

NHS BOLTON CLINICAL COMMISSIONING GROUP
Public Board Meeting

AGENDA ITEM NO:16.....

Date of Meeting:26th January 2017.....

TITLE OF REPORT:	CCG Executive Update	
AUTHOR:	Su Long, Chief Officer	
PRESENTED BY:	Su Long, Chief Officer	
PURPOSE OF PAPER: (Linking to Strategic Objectives)	To update board members on decisions taken at the Executive, within the Scheme of Delegation, that have a financial, reputational or operational impact.	
LINKS TO CORPORATE OBJECTIVES (tick relevant boxes):	Deliver Year 2 of the Bolton Locality Plan.	
	Ensure compliance with the NHS statutory duties and NHS Constitution.	
	Deliver financial balance.	
	Regulatory Requirement.	
	Standing Item.	√
RECOMMENDATION TO THE BOARD: (Please be clear if decision required, or for noting)	The Board is asked to note the content.	
COMMITTEES/GROUPS PREVIOUSLY CONSULTED:	<p>All items will have been through the CCG Executive.</p> <p>Most items will have been to other relevant committees/groups dependent on topic.</p>	
REVIEW OF CONFLICTS OF INTEREST:	Conflicts of interest are reviewed at every meeting.	
VIEW OF THE PATIENTS, CARERS OR THE PUBLIC, AND THE EXTENT OF THEIR INVOLVEMENT:	Patients, carers or the public will have been involved as required for each individual topic area.	
OUTCOME OF EQUALITY IMPACT ASSESSMENT (EIA) AND ANY ASSOCIATED RISKS:	Each topic will have been individually assessed for equality impact as required.	

CCG Executive Update

1. Executive Summary

- 1.1 Under the Scheme of Reservation and Delegation - appendix D of the NHS Bolton CCG Constitution a number of decisions are delegated to the CCG Executive.
- 1.2 Where these decisions are of an operational, financial or reputational matter, they will be reported to the Board within this CCG Executive Update.
- 1.3 Decisions between 29th November 2017 and 10th January 2018 are contained within this report.

2. All Age RAID Draft Specification

- 2.1 The report detailed the final specification for the Children and Young People RAID service in partnership with Salford and Trafford CCG, seeking sign off in localities to be used to inform all age RAID as part of a two year model providing crisis 24/7.
- 2.2 Funding has been identified as part of the Bolton Child and Adolescent Mental Health Services (CAMHS) transformation fund up to 2020 to expand the current RAID team and provide training for staff and Greater Manchester Mental Health Trust (GMMH) have commenced recruitment at risk.
- 2.3 The Executive reviewed the report and specification to understand the national requirement for this service provision and requested feedback on the outcomes.

3. KOOTH

- 3.1 The Executive received a presentation in relation to a digital early intervention tool, focusing on 11 to 16 year olds, which is available 24/7 and accessible on a resident basis (non-referral). There was discussion which assured the Executive members on local links made by the service for signposting, safeguarding and safety processes.
- 3.2 Discussions are taking place across Greater Manchester in relation to roll out of this tool at scale.
- 3.3 The Executive noted the update for this offer and recognised that service provision is for people who may not meet the criteria for CAMHS.
- 3.4 Following initial discussions, the Executive further reviewed a copy of the original proposal. It was noted that the funding has been identified from mental health focus monies [CAMHS] and the TEC strategy group will oversee implementation.
- 3.5 The Executive recognised this service as a positive approach to provide a lower level CAMHS offer, meeting a reported gap in services, which will help to support GP workload and access to care locally without referral.
- 3.6 Discussion took place regarding measuring outcomes, seeking comments from other areas that already use this service and ensuring that these are defined when finalising the offer and consideration when setting criteria arrangements if the service should need to cease at any point.

- 3.7 The Executive supported and recognised that this is set against mental health funding approved by the CCG Board.

4. GP Clinical System Rationalisation

- 4.1 The Executive received an update seeking endorsement on the Estates Technology Transformation fund [ETTF] bid in relation to securing capital funding to move towards a single GP clinical system in Bolton, supporting neighbourhood working, mobilising primary care workforce and associated staff.
- 4.2 This funding is expected to be secured through NHS Digital funds and there are minimal revenue consequences for the CCG. NHS England will own the assets.
- 4.3 It was reported that there is a level of interest already from practices to move to a single system, recognising there will be impact and disruption during any period of change and appropriate support will be required to mitigate this.
- 4.4 The Executive recognised that there needs to be a clear vision of what the CCG will offer, the benefits, risk mitigation, appropriate support and any criteria and learning from other areas that have undergone a similar implementation.
- 4.5 The Executive noted the update and supported progression of the ETTF bid based on the above comments raised. The Executive agreed further work was required to clarify the case for change, support available to Practices for transition and setting the criteria for a successful system to meet. This information would then be shared with GP members at a future meeting,

5. Bolton GP Legacy Telephony

- 5.1 The report detailed the issues with the ageing telephony system currently in place across the GP practices, community services and CCG.
- 5.2 Work has been developing with Bolton FT in relation to a move to an integrated system, reducing call costs. This proposal will incur an upfront cost £172k. However, £100k has already been identified, leaving a balance in year of £72k.
- 5.3 Members discussed the current system stability, as the new solution will not be available until March 2018 and recommended a basic emergency solution.
- 5.4 The Executive noted the report and supported the integrated service with Bolton FT to meet any CCG specific criteria due to the current issues with the system. The Executive recommended that this option be made available to the other practices not currently on the legacy system once the urgent changes had been made.
- 5.5 The Executive agreed to the implementation of an interim solution to mitigate risk until March 2018. Appropriate communication to be sent to the GP membership in relation to the final offer proposal.

6. Personalisation of Care and Choice for End of Life Care Patients via a Personal Health Budget

- 6.1 The Executive reviewed a report regarding the development of personal health budgets for end of life care programme. Positive feedback has been received and the Funded Nursing Care team is taking forward a process relating to notional personal health budgets

if a patient or family does not take advanced support.

6.2 The Executive noted the report and welcomed the update.

7. Primary Care Urgent Care Plans

7.1 The report outlined the current options considered to date against the national funding allocation. Greater Manchester Health & Social Care Partnership is implementing an urgent care practitioner model for nurse practitioner triage to review the queue of ambulance requests.

7.2 Discussion took place regarding the proposed options and recommendations being considered and noted that these have also been discussed with the Local Medical Committee.

7.3 The Executive recognised the GM monies for nurse practitioners to review the queue of ambulance requests and considered how this scheme will link with the local Bolton scheme. It was agreed to use the Bolton allocation to fund a trial acute visiting scheme to pick up direct deflections from NWS, along with the required expansion to streaming in A&E. The CCG will offer to support the GP Federation in relation to improving utilisation of the 7 day access service and improve DNA rates.

8. HR/OD Contract review

8.1 The CCG gave formal notice to Greater Manchester Shared Services (GMSS) in September 2017 for HR and Organisation Development service provision. Further work has been undertaken to look at all options and risks, benefits and cost comparisons.

8.2 The Executive approved option one to contract with Bolton FT and that this recommendation be included the Chief Officer update to the Board.

9. Recommendations

9.1 It should be noted that all other discussions at Executive which require decision are on the Board agenda.

9.2 NHS Bolton Clinical Commissioning Group Board is asked to note the content of this paper.

**Su Long,
Chief Officer**

January 2018