

Governing Body (Public) Meeting

DATE: 28th February 2013

Title	Bexley CCG Committee Minutes & Summary Sheets and Working Group Summary Sheets as detailed below	
Recommended action for the Governing Body	That the Governing Body: Note the work of the Governing Body's Committees and Sub-Committees.	
Executive Summary	Summary sheets for each Committee and Sub-Committee of the Governing Body are provided to assure the Governing Body of the work being undertaken in its name. The full minutes of each Committee/Sub-Committee are available to members on request, but not included in full as they may contain privileged or sensitive information.	
Which objective does this paper support?	Patients: Improve the health and wellbeing of people in Bexley in partnership with our key stakeholders	✓
	People: Empower our staff to make BCCG the most successful CCG in (south) London	
	Pounds: Delivering on all of our statutory duties and become an effective, efficient and economical organisation	✓
	Process: Commission safe, sustainable and equitable services in line with the operating framework and which improves outcomes and patient experience	✓
Organisational implications	Key Risks <i>(corporate and/or clinical)</i>	If decisions are not taken with due consideration, services could be affected which could have a clinical or financial impact.
	Equality and Diversity	All decisions should be taken with due consideration of any impact on of equality & diversity.
	Patient impact	All decisions should be taken with due consideration of any impact on patient services.

	Financial	All decisions should be taken with due consideration of the associated costs & savings and any impact on the financial position of the CCG.
	Legal Issues	Not applicable
	NHS constitution	All decisions should be taken with due consideration of the CCG's obligations under the NHS constitution.
Consultation (Public, member or other)	Not applicable	
Audit (Considered / Approved by Other Committees / Groups)	The Finance Working Group minutes are presented to the Executive Management Team.	
Communications Plan	Any scheme requiring a communication plan will have one specific to that scheme.	
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Date	18 th March 2013	

Bexley Clinical Commissioning Group
Audit & Integrated Assurance Committee (AIGC) - Report to the Board

The AIGC held an extraordinary meeting on 8th February 2013 the main purpose of which was to consider the implications for Bexley CCG of the Bexley Care Trust (BCT) Transfer Scheme; present Keith Wood (Chair), Sandra Wakeford, Dr Sushanta Bhadra, Dr Graham Rehling.

At the meeting the AIGC:

1. Approved the minutes of the meeting held on 7 December & noted the status of the Action Points arising.
2. Noted the Declarations of Interest; in particular that the Chair was a Non-Executive Director of Bexley Care Trust, that Sandra Wakeford had an indirect interest in BATS and that staff members in attendance were currently employed by BCT but would transfer to Bexley CCG with effect from April 1.
3. Noted the work carried out by BCT staff on behalf of both the sending & receiving organisations; the Committee recorded its particular appreciation of the diligent & professional way in which those concerned had addressed the various tasks.
4. After careful consideration of the risks identified & the assurances received the Committee:
 - Recommends that the Accountable Officer be authorised to sign the Transfer Scheme on behalf of the Governing Body, and that The Governing Body should note the following:
 - The Cluster Finance Team is taking steps to reduce assets and liabilities at 31 March 2013 which will substantially reduce the CCG's exposure to risk.
 - At the time of the meeting there was still the need to finally confirm the identity of the receiving organisation for a small number of items; this needs to be resolved before signature.
 - It is unclear whether the estimated liability for Continuing Healthcare Claims is to be transferred to the CCG; if so, it may represent a material risk for the CCG.
 - There needs to be clarity on the values, if any, at which office and computer equipment will be transferred to the CCG.
 - Non clinical contracts had been the subject of thorough internal review and are not regarded as being material in terms of value or risk; the AIGC relied on assurance from management in respect of this.
 - It is for the Governing Body to decide whether it required any specific further external assurance but the Committee is comfortable with the internal assurance received.
5. Noted a consultative letter to the Chief Officer regarding the appointment of External Auditors & that Theresa Osborne would be drafting a reply.

Executive Team Committee Meeting Summary 21 February 2013

The Executive Team Committee met on 21 February 2013 the minutes are attached please note the main actions points/discussion:

- Integrated Care for Older People – Contractual Model in detail and considered the process for the risk pool arrangements. Members stressed the need to ensure new pathways of care implemented as planned.
- Update on Neuro-Rehabilitation Services – Provider (full discussion referred for another meeting). South London Healthcare Trust (SLHT) to be advised of additional 3 month extension to current services – further proposals to be submitted to next EMC meeting.
- Board Agendas & Papers 28.02.13 (Public & Private) discussed and amended.
- Operating Plan 2013 – Plan on Page/Unify – comments from National Commissioning Board meeting regarding Bexley Commissioning Intentions documentation to be shared with Governing Body 28.02.13 and Plan on Page circulated to CCG membership and staff.
- QIPP Assurance – meeting acknowledged that further work required on the 2013/14 QIPP schemes to ensure correct RAG rating agreed so that an accurate update on the assurance process can be given to the Governing Body.
- Update on additional costs for Transformation & Other 2013/14 investments – the EMC discussed and noted the additional resource received non-recurrently in 2012/13 and the areas agreed for additional investment in current financial year and the movement in the financial position from month 9 to month 10 and the possible impact on the additional resources received.
- Information Governance Update – the meeting noted the 96% staff mandatory training achievement.
- Transition/Authorisation Update – meeting acknowledged BCCG achievement in receiving three reds in the authorisation process at the current time had been due to hard work from staff. Final authorisation outcome announced 6/7 March 2013
- CSU Update – discussions included historical, current and future acute performance reporting and the need for integrated work going forward between the two organisations and with acute trust. 2013/14 SLHT contract negotiations on going and meeting agreed the need to reach agreement without arbitration. Concerns raised regarding the National Commissioning Board and future Specialist Commissioning
- Trust Special Administrator (TSA) Update – meeting noted that the QMS site would not be included in the Judicial Review and the site would transfer to Oxleas from 1 July 2013.
- Emergency Prevention, Preparedness and Response – confirmed BCCG was now a 2nd level responder (local surge response across SELDN) and would support 1st level responder as required.
- Medicine Management Working Group Minutes 9.0.13/Finance Working Group Minutes 5.02.13 noted.
- AOB – more Locality finance training arranged/PMC contact extension.

Finance Working group 5th February 2013 Summary

The following are the main action points from the Finance Working Group meeting on 5th February 2013

- Members discussed and agreed the Terms of Reference for the group following recommendations from the Trust Auditors.
- The members received a verbal update on the Month 9 Finance Report.
- The members received an update on QIPP performance at month 9. The challenge for 2013/14 was also detailed.
- Members considered an ideas generation template for additional non-recurrent funding of £250k in 2012/13 for Community Equipment to support early discharge and the Elderly; to assist in the implementation of the TSA recommendations and the Integrated care project. The proposal was supported subject to assurance on the process for issuing & recycling and receipt of audits.
- Members considered a proposal for funding for the purchase of Blood Pressure Monitors for GP practices to reduce referrals to acute providers and as part of the on-going review of cardiology services for GPs to provide 24 hour blood pressure monitoring and ECGs within their own practices. The proposal was approved.
- Members considered Additional Costs for Transformation & other 12/13 investments from N/R funding received, previously approved by the executive team. The members noted the spend and the areas still under consideration.
- Financial Planning – summary slides were circulated on the draft financial planning submitted to the Department of Health. A verbal update was given to the members pending a full paper to be presented to the Governing Body on 28th February 2013.
- A paper on the Rag rating of the 2013/14 QIPP schemes was presented. This process helps ensure appropriate governance around the organisation's RAG rating of QIPP schemes.
- A paper asking for a 120 day extension of the Patient Management Centre contract was considered, pending completion of the service review. Members approved the extension subject to negotiation of additional KPIs / monitoring mechanisms and a reduction in the contract price.
- The members received a verbal update on the progress on the Cardiology Scheme. Members raised concerns that communication with stakeholders needs to be robust.
- Members received an update on the changes to provision of the diabetes service.
- Members discussed the LMC's comments on the Care Homes LES. FWG members felt that it was appropriate to include CQUIN and that consequently the LES should be referred to the Governing body for a decision. This would also take account of the fact that this scheme related to payments to GPs.

Quality and Safety Working Group (Q&SWG) - Report to the Board

The Q&SWG meeting was held on 21st February 2013 to review Quality and Safety agenda items ; Chair and GP lead for Quality Dr Sarah Chase.

At the meeting the Q&SWG:

1. There were no conflicts of interest declared.
2. Approved the minutes of the meeting held on 15 November 2012 & noted the status of the Action Log.
3. Noted the action log item on Savoy Transport – there has been a marked improvement in the service as shown by LINKs satisfaction survey, the only problems reported were the lengthy waiting times to take patients home. Reported it was due for reprocurement as contract ends November 2013.
4. Reviewed the Q&SWG Terms of Reference - now to go to EMC.
5. Noted the Francis Report – DoH Guidance (Gateway ref: 18732) - this was discussed with all members asked to read to understand the implications of the report.
6. Noted the quality aspects of the Diabetes LES which were agreed.
7. Received the Patient Insight and Experience Update/Q3 Report. This included issues around the length of time that providers are taking to respond to complaints, namely SLHT. PALS had received two complaints in the week for QEH A&E and one for QEH Children's A&E. A GP alert also highlighted a near miss where a patient at QEH was taking 2 similar drugs at the same time with the GP unaware. This had been raised as a serious incident with the SLHT medical director. Further cases were discussed. There was agreement to collate hard and soft intelligence and share with other CCGs in light of increasing QEH concerns and raise at SLHT Quality Review Group.
8. DVH - Noted that indicators have improved from the previous year.
9. Oxleas Mental Health - Noted issues around Care planning, poor information on short term detainments and issues of lack of recording on RiO.
10. SI process - Noted the Pan BBG Serious Incident Evaluation Panel (SIEP) has been established as sub group of the Quality groups for each of the Bromley, Bexley and Greenwich CCGs. Representation from each CCG. SI reports for BBG were starting to be produced.
11. Noted issues around Cross Border Services for Children.
12. Noted the outcome of a serious case review
13. Noted the improvement plan for neo-natal screening and cervical care SI update.
14. Received the Imms and Vacs policy and agreed this needed further work.
15. Noted the NICE Guidance TB audit.

Information Governance Working Group Minutes Summary

December 2012

- Discussions held with internal auditors confirmed that only a baseline level 1 is expected for the 2012-13 CCG IG toolkit. However a development plan demonstrating the work required to reach a level 2 during 2013-14 will also be required to show the work that the CCG intends to take place to enable a future level 2 submission.
- An IG assurance report was developed to support the CCG authorisation domain 4.3.3. This was circulated to the IGWG for information.
- IG mandatory training figures were at 82% in December 2012 and a staff awareness campaign was launched via comms to ensure all staff were fully aware of the requirement to complete it.
- The archiving review of off-site storage still progressing and on track to be complete by the end of March
- Information Asset Register and Information Flows work fully underway with discussions taking place with each department to capture all CCG information assets and flows.
- Records Management communications launch took place making staff aware of their responsibilities with respect to the transitional records management activities prior to the Care Trust ceasing.
- The new CCG O: Drive was discussed which will supersede the Care Trust's P: Drive for any data relating to business going forwards under the CCG.

January 2013

- IG mandatory training figures risen to 86% in January 2012. Staff reminders via emails and Directors to capture those that haven't completed.
- A draft IG development plan circulated to IGWG for work required to meet both level 1 and level 2 requirements.
- A number of draft policies and plans were presented to the IGWG including the Security Framework, the Business Continuity Plan, Pseudonymisation Plan, Caldicott Plan, Data Protection Plan, FOI Policy, Password Policy and Confidentiality Leaflet
- Concerns raised regarding only 2 Practices having completed their IGT as at the end of January 2012. All practices need to complete and submit their IGTs at the end of March to maintain their N3 connections. SIRO to contact to address this with the cluster who maintains IG responsibility for independent contractors.

February 2013

- Several IG Policies were reviewed and approved as follows:

Data Quality Strategy
Pseudonymisation Project Plan

ICT Security Policy
Network Security Policy
IG Framework
IG TOR
IG Policy
Data Protection Policy
Disaster Recovery policy
Records Management Strategy and Lifecycle policy
FOI Policy
IG Communications Plan

- Mandatory IG training figures had dropped to 94% due to the number of new starters – this is being picked up with line managers to ensure that new staff complete their IG training or provide IG certificates from previous NHS organisations urgently
- A draft guidance document developed regarding the on-going retention of electronic data and management of emails going forwards. This will be circulated to all staff once finalised and approved
- Records Management Transition Activities proceeding well with all staff supporting the requirements to review and delete files no longer fit for purpose. On-going monitoring taking place through the IAAs.
- A draft CCG Information Sharing Agreement has been developed to cover the sharing of CCG information across organisations. This is currently going through the review stage and once final amendments are completed and approval given, it will be shared with partner organisations to sign upto.

Letter sent to all Practices by CCG SIRO encouraging them to complete their online IGT submission as failure to do so could result in their N3 connection being jeopardised. As at the end of February 2013, 8 practices were still yet to complete and submit their IGT.

Medicines Management Working Group Minutes 6th February 2013

The following are items discussed at the Medicines Management Working Group on 6th February 2013:

- Innovation Health and Wealth related to NICE guidance implementation and formularies was discussed and the information to be added to public website agreed
- A 7-day prescription and compliance aids guidance for Bexley was approved
- Cardiology Formulary Joint formulary Chapter with SLHT was approved
- Ciclosporin shared care agreement is being produced with SLHT and Bromley and Greenwich CCGs
- Prescribing budget methodology was discussed further