Group members		Rachel Potts (RP) (Chair) Sue Metcalfe (SM) Simon Cox (SC) Amanda Bloor (AB) Amanda Brown (ABr) Dr Alistair Ingram (AI) Dr Mark Hayes (MH) Dr Vicky Pleydell (VP)			
Apologies		Dr P Garnett Debbie Newton Alan Wittrick (AW) Carol Greaves (CG) Adrian Snarr (AS)			
In Attendance		Bob Wiggins (BW) Sarah Ferguson (SF) Anna Walters-Holliday (AWH) Mary Skelton (Minutes)			
Date		Thursday 8 <sup>th</sup> November 2012 Sovereign House, Kettlestring Lane, Clifton Moor, York			
No.			Action Lead		
1.	Apologies As noted above				
2.	Minutes of the meeting held on 11 October 2012 The minutes were agreed as an accurate record of the meeting held on 11 October 2012. It was agreed members would send their amendments to Mary Skelton and they would formally agree revised minutes at the next meeting.  ALL				
	Matters Arising AB expressed disappointment with regards to the process in approving the risk share agreement as the final draft for approval was received on Wednesday 7 <sup>th</sup> November. The original submission date was recorded as Wednesday 31 <sup>st</sup> October therefore this document was unable to be authorised at this meeting. Telehealth SC updated the group following on from a meeting attended in London where there was a massive push for CCG's to continue to use Telehealth.				
	Following on from the discussion in the last meeting, the Vale of York CCG Governing Body made a decision at its last meeting to not to go ahead with extending the contract for Telehealth. HRW had outstanding questions regarding this and forwarded these to Kerry Wheeler, lead for Teleheath and were not able to proceed without a response. Ultimately it is each CCG's decision into whether they would like to go ahead with Telehealth. There has				

		Item 12.1	
	been concerns regarding financial implications for the CCG's therefore a paper will need to be presented to each board of members containing all information in order to make a clear decision. The CCG'S wish to embrace new technology but do not support the way it has been procured.		
	Each CCG raised their reasons behind their chosen option and it was highlighted whether a discussion could take place with Tunstall to just pay the revenue costs for kits that were in use. SC to lead on this.	SC	
3.	<u>ToR for strategic collaborative commissioning Committee</u> (the title of the group moving forwards)		
	Following on from the comments made at the last meeting, the ToR's were <a href="#">APPROVED</a> following minor amendments made by Rachel Mann, HaRD Audit Committee Chair. The amendments were made to clarify the ToR's.		
4.	Collaborative Commissioning and Risk Sharing Agreement		
	AB expressed disappointment with regards to the process in approving the risk share agreement as the final draft for approval was received on Wednesday 7 <sup>th</sup> November. The original submission date was recorded as Wednesday 31 <sup>st</sup> October therefore this document was unable to be authorised on this meeting.		
	The risk share agreement Version 6 which was sent to this meeting for approval has been assessed and it is incorrect. A meeting was held with Senior Finances Manager from each of the CCG's met on Monday 5 <sup>th</sup> November to amend version 5. It was noted that the changes discussed were missing from version 6 and still contained paragraphs that weren't accurate.		
	ACTION: All CFO's from each CCG to approve and sign off by the End of Day: Monday 13 <sup>th</sup> November 2012.	ALL	
5.	Financial Position		
	BW informed the group following the Directors meeting on Monday 5 <sup>th</sup> November, CL reported that further to the meeting with David Flory and a number of meetings with the SHA, it is an absolute certainty that the deficit must not exceed £19 million. The PCT needs to demonstrate that they have done everything possible due to the £19M being non negotiable.		
	The CCG's expressed concern about whether the SHA had any ideas to share with the PCT as some of the turnaround initiatives are impossible to complete in the short timescale.  BW reflected that the SHA message delivered by Richard Barker to the CCG leads at a recent meeting was consistent with the messages given to Chris Long however it appeared the force and tone was somewhat more restrained. This unjustly made Chris look to be taking a firmer line that the SHA. It was noted that there has been no clear list of consequences for not meeting the £19M by Richard Barker at the meeting and therefore there remains a lack of clarity on the part of the CCG leads. VP felt that there was a lot of pressure on		

the CCG's and felt uncomfortable placing this pressure onto the team to get results. The possible situation of this additional pressure could lead to staff to resign or become disengaged due the feeling of potential job loss if results aren't met. VP/MH informed that group that they wouldn't do anything that would disengage the staff or push the problem into next year.

It was noted that all CCG's have a burning desire to work on improving the deficit and the SHA need to connect with the PCT/CCG if their hold any possible ideas to help improve. Each CCG highlighted how there are dealing with the current situation and also their plans for 2013/14. RP updated the group on a meeting that took place with VOYCCG and CSU with regards to business planning and the outcomes of the meeting.

Al highlighted his understanding of the current situation and wanted to be clear that the PCT are aiming to reduce the deficit down to £19M not Zero. BW confirmed that the deficit is to be no more than £19M, however David Flory wanted assurances that we had carefully considered how we might reduce the deficit to nil, and the reasons for choosing not to do so.

Peter March, QIPP Specialist is currently working on a paper containing all CCG information on their individual CCG turnaround initiatives that will be presented at Directors on Monday 12<sup>th</sup> November 2012. It was raised that the Director's meeting should extend the attendees list to include clinical leads and LAT directors once all in place.

**ACTION:** Request for CL to extend the attendees list

**BW** 

## 6. CHC

John Pattinson prepared a paper for the group which gave detailed proposed arrangements for the collective commissioning activities associated with partnership commissioning.

Chris Long has approved funding for an interim management post for CHC as the CSU has declined the offer to take responsibility for CHC due to risks and the need for further investment. It was noted that Helen Mortimer has been approached to lead of CHC moving forward until the end of March 2013. Simon Cox will be the lead CCO for the CCG's and this has been supported by all CCG's.

<u>ACTION:</u> Individual CCG's to meet with Helen Mortimer to discuss CHC to highlight any concerns and clarify understanding.

A letter has been drafted with support from the CCG's to be sent to Maddy Ruff, Managing Director of the CSU on Thursday 8th November 2012. This letter informed the CSU that the CCG's have reviewed their future requirements and explained what services that the CCG's intend to manage and the plan of action moving forward.

**ALL** 

## 7. Out of Hours Service and NHS 111 Process

## **NHS 111**

Anna Walters-Holliday and Amanda Brown attended this meeting to give their monthly update. There was a paper tabled called 'NHS 111 – update on the progress towards the implementation of the new NHS 11 service across north Yorkshire and York.

Currently AWH is the project lead for NHS 111 and has project support from Suzanne Savage from CSU and additional support from staff from primary care to assist in building the database. AWH discussed NHS 111 contract management and how it would be contracted. There was a recent letter issued from Eleri DeGilbert, Programme Director for NHS 111 about a possible link to YAS contracts.

A discussion took place as AB informed that group that East Riding lead on the contract and CSU will manage NHS 111. Consideration is required for who will lead moving forward as if Hull takes over then they will lead on NY footprint. Would it be better for a CCG in NY to lead and then charge each CCG for hosting?

AWH/ABr explained the tabled paper and its content for the group. It was noted that Governance is important and need to remain tight on this. A separate discussion is required with each CCG to discuss requirements in more detail.

**ACTION:** Individual CCG lead to meet with AWH/ABr to discuss governance.

John Keith has joined the team as the Clinical Governance Lead for NHS 111.

It was noted that each CCG will be responsible for their own part of the Directory of Service to ensure that it is up to date and make necessary amendments. NHS 111 will need to be considered under urgent/emergency pathways to reduce admissions therefore databases will need to be100% correct.

## **Out of Hours**

ABr tabled a paper titled 'Business Case – Out of Hours Services' and discussed the 3 options that have been considered for procurement. It was noted in the report that the preferred option was option 1 for North Yorkshire and York wide as a single lot as it delivers the most significant savings.

The financial summary doesn't include military activity and the report made reference for benchmarking.

It was a group decision that the CCG's wouldn't support option 1 and would like to consider option 3. Option 3 is for four individual lots, one for each CCG. Using the figures in the five year forecast, each CCG will be able to break down the figure to work out what each lot would cost.

ALL/AWH/ ABr

		Item 12.1
	An advert will be released on Friday 9 <sup>th</sup> November for expression of interest to check for market response.  ACTION: HRWCCG and SRCCG to meet to discuss Whitby.	SC/VP/DN
	It was noted that there was a very tight timeline and due to the local elections in May it wouldn't be the right time to procure.	
8.	Joint Working with NYCC  AB informed the group that a meeting took place with Helen Taylor from North Yorkshire County Council with regards to joint working. The message noted joint working would be excellent if all CCG's including Craven and South Lakes engaged with each other. The ToR's for this group were shared with NYCC and Helen Taylor is supportive of this group and would like to meet the group to discuss joint working in more detail. The idea is to have an additional meeting Bi-Monthly which would operate as an 'Intergrated Commissioning Executive' where NYCC would join the group.	
	<b>ACTION</b> : AB to arrange for Helen Taylor to attend a future meeting and future agenda item	АВ
9.	Voluntary Sector Contracts Following on from an Email from Judith Knapton with regards to the Carers Strategy and Implementation Plan, AB felt that the summary wasn't exactly the information that we asked for.	
	<b>ACTION:</b> Each CCG is required to review the plan on an individual basis and fed back to AB who will be leading on this.	ALL/AB
	SC will be the overall lead on Hospices moving forward with each CCG responsible for the hospices on their own patch and it was agreed that Martin House children hospice will be hosted by SRCCG.	
10.	Any Other Business	
	BW informed the group that he will be attending the NYCC overview and scrutiny committee on Friday 9 <sup>th</sup> November which VP will also be attending and highlighted the possible discussions that may take place.	
11.	Date of Next Meeting Thursday 13 <sup>th</sup> December 2012 09:30 – 12:00	
	Boardroom, Sovereign House, Clifton Moor, York, YO30 4GQ	
<u> </u>	<u>I</u>	1