



Item: 11.1ii

#### PLANNING AND COMMISSIONING COMMITTEE

# MINUTES OF THE MEETING HELD ON FRIDAY 7 FEBRUARY 2020 THE BOARD ROOM, WILBERFORCE COURT

# PRESENT:

M Balouch, NHS Hull CCG, (Clinical Member)

J Crick, NHS Hull, (Consultant in Public Health Medicine and Associate Medical Director)

B Dawson, NHS Hull CCG, (Strategic Lead Children, Young People & Maternity)

P Davis, NHS Hull CCG, (Strategic Lead Primary Care)

K Ellis, NHS Hull CCG, (Deputy Director of Commissioning)

J Dodson, NHS Hull CCG, (Director of Integrated Commissioning)

I Goode, NHS Hull CCG, (Lay Member) (Chair)

A Oehring, NHS Hull CCG, (Clinical Member)

S Lee, NHS Hull CCG, (Associate Director, Communications and Engagement)

D Lowe, NHS Hull CCG, (Dep Director of Quality and Clinical Governance / Lead Nurse)

# IN ATTENDANCE:

C Denman, NHS Hull CCG, (Head of Funded Care)

K McCorry, North of England Commissioning Support, (Medicines Optimisation Pharmacist)

S Milner, NHS Hull CCG, (Senior Finance Manager)

D Robinson, NHS Hull CCG, (Minute Taker)

# **WELCOME & INTRODUCTIONS**

The Chair welcomed everyone to the meeting.

# 1. APOLOGIES FOR ABSENCE

V Rawcliffe, NHS Hull CCG (Clinical Member)

D Storr, NHS Hull CCG (Deputy Chief Finance Officer)

M Bradbury, NHS Hull CCG, (Strategic Lead Mental Health and Learning Disabilities)

B Ali, NHS Hull CCG, (Clinical Member)

T Fielding, Hull CC, (Assistant Director Health and Wellbeing/Deputy DPH)

M Whitaker, NHS Hull CCG, (Practice Manager Representative)

# 2. MINUTES OF THE PREVIOUS MEETING HELD ON 3 January 2020

The minutes from 3 January 2020 were submitted for approval and taken as a true and accurate record.

#### Resolved

| (a) | The minutes of the meetings held on 3 January 2020 were taken as a true |
|-----|---|
|     | and accurate record and signed by the Chair.                            |

# 3. MATTERS ARISING FROM THE MEETING

The Action List from the meeting held on 3 January 2020 was provided for information, there were no matters arising to be updated.

# CATARACT REFERRAL PROCESS

No consultants had seen an increase in post-operative infections / complications, a piece of work was going to be undertaken reviewing infections / complications. – The status of this action is closed

(a) Members of the Planning and Commissioning Committee noted the updates to the Action List.

# 4. NOTIFICATION OF ANY OTHER BUSINESS

There were no items of Any Other Business to discuss.

#### Resolved

(a) The Planning and Commissioning Committee noted that there were no items of Any Other Business to discuss.

# 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 financial 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 too;

The following declarations of interest declared.

| Name        | Agenda No | Nature of Interest and Action Taken           |
|-------------|-----------|---|
| James Crick | 6.2c      | Personal Interest as part of the NICE Quality |
|             |           | Standards who worked on these drugs.          |
|             |           |   |
|             |           |   |

# Resolved

(a) The Planning and Commissioning Committee noted the declarations made.

# 5.2 GIFTS AND HOSPITALITY

There had been no declarations of Gifts or Hospitality made since the Planning and Commissioning Meeting in January 2020.

#### Resolved

(a) Members of the Planning and Commissioning Committee noted there were no gifts and hospitality declared.

# 6. STRATEGY

# 6.1 PUBLIC HEALTH BY EXCEPTION

The Consultant in Public Health Medicine and Associate Medical Director gave a verbal update on the work which was being undertaken by Hull City Council.

Hull City Council are awaiting confirmation of the Public Health grant allocation, no reduction in allocation is expected and there are no planned changes to services expected.

The drug and alcohol service within the Accident and Emergency is not currently being utilised to its full potential, it was agreed that this would be escalated through the Unplanned Care Delivery Group.

Discussions had taken place at Primary Care Network (PCN) level with regard to Long Acting Reversible Contraception (LARC) services and the timescale had been extended as this service was not directly commissioned by PCNs currently.

The World Health Organisation (WHO) have expressed concerned about e-cigarettes and specifically the impact of home brewed liquids as well as the impact on respiratory patients. Public Health England are currently supportive of the use of e-cigarettes as an alternative to tobacco, however it was agreed that a 'stop vaping' pathway was also desirable.

A Children and Young People survey will commence at the beginning of the next academic year, it was agreed that the CCG Strategic Lead Children, Young People & Maternity, Strategic Lead Mental Health and Learning Disabilities and Engagement Manager will be involved.

Assurance was received about the processes for daily updates in respect of New Coronavirus.

A high number of asylum seekers remain in temporary housing in the city, health assessments are being undertaken on the individuals.

# Resolved

(a) Members of the Planning and Commissioning Committee noted the update.

# 6.1b DIRECTOR OF PUBLIC HEALTH ANNUAL REPORT

The Consultant in Public Health Medicine presented the Director of Public Health's Annual Report with the following areas being highlighted.

Directors of Public Health in England have a statutory duty to publish an annual report. These reports provide an independent voice in setting out important health and wellbeing challenges, highlighting where positive action is being taken and providing clear recommendations for further work across the system.

The report explores a number of long term conditions that have an impact on life expectancy. The following four long term conditions: heart disease; dementia; lung disease, specifically cancer and Chronic Obstructive Pulmonary Disease (COPD); and stroke.

#### Resolved

| (a) | Members     | of   | the    | Planning    | and  | Commissioning | Committee | noted | the |
|-----|-------------|------|--------|-------------|------|---------------|-----------|-------|-----|
|     | Director of | f Pu | blic I | Health's Ar | nual | Report.       |           |       |     |

#### 6.2 MEDICINES MANAGEMENT

# 6.2a CLINICAL COMMISSIONING DRUG POLICIES (STANDING ITEM)

There were no clinical commissioning drug policies to approve.

# 6.2biHULL & 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 change in usage applications and traffic light status.

It was stated that the following new Prescribing Guidelines had been provided and approved by Hull and East Riding Prescribing Committee.

LAT, CCG – Red (CCG Commissioned)
Midazolam Liquid AMSED (Unlicensed) – Red (CCG Commissioned)
Avapritinib – Red (CCG Commissioned)
Xeomin (Botulinum Neurotoxin type A) – Red (CCG Commissioned)

Sativex is indicated as a treatment for symptom improvement in adult patients with moderate to severe spasticity due to multiple sclerosis – NICE indicates that certain drug preparations derived from cannabis are now approved by the National Health Service (NHS).

A wide and varied discussion occurred around Sativex as the CCG was responsible for commissioning Sativex to treat spasticity. It was agreed that the use of Sativex should not be routinely commissioned, only by via an IFR Policy request and approval would be time limited until demonstrable improve in symptoms/quality of life. It was suggested that this be included in all FOI responses.

A commissioning policy is in the process of being developed in conjunction with East Riding of Yorkshire CCG.

Dymista gives relief of symptoms of moderate to severe seasonal and perennial allergic rhinitis. Due to the price reduction/changes HERPC and HUTH Drug and Therapeutic Committee had given approval for use as a cost effective drug. It was agreed that Dymista be included in the existing pathways for allergic rhinitis.

# 6.2biiHULL & EAST RIDING PRESCRIBING COMMITTEE - PRESCRIBING GUIDELINES, POLICIES OR SHARED CARE FRAMEWORKS

The Medicines Optimisation Pharmacist provided a report to consider and approve the Prescribing Guideline from Hull & East Riding Prescribing Committee.

**Anticoagulant** – Robust discussion occurred regarding the placement of Edoxaban as a recommended option as it was associated with the current rebate scheme.

It was noted that rebate schemes are not designed to change prescribing habits, but are to be a natural by-product of clinical prescribing.

The clinicians present agreed that by putting Edoxaban as a recommended option the rebate was driving a change in prescribing behaviours as there was no clinical reason as to why it should be recommended in preference to the other medications identified. It was agreed to recommend to partner organisations that the two atrial fibrillation indications and the list of medicines under 'recommended' and 'also approved' be merged. It was agreed that a discussions was to be held with partners and an update would be brought to the March 2020 Planning and Commissioning Committee.

Cluster Headache and Migraine - A new guideline has been written for consideration that identified what treatment could be initiated in which tier including those that required Individual Funding Requests (IFR). It was suggested that due to the complexity of the medication a commissioning statement be developed for those aspects which fall under Individual Funding Requests (IFR).

**Furosemide** – The guidance for Furosemide was circulated and approved. It was noted that numbers requiring this intervention would be low.

# Resolved

| (a) | Members of the Planning and Commissioning Committee approved the     |
|-----|--|
|     | Anticoagulant Prescribing Guideline subject to Edoxoban not being    |
|     | identified as a preferred medication.                                |
| (b) | Members of the Planning and Commissioning Committee approved Cluster |
|     | Headache & Migraine Guideline  |
| (c) | Members of the Planning and Commissioning Committee approved         |
|     | Guidance for Administration of Continuous Subcutaneous Furosemide in |
|     | the Community for Adults with End Stage Heart Failure                |

# 6.2c NICE MEDICINES UPDATE (STANDING ITEM)

James Crick declared a Personal Interest in agenda item 6.2c as he had previously been a member of the NICE Quality Standards group, the declaration was noted, James stayed in the room.

The Medicines Optimisation Pharmacist provided an update of changes or additions to NICE publications, and their implications for CCG Commissioners.

The NHS Hull Clinical Commissioning Group Summary of NICE Guidance form had been altered to include a RAG rating which indicates who is responsible for the action.

TA614 - Cannabidiol with clobazam for treating seizures associated with Dravet syndrome - NICE stated this guidance is applicable to Primary care and secondary care – acute. Commissioner: NHSE, NICE state to assess costs locally.

QS189 - NICE stated this guidance is applicable to Primary & Secondary care, Local Authorities, Social Care, Voluntary sector, Education. Commissioner: NHSE, CCGs, LA & the criminal justice system NICE stated this will be cost neutral. HCV are picking up this topic of work.

QS17 - NICE stated this guidance is applicable to Secondary care – acute. Commissioner: NHSE & CCG. NICE expect this to be cost neutral.

NG148 - Acute kidney injury: prevention, detection and management - NICE stated this guidance is applicable to Secondary care – acute. Commissioner: NHSE & CCG. NICE do not anticipate a significant resource impact.

The Deputy Director of Commissioning provided the new action tracker which will be used to monitor agreed actions relating to then NICE updates.

# Resolved

| (a) | Members | of | the | Planning | and | Commissioning | Committee | noted | the |
|-----|---------|----|-----|----------|-----|---------------|-----------|-------|-----|
|     | update. |    |     |          |     | _             |           |       |     |

# 6.3 INTEGRATED COMMISSIONING

# 6.3a INTEGRATED COMMISSIONING OFFICER BOARD (ICOB)/GENERAL UPDATE AND NOTES

The Director of Integrated Commissioning provided a verbal update advising that the next Committees in Common was scheduled for 26<sup>th</sup> February 2020.

A new interim Director of Children's Services (Nicola Clemo) has been appointed as part of a transformation team and Alison Murphy has now left Hull City Council.

# Resolved

| (a) | Members | of | the | Planning | and | Commissioning | Committee | noted | the |
|-----|---------|----|-----|----------|-----|---------------|-----------|-------|-----|
|     | update. |    |     |          |     |               |           |       |     |

# 6.4 INTEGRATED DELIVERY

#### 6.4a FOCUS AREA PLANNED CARE

The Deputy Director of Commissioning provided a report informing the Committee about the range of projects currently underway around Planned Care, and their progress to date.

There are a number of forums that are focussing on Planned Care either as a whole or sub-sets of Planned Care. The main forums covered by this report are:

Humber Coast and Vale Strategic Elective Network Hull and East Riding Planned Care Delivery Group

There are indirect links between the two meetings, which are being strengthened with regard to RightCare and other projects which could be systemised across all 6 CCGs and relevant providers.

The following areas/key points were highlighted: Respiratory Diabetes Digitisation

The Planned Care Delivery Group is in the process of being refocussed and relaunched with improved clarity of the joint agenda across Hull and the East Riding, which is now being progressed to start aligning planning and prioritisation systems and processes to maximise efficiencies and joint opportunities.

The revised work programme includes:

- Outpatient Transformation focus on reducing follow-up activity and promoting use of advice and guidance
- CVD cardiology RightCare and improvements in community stroke rehabilitation
- ENT overall pathway review arising from a growth in referrals and capacity constraints
- MSK / back pain First Contact Physios, ESCAPE pain, spinal injections commissioning statements
- Humber Commissioning Statements and the VBC Checker.

Discussion took place in relation to the new requirement to offer patients a new provider once they had waited 26 weeks for treatment from 1<sup>st</sup> April 2020.

#### Resolved

(a) Members of the Planning and Commissioning Committee considered the report and the work programmes identified.

# 6.4b PROJECT EXCEPTIONS

#### **Primary Care**

In the first week of Targeted Lung Health Checks 134 procedures had taken place, approximately 94 of whom had a low dose CT scan, final figures were still to be validated.

Revised service specifications for Primary Care Networks (PCNs) – outlining the responsibilities of these groups of practices and community providers in the coming years – had been significantly amended after widespread criticism from the profession that the draft versions published by NHS England and NHS Improvement at the end of 2019 were unfair, unrealistic and burdened already struggling-practices with unsustainable workloads.

# Children, Young People and Maternity

The outcome letter of the Ofsted monitoring visit to Hull City Council Children's Services was published on 6 February 2020. The letter states the local authority was making insufficient progress in improving services for children in care, including disabled children. Services had deteriorated since the last inspection of January 2019 and shortfalls identified at the time of the inspection had not been properly rectified. CCG senior commissioners along with the Designated Nurse and Doctor for Looked After Children will work with provider services and local authority leads to review identified issues and implement improvement plans where required.

# **Mental Health and Learning Disabilities**

No exceptions to report.

# **Unplanned Care**

No exceptions to report.

# **Cancer Alliance**

No exceptions to report.

# Resolved

(a) Members of the Planning and Commissioning Committee noted the update.

#### 6.5 COMMUNITY EATING DISORDER SERVICE SPECIFICATION CYP

The Commissioning Manager provided the Committee with the joint Hull and East Riding of Yorkshire Children's & Young People's Community Eating Disorder Service Specification.

The aim of the service specification is to provide a high quality service for children and young people aged up to 18 years in the East Riding of Yorkshire and Hull CCG areas which meets the requirements of Access and Waiting Time Standard for Children and Young People with an Eating Disorder (NHS England / National Collaborating Centre for Mental Health, 2015) and NICE Clinical Guideline 69 (2017).

It was stated that service specification had been produced jointly between NHS East Riding and Yorkshire and NHS Hull CCG.

The service specification was considered with the following areas highlighted:

- Concerns were raised that it suggested only GPs could refer into the service This was be amended to say professional.
- The service appeared very onerous on Primary Care.
- Weekly assessment by GP to be undertaken while waiting for assessment It
  was stated that this needed to identify value.
- GPs to be made aware of the service as they were not clear that this was a service in place.
- Links with autism & eating disorder to be incorporated within the service specification.
- Assurance was requested that engagement with providers had been undertaken.
- The role of Primary Care need to be reviewed and clarified within service specification.

It was as agreed that the service specification needed to be brought back to a future Planning and Commissioning Committee with the above amendments for approval.

# Resolved

(a) Members of the Planning and Commissioning Committee did not approve the service specification.

(b) Members of the Planning and Commissioning Committee requested that an amended service specification be brought to the March 2020 Committee.

# 6.6 AUTISM MATTHEWS HUB

The Commissioning Manager provided the Committee with the Service Specification for a partnership between Matthews Hub and Humber Teaching NHS Foundation Trust.

The proposal is designed to enhance and develop a unified approach to delivering care and support services for young people with autism aged fourteen and above, who are awaiting clinical assessment from HTFT and to also raise awareness of support services available across the City.

Matthews Hub will engage with secondary schools to identify individuals who would benefit from the service and also provide training and support to schools.

The service specification was reviewed with the following areas being highlighted:

- References for data collection need to be included in service specification.
- A section on Education, Health and Care plans is required
- Alter the wording within the document to say 'people with autism' not 'autistic people', also remove 'no known cure'.
- Clarification was requested on whether Matthews Hub will cope providing general support to individuals who experience significant challenges with their autism and it was confirmed that Humber Teaching NHS Foundation Trust will support these individuals clinically.

It was agreed to approve the service specification with the above amendments, the Director of Integrated Commissioning would provide the final approval.

# Resolved

(a) Members of the Planning and Commissioning Committee considered and approved the service specification.

# 7. SYSTEM DEVELOPMENT AND IMPLEMENTATION

# 7.1 PROCUREMENT UPDATE

The Director of Integrated Commissioning provided an update to the Committee on the procurement activity taking place currently in NHS Hull CCG:

The Primary Care IT service and Non-Emergency Medical Transport continue with mobilisation for commencement on 1 April 2020.

It was stated that legislative change in respect of NHS procurement is expected during 2020 which may affect procurement projects for the CCG.

# Resolved

(a) Members of the Planning and Commissioning Committee considered

and noted the contents of the report.

# 8. STANDING ITEMS

# 8.1 REFERRALS TO AND FROM OTHER COMMITTEES

There were no items to refer to another Committee.

# 9. REPORTS FOR INFORMATION ONLY

# 9.1 QUALITY & PERFORMANCE MINUTES

The minutes of the Quality and Performance Committee on 19<sup>th</sup> November 2019 were circulated for information.

# Resolved

| (a) | Members of the Planning and Commissioning Committee noted there were |
|-----|--|
|     | no minutes to circulate.   |

# 10. GENERAL

# **10.1 ANY OTHER BUSINESS**

There were no items of any other business to use.

# 10.1 DATE AND TIME OF NEXT MEETING

V. A. Reveliffe

The next meeting would be held on 6 March 2020, 9.30 am in the Boardroom, Wilberforce Court, Alfred Gelder Street, Hull, HU1 1UY.

Signed:

(Chair of the Planning and Commissioning Committee)

Date: 6 March 2020

# **Abbreviations**

| A&E    | Accident and Emergency                               |
|--------|--|
| ADHD   | Attention Deficit Hyperactivity Disorder             |
| APMS   | Alternative Provider Medical Services                |
| ASC    | Adult Social Care                                    |
| BCF    | Better Care Fund                                     |
| BHC    | Bransholme Health Centre                             |
| C&YP   | Children & Young People                              |
| CHC/CC | Continuing Healthcare and Children's/Continuing Care |
|        | Provider   |
| CHCP   | City Health Care Partnerships                        |

| CQC Care Quality Commission DOIs Declarations of Interests EHaSH Early Help and Safeguarding Hub EPaCCS Electronic Palliative Care Co-ordination System EQIA Equality Impact Assessment EROY East Riding of Yorkshire HCC Hull City Council HCP Health Care Professional HCV Humber Coast and Vale Cancer Alliance HERPC Hull and East Riding Prescribing Committee HSCN Health and Social Care Network HUTHT Hull University Teaching Hospital NHS Trust Humber TFT Humber Teaching NHS Foundation Trust IAGC Integrated Audit and Governance Committee IBCF Integrated Audit and Governance Committee IBCF Integrated Personal Commissioning Officer's Board IFR Individual Funding Request IPC Integrated Personal Commissioning ITT Invitation to Tender IRP Independent Review Panel JCF Joint Commissioning Forum LA Local Authority LDR Local Digital Roadmap LAC Looked after Children LRM Local Resolution Meeting MDT Multidisciplinary Team MH Mental Health MSK Musculo-Skeletal MSD Merck Sharpe Dohne NHSE NHSE England NICE National Institute for Health and Care Excellence NHSI NHS Improvement PCCC Primary Care Network PDB Programme Delivery Board PHE Public Health England PMLD Profound and Multiple Learning Difficulties SCR Summary Care records SHO Senior House Doctor SPD Sensory Processing Disorder SATOD Smoking Status at Time of Delivery SLIP System Lead Interoperability Pilot SSSS Specialist Stop Smoking Service TCP Transforming Car Programme TOR TYCKS THERESTS  | COM  | Council of Members                 |
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| LRM Local Resolution Meeting  MDT Multidisciplinary Team  MH Mental Health  MSK Musculo-Skeletal  MSD Merck Sharpe Dohme  NHSE NHS England  NICE National Institute for Health and Care Excellence  NHSI NHS Improvement  PCCC Primary Care Commissioning Committee  PCN Primary Care Network  PDB Programme Delivery Board  PHE Public Health England  PMLD Profound and Multiple Learning Difficulties  SCR Summary Care records  SHO Senior House Doctor  SPD Sensory Processing Disorder  SATOD Smoking Status at Time of Delivery  SLIP System Lead Interoperability Pilot  SOP Standard Operating Procedure  SSSS Specialist Stop Smoking Service  TCP Transforming Car Programme  Tor  |      | ·                                  |
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| SLIP System Lead Interoperability Pilot  SOP Standard Operating Procedure  SSSS Specialist Stop Smoking Service  TCP Transforming Car Programme  ToR Terms of Reference   |      |                                    |
| SOP Standard Operating Procedure SSSS Specialist Stop Smoking Service TCP Transforming Car Programme ToR Terms of Reference   |      | Smoking Status at Time of Delivery |
| SSSS Specialist Stop Smoking Service TCP Transforming Car Programme ToR Terms of Reference  | SLIP | System Lead Interoperability Pilot |
| TCP Transforming Car Programme ToR Terms of Reference   | SOP  |                                    |
| TCP Transforming Car Programme ToR Terms of Reference   | SSSS | Specialist Stop Smoking Service    |
|   | TCP  |                                    |
| YHCR Yorkshire & Humber Care Record   | ToR  | Terms of Reference                 |
|   | YHCR | Yorkshire & Humber Care Record     |