

## MINUTES

### NHS Bolton Clinical Commissioning Group Board Meeting – Virtual Meeting

Date: 9<sup>th</sup> July 2021

Time: 9.30am to 11.30am

Present:

Niruban Ratnarajah	CCG Chair
Su Long	Chief Officer
Melissa Maguinness	Director of Strategic Commissioning/Deputy CO
Kelly Knowles	Acting Chief Finance Officer
Alan Stephenson	Lay Member
Tony Ward	Lay Member, Governance
Zieda Ali	Lay Member, Public Engagement
Stephen Liversedge	Clinical Director, Primary Care & Health Improvement
Jane Bradford	Clinical Director, Governance & Safety
Helen Wall	Clinical Director, Commissioning
Dharmesh Mistry	GP Board Member
Tarek Bakht	GP Board Member
Emma Saunders	GP Board Member
Helen Lilley	Board Nurse
Romesh Gupta	Secondary Care Specialist
Helen Lowey	Director of Public Health, Bolton Council

In attendance:

Nicola Onley	Associate Director, Communications and Engagement, Bolton CCG
Andrew Chilton	Deputy Director of Finance, Bolton FT

Minutes by:

Joanne Taylor	Board Secretary
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Minute No.	Topic
98/21	<b>Apologies for Absence</b> There were no apologies for absence.
99/21	<b>Introductions</b> Board members introduced themselves. There were 3 members of the public in attendance.
100/21	<b>Chair's Update</b> The Chair updated the Board on the NHS's 73 <sup>rd</sup> birthday and thanked all health and care staff for their continued hard work through the Covid pandemic. The Chair asked for a moment of reflection for all health and care staff and the local population who have lost their lives due to Covid. He reminded the Board of the need to continue this good work and the challenges that are faced with restarting elective recovery and access work, including the challenges this will bring for both primary and secondary care colleagues.  Members were asked to celebrate this birthday but also use as a time of reflection to think of those going through difficult times.

101/21	<p><b><u>Questions/Comments from the Public on items on the Agenda</u></b>  There were no questions/comments from the public on items on the agenda.</p>
102/21	<p><b><u>Declarations of Interest in Items on the Agenda</u></b>  GP Board members declared an interest in the item on the agenda on the Bolton Quality Contract 2021/22. It was agreed that GP Board members would be allowed to take part in the discussions as this report is a recommendation from the Primary Care Commissioning Committee. However, non-conflicted Board Members would be asked to approve the continuation of the Bolton Quality Contract for 2021/22.</p> <p>The Board noted that on-going declarations of interest stood for every Board meeting and were publicised on the CCG's website. The Chair reminded members of their obligation to declare any interest they may have on any issues arising at meetings which might conflict with the business of the CCG Board.</p> <p>It was noted that declarations declared by members of the Board are listed in the CCG's Register of Interest. The Register is available either via the CCG Board Secretary or the CCG's website at the following link:  <a href="http://www.boltonccg.nhs.uk/about-us/declarations-of-interest">http://www.boltonccg.nhs.uk/about-us/declarations-of-interest</a></p>
103/21	<p><b><u>Minutes of the Meeting previously agreed by the Board from 11th June 2021</u></b>  <b>The minutes were agreed as an accurate record. It was noted that there were no outstanding actions on the action log.</b></p>
104/21	<p><b><u>Patient Focus</u></b>  This month's patient focus updated the Board on how the Covid vaccination bus has helped identify people who were vulnerable, at risk or were not engaged with primary care and other services to make contact and offer them a vaccination.</p> <p>Members were taken through three specific stories that had been highlighted. Members discussed the opportunities this brings to progress this work beyond the vaccination programme, the main opportunity being that primary care is able to see patients that they may not generally see. Methodically working through vaccinating a practice's own patients is key.</p> <p>Members discussed these opportunities further, in particular communities that are far removed from receiving health care service to think differently on how to approach communities to provide the right healthcare.</p> <p>Members also noted the benefits of the vaccination bus and how this has helped to reach those people in the most deprived areas.</p> <p><b>The Board noted the Patient Focus.</b></p>
105/21	<p><b><u>Bolton Quality Contract (BQC) 2021/22 and Options for Payment</u></b>  The report presented updated the Board on the process for reviewing the re-set of the BQC for 2021/22 and agreed standards, KPIs and contract value as overseen by the Primary Care Commissioning Committee. Thanks were given to Stephen Liversedge and his team for the hard work in developing the re-set BQC for 2021/22.</p> <p>The presentation highlighted the proposals for a 9 month BQC from July 2021 to March 2022 and set out the context of the BQC from February 2020 to the proposal considered in May 2021.</p> <p>The Board received an update on the 6 month re-set programme from September 2020 to March 2021, including an update on the quarter 4 data, highlighting the achievements to March 2021. The Board reviewed the general principles agreed by the Primary Care Commissioning Committee for the setting of the 2021/22 (9 month) BQC, giving consideration to general practice workload and setting achievable KPIs.</p>

	<p>The proposed 2021/22 BQC standards, KPIs and the rationale were reviewed and changes noted. Members also noted the current principle regarding the contract basis and penalties and considered the Primary Care Commissioning Committee's recommendation for the financial uplift for 2021/22, which ensured an increase in investment into practices.</p> <p><b>The non-conflicted Board Members approved the recommendations made by the Primary Care Commissioning Committee for the BQC for 2021/22 commencing from July 2021 to March 2022, including the financial option to apply a 2% inflationary uplift on the 2020/21 rate to give a rate of £113.13.</b></p>
106/21	<p><b><u>Report of the Chief Finance Officer Month 2</u></b></p> <p>The finance report for Month 2 was presented, which has previously been considered by the CCG Finance and QIPP Committee.</p> <p>It was reported that a system wide financial envelope has been allocated to Greater Manchester (GM) for the period 1 April 2021 to 30 September 2021. This comprises of initial allocations for both CCGs and Providers, Covid funding, growth funding and system top up. GM has managed the financial plan within this envelope for all areas of spend, with the exception to this being those areas where national funding was available.</p> <p>Any expenditure relating directly to the Hospital Discharge Programme has been captured and reported separately within the monthly Non ISFE submissions to NHS England. Allocations to cover these costs are expected to be received once the validation process with NHS England has been undertaken.</p> <p>At month 2, the CCG has reported a balanced position however it should be noted that this is at significant risk due to pressures within Continuing Care Services, as a result of an increase in occupancy and compounded by the unidentified QIPP, which is currently valued at £2.04m.</p> <p><b>The Board noted the financial position at Month 2, which currently excludes the Month 2 year to date allocation for expenditure incurred under the Hospital Discharge Programme.</b></p> <p><b>The Board also noted the Month 2 position is reporting a balanced position compared to the financial plan approved via CCG Board and GM Partnership Executive Board and the stated risks to this balanced position including volatility of CHC spend and the unidentified QIPP value.</b></p>
107/21	<p><b><u>CCG Corporate Performance Report</u></b></p> <p>The performance report was presented to the Board. The following highlights were noted for months 1 and 2:-</p> <p><b><u>Elective Care</u></b></p> <p>The impact of Covid has been particularly felt in the elective care pathways of the health system. Significant backlogs developed across all providers, due to the limited delivery of elective care as resources were prioritised nationally to fight the urgent effects of the pandemic. Performance against the 92% (90% across GM) standard is still significantly under the national standard at 69.4% in May 2021. This is in line with other GM localities. There has been a slight reduction in 52 week breaches from 2,324 in April to 2,074 in May 21 as Bolton FT is treating patients in clinical and chronological priority in line with the GM elective recovery programme.</p> <p>The 6-week diagnostic target remains an ongoing challenge, with performance in May 2021 at 29.3%, against a target of &lt;1%. Following the receipt of the national planning guidance and the priorities that have been set for the coming year by NHS England, commissioners and providers are working together to ensure recovery plan are in place. Work is underway to ensure demand and capacity is fully understood with additional diagnostic being sourced from the independent sector.</p>

### **Cancer**

In April 2021, there was a slight decline in the performance for the 'Percentage achieving maximum two week wait for first outpatient appointment, for patients referred urgently with breast symptoms (where cancer was not initially suspected)' from 25.7% in March 2021 to 21.3%, against a target of 93%. The performance for the indicator "Percentage achieving maximum 2 week wait for first outpatient appointment, urgently referred with suspected cancer via GP", has also declined slightly with 96.6% of referred patients being seen within 14 days of referral. However this still exceeds the target of 93%. The percentage achieving maximum two month (62 day) wait from urgent GP referral to first definitive treatment for cancer" saw a further decrease in to 80.3% in April 21 which is below the national target of 85%. The performance for 'Maximum 62 day wait from referral from an NHS screening service to first definitive treatment for all cancers' was 87.5% in April 2021, which is a decline from 88.9% in March 2021.

In April 2021, there were 7 Bolton CCG patients reported within the month (monitored in a rolling cohort) who waited 104 days or more from initial referral to the first definitive treatment. The clinical teams continue to monitor these patients and there was no harm reported to any of the 7 patients.

### **Urgent and Emergency Care**

A&E performance remains below the national standard of 95% at 72% in May. Following an April average daily attendance at A&E of 351, May 2021 saw a further increased average attendance to 370 patients per day. In April the number of NWS patients waiting >30 Mins <59 minutes for a A&E handover to take place, was 154. Performance has reduced further in May resulting in a figure of 205. There were 76 ambulance waiting over 60 minutes for handover in May, following 60 in April, which is 36 above the agreed locally set target. Non Elective LoS was maintained at 4.3 in May, this figure is now below the target of <4.61.

### **Mental Health**

April's IAPT prevalence was 22% but remains in line with the trajectory for the anticipated extended target of 25% by March 2022. Funding has been agreed to facilitate this for both GMMH and 1 Point, with recruitment underway. Recovery was slightly under target at 48% in month. Performance against the EIP target improved slightly but still fell short of the national target which has been extended to 60% for 21/22. Mental Health Liaison Service (MHLS) performance exceeded the target at 83.7%.

Acute OAPs continue to fluctuate with 4 new placements in April. The GM crisis care and DTOC group continues to drive forward alternatives to admission and supported options for discharge including an extension of the tenancy support pilot provided by Bolton at Home.

### **Children's and Maternity**

Maternity booking performance at Bolton FT for women registered with a Bolton GP was slightly below the 90% target in April with a monthly position of 89%. Bolton's access to CYP mental health treatment continues to improve with a performance of 54.8% in April compared to 41.5% in March. All Age Mental Health Liaison (the number of completed assessments for children aged 16 and under) reduced slightly from March (56) to April (52). In April there were 203 referrals received by Bolton CAMHS, this is a reduction from March of 29 referrals.

**The Board noted the performance report for months 1 and 2.**

108/12

### **Covid 19 Update**

The Board received a presentation outlining the most up to date information on the local vaccination programme and the latest public Covid position.

The presentation highlighted the daily confirmed cases of Covid 19 for Bolton with Pillar 1 and 2 cases inclusive, the current vaccination doses given by age group and doses given at the local vaccination sites over a period of time along with the challenges for July, which included:

- The Government commitment that all over 18s should be offered first dose by 19<sup>th</sup> July.
- 2nd dose schedule reduced to 8 weeks.

	<ul style="list-style-type: none"> <li>● Several Bolton sites had large gaps in supply compared to need - sites capacity plans provided to SRO and GM team have supported with supply.</li> <li>● Our fixed vaccination sites are the focus for the majority of the area.</li> <li>● Vaccine buses and pop-ups being used in our most deprived and low uptake areas.</li> <li>● Demand for first doses is tailing off, despite nearly 50,000 adults still to do.</li> <li>● Many people trying to receive second dose before 8 week guided timeline, causing pressure on sites and frustration.</li> </ul> <p>Other important updates noted were that the main site for vaccinations for Central, Rumworth and Farnworth &amp; Kearsley has moved from Lever Chambers to the Market Place. Brightmet PCN has given notice on their contract for Covid vaccinations, which ceased at the end of June 2021. The Greater Manchester team has also commissioned Cohens Pharmacy within Brightmet Health Centre to provide vaccinations to this population. This ensures the service will be provided at the same site.</p> <p>The Board was also informed of the plans to develop specialised clinics to focus particularly on maternity services and the cultural liaison midwife to offer a bespoke offer to pregnant women and a specialised clinic in operation from next week for sex worker and probation individuals which will also offer health care advice.</p> <p><b>The Board noted the update report. It was agreed that further information would be shared with the Board at the next meeting on better births, highlighting any maternity issues regarding mortality rates for miscarriages/still births and mental health since the vaccination programme commenced.</b></p>
109/21	<p><b><u>Minutes and Reports from:</u></b></p> <p><b><u>CCG Executive Update – May/June 2021</u></b> The Board noted the update.</p> <p><b><u>CCG Finance and QIPP Committee – 25/6/21</u></b> The Board approved the Minutes.</p> <p><b><u>Primary Care Commissioning Committee – 10/6/21</u></b> The Board approved the Minutes.</p>
110/21	<p><b><u>Any Other Business</u></b> There was no further business discussed.</p>
111/21	<p><b><u>Date of Next Meeting</u></b> It was agreed that the next meeting would be held on <b><u>Friday 13<sup>th</sup> August 2021 at 9.30am</u></b></p>
112/21	<p><b><u>Exclusion of the Public</u></b> The Chair confirmed there were no confidential matters to be discussed and, therefore, the Board meeting was closed.</p>

**KEY ACTION LOG:**

**Updated from 9<sup>th</sup> July 2021:**

*This action log aims to cover all matters arising from previous meetings.*

*Members will raise any further queries with the Chair in advance of the next meeting.*

**COMPLETED ACTIONS:**

9/7/21 108/12 MM/HW	<b>Covid 19 Update</b> It was agreed that further information would be shared with the Board at the next meeting on better births, highlighting any maternity issues regarding mortality rates for miscarriages/still births and mental health since the vaccination programme commenced.	Progressing	Aug/Sept 21	Additional information/national link sent to the lay member, public engagement. The maternity lead invited to present at the September board development session.
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**Actions completed since April 2015 = 223**

**Number of actions remaining at 10<sup>th</sup> September 2021= 0**

**NOTE 1:**

MM	Melissa Maguinness		
HW	Helen Wall		

**NOTE 2:** Current Status, (incl. relevant dates): Completed, Overdue, On target, Delayed