Minutes of the Executive Committee, meeting held on 15 August 2018 at West Offices, York

Present

Phil Mettam (PM) Accountable Officer

Michelle Carrington (MC) Executive Director of Quality and Nursing

Simon Bell (SB) Chief Finance Officer

Denise Nightingale (DN) Executive Director of Transformation

Dr Kev Smith (KS)

Director of Primary Care and Population Health

In Attendance

Caroline Alexander (CA)

Assistant Director of Delivery and Performance

Jo Baxter Executive Assistant

The agenda was discussed in the following order:

STANDING ITEMS

1. Apologies

There were no apologies to the meeting.

2. Declaration of Interests

There were no Declarations of Members' Interest in relation to the business of the meeting. All declarations were as per the Register of Interests.

3. Minutes from the previous meeting

The minutes of the Executive Committee held on 18 July were approved. The minutes from the 1 August were approved subject to minor amendments at items 8 and 21.

4. Action Tracker/Matters Arising From The Minutes

The Action Tracker was updated by the Committee.

Mental Health Individual Funding Requests: MC provided an update on the outstanding Mental Health Individual Funding Requests whilst work continued to clear the backlog. The committee discussed the urgency of the process review being undertaken. DN to pursue and ensure an update is provided at the next Executive Committee.

North Yorkshire Overview & Scrutiny Committee - Hyper Acute Stroke Services for Harrogate Patients: PM advised that clarification and assurances to questions raised on the new proposal continued to be worked through. The proposal was entering the next phase of planning and a brief summary would be produced for the Governing Body in September.

CORPORATE

5. Adult Autism / ADHD Current Contract Extension and Option for Future Commissioned Activity

DN summarised the paper on the current contract for the North Yorkshire Autism and ADHD Assessment Service provided by The Tuke Centre in York. As recommended by the Vale of York CCG and the North Yorkshire CCG's in September 2017, the initial contract of 2 years had been extended to the 31st December 2018 to allow the CCG's to fully consult, develop a robust specification and undertake a further procurement exercise.

A Prior Information Notice had been issued in February 2018 which had attracted expressions of interest from 4 providers. Discussions followed in June with finance and contract representatives from the CCG's to determine an appropriate cost model which had highlighted the need to fully understand the nature of growing waiting times and the impact of increasing demand on the service. The report provided the outcome of that analysis.

The committee discussed the report and their concerns on the current waiting lists and agreed a different model of delivery was required. It was agreed that an extension to the contract should be requested to allow further work to take place on the new model and options available to clear and stabilise the backlogs. This would include liaising with the North Yorkshire CCG's to ascertain their views and ambitions on the future model for their areas in line with strategic and operational changes.

6. Evaluation of the Second Musculoskeletal (MSK) Shared Decision Making (SDM) pilot

The report provided the results of the second MSK SDM pilot which had made SDM a mandatory exercise for patients requiring hip or knee replacement surgery and placed the appointment at the end of the MSK pathway.

In addition, the report also included the results again from the first pilot where SDM had been trialled early in the MSK pathway however was non-mandatory.

Due to the lack of evidence that the pilots had made a significant impact compared to the approach taken in the original MSK pathway, the committee supported the recommendation to cease the funding of SDM in its present position within the MSK pathway.

Messages to patients throughout the MSK pathway about their treatment options would therefore be retained however it was proposed this would include working with the MSK service to provide assurance that a consistent approach to SDM was maintained by all staff throughout the patient journey. This would be monitored via continuation of the patient qualitative survey undertaken by the Referral Support Service.

7. Statutory and Mandatory Training Policy

The committee approved the minor changes to the policy.

8. Funding Support to Continue the York Mind Counselling Service

The committee noted the request from the Chief Executive of York Mind to explore commissioning or alternative funding options available from the CCG to secure the future of the service.

The committee discussed this in the wider context of financial pressures and were unable to support the request. It was felt the demand into the Improving Access to Psychological Therapies (IAPT) could be improved upon and concerns were also raised that the CCG would not wish to set a precedent for any similar requests received in the future.

Through discussion the committee agreed to review the £80k funding for York Carer's Centre to consider the best use and value for the funding.

9. Unity Health - Contractual issues highlighted in the Care Quality Commission (CQC) report

Unity Health had recently received an inadequate CQC rating and sanctions had been placed upon the practice. KS presented the report which highlighted the

issues raised by the CQC inspectors that were also contractual issues requiring either remedial action or breach notification.

The committee considered the report and agreed a contract breach notice should be issued. The CCG would continue to work with the practice to support the resolution of any outstanding actions.

The committee also agreed to adopt this as a standard approach for any future issues highlighted within a CQC report that placed a provider in breach of the contract.

10. Personal Health Budgets (PHB) – Direct Payment Agreement

The committee approved the Direct Payment Agreement which would improve governance around PHB's.

11. Vale of York CCG Flu Plan

The committee received and noted the requirement of a CCG Flu Plan.

12. Directors Development Programme

The committee reviewed the content available for delegates on the Directors Development Accelerator Programme and agreed any nominations should be considered alongside succession planning discussions.

13. Historic Continuing Health Care (CHC) Funding Queries

A query had been raised regarding historic CHC funding requests/disputes and if a pragmatic approach could be agreed by the committee. The committee discussed the issues and were unable to approve a blanket approach, agreeing that each case should be reviewed on an individual basis. SB would review the current issue with the CHC finance team.

14. Referral Support Service (RSS) Temporary Staffing

Temporary staffing had been requested to support the RSS to cover long term absences within the team. The committee discussed the request and acknowledged the gaps in capacity and the need for additional staff to maintain an on-going

efficient service. Approval to recruit for a permanent Band 3 position was therefore given and a further temporary position was approved to recruit through agency staff.

Staffing Update

The committee approved the backfill of a Band 4 Finance Assistant.

Further information was sought on a job evaluation request within the finance team. SB would take this forward.

BUSINESS CASES AND COMMISSIONING STATEMENTS

15. Pilot Tier 3 Obesity Management Service – Funding for Evaluation

The committee noted the update on the project's progress and approved the evaluation of the service subject to confirmation that the funding was available. SB to investigate and bring back to the Executive Committee

16. Microsuction Commissioning Statement

In accordance with the report, it was agreed that no further work would be carried out on the microsuction commissioning statement.

17. Moving Towards Joint Commissioning with North Yorkshire County Council

KS presented the paper which outlined a new shared Joint Commissioning post with North Yorkshire County Council. The committee were supportive in principle of the joint post however felt that further work was required to ensure the most value was gained from the opportunity.

SB to work on this and provide more clarity to the Executive Committee.

FINANCE AND PERFORMANCE UPDATE

18. Finance Update

SB gave a brief update as a more detailed financial position would be presented to the Finance & Performance Committee on the 23rd August.

The committee noted a deteriorating position and that meetings were taking place to discuss the emerging alignment gap between commissioners and the providers.

ASSURANCE AND RISK

CA joined the meeting

20. Issues of Assurance Framework and/or Risk Register

The risk register from June had been circulated for information. The next Financial Recovery Board would be asked to review and update the risks which would be brought back to the Executive Committee once refreshed.

19. Cancer Alliance Transformation Funding Reduction

The committee were asked to note the first impact to affected projects following the reduction in Cancer Alliance Transformation Funding. CA would be providing feedback on how this would impact locally through the local QIA.

23. Cancer & Maternity Assessment

CA presented the 2017/18 assessment ratings and indicator values for Cancer and Maternity which would be discussed further at the Finance & Performance Committee. CA advised that the Cancer rating had remained the same with no deterioration seen, however the Maternity rating had seen a small deterioration which was thought to be associated with the maternal smoking at delivery rates.

21. Christmas On-Call Planner

The on-call planner would be agreed over the coming weeks for Christmas. Minimum staffing requirements for the holiday period were agreed to ensure each department was covered.

22. September Governing Body

The agenda's for the September Governing Body meetings were approved.

24. Anticoagulation Services

The committee discussed a letter from a local MP requesting further information on changes to Anticoagulation services. A response was being prepared with the involvement of the Head of Commissioning and Delivery.

Next meeting Wednesday 5th September