

PLANNING AND COMMISSIONING COMMITTEE

**MINUTES OF THE MEETING HELD ON FRIDAY 3 AUGUST 2018
THE BOARD ROOM, WILBERFORCE COURT**

PRESENT:

V Rawcliffe, GP, NHS Hull CCG (Clinical Member) Chair
 K Billany, NHS Hull CCG, (Head of Acute Care)
 B Dawson, NHS Hull CCG, (Head of Children, Young People & Maternity)
 J Dodson, NHS Hull CCG, (Deputy Chief Finance Officer)
 K Ellis, NHS Hull CCG, (Deputy Director of Commissioning)
 P Jackson, NHS Hull CCG (Lay Member) Vice Chair
 S Lee, NHS Hull CCG, (Associate Director, Communications and Engagement)
 K Martin, NHS Hull CCG, (Dep Director of Quality and Clinical Governance / Lead Nurse)
 A Oehring, NHS Hull CCG, (Clinical Member)
 D Storr, NHS Hull CCG (Deputy Chief Finance Officer)

IN ATTENDANCE:

D Robinson, NHS Hull CCG (PA - Minute Taker)
 K McCorry, North of England Commissioning Support (Senior Pharmacist)

1. APOLOGIES FOR ABSENCE

M Bradbury, NHS Hull CCG, (Head of Vulnerable People Commissioning)
 E Daley, NHS Hull CCG (Director of Integrated Commissioning)
 P Davis, NHS Hull CCG, (Head of Primary Care)
 R Raghunath, NHS Hull CCG, (Clinical Member)
 T Fielding, Hull City Council, (City Manager, Health and Wellbeing)
 M Whitaker, NHS Hull CCG, (Practice Manager Representative)

2. MINUTES OF THE PREVIOUS MEETING HELD ON 6 JULY 2018

The minutes of the meeting held on 6 July 2018 were submitted for approval.

Resolved

(a)	The minutes of the meeting held on 6 July 2018 to be taken as a true and accurate record and signed by the Chair.
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3. MATTERS ARISING FROM THE MEETING

The Action List from the meeting held on 6 July 2018 was provided for information, there were no updates.

Resolved

(a)	Committee Members noted the Action List.
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4. NOTIFICATION OF ANY OTHER BUSINESS

Any proposed item to be taken under Any Other Business must be raised and, subsequently approved, at least 24 hours in advance of the meeting by the Chair.

It was stated that a prescribing issue in relation to Norethisterone would be discussed at agenda item 10.1.

Resolved

(a)	That a prescribing issue in relation to Norethisterone would be discussed at agenda item 10.1.
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5. GOVERNANCE

5.1 DECLARATIONS OF INTEREST

In relation to any item on the agenda of the meeting members were reminded of the need to declare:

- (i) any interests which are relevant or material to the CCG;
- (ii) any changes in interest previously declared; or
- (iii) any pecuniary interest (direct or indirect) on any item on the agenda.

Any declaration of interest should be brought to the attention of the Chair in advance of the meeting or as soon as they become apparent in the meeting. For any interest declared the minutes of the meeting must record:

- (i) the name of the person declaring the interest;
- (ii) the agenda number to which the interest relates;
- (iii) the nature of the interest which the Action taken
- (iv) be declared under this section which at the top of the agenda item which it relates to;

There were no declarations of interest declared.

Name	Agenda No	Nature of Interest / Action Taken
Dr A Oehring	7.1	Declared a Financial Interest as GP Partner at Sutton Manor
Dr V Rawcliffe	7.1	Declared a Financial Interest as GP Partner at Newhall Surgery
S Lee	7.1	Declared a Personal Interest as family member works at relate.

Resolved

(a)	The Planning and Commissioning Committee noted the declarations of interest declared. It was noted that participation in the discussion would be permitted.
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5.2 GIFTS AND HOSPITALITY

The Gifts and Hospitality Declarations made since the July 2018 Committee were provided for information.

Resolved

(a)	Planning and Commissioning Committee Members noted there were no gifts and hospitality declared.
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5.3 R&D EXCESS TREATMENT COSTS - MIDFUT STUDY

The Deputy Director of Commissioning provided a report providing an overview of the National Institute for Health Research (NIHR) Health Technology Assessment Programme Multiple Interventions for Diabetic Foot Ulcer Treatment (MIDFUT) research study in which Hull and East Yorkshire Hospitals NHS Trust was planning to participate.

Clarification was sought on the process of the R & D Excess Treatment cost protocol, it was noted that all excess treatment costs were imposed on Clinical Commissioning Groups and were conveyed at the Planning and Commissioning Committee for retrospective approval.

It was agreed to review the process to ascertain if there was a more proactive way of approving funding the cost which would be brought to the September 2018 Committee for approval.

Resolved

(a)	Planning and Commissioning Committee Members considered the outcome of the NHS England consultation on research in the NHS.
(b)	Planning and Commissioning Committee approved the funding for the identified excess treatment costs.
(c)	Planning and Commissioning Committee requested the protocol for approving R & D excess treatment costs be reviewed.

6. STRATEGY

6.1 PUBLIC HEALTH WORK PLAN

There was no Public Health work plan update provided.

6.2 CLINICAL COMMISSIONING DRUG POLICIES (STANDING ITEM)

There were no policies to discuss.

6.3 HULL & EAST RIDING PRESCRIBING COMMITTEE (HERPC) SUMMARY OF NEW DRUGS OR CHANGES IN USAGE APPLICATIONS AND TRAFFIC LIGHT STATUS

The Medicines Optimisation Pharmacist provided an update on recent new drugs or changes in usage applications and traffic light status.

Flunarizine – Red

Plenvu – Red (bowel screening to perform audit on 200 patients to assess product performance before switching)

Linagliptin – Green

Resolved

(a)	Members of the Planning and Commissioning Committee noted the update.
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6.4 NICE MEDICINES UPDATE (STANDING ITEM)

The Medicines Optimisation Pharmacist provided an update on the National Institute for Health and Care Excellence (NICE) Medicine update report to the Committee for information purposes, which in particular, attention was drawn to:

Guselkumab for treating moderate to severe plaque psoriasis - Commissioner: CCG, NICE expected this to be cost neutral.

Dementia: assessment, management and support for people living with dementia and their carers - Commissioner: CCG & LA, NICE suggested assessing costs locally.

Hearing loss in adults: assessment and management - Commissioner: CCG, NICE stated this would be high cost.

It was stated the Interventional Procedures Guidance (IPG) circulated were in relation to secondary care.

All costs identified within the implications of Technology Appraisal Guidance (TA) were reviewed in-depth through the NHS Hull CCG Quality Forum and Provider Process to ensure the systems were being adhered to.

Clinical Commissioning Groups had the option not to commission/implement the recommendation provided via National Institute for Health and Care Excellence (NICE) guidelines however challenges may arise.

Resolved

(a)	Members of the Planning and Commissioning Committee noted the update.
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6.5 PROGRAMME HIGHLIGHT REPORTS BY EXCEPTION

Vulnerable People & L&D

- There were no exceptions to report.

Acute Care

- There were no exceptions to report.

New Models of Care

- There were no exceptions to report.

Medicines Management

- Points of Prescribing were not operational in one practice across the city, it was stated that there could be a cost to rectify the IT issue. A meeting had been arranged with Embed to further discuss.

Children Young People and Maternity (CYPM)

- The requirements to address the waiting list and service remodelling for paediatric Speech and Language service was slow, potentially due to annual leave of key Humber staff. We were awaiting refreshed waiting time trajectory and to agree the mechanisms for the additional non-recurrent funding. This had been escalated at the Executive Meetings. The potential to apply

contractual levers would be considered if progress was not made within the next month.

- Paediatric Consultant workforce (Community and Acute). Paediatric Medical service (CHCP) had notified the NHS Hull CCG of staff pressures due to two consultants leaving at the end of September 2018 and historic difficulties in recruitment and retention. Hull and East Yorkshire Hospitals had reported challenges in meeting the demand for children with neurodisability. NHS Hull CCG was working with both services to fully understand the impact and agree solutions, including review of clinical pathways and joint working arrangements.

Resolved

(a)	Members of the Planning and Commissioning Committee noted the updates.
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6.6 INTEGRATED COMMISSIONING UPDATE

The Deputy Chief Finance Officer provided a verbal update to the Committee on Integrated Commissioning.

The governance of the Committees in Common meetings were being aligned along with the Terms of Reference (ToR), it was stated that there was a complex governance pathway with a wider role to encompass the statutory responsibilities.

A large amount of positive work had been undertaken within the joint working of NHS Hull CCG and Hull City Council with meetings being well attended, particularly the Joint Commissioning Forum.

Resolved

(a)	Members of the Planning and Commissioning Committee noted the update.
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6.7 UNPLANNED CARE – A & E DELIVERY BOARD

The Deputy Director of Commissioning updated the Committee that the attendance at Accident and Emergency had reduced to approximately 360/80 a day during July 2018 although the target was not being achieved.

It was acknowledged that the issue lies with 'Majors' as there were not the relevant number of Senior House Officer's (SHO) and Registrars.

There were 5 areas which the A & E Delivery Board were working on, one being "Management of stranded and super-stranded patients" with the majority of these being in Surgery.

There was an issue in recruiting GPs to work within the A & E Department, it was suggested that a careers navigation system be implemented to ensure the correct service was being used with Primary Care being "put out" for procurement.

Work on Winter 2018/19 had commenced in terms of performance.

Attendance at the Bransholme Health Centre had increased.

Resolved

(a)	Members of the Planning and Commissioning Committee noted the update provided.
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6.8 ADULT COMMUNITY EATING DISORDERS SERVICE SPECIFICATION

It was agreed to adjourn this agenda item until the September 2018 Committee.

7. SYSTEM DEVELOPMENT AND IMPLEMENTATION

7.1 PROCUREMENT UPDATE

Dr A Oehring and Dr V Rawcliffe declared a financial interest due to being GP Partners. S Lee declared a personal interest.

Dr A Oehring and Dr V Rawcliffe left the meeting.

The Deputy Chief Finance Officer provided an update to the Committee on the procurement activity taking place currently in NHS Hull CCG.

The following key procurement activity had taken place:

- The procurement for Extended Access to Primary Care had now closed with evaluation complete; the contract had been awarded and was now in the mandatory stand still period.
- The procurement of an APMS practice for Calvert and Newington was progressing with tender documents being finalised ready for publication.
- Re-procurement of the Eating Disorders service for Adults was being prepared with an anticipated publication date of the Invitation to Tender during August 2018.

Dr A Oehring and Dr V Rawcliffe re-entered the meeting after the above discussion.

A wide and varied conversation had taken place in relation to Depression and Anxiety Service, concern was raised in relation to the service which was being provided at present and it was proposed to have a table top discussion without the presence of the current lead provider at the Council of Members meeting in September 2018 to ascertain if to extend and modify the current service or re-procure the service.

It was agreed that engagement was required, the Council of Members meeting was part of this but wider public, stakeholder and clinical engagement would also be undertaken.

A specific issue was raised by Dr Oehring, it was noted that all patient complaints and concerns in relation to the Depression and Anxiety Service should be escalated to the CCG Patient Advice Liaison Service (PALS) copying in the Commissioning Manager.

Resolved

(a)	Members of the Planning and Commissioning Committee considered and noted the contents of the report.
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(b)	Depression and Anxiety Service table top exercise to be held at the Council of Members meeting in September 2018.
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7.2 COMMUNICATIONS AND ENGAGEMENT DELIVERY PLAN UPDATE

The Associate Director of Communications and Engagement provided a report presenting the progress on the Communication and Engagement Delivery Plan 2018/19.

Committee Members were advised that all service specific engagement was heading in the right direction.

Requests for further engagement events should be highlighted as soon as they were identified to enable appropriate planning.

It was highlighted that the Sexual Health engagement with Hull City Council was off track and this was only brought to the NHS Hull CCG attention at the Joint Commissioning Forum.

Resolved

(a)	Members of the Planning and Commissioning Committee noted the report.
(b)	Members of the Planning and Commissioning Committee were assured on the delivery of actions within the Communications and Engagement Delivery Plan.

8. STANDING ITEMS

8.1 REFERRALS TO AND FROM OTHER COMMITTEES

There were no referrals to other Committees.

9. REPORTS FOR INFORMATION ONLY

9.1 PROCUREMENT PANEL

There were no approved minutes to circulate.

9.2 CHAIRS UPDATE REPORT – 6th July 2018

Committee Members noted the contents of the Chairs Update report.

9.3 BOARD MINUTES

There were no approved minutes to circulate.

9.4 ICOB MINUTES

There were no approved minutes to circulate.

10 GENERAL

10.1 ANY OTHER BUSINESS

Prescribing of Norethisterone.

It had been identified that GP's were experiencing a high level of requests for Norethisterone to be prescribed as a social use not clinical use. The question was

posed as to whether there had been specific guidelines disseminated for prescribing as there were online pharmacies/over the counter pharmacies who would prescribe.

The North of England Commissioning Support (Senior Pharmacist) would explore the commissioning guidance nationally and update at the September 2018 Committee.

Resolved

(a)	Members of the Planning and Commissioning Committee requested clarification as to if national commissioning guidance had been circulated.
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10.2 DATE AND TIME OF NEXT MEETING

The next meeting would be held on **7th September 2018, 9.30 am in the Boardroom, Wilberforce Court, Alfred Gelder Street, Hull, HU1 1UY.**

V. A. Ruxcliffe

Signed:

(Chair of the Planning and Commissioning Committee)

Date: 7 September 2018

Abbreviations

5YFV	Five Year Forward View
AAU	Acute Assessment Unit
ACP	Advanced Clinical Practitioner
ANP	Advanced Nurse Practitioner
APMS	Alternative Provider Medical Services
A&E	Accident and Emergency
BAF	Board Assurance Framework
C&YP	Children & Young People
CHCP	City Health Care Partnerships
CQC	Care Quality Commission
CGMS	Continuous Glucose Monitoring
CORRS	Community Ophthalmic Referral Refinement
CVD	Cardiovascular Disease
DoH	Department of Health
DROP	Drugs to Review for Optimised Prescribing
ECPs	Emergency Care Practitioners
EoL	End of Life Care
ENT	Ear Nose & Throat
EPRR	Emergency Preparedness Resilience and Response
GPC	General Practitioners Committee
GCOG	General Practitioner Assessment of Cognition
H&WBB	Health and Wellbeing Board
HEYHT	Hull and East Yorkshire Hospital Trust
HERPC	Hull and East Riding Prescribing Committee
HCC	Hull City Council
Humber TFT	Humber Teaching NHS Foundation Trust

ICC	Integrated Care Centre
IPG	Interventional Procedures Guidance
JSNA	Joint Strategic Needs Assessments
IAPT	Improving Access to Psychological Therapies
ICC	Integrated Care Centre
ICOB	Integrated Commissioning Officer's Board
LMC	Local Medical Committee
LMS	Local Maternity System
IDS	Immediate Discharge Summary
ITT	Invitation to Tender
KPIs	Key Performance Indicators
LA	Local Authority
LAC	Looked after Children
MH	Mental Health
MDT	Multi-Disciplinary Team
MSK	Musculoskeletal
NICE	National Institute for Health and Care Excellence
NIHR	National Institute for Health Research
NHS-CHC	NHS Continuing Healthcare
NHS-FNC	NHS-funded Nursing Care
NHSE	NHS England
OSC	Overview and Scrutiny Committee
PALS	Patient Advice Liaison Service
PIN	Prior Information Notice
PIP	Planned Intervention Programme Board
PNA	Pharmaceutical needs Assessment
PTL	Protected Time for Learning
RIGS	Recommended Improvement Guidelines
RTT	Referral to Treatment
SHO	Senior House Officer
SRG	System Resilience Group
STP	Sustainable Transformational Partnership
TA	Technology Appraisal Guidance
ToR	Terms of Reference
UCC	Urgent Care Centre
YAS	Yorkshire Ambulance Service