent actions had been noted, but a plan and overarching strategy with the Council was being developed.

LP referred to the challenges ahead for the CCG:

- Sustainability and Transformation Partnership (STP) – a broader geographical footprint may be created. The CCG needed to ensure that services were coherent with STP partners.
- Workforce – an ongoing issue. Recruiting GPs across Wiltshire was becoming difficult. A workforce plan was needed to create an attractive health and social care sector. Partners were encouraged to consider the use of apprenticeships.
- Self-care – resources and tools and mobile phone apps were being developed to encourage self-care.

- Digital – opportunities were there to improve the use of digital.
- Estates – The Devizes Health Centre had received national funding. A review of premises across Wiltshire was underway to establish those not fit for purpose. An Estates Strategy would prioritise development. An improved model of care was being implemented and aligned to the estates work.

AGM/18/06/03**Finance and Performance**

SP first went through the national funding backdrop, giving an update on the Five Year Forward View challenge and the further £1.6bn provided to the NHS as part of the Autumn statement, of which Wiltshire received an additional £5m.

The CCG had faced some financial challenges in 2017/18. It had delivered £13.4m against its £14.5 QIPP challenge. Some costs pressures had been seen against the acute services contracts due to higher than expected levels of complex non-elective activity. The Prescribing budget had also seen unplanned pressures due to the availability of some drugs, leading to the need to purchase higher cost drugs. The CCG had also seen its first full year of primary care delegation and the transfer of funds from NHS England to manage the GP contracts.

The CCG had forecasted to achieve a £57k surplus, but had actually achieved a surplus of £3m, largely due to the release of the risk reserve headroom monies. Over the two years, Wiltshire CCG has provided an additional £8.6m into the system risk, which was expected in the future to be available to draw down to invest in service transformation.

Activity within urgent care had brought a significant impact on services and performance. Accident and Emergency (A&E) attendances had seen a 1.9% drop. Elective admission activity had increased by 10.2%. The reduction in GPs referring should have a positive impact upon elective admissions.

The CCG played a key role in the BaNES, Swindon and Wiltshire STP. As of month 12, the STP was showing a £1.2m deficit.

For 2018/19, the CCG was to achieve an aggregated 1% surplus and a QIPP challenge of £15.8m. The STP had a savings target of £91m. A financial recovery process was to be followed to ensure delivery and long term sustainability of the STP.

AGM/18/06/04**Plans for the Future****a) Wiltshire Care Model**

MH talked through the new Care Model to be implemented across Wiltshire, commissioning services that were best for the population. Key principles had been applied to its development, recognising that services may be different for different areas of the county and considering the travel time and access requirements.

The approach was split into population levels. The next level parameters were to be added and then, working with stakeholders, this would be mapped across the county to identify the gaps.

MH talked through examples of how services would be commissioned according to the local area and locality. Full details of this would be available in the summary that was to be produced for circulation. The Implementation Programme was to be developed, ensuring it aligned with CCG, Council and provider transformation plans. This would help steer the estates, digital and workforce strategies and plans.

The Wiltshire Care Model would be shared at the next Health and Wellbeing Board to engage stakeholders.

b) Integrated Urgent Care

Jo Cullen introduced the Integrated Urgent Care Service, a new service that went live on 1 May 2018. The service had been developed over a two year period, engaging

	<p>providers, stakeholders and patients.</p> <p>The contract had been awarded to Medvivo, with NHS 111 service subcontracted to Vocare. From 1 May 2018 to the day of the AGM, 43,000 calls had been received. The call triage process was working well with clinicians now more involved. This was the first service in the country to include 111 as part of its integrated service. All activity would continue to be monitored through regular contract meetings.</p>
AGM/18/06/05	<p>Receiving of Report and Accounts</p> <p>RSH stated that copies of the CCG's Annual Report and Accounts were available to take away, or available to download from the CCG's website.</p>
AGM/18/06/06	<p>Questions</p> <p>The following questions were raised:</p> <ul style="list-style-type: none"> • Tony Pickernell – Tidworth Community Area Partnership Mr Pickernell raised concerns over the forthcoming increase in military staff in Wiltshire in 2020 and the planned 800 new houses. With the current workforce issues across the health service, would there be sufficient staff to run the services in Wiltshire? <p>LP explained that primary care services were to be delivered in a different way to help overcome these issues. Practices could share staff resources if required. LP was confident that there would be sufficient successful recruitment. The arrival of the military and their families was also seen as an opportunity to recruit more staff into the health and social care sector.</p> <p>Lucy Baker, Acting Director of Acute Commissioning reiterated that this would bring an opportunity to the health service, and sufficient planning was being done. A visit to Germany of relevant partners was being organised, giving an opportunity to meet military staff and their families to gauge their needs. The NHS was to link with the Larkhill Military Primary Care service that was currently being built. An impact on SFT was expected, but this was being considered by the hospital, the Council and primary care to ensure services were prepared. TD added that some military staff had already arrived in the county.</p> <ul style="list-style-type: none"> • A second question was raised to ask if the Salisbury incident had affected the Wiltshire health budget? <p>SP advised that staff resources had been devoted to the incident, but funding had not been affected.</p> <p>Lisa Thomas, SFT's Director of Finance, added that £925k of funding had been provided to SFT through a central Government fund set aside specially for the financial impact of major incident to ensure sufficient support was able to be put into place. SFT had been grateful for the tremendous support of all during the event.</p>
	<p>The meeting concluded at 10.32hrs</p>