

NHS Waltham Forest Clinical Commissioning Group Governing Body Part 1 Minutes

Date:	Wednesday 22 July 2015
Time:	2:00pm to 4:00pm
Venue:	Ground Floor Meeting Room, Kirkdale House
Chair:	Anwar Khan, Chairman

Attendees

Members

Name	Initials	Title
Dr Anwar Khan	AK	Chairman
Terry Huff	TH	Chief Officer
Alan Wells OBE	AW	Deputy Chairman
Dr A Q Sheikh	AS	Clinical Director Walthamstow
Dr Syed Ali	SA	Clinical Director Leyton/Leytonstone
Les Borrett	LB	Director of Financial Strategy
Dr Tonia Myers	TM	Clinical Director Chingford
Dr Mayank Shah	MS	Clinical Director Walthamstow
Dr John Samuel	JS	Clinical Director Leyton/Leytonstone
Dr Naheed Khan-Lodhi	NKL	Clinical Director Walthamstow
Helen Davenport	HD	Director of Nursing, Quality & Governance
Dr Rizwan Hasan	RH	Secondary Care Consultant
Jaime Walsh	JW	Healthwatch Manager

In Attendance

Name	Initials	Title
Neil Suttie	NS	Head of Research, Education and Development Projects
Jane Mehta	JM	Director of Strategic Commissioning
Andrew Taylor	AT	Interim Director of Public Health, London Borough of Waltham Forest

Apologies

Name	Initials	Title
Dr Dinesh Kapoor	DK	Clinical Director Leyton/Leytonstone
Linzi Roberts-Egan	LRE	Deputy Chief Executive, London Borough of Waltham Forest

Members of the Public in Attendance

Name	Initials	Title
Brian Steedman		Waltham Forest: Save our NHS

1. General Business

117/15 Apologies and Announcements

Apologies were noted as above. There were no announcements.

118/15 Declarations of Interest

There were no new declarations of interest.

119/15 Draft minutes from June 2015 Governing Body

The minutes of the Governing Body held in June 2015 were agreed as correct. There were no amendments.

120/15 Matters Arising

Owner

Item 102/15 – HD updated the Governing Body on health visitor numbers. Following the Call to Action National Directive, Waltham Forest needed to create an increase in the budget establishment of the Health Visitor whole time equivalent (WTE) from 35.0 WTE in 2011 to 101.1 WTE by 2016. There are currently 17.5 WTE vacancies that are being backfilled by agency staff.

HV is currently commissioned by NHS England but this responsibility transition to the London Borough of Waltham Forest (Public Health lead commissioners) in October 2015 when the NHSE England contract will be novated.

120/15

Chair's Report

AK

AK provided a verbal update on two areas –

Update on Whipps Cross Hospital Improvement Plan

AK informed the Governing Body that following the Care Quality Commission visit and report, Whipps Cross Hospital had been placed in special measures. Since then the CCG had been to three assurance meetings. AK reported that there had been good engagement from Whipps Cross management team and there was evidence the improvement was on a positive trajectory. The new Barts Health Interim Chief Executive Officer had been very receptive to CCG concerns. Further meetings with the CCG, Whipps Cross consultants and directors and London Borough of Waltham Forest in August.

Waltham Forest CCG Annual General Meeting

AK announced that the CCG Annual General Meeting will be held in early September. The CCG would like to encourage a high attendance and for patients, public and members to come along to the event.

121/15

Questions from the Public

AW

Q1a. Can the CCG please give an update on the consultation over the proposed closure of Forest Road Medical Centre, as patients are apparently unaware of any consultation taking place?

A1a. The Primary Care Committee of the CCG have instructed NHS England to request a refreshed business case from Dr Ivbijaro with an engagement plan to consult with patients. There are no agreements on a closure or shift of the practice at this point.

Q1b. If the closure is confirmed, would it conflict with the recently published CCG Urgent Care Strategy with regard to access to GP services?

A1b. Without pre-determining the outcome of the business case referenced above the Primary Care Committee would need to be comfortable that should the relocation of the practice take place access to routine primary care will not be reduced. We believe that the consolidation of the branch surgery's services on the same site will enhance and improve access for the practice patient list over a greater range of times.

2. Governance

122/15 There were no Governance agenda items.

3. Performance and Quality

123/15 Performance and Quality Report (CCG Scorecard)

LB & HD

LB gave an overview of the Performance Report. Of the 22 performance targets 12 were risk rated as low (Green) and 3 risk rated as high (Red). The three high risk areas are;

Cancer GP referral to first treatment within 62 days; in April Waltham Forest CCG met the 85% target, however, provisional data from Barts Health for May shows continued under-performance for both the Trust overall and Whipps Cross Hospital. Barts Health have provided an action plan to improve cancer performance but the WEL CCGs have asked for this to be rewritten to provide additional assurance. The CCG will consider whether to withhold contract payments in the event performance does not improve.

General Practice Friend and Family Test score; the April performance was 80.4% which is below the target figure. This figure is based on 897 responses.

Reduction in cardiology outpatient referrals; a significant proportion of cardiology outpatient referrals to secondary care are from GPs seeking advice on medications and interpretation of diagnostic results. A cardiology consultant advice and guidance email service to GPs has been piloted to support GPs manage some of these patients in primary care, without needing to make a referral. The CCG has marketed and promoted the service to GPs through our locality commissioning meetings. This will be repeated in September/October to continually keep GPs aware of the service.

LB updated on District Nursing waiting times for patients referred by GPs for district nursing services. Month 2 reporting has seen a decline to 72% of referrals from primary care having been responded to within 48 hours. NELFT advised that the main issue has been the reporting of performance, rather than a decline in services. NELFT submitted an action plan, which was reviewed on 9 July 2015 and signed off with NELFT on the same day. If there is no improvement in performance in the next month the CCG will consider issuing a contract breach notice.

LB reported Whipps Cross A&E 4 hour performance in May was 88.5% against a target of 95%. This was an improvement on the previous month. Performance has been steadily improving and was 90.3% for the week ending 28 June 2015. The quarter-to-date performance at this date was just below the planned trajectory agreed with Barts Health, NHS England and

the Trust Development Authority. Whipps Cross is on course to be compliant with 95% from Q3 onwards.

HD gave an overview of the Quality Report. In May 91.1% of patients at Whipps Cross would recommend the hospital to friends or family. This is just below the target for 2015/16, deteriorating from the previous month (93.5%). HD reported the CCG Deputy Director of Integrated Governance will be working with the Patient Experience Lead at Whipps Cross to plan consistency in performance and review how the results are being used to improve the quality of patient care. A review by site indicates that Whipps Cross Hospital site did not achieve either of the required response rates and this is being investigated. A presentation will be requested for the August Clinical Quality Review Meeting.

HD drew attention to Venous Thromboembolism (VTE) Risk Assessment target. HD informed that this is not a national target however, the Trust failed to achieve the required 95% of all patients receiving a VTE risk assessment. The CCG is not assured that the underperformance against the target for the past 12 months is being robustly addressed and no action plans have been provided to date. HD outlined this may have impacted on Barts Health failing to achieve the Safety Thermometer measures in relation to the percentage of harm free care delivered to patients. Bart's Health has a target of 95% and the national average is 94%. Whipps Cross failed to achieve this reporting 85.7% April 2015. This is possibly linked to the failure to undertake the required percentage of VTE risk assessments.

HD reported Whipps Cross Hospital declared one serious incident that met the Never Events Criteria in April 2015. The incident related to a misplaced nasogastric (NG) tube and was in the Emergency Care and Acute Medicine Clinical Academic Group (ECAM CAG). Bart's Health has not routinely completed 72 hour reports which are required in line with the serious incident framework.

Whipps Cross Hospital failed to meet the complaints responded to in 25 working day target of 80%. In April 2015 this was at 42.7% and the target has not been achieved over the past 12 months. Bart's Health has requested an external review of the complaints process and an update will be requested for the August Clinical Quality Review Meeting and will also be discussed with the Trust in the meeting with the Director of Nursing. This will include the GP alert system.

HD outlined the NELFT report shows one patient safety alert that breached its required closure date relating to management defibrillation electrodes for children due for closure on 2 April 2015. Bart's Health report 3 CAS alerts that have breached the required response deadline. These will be addressed in a meeting with the Chief Nurse at Whipps Cross on 29 June.

HD informed that Bart's Health met the statutory 80% for all levels of adult and child safeguarding training and met the contractual 85% for all levels of training with the exception of level 3 for children with 84% attained.

NKL noted there was a high drop in the number of serious incidents (SIs) at Whipps Cross. HD notified there were a number of outstanding SIs that had now come off the list. TH suggested it would be worth having a breakdown of the numbers of SIs. HD agreed this would be supplied at the September Governing Body.

HD

Action HD to provide a breakdown of serious incidents to September Governing Body meeting

The Governing Body **noted** the report.

124/15

Cancer: Early Diagnosis Schemes in Waltham Forest

NKL

NKL gave an overview of Cancer Early Diagnosis Schemes in Waltham Forest. In 2014 the All Party Parliamentary Group on Cancer (APPG) recommended that one year cancer survival rates should be monitored by NHS England from April 2015. Waltham Forest was in the bottom 10 CCGs in England, there has been improvement and the CCG has moved out of the bottom 10. NKL drew attention to the Straight to Test (STT) colorectal diagnostic pathway developed following advances in endoscopy. Rather than patients waiting over 6 weeks for a first outpatient attendance following GP referral and another wait of 12 weeks for the procedure, a nurse telephone triage system is used following referral which allows patients requiring investigation to receive a colonoscopy in 2 to 3 weeks.

NKL informed the CCG conducted an educational session on the Earlier Detection of Cancer in May 2014. Presentations were made by the clinical lead for cancer, Whipps Cross lung and colorectal consultants as well as guest speakers from Cancer Research UK and the Whittington Hospital.

NKL outlined Waltham Forest CCG is working with Barts Health NHS Trust to address the issue of provision of triple assessment for suspected breast cancer on the site. Currently the trust offers a 'virtual' clinic, where patients can get the three elements on the same day but from different locations in the hospital, rather than all being conducted in the same clinic in a single location. The expected date for completion of the single site clinic is Quarter four 2015 /16.

In 2014 Waltham Forest CCG made an application to Macmillan for funding for a Macmillan Cancer GP and a Walthamstow GP was appointed in June 2015. The Macmillan GP will have an important role in the communication of the new 2015 cancer NICE guidelines to primary care.

NKL drew attention to the increasing uptake in bowel screening and informed the Governing Body that the CCG aims to re-launch an enhanced pilot in the summer of 2015.

AT commented that London Borough of Waltham Forest was keen to work with the CCG in this area.

The Governing Body **noted** the report.

HD informed the governing body of the suspension of maternity services at Barts Health Whipps Cross Hospital site on 22 May 2015, the temporary closure of the Lilac Ward and relevant failure of Barts Health to communicate this to the CCG.

HD outlined the CCG's intention to amend the Maternity Services Specification to ensure that the CCG is provided with formal notification when there are any suspension of services and action being taken to resolve the issues related to Lilac Ward.

The Governing Body **noted** the report.

4. Finance and QIPP

126/15 Finance Report

LB gave an overview of the finance report as at the end of June 2015. LB reported that based on the information available to date the CCG is projected to achieve a total surplus of £8.6 million which is the planned surplus for 2015/16 and to manage CCG management costs within the "capped" running cost allowance.

LB summarised the key headlines. Barts Health contract is projecting a small surplus of £0.2 million at year end. Imperial College contract is projecting a £0.2m risk at year end and the CCG are seeking clarification from LBWF regarding the level of financial risk associated with children with a learning disability.

Performance against the delegated primary care budget includes a £0.5 million Quality, Innovation, Productivity and Prevention (QIPP) target with no plans attached to deliver these savings so this is a risk which will need to be managed in year.

AW questioned why there were no plans in place to deliver the savings. LB outlined that part of the delegated primary care budget deal is to build savings into the contracts. The CCG has had to pick this up and there is work required to put this into the QIPP schemes. JM clarified this will be discussed at the Primary Care Committee.

LB reported that the CCG was forecasting 95% delivery of QIPP schemes, although cautioned it was still early in the financial year.

LB drew attention to the Non Recurrent Investment Proposals for 2015/16. Eleven schemes had been approved.

The Governing Body **noted** the report.

5. Strategy and Planning

127/15 Waltham Forest CCG Organisational Development Strategy Refresh July 2015 JM

JM provided an overview of the Waltham Forest CCG Organisational Development Strategy Refresh July 2015. The current Organisational Development Strategy was written in 2013, reflects the development of the CCG in its early days and was designed to enable the CCG to work through a number of areas in order to gain full authorisation. The CCG has achieved that and has evolved to a more developed organisation. The organisational development strategy therefore needs to be refreshed and updated in order to enable the CCG to further strengthen and develop into a high performing commissioning organisation. JM outlined the emerging themes from the information gathering process were; clinical leadership including succession planning; strengthening roles, responsibilities and expectations; building cohesive teams with a strong clinical and multi-professional focus; patient and public engagement; collaboration.

JM drew attention to the CCG's vision and values and particular areas of the strategy including the CCG's approach to development, the key organisational development objectives for 2015/16, strengthening the role of the existing Public and Patient Reference Group (PPRG), the monitoring and evaluation plan and the development plan activities.

JM outlined that the updated strategy was a refresh of the original organisational development plan so should be familiar. JM requested feedback on the general themes of the strategy.

AW commented that there could be more communications to both members and the public.

JW commented that there were positives on patient engagement but could be something on Third Sector involvement. It was worth thinking about training and developing patient representatives.

The Governing Body **approved** the report.

128/15 Draft Clinical Director Job Description and Person Specification JM

This item will be tabled at September 2015 Governing Body meeting.

6. For Information

129/15	Performance and Quality Committee - June 2015	HD
	JW commented that Healthwatch would support an engagement process as part of the Community Participation Strategy.	
130/15	Planning and Innovation Committee – June 2015	JM
	There were no comments	
131/15	Finance and QIPP Committee - June 2015	LB
	There were no comments	
132/15	IT Committee - June 2015	LB
	There were no comments	
133/15	Medicines Management – June 2015	HD
	There were no comments	
134/15	Audit Committee - June 2015	HD
	AW outlined that the auditors gave a clear report for 2014/15.	
135/15	Safety Net Executive – London Borough of Waltham Forest	AT
	AT outlined that a wide range of areas are covered at this meeting and suggested the terms of reference be brought to a future Governing Body meeting. TM suggested a brief summary of the meeting would be useful rather than the minutes.	
136/15	Leyton/Leytonstone Locality Commissioning Meeting – June 2015	JM
	There were no comments	
137/15	Walthamstow Locality Commissioning Meeting – June 2015	JM
	There were no comments	
138/15	Chingford Locality Commissioning Meeting – June 2015	JM
	There were no comments	
139/15	Any Other Business	
	There was no other business, the meeting closed at 2:55pm.	

Signature

Date

Next meeting

Date: 23 September 2015

Time: 2.00-5.00pm

Venue: Boardrooms, Ground floor, Kirkdale House, Leytonstone, E11 1HP
