

NHS LIVERPOOL CLINICAL COMMISSIONING GROUP

GOVERNING BODY

Minutes of meeting held on TUESDAY 8TH DECEMBER 2015 1pm
BOARDROOM, THE DEPARTMENT, LEWIS'S BUILDING

PRESENT:

VOTING MEMBERS:

Dr Nadim Fazlani	Chair/GP
Katherine Sheerin	Chief Officer
Prof Maureen Williams	Lay Member – Governance/Deputy Chair
Dr Simon Bowers	GP/Clinical Vice Chair
Dave Antrobus	Lay Member – Patient Engagement
Jane Lunt	Head of Quality/Chief Nurse
Dr Maurice Smith	GP
Dr Rosie Kaur	GP
Dr Janet Bliss	GP
Tom Jackson	Chief Finance Officer
Dr Monica Khuraijam	GP
Dr Fiona Ogden-Forde	GP
Dr Fiona Lemmens	GP
Dr Shamim Rose	GP
Moira Cain	Practice Nurse
Dr Donal O'Donoghue	Secondary Care Doctor

NON VOTING MEMBERS:

Dr David Webster	GP – Matchworks Locality Chair
Dr Paula Finnerty	GP – North Locality Chair
Tina Atkins	Practice Manager
Dr Tristan Elkin	GP – Liverpool Central Locality
Dr Sandra Davies	Director of Public Health
Dr Rob Barnett	LMC Secretary

IN ATTENDANCE:

Carole Hill	Healthy Liverpool Integrated Programme Director
Ian Davies	Healthy Liverpool Programme Director – Hospitals & Urgent Care
Ray Guy	Retired Practice Manager
Stephen Hendry	Acting Head of Operations & Corporate Performance
Samih Kalakeche	Director of Adult Services & Health, Liverpool City Council
Phil Wadeson	Director of Finance, NHS England Sub Regional Team
Cheryl Mould	Head of Primary Care Quality & Improvement
Tony Woods	Healthy Liverpool Programme Director - Community & Digital Care
Paula Jones	Minutes

APOLOGIES:

Lynn Collins	Chair of Healthwatch Liverpool
Alison Ormrod	Interim Head of Finance
Councillor Roz Gladden	Liverpool City Council

Public: 6

PART 1: INTRODUCTIONS & APOLOGIES

Introductions were made for the benefit of the members of the public present.

1.1 DECLARATIONS OF INTEREST

There were no declarations of interest specific to the meeting.

1.2 MINUTES & ACTION POINTS FROM THE LAST MEETING

The minutes of the previous meeting on 10th Nov 2015 were agreed as an accurate record of the discussions that had taken place subject to the following amendments:

- Page 9 item 2.6 Public Health Update – the Chief Officer noted the last bullet on Examine Your Options should be amended to state that there had been a significant increase in attendance at Alder Hey A&E Department.
- Page 17 item 4.1 Healthy Liverpool Engagement Presentation on Activity Summer 2015 last bullet, it was noted that it was the Senior Project Manager for Self Care (not Neighbourhood Transformation Manager) who had presented at the Governing Body Development Session in November 2015 on the Self Care Framework along with the More Independent Clinical Lead .

1.3 MATTERS ARISING from 10th November 2015 not already on the agenda:

- 1.3.1 Update on Dr Dharmana: the Head of Primary Care Quality & Improvement updated the Governing Body that the Interim Provider had been appointed (Vauxhall Health Centre) and was working closely with the CCG on a mobilisation plan ready for the start date of 1st January 2016. Vauxhall Health Centre was an excellent practice with an excellent Care Quality Commission report.
- 1.3.2 Action Point Two – it was noted that the Corporate Risk Register would be on the January 2016 agenda.
- 1.3.3 Action Point Three – an update on Primary Care Support Services was to be sent to the December 2015 Primary Care Commissioning Committee.
- 1.3.4 Action Point Four – The Head of Primary Care Quality & Improvement clarified that the presentation to the Localities was to demonstrate how the CCG

held all providers to account (eg through the work of the Clinical Quality & Performance Groups).

- 1.3.5 Action Point Five – it was noted that the full Healthy Liverpool Engagement Report was to come to the January 2016 Governing Body.
- 1.3.6 Action Point Six – it was noted that the presentation had been made to the Governing Body Development Session on 18th November 2015 on Self Care.
- 1.3.7 Action Point Seven – it was noted that Governing Body papers had been left at the CCG reception prior to the meeting for the public.
- 1.3.8 Action Point Eight – The Chief Finance Officer updated the Governing Body on the issue of a hydrotherapy pool at the Royal Liverpool Hospital which had been raised by a member of the public Mr William Shortall. He raised the specific question with the Royal Liverpool Hospital and had been back in touch with the member of the public. The Chief Finance Officer would establish if a hydrotherapy pool was required to deliver CCG commissioned services at the Royal Liverpool Hospital.

PART 2: UPDATES

2.1 Feedback from committees – Report No GB 84-15:

- Primary Care Commissioning Committee 17th November 2015 – the Head of Primary Care Quality & Improvement fed back to the Governing Body:
 - ✓ Transition Plan six month update – good progress being made on the majority of areas for delivery but clarity still required on which services were to transition from NHS England. Transition Plan to be

complete by April 2016 – the Memorandum of Understanding between NHS England and the CCG was to be discussed at the next meeting.

- ✓ Liverpool Quality Improvement Scheme 2016/17 – governance process to be more robust therefore the scheme would be reviewed by the Finance Procurement & Contracting Committee to discuss the procurement model and value for money
- ✓ Terms of Reference were amended and were attached for approval, the changes were outlined in red and referred to the explicit role in the commissioning of Primary Care and ensuring continuous improvement. Also the Head of Primary Care Quality & Improvement had become a full voting member, the quorum was amended to five voting members

The Lay Member for Governance/Deputy Chair was happy to support the changes noting that section 7 (e) had been strengthened to state “...in order to deliver the ambitions of the Healthy Liverpool Programme and ensure continuous service improvement”.

- ✓ Primary Care Quality Sub-Committee 29th September 2015: The Sub-Committee Vice Chair fed back to the Governing Body:
 - Integrated Musculoskeletal Service Redesign Model presented by the Primary Care Lead – was well received. Question raised about patient pathway and triage which would be brought back to the sub-committee.
 - Liverpool Quality Improvement Scheme 2016/17 – the changes to the scheme were approved and then presented at a citywide members meeting and at the Primary Care Commissioning Committee in November 2015.

- Finance Procurement & Contracting Committee 24th November 2015 – the Chief Finance Officer fed back to the Governing Body:
 - ✓ Extension to existing Service Level Agreement with Voluntary Sector organisations were discussed. It was agreed that a three month extension be given whilst formal reviews against commissioning plans were undertaken.
 - ✓ The underperformance for Urgent Care against Plan in contracts 2015/16 was reviewed in detail.
 - ✓ Information Governance Update – the Steering Group had met that day and highlighted a number of issues mostly around being on track with the Information Governance Toolkit and surrounding issues.

- Healthy Liverpool Programme Board – 25th November 2015 – the Chief Finance Officer feedback to the Governing Body:
 - ✓ Assessment of risk and Risk Register was discussed.
 - ✓ Development of the Programme Management Office was discussed.
 - ✓ Review of Healthy Liverpool leadership carried out.

- Quality Safety & Outcomes Committee 1st December 2015 – the Lay Member for Governance/Committee Chair fed back to the Governing Body:
 - ✓ CCG Staff Safeguarding Training – CCG was non compliant with mandatory training and Human Resources had put a plan in place to address this. Training would be mostly be e-learning which was now in a better format than previously.

- ✓ Safeguarding – concerns had been raised at the Liverpool Safeguarding Children’s Board re Liverpool Community Health’s engagement in Early Help and Multi-Agency meetings. This was being addressed.
- ✓ Serious Incidents – there was significant pressure on Liverpool CCG as the co-ordinating commissioner for seven trusts to complete reviews within the set timescales due to the lack of clinicians available. The Chief Officer noted that she had raised this at the CCG Network meeting for clinicians from other CCGs to come forward and the use of NHS England reviewers had also been suggested.

The NHS Liverpool CCG Governing Body:

- **Considered the reports and recommendations from the Committees.**

2.2 Feedback from CCG Network – 2nd December 2015 – Report No 80-15:

The Chief Officer updated the Governing Body:

- ✓ Future of the CCG Network was discussed – there was a specific paper on this later on the agenda.
- ✓ Paediatric Rehabilitation – there were gaps in service provision both for children with neurological dysfunction which was the responsibility of NHS England and step down facilities which were the responsibility of the CCG. It was agreed that this should be looked at across the Cheshire & Merseyside footprint through the recently established Vanguard for Children’s and Maternity Services. The Secondary Care Clinician asked about adolescents and young people and the Chief Officer responded that they would normally access adult trauma and rehabilitation. but after an observation from the Urgent Care Clinical Lead on the spot judgement taken at the

scene of an accident on the age of the person involved the Chief Officer acknowledge that there needed to be further consideration for the transition elements.

The NHS Liverpool CCG Governing Body:

- **Considered the reports and recommendations from the Merseyside CCG Network.**

2.3 Chief Officer's Update

The Chief Officer updated the Governing Body:

- ✓ Mayoral Health Summit had been held in November 2015 and had been a very successful event with presentations from the CCG, Local Authority and provider colleagues. The Healthy Liverpool Blueprint had been presented.
- ✓ The CCG Chair, Head of Primary Care Quality and Ray Guy had met with the Prime Minister's Advisor Nick Seddon, areas discussed were:
 - Liverpool was not part of a Vanguard but was carrying out the same activity and Nick Seddon had expressed an interest in coming to Liverpool to see what was happening here.
 - Spending Review – there was now support for transformation.
 - Changes to GP contracts.
- ✓ The Chief Officer and Ray Guy met Stephen Dorrell, Secretary for Health in the 1990's and now Chair of the NHS Confederation and no longer an MP. He was involved in the Manchester Devolution and it was clear that Devolution was an important issue.
- ✓ The Chief Officer had been invited to attend a 10 Downing Street Reception along with other NHS Vanguard Leads.

- ✓ A successful marketplace event had taken place. The Practice Manager representative noted that over 200 people had attended each day with a variety of workshops held and a marketplace of provider stalls. Feedback had been extremely positive.
- ✓ 2nd Clinical Summit held on the community service model for Healthy Liverpool which had been well attended with positive feedback.

The NHS Liverpool CCG Governing Body:

- **Noted the Chief Officer's update**

2.4 NHS England Update

The Director of Finance NHS England Sub-Regional Team updated the Governing Body:

- Output of Comprehensive Spending Review had been very successful and the outcomes for the NHS had been far better than anticipated. New monies were available linked to delivery on transformation and to support the Five Year Forward View. An event was being held in Leeds for commissioners and providers – the strategic timeframe was for the next three years (a further spending review would be held after year three) therefore delivery was required within three years. The key areas of Cancer, Mental Health, Prevention and Seven Day Services were intrinsically linked to Health Liverpool and this was a major opportunity to access a significant portion of these funds. Healthy Liverpool could almost be described as the Virtual Vanguard.
- Dame Barbara Hakin had retired and Richard Barker (Regional Director for NHS England North) was acting up until the new appointee Matthew Swindells came into post – he was a former hospital Chief Executive.

- Jim Mackey had been appointed as the new Chief Executive of NHS Improvement. There would be Winter Control Rooms across four regions with possibly one at Regatta Place jointly run by NHS England and NHS Improvement.
- 55 trusts nationally had been assessed by NHS England as at risk, including Wirral, St Helens & Warrington locally.
- Planning Round 2016/17 – there were new settlements for CCGs, Liverpool was over target but there was possible growth available in the Liverpool system. The NHS England Board was due to meet 17th December 2015 after which there would be more sense of distribution for total settlement but not at specific CCG level until the New Year.

The NHS Liverpool CCG Governing Body:

- **Noted the Verbal Update.**

2.5 Public Health Update - Verbal

The Director of Public Health updated the Governing Body:

- ✓ It was good to hear about funding for growth in the CCG but the news for Public Health was not so good. The annual year on year reduction had been announced of 3.9% which equated to £6m to £7m in addition to the £3m cut already made. The pace of change was not yet known and this would not be clearer until after 20th December 2015.
- ✓ Alcohol Strategy development event at the end of November 2015 had been very successful which had led to an Action Plan to sit alongside the Strategy.
- ✓ “Say No to Drunks” Campaign had shown considerable success in reducing heavy drinking in the city centre. The difference between Liverpool and Manchester was

significant and proved that action could be taken on issues. It was agreed that this should be presented to a future Governing Body meeting.

- ✓ Antimicrobial Resistance – this was a national strategy but was re-launched locally in November 2015. Liverpool CCG had led the Delivery Group formed and it was hoped to get this on the agenda for the Local Resilience Forum.
- ✓ Active Cities/International Olympic Committee/The Associate for International Sport for All initiative – there would be a meeting for all the worldwide pilots held at the Echo Arena in Liverpool which would provide a great opportunity to see how we could link into this with our work on the Physical Activity Strategy.

The NHS Liverpool CCG Governing Body:

- **Noted the Verbal Update.**

2.6 Update from Health & Wellbeing Board - Verbal

The Chair updated the Governing Body on the recent meeting of the Health & Wellbeing Board and issues discussed:

- ✓ There was a discussion on Mental Health led by Luciana Berger MP on the challenges being faced. The life expectancy for the mental health population was at the 1958 levels.
- ✓ North West Coast Academic Health Science Network.
- ✓ Public Health Annual Report presented.
- ✓ Healthy Liverpool Health & Wellbeing Strategy Alignment report was very well received – Liverpool City Council and Liverpool CCG were working as one to support health and wellbeing in Liverpool.

- ✓ The Director of Adult Health & Social Care, Liverpool City Council noted that the Terms of Reference of Health & Wellbeing Board to be reviewed with it possibly being a Cabinet of Liverpool City Council with greater powers.

The NHS Liverpool CCG Governing Body:

- **Noted the Verbal Update.**

PART 3: PERFORMANCE

3.1 CCG Performance Report – Report No GB 86-15

The Acting Head of Operations & Corporate Performance presented the Performance Report to the Governing Body to report on the CCG's performance in the delivery of quality, performance and financial targets for the year 2015/16. .

He highlighted:

Good Performance:

- Referral to Treatment – this was Green with all Trusts achieving the 92% threshold for 18 weeks. One breach reported by Alder Hey (spinal patient, commissioned by NHS England but reported for consistency).
- Diagnostics – performance continued on a very positive trend of remaining below 1% threshold with a clear level of consistency achieved in 2015/16 so far.
- A&E Waits – CCG performance overall was above the 95% threshold for September 2015. At provider level Aintree was suffering from another “downturn” which currently looked unlikely to improve. Alder Hey performance also suffered although evidence pointed to increased attendances as a means to see the new hospital site rather than clinical need as conversion rates were not high. The Alder Hey data incorrectly included performance at Smithdown Paediatric Walk-In Centre for

which the governance arrangements had not yet been agreed. An extended narrative on Aintree and Alder Hey would be provided in the January 2016 Corporate Performance Report.

- North West Ambulance Service – performance green for all response times.
- Cancer Waiting Times – Amber rating influenced by Liverpool Heart & Chest Hospital performance against the two 62 day wait measures of GP referral and consultant’s decision to upgrade.
- Stroke – performance influenced by Royal Liverpool Hospital, the trust had experienced unusually poor performance in the last quarter which was being addressed with a short term Remedial Action Plan. Longer term actions were in place.
- Increased Access to Psychological Therapies – an exception report had been requested at the previous Governing Body meeting. The CCG was rated as red for Quarter 2 but in-month performance for Month 7 showed that targets for six weeks and 18 weeks (75% and 95% respectively) were being met. Extensive details of the Remedial Action Plan provided additional assurance for the Governing Body. The Head of Quality/Chief Nurse noted that a contract query had been issued in September 2015, the new provided had not delivered the contracted level of activity. Prior to the contract commencing an agreement had been reached where the CCG would pay on a cost per case basis for activity over and above the contracted requirement until the inherited backlog was cleared. Due to failure to clear backlog this had not been paid. For steps two and three three more psychologists had been recruited along with six Cognitive Behavioural Therapists. It was anticipated that this month would be the turning point regarding the additional capacity.

The Local Medical Committee Secretary commented that he was not confident that the situation could be rectified.

The Chair responded that he shared the Local Medical Committee Secretary's disappointment. The Lay Member for Governance/Deputy Chair suggested that maybe there should not be one dominant single provider and perhaps the Third Sector could be more involved. The Head of Quality/Chief Nurse noted that new national targets would be agreed from April 2016. The Secondary Care Clinician asked about the recovery rates and it was noted by the Head of Quality/Chief Nurse that recovery was improving.

The Chair noted that the Governing Body required assurance and how this situation would change. The Chief Officer noted that the CCG had not been under obligation to publish performance of this contract yet but had chosen to do so to be open and transparent and to push hard for improvement.

- Mixed Sex Accommodation – the Head of Quality/Chief Nurse noted that there had been no breaches for Liverpool CCG in October 2015, Liverpool Heart & Chest Hospital continued to report breaches due to on-going issues with movement out of Critical Care.
- MRSA – zero cases reported in month but still Red due to six reported year to date.
- C Difficile – over trajectory but antimicrobial prescribing was being targeted and a strong action plan was in place.
- Care Quality Commission Inspections – four practice reports had been received:
 - Abercromby Health Centre – overall good, outstanding for Patient Participation Group.
 - Rutherford Road Medical Centre – overall good, good across all key lines of enquiry of safe, responsive and well led.
 - Aintree Park Group Practice – overall good with outstanding for well led.
 - Garston & West Speke Health Centre – overall good.

- Financial Position – no change from November 2015.

The Governing Body members commented on the report as follows:

- The More Independent Clinical Lead commented on antibiotic prescribing and the need to increase engagement with the community. The Prescribing Clinical Lead responded that a local group had been established to give guidance to medical and non-medical prescribers. Liverpool CCG was heading in the right direction. The Lay Member for Governance/Deputy Chair added that the problem also lay in the use of antibiotics in the agricultural economy which entered the food chain. It was noted that reporting on this area would be to the Primary Care Quality Sub-Committee which in turn reported to the Governing Body through the Primary Care Commissioning Committee.

The NHS Liverpool CCG Governing Body:

- **Noted the performance of the CCG in delivery of key national performance indicators and the recovery actions taken to improve performance.**

PART 4: STRATEGY & COMMISSIONING

4.1 Public Health Annual Report – Report no GB 87-15

The Interim Director of Public Health presented the Public Health Director's Annual Report for 2014/15 to the Governing Body for noting and consideration. She commented that life expectancy for men and women had increased. Alcohol related activity had plateaued, smoking prevalence had decreased. The challenges for the city were around tobacco, alcohol, legal highs, obesity, antimicrobial resistance and wider determinants of health such as poverty. It was vital to maintain a competent public health workforce and focus on prevention. The report sat alongside the Joint Strategic Needs Assessment.

The Lay Member for Patient Engagement referred to chapter three of the report “The Best Start in Life” and the use of children’s services, Head Teachers and the Healthy Schools Programme to achieve this. The Clinical Lead for Children’s Services noted the close relationship with Liverpool Learning Partnership, and how we were working together to deliver on this.

The Secondary Care Clinician congratulated the Interim Director of Public Health and her colleagues on the report, noting that Public Health was the bedrock of Healthy Liverpool. End of Life Care continued to be a challenge.

The Lay Member for Governance/Deputy Chair also congratulated the Interim Director of Public Health on the report and requested an electronic version. The Interim Director of Public Health noted that it would be uploaded to the Liverpool City Council website.

The Chief Finance Officer asked about a whole system approach and for example ensuring that people with Learning Disabilities accessed employment. The Interim Director of Public Health agreed that this should be the case and that perhaps there should be a workplace health group. The Director of Adult Health & Social Care Liverpool City Council noted that there was already an Employment and Skills Group and various support mechanisms in place for the Learning Disabilities population and a “Buddy System”. The Chief Finance Officer noted that this was not the core business of the CCG but as a major employer in the city the NHS had an important role to play. The Chief Officer added that Liverpool had been approached by NHS England to work with the Department of Work and Pensions to test some schemes and the CCG Network was to explore the possibilities and scope out the work. The More Independent Clinical Lead noted the huge psychological benefit of being in employment. The Lay Member for Governance/Deputy Chair commented that the Social Value Policy would come into its own in this area. The Healthy Liverpool Programme Director – Digital and Community Care commented that our focus was on keeping patients with mental

health and long term conditions in work. The Director of Adult Health & Social Care suggested that someone should pull together the help/programmes that were in existence and bring back to be taken to the Health & Wellbeing Board.

The NHS Liverpool CCG Governing Body:

- **Noted the report and considered the recommendations contained within it.**

PART 5: GOVERNANCE

5.1 The Future of the CCG Network – Report no GB 88-15

The Chief Officer presented a paper to the Governing Body to advise on changes to the Merseyside CCG network and to confirm the Governing Body's support for the creation of the Liverpool City Region CCG Alliance. The CCG Network had discussed this at the October 2015 meeting and had considered three options for governance arrangements:

Option 1 - Remain the same

Option 2 - Establish a Committee in Common across the Liverpool City Region (LCR) CCGs

Option 3 - Establish a Joint Committee across the LCR CCGs

Three options for the scope of the new body were also proposed –

Option 1 - Remain the same

Option 2 - Current responsibilities plus –

- Strategic Planning for health services across Liverpool City Region, including overseeing delivery of the 'Transformation and Sustainability Plan' which NHSE is expected to require.

- Acting as the body to take forward discussions regarding devolution of health across Liverpool City Region.
- Co-commissioning of Specialised services with NHSE
- Co-commissioning services which make sense on this footprint

Option 3 - As option 2 plus formal delegation of all commissioning which impacts on hospital services to the Network

It was agreed that each CCG would consider the options and that the feedback would then be distilled and reported back to the CCG Network in December 2015, in order that new arrangements can be progressed for implementation by April 2016. Liverpool CCG had considered the options at the Strategic Development Session in October 2015 and confirmed support for Option 2 for governance and option 2 for scope. The first meeting of the Liverpool City Region CCG Alliance would be on the 6th January 2016 when the Terms of Reference would be developed to be signed off by each CCG Governing Body.

The Lay Member for Patient Engagement agreed the principle but asked about representation from other CCGs such as West Lancashire. The Chief Officer responded that other bodies would be invited to the discussions as appropriate such as for Specialised Commissioning. In response to a query from the Local Medical Committee Secretary the Chief Officer noted that Wirral CCG had now been included in the CCG Network and would be formally part of the Liverpool City Region CCG Alliance.

The NHS Liverpool CCG Governing Body:

- **Noted that the Merseyside CCG Network was to be disbanded;**
- **Confirmed support for the establishment of the Liverpool City Region CCG Alliance as a formal Committee in Common**

6. QUESTIONS FROM THE PUBLIC

- 6.1** Mr William Shortall raised the issue of the Hydrotherapy Pool at the Royal Liverpool Hospital and re-iterated his views. The Chief Finance Officer confirmed that he was looking into the matter.
- 6.2** A Member of the Public referred to the discussions earlier in the meeting about Learning Disabilities and ensuring employment options for people with Learning Disabilities. The reference was about protecting vulnerable people from zero hours contracts and breaches of Equality legislation. The Chair responded that employers were required to make reasonable adjustments but the key was defining “reasonable”. The Chief Officer confirmed that the CCG was very keen to support this agenda.
- 6.3** A member of the public commented that the Public Health Annual Report was excellent. However he noted that he had struggled to hear the discussions at the meeting due to the shortcomings of the amplification system.
- 6.4** A Member of the public raised the issue of the visit of the Coca Cola truck to Liverpool city centre and the blatant marketing of a beverage so detrimental to health. The Interim Director of Public Health noted the various campaigns in place to reduce sugar intake, healthy swaps etc and the effect of sugar on diabetes and other health issues.

7. ANY OTHER BUSINESS

None.

8. DATE AND TIME OF NEXT MEETING

Tuesday 12th January 2016 1pm in The Boardroom, The Department.