



# PLANNING AND COMMISSIONING COMMITTEE CHAIR'S ANNUAL REPORT 1 APRIL 2017 TO 31 MARCH 2018

#### 1. Introduction

- 1.1 The purpose of this report is to update Board members regarding the work programme undertaken by the NHS Hull CCG Planning and Commissioning Committee and to provide details of how it has, with due regard to its terms of reference, ensured that the planning, commissioning and procurement of commissioning-related business is in line with the Clinical Commissioning Group (CCG) organisational objectives supporting the promotion and delivery of high quality, safe services that deliver the outcomes expected by the local population.
- 1.2 This report covers the work of the NHS Hull CCG Planning and Commissioning Committee from April 2017 to March 2018.
- 1.3 The NHS Hull CCG Planning and Commissioning Committee was established in April 2015 as a formal sub-committee of the CCG Board. For the purposes of this report the term Committee will be used when referring to the NHS Hull CCG Planning and Commissioning Committee.

# 2. Membership and Role of the Planning and Commissioning Committee

- 2.1 The Members, their respective roles and attendance at the Committee are provided in Figure 1.
- 2.2 In May 2017 the role of Chair formally transferred to Dr. Vince Rawcliffe as Dr. John Parker stepped down. The contribution that Dr. Parker had made whilst Chair was acknowledged. Mr. Paul Jackson continued serving as the Vice-chair.
- 2.3 11 out of 12 meetings have been quorate and, in the main, core members have consistently attended. Members are required to attend 9 out of the 12 meetings (75%) scheduled on an annual basis.
- 2.4 The named representative from the Clinical Quality and Governance Team changed during the year which helped deliver improved access and participation in the Committee. This has been appreciated by the wider Committee membership, as well as strengthening links with the Quality and Performance Committee.

First			No of Meetings Attended (out of a	% of Meetings
Name	Surname	Role	possible 11)	Attended
Vince	Rawcliffe	GP Member (Chair)	10	91
Raghu	Raghunath	GP Member	8	73
Amy	Oehring	GP Member	5/5	100
Paul	Jackson	Lay Member (Vice Chair)	8	73
Erica	Daley	Director of Integrated Commissioning	11	100
Karen	Billany or Deputy	Head of Acute Care	8	73
Philip	Davis or Deputy	Head of Primary Care	8	73
Bernie	Dawson or Deputy	Head of Children, Young People and Maternity	8	73
Joy	Dodson	Deputy Chief Finance Officer, Contracts, Performance, Procurement and Programme Delivery	9	82
Karen	Ellis *	Deputy Director of Commissioning	6	55
Tim	Fielding or Deputy	City Manager Adult Social Care/Public Health Commissioning – or deputy	8	73
Sue	Lee	Patient Experience and Engagement	7	64
Danny	Storr	Deputy Chief Finance Officer, Finance	9	64
Melanie	Bradbury or Deputy	Head of Mental Health and Vulnerable People – or deputy	10	91
Mark	Whitaker	Practice Manager Representative	5/9	56

# \* The Chair agreed for the Deputy Director of Commissioning to be absent for meetings on the request of the Director of Integrated Commissioning

2.5 The remit of the Committee has remained largely unchanged throughout the whole of this period. As part of the CCG's annual audit process the Terms of Reference were reviewed at the start of the 2017/18 year. This resulted in minimal changes relating to role titles due to the organisational restructure, in general the Terms of Reference were deemed fit for purpose. This assessment was supported at the Integrated Audit and Governance Committee.

Governance and quality are integrated within the strategic and service development that the Committee delivers reflecting the Committee's core value that quality and governance are central to everything the Committee undertakes.

2.6 A core part of the Committees role is to review, comment upon and note the final versions of the CCGs annual Operating Plan and Finance Plan prior to formal consideration at the CCG Board, as well as other strategies, service implementation plans and service specifications to demonstrate and explain how the CCG exercises its functions with a view to securing improvement in the quality of services and outcome for patients, together with a supporting financial plan.

As part of this review the Committee considers:

- The equality and diversity impact assessments
- The level of involvement and engagement of patients and the public in the development of proposals (co-production) which have a significant impact on service delivery or the range of health services offered, specifically the Hull Integrated Care Centre
- Quality improvements / impacts
- Financial prioritisation
- Deliverability

The Committee also ensured that there are effective key performance indicators (KPIs) in those plans / specifications so that agreed outcomes can be monitored and measured, especially those that relate to Quality, Innovation, Productivity and Prevention (QIPP) benefits.

The Committee monitors the delivery of the annual plan and medium term strategy through updates on the transformational programmes being delivered across the CCG in order to ensure that they are enacted in a timely and effective way.

- 2.7 The Committee reviewed, and was assured on the delivery of, the Communications and Engagement Delivery Plan during the year. Assurance was also received regarding how the plan supported the commissioning process ensuring that patients and the public informed and shaped our commissioning decisions.
- 2.8 The Committee has two agreed sub Panels, as follows:
  - Procurement Panel

This panel convenes monthly and provides detailed assessment and monitoring of all the CCG's potential and actual procurements. In addition the Panel provides expert advice on potential procurement / commissioning methodology for service redesign proposals. Monthly updates are provided to the Committee to enable members to maintain a strategic oversight of the procurements

#### Prioritisation Panel

This Panel is convened when there are business proposals to consider with regard to supporting the ongoing development / management of the medium term financial plan. The Panel reviews the proposals and recommends to the Committee whether the proposal is aligned with the CCG's strategic plans and the Committee makes the final decision whether the business proposal should continue to be progressed. The Committee received and approved a revised Procurement Framework in February 2018.

#### 3. System Development

- 3.1 The Committee has a central role in supporting the overall development of the health and care system at a local Hull place basis as well as within wider systems across both Hull and the East Riding and the Sustainability and Transformation Partnership (STP).
- 3.2 In delivering this the Committee has supported the ongoing development of the Pathway Information Portal as an accessible source of information on the CCGs policies, best practice, etc. Enabling Practitioners and Practices to easily source key documents relating to their daily decision making
- 3.3 In line with the CCG's developing agenda around Integrated Commissioning with Hull City Council the Committee commenced receiving regular updates around the progress being made to integrate across the two organisations with a specific focus on the revised Better Care Plan which increased the level of financial integrated and integrated working.
- 3.4 In addition the Committee receives reports relating to wider system peer review activity. These peer reviews are vital to enable the CCG to increase its understanding of commissioned services where national guidelines and specifications exist including an overview of the quality of the service provision. The Committee identifies from the report any commissioning actions that are required and ensures that these actions are delivered; it also oversees the delivery of Trust specific actions via regular updates. The Quality and Performance Committee oversee the delivery of quality related actions.

In June 2017 the Committee received a report relating to the Sentinel Stroke National Audit Programme (SSNAP) Peer Review visit which identified a number of areas for improvement. Updates were received in December 2017 regarding delivery against the actions.

3.5 Committee members were involved in wider commissioning work across the STP with the CCG taking a lead around the alignment of value for money policies across the six involved CCGs. The Committee at the end of the process approved 22 aligned policies.

The Committee supported the Local Maternity System Transformation Plan which set out improvement plans to deliver the Better Births national policy across the STP.

3.5 The Committee has a role in assuring that the CCG is prepared to respond to system resilience incidents. The CCG self-assesses every year against a national framework for Emergency Preparedness, Response and Resilience. This self-evaluation and actin plan was considered by the Committee in October 2017 and the self-evaluation of substantial compliance supported.

Throughout the year the Committee receives lessons learnt documents from local and national incidents to review any local requirements for action. Lessons learnt documents considered included:

- Leeds Teaching Hospitals NHS Trust Pathology IT Incident
- Northern Lincolnshire and Goole NHs Foundation Trust Cyber Attack

#### 4. Committee Decisions

- 4.1 Throughout the year the Committee considered a range of plans, pathways and specifications that have been developed as part of the delivery of the CCG's strategic direction or which impact upon the delivery of the CCG's strategic direction. The policies support the CCG to fulfill its duties under the Secretary of State Directions for Health and are published on the CCG website. A number of the considered policies required revisions or further clarification was sought. Occasionally some were not approved.
- 4.2 Items where the Committee gave approval are as follows:

#### Medicines Management / Optimisaton

The Committee approved the Medicine Management Work Plan for 2017 / 18 and the prescribing indicators for inclusion in the extended medicine management scheme in April 2017. In March 2018 the CCG Medicines Optimisation work plan and the extended medicines management scheme prescribing indicators were agreed for 2018/19.

The work plan details the areas of prescribing where improvements can be made in quality and where savings can be achieved through improved cost effectiveness.

In addition specific items were approved including:

- Guidelines for the prescribing of stoma care appliances in Primary Care
- Drug Policy Flash Glucose Monitoring Systems
- The prescribing for patients with heart failure with reduced ejection fraction primary care communication

The Committee reviewed and agreed some Primary Care Rebate offers relating to prescribing. The Committee approved the following schemes following confirmation that the schemes were not designed to change prescribing practice:

- Boehringer Ingelheim for Tiotropium & Olodaterol Respimat (Spiolto)
- Sandoz Limited for Mezolar Matrix (Fentanyl) Pain Patch

# Guidance of Referral Criteria for Specialised Augmentative and Alternative Communication (AAC) Aids

#### Community Pharmacy Initiatives

A review of the enhanced services commissioned from Community Pharmacies was received. The Committee approved that the following services should continue to be commissioned for a further 3 years:

- Domiciliary Charts
- Medicines Management Support
- Minor Ailments Scheme
- Pharmacy Urgent Repeat Medication Service (PURMS)
- Point of Dispensing Counselling ad Interventions Scheme

- Palliative Care Drugs Stock
- Tuberculosis Directly Observed Therapy

# **Emotional Vulnerability Hub Specification**

The Committee had in January 2017 requested that the initial proposal be adapted. In May 2017 the final specification was approved. The service was formally launched a few months later.

# Safeguarding Children and Adults Service Specification

Both the CCG, as a Commissioner, and City Health Care Partnership, as a provider, are under a statutory duty to take account of the need to safeguard and promote the welfare of the most vulnerable members of our population. The Committee has a central role in this by ensuring that all plans, specifications, etc. take due note of safeguarding principles, have effective processes, procedures and communications in place. This specification was a revision of the existing specification for the safeguarding service taking note of changes with specific reference to training of staff, revised child protection case conference processes.

## Complex Psychological Intervention Service

The Committee approved a plan and specification to increase the level of specialist resources to manage individuals' with severe complex personality disorder. This included seeking to reduce the number of out of area placements with a focus on keeping our patients within their home locality.

## Specialist Palliative Care and End of Life Strategy

The Committee approved the strategy in September 2017, subject to further work being undertaken to strengthen the integrated focus and work plan for the City as opposed to the wider work across Hull and the East Riding. A revised strategy was received in February 2018 with strengthens sections around the integration of commissioning and services around end of life care across the city. The Committee approved the revised version.

The specification for the end of life care Macmillan GP facilitators was also approved.

The Committee received updates concerning the plans to develop and deliver a sustainable funding model for Hospice based services. The final proposal was approved by the C0mmittee in March 2018.

#### Care Homes Multi-Disciplinary Team Pilot

The Committee agreed that a pilot should be run across 4 practices:

- New Hall Surgery
- Faith House Surgery
- Newland Group Practice
- Field View Surgery

The pilot was based upon the NHS England Enhanced Health in Care Homes Framework.

# Community Integrated Chronic Obstructive Pulmonary Disease (COPD) Service

Work has occurred across Hull and the East Riding to develop an integrated service. Concerns were raised regarding the potential for the workload to be transferred to Primary Care. The specification was approved with the caveat that the specification needed to be enhanced to ensure that there was no demand drift into Primary Care.

### Children's and Young People's Services

Redevelopment and improvement of the service offer to children and young people across the city was a central theme to the work of the Committee through the year.

The Committee approved the following initiatives / specifications:

- Down's Syndrome Pathway
- Community Paediatric Medical Service Specification
- Children's Community Nursing Service Specification
- Looked after Children Community Health Service

In addition following a joint inspection of the health and care services for Children with Special Educational Needs and Disabilities (SEND) which raised a number of improvement areas; which for the CCG included improving the Speech and Language service offer and the Autism diagnosis and management pathway. The Committee considered and noted the report and supported the Written Statement of Action.

3.3 Items where the Committee did not give approval are as follows:

#### Linking Health Optimisation to Planned Surgical Intervention

Following due consideration of the proposals around introducing a period of health optimisation into planned surgical pathways the Committee did not approve the introduction of a formal period of health optimization, the committee did endorse the ongoing system programmes designed to improve lifestyle and deliver health improvements as a routine with all individuals.

3.4 Areas where the Committee received and considered reports / briefings include:

#### IMT Strategy and Approach

The Committee received a presentation which briefed it on the progress being made against the Local Digital Roadmap and the universal capabilities identified to support the transition to paperless working.

#### Public Health Work Plan

The public health work plan amendments that directly integrate with the commissioning work of the CCG came before the committee and were duly noted. Regular updates against the work plan were received throughout the year.

#### Programme Highlight Reports

A regular feature on the agenda is the programme highlight reports and updates, by exception, giving Committee members the chance to understand and input into the wider work programmes

### Research and Development

The Committee has continued to maintain an oversight of research and development activity, which is formally coordinated via the Research and Development (R&D) Steering group which ensures that the CCG promotes opportunities for high quality and relevant research.

The Committee received a report from the Research and Development Manager on the NHS Hull funded studies in May 2017 and in July 2017. The Committee referred the recommendations to the Research and Development Steering Group for review / enactment.

The Committee has approved Excess Treatment Costs in relation to NIHR Heath Technology Assessment HERO Trial Study.

#### 6. Summary

The Planning and Commissioning Committee can confirm from evidence provided throughout the year in terms of minutes and delivered service / system change and through this annual report that the CCG Board can be assured of the planning, procurement and commissioning of commissioning related business is in line with the CCG organisational objectives, the CCG Commissioning Strategy and 2017-19 operating plan.

The Committee continues to be the "engine room" of the CCG governance structure, with an agreed and regularly updated work-plan that ensures continuous improvements in the quality of services for patients and related outcomes especially with regard to clinical effectiveness, safety and patient experience.

Vince Rawcliffe Chair

Planning and Commissioning Committee

June 2018