

Strategic Finance Committee

Minutes of the meeting held on 27th March 2018, held in the Bevan Room, South Plaza

Minutes

Present		
Danielle Neale	Chair Bristol CCG, Audit and Governance Lay Member	DN
John Rushforth	South Gloucestershire CCG, Audit and Governance Lay Member	JR
Sarah Truelove	BNSSG Chief Financial Officer	ST
Lisa Manson	BNSSG Director of Commissioning (For items, 5,7,10 onwards)	LM
Apologies		
Julia Ross	BNSSG Chief Executive Officer	
Ryan Richards	North Somerset CCG, Audit and Governance Lay Member	
Deborah El-Sayed	BNSSG Transformation Director	
Janet Biard	South Gloucestershire CCG Governing Body, Practice Representative	
Dr David John	North Somerset CCG Governing Body, GP Member	
Richard Laver	Bristol CCG Governing Body, Practice Representative	
Steve Rea	BNSSG PMO	
In attendance		
Peter Marriner	Strategic Finance Committee Chair (From 1 st April)	PM
Claire Thompson	BNSSG Delivery Director	CT
Lesley Ward	Urgent Care, Clinical Lead	LW
Bob Deans	Attain	BD
Mike Vaughton	Deputy Chief Financial Officer	MV
Lucy Powell	PA to the Chief Financial Officer (Note taker)	LP

	Item	Action
02	<p>Declarations of Interest</p> <p>There were no additional declarations of interest made.</p>	
03	<p>Minutes of last meeting and actions from previous meetings</p> <p>The minutes of the last meeting were agreed as a correct record. It was agreed to note that Ryan Richards and Janet Biard left during the afternoon of the February meeting.</p> <p>The Committee reviewed the action log:</p>	

	Item	Action
	<ul style="list-style-type: none"> • 30/01 10(1) Sarah Truelove explained that for 2018/19 reporting the finance report would have a clearer alignment between activity and finance. It was agreed to bring a draft report showing the revised reporting structure to the April meeting for the Committee to review and comment. • 30/01 12(1) The Committee discussed the merit of presenting the Governing Body with a set of key messages from the Committee rather than minutes each month. It was agreed to add a section to the agenda for the Committee to review key messages each month. • 26/02 6(1), 26/02 7(1), 26/02 7(2), 26/02 7(3), 26/02 7(3), 26/02 10(1), 26/02 10(2), 26/02 10(3), 26/02 10(4) It was agreed that Steve Rea would explain these actions further to the Committee at the next meeting. • 26/02 8(1) Urgent Care updated plans scheduled for the March meeting. This action was closed. • 26/02 11(1) The Committee noted that the Primary and Community Care control centre savings plans had been updated within the system financial recovery plan report and this action was closed. • 26/02 12(1) Enablers to the savings plan had been included within the system financial recovery plan report and this action was closed. 	<p>ST</p> <p>LP</p> <p>SR</p>
04	<p>Month 11 Financial Report</p> <p>Sarah Truelove (ST) informed the Committee that the CCGs were forecasting a deficit of £35.0m for 2017/18 and that this had not changed from Month 10. It was noted that there was no expected change of this position for Month 12.</p> <p>John Rushforth (JR) asked about the diagnostic imaging outlier shown in the report. ST noted that this was activity driven and highlighted the need for the finance report to align with the activity reporting.</p> <p>ST noted that Bristol City Council had signed an agreement to repay the CCG £1.4m which had been queried from the Better Care Fund underspends. The Committee acknowledged the support from Glyn Howells in achieving this repayment and thanked him for his hard work.</p> <p>Danielle Neale (DN) commented on the running costs underspend and asked for a further explanation as to how the turnaround costs were still included within this amount. ST noted that there was a savings plan associated with the running costs and that this had been phased across the year. ST agreed to review and confirm the turnaround costs to the Committee.</p>	ST
05	Budget Recommendation Report	

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	<p>Sarah Truelove (ST) presented the report to the Committee highlighting the additional amounts allocated to the CCG following reviews of growth by NHS England. It was noted that there was an additional allocation for elective and emergency admissions. It was noted that the amount allocated was based on a 5% increase in these admissions.</p> <p>ST noted that the Community, Mental Health and other provider contracts had been agreed and signed. The plans for UHB and NBT have not yet been agreed and there are meetings planned with UHB and NBT later in the week to agree these. ST assured the Committee that she believed the contracts would be agreed within the allocated amount and would not exceed the budgets.</p> <p>ST noted the risks to the 2018/19 position including:</p> <ul style="list-style-type: none"> • Slippage on 2018/19 savings which had been mitigated by starting plans for 2019/20 next year. • The CCG has not built in No Cheaper Stock Obtainable drug provision into the 2018/19 position as per NHS England request. • Acute activity growth which is being reviewed by the Urgent Care control centre and BNSSG system working through the STP work groups. <p>ST noted that the CCG has reserves of 0.5% which can be utilised if necessary.</p> <p>The Committee recommended that the Governing Body approve the budget outlined in the paper.</p> <p>Delegated Commissioning</p> <p>Mike Vaughton (MV) summarised the CCGs position on delegated commissioning explaining that as of the 1st April 2018, the BNSSG CCG would be responsible for the Primary Care budgets.</p> <p>MV assured the Committee that the budgets inherited by the CCG were not in deficit and so there was no cost pressure shift to the CCG.</p> <p>It was noted that NHS England would be setting the General Practice budgets for 2018/19 which the CCG would review and approve. From 2019/20 the CCG would be responsible for this budget setting. It was noted that NHS England would also be drawing up the payment schedules for 2018/19 for CCG review.</p> <p>The Committee asked that the budget paper presented to the Governing Body highlighted that the budgets transferring to the CCG for delegated</p>	

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	commissioning did not represent a cost pressure to the CCG.	
06	<p>Month 11 review of the System Financial Recovery Plans</p> <p>Sarah Truelove (ST) presented the report to the Committee highlighting that the current focus was 2018/19 planning and the achievement of the £37m savings plan. Currently £32m of savings were included within the control centres savings plans with the additional £5m to be developed within the System Wide Task and Finish groups associated with the Sustainability and Transformation Plan (STP).</p> <p>ST noted that following the February Strategic Finance Committee the control centres had reviewed their plans and removed plans not sustainable and developed further plans. Further work is ongoing to produce detailed RAG ratings for all the plans as well as milestones.</p> <p>John Rushforth (JR) asked whether there was any contingency above the £37m to allow for plan slippage and gaps in delivery. ST explained that the control centres are developing schemes for 2019/20 in addition to the plans for next year. The 2019/20 plans are expected to be in place by June 2018 and ready for delivery during the 2018/19 planning round. It was noted that a rolling programme of delivery was expected to be established to aid the process. ST explained that over the 2 years it was expected that £57m would be saved with the majority being achieved in 2018/19.</p> <p>Danielle Neale (DN) noted that in previous years the CCGs had been adversely affected by schemes not beginning in April. ST noted that the first Turnaround Steering Group of 2018/19 has been extended in order to review plans and provide a platform for the PMO to further assess plans and review commencement dates. DN also noted that the CCG had been disadvantaged by the later publication of the NHSE Planning guidance.</p> <p>John Rushforth asked that the 2019/20 risk assessed plans are presented to the Committee at the next meeting for review.</p>	ST/PMO
07	<p>System Financial Recovery Plan: Urgent Care Savings Plan</p> <p>The Committee welcomed Claire Thompson and Lesley Ward to the meeting. Danielle Neale noted that the papers for this item had only been distributed that morning and reminded Committee members of the importance of Committee members receiving papers in a timely manner.</p> <p>Claire Thompson (CT) presented the paper acknowledging that the 2018/19 plans presented at the last meeting were not as expected and so the Urgent Care control centre had reviewed the feedback and developed a revised set of plans and ideas which were not yet fully worked up but were more in line with the Committee's expectations.</p>	

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	<p>CT outlined the Urgent Care Strategy and the events and groups which had been attended across the STP footprint to further discuss and develop the strategy.</p> <p>John Rushforth (JR) asked about benchmarking across the Urgent Care system and asked how much the CCG should be spending on Urgent Care as a comparison with other CCGs. CT explained that the CCGs spend less on Urgent Care than other areas nationally but spend more in terms of acute services as a whole. It was noted that admissions in the CCGs were low, but increasing, but the length of stay was higher than the national average. It was agreed that Mike Vaughton would send more detailed activity figures to the Committee members.</p> <p>CT outlined the proposed plans noting that there will be further plans suggested as outcomes from the STP Task and Finish Group. The Committee reviewed the plans and noted the lack of figures attributed to the savings. JR asked for indicative figures for the plans and CT noted that figures could be suggested based on pilots in other parts of the country.</p> <p>The Committee discussed the need for a change in the front door model for A&E and CT outlined the possible options which would be reviewed and discussed in further detail as part of the Urgent Care Strategy.</p> <p>CT noted that the focus for the Urgent Care control centre for 2018/19 was to develop a 3 year strategy with delivery of savings realised between 2018 and 2021. CT noted that realistically the work undertaken in 2018/19 would be transactional with the transformation work taking place in 2019/20.</p> <p>The Committee agreed that the Urgent Care system was an important part of the savings delivery programme and a key component of improving health care provision in Bristol, North Somerset and South Gloucestershire (BNSSG) and it was recommended that Urgent Care savings be a standing item on the SFC agenda for review each month. The Committee requested that at next month's meeting the plans include financial detail and more detail on the timelines for the plans.</p>	<p>MV</p> <p>PMO/ CT</p>
08	<p>Turnaround Steering Group Minutes</p> <p>The Committee received the minutes and noted that these were for information only.</p>	
09	<p>Information sent to the Control Centres following the February Committee meeting</p> <p>The Committee reviewed the feedback that had been sent to the control</p>	

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	centres following the February SFC meeting. Danielle Neale agreed with the feedback for the Urgent Care control centre and asked whether the control centre had considered looking at benchmarking tools such as RightCare to inform local models.	
10	<p>Modelling Assumptions – 3 R’s</p> <p>Lisa Manson introduced Bob Deans of Attain explaining that Attain had been commissioned by the CCG to review the provision of services in regards to the 3R’s, Rehabilitation, Reablement and Recovery. The Committee discussed the data reviewed by Attain and the average length of stay for the current local Rehab beds. The CCG were reviewing a number of options for the Frenchay and Thornbury beds and a paper would be presented to the Governing Body with full details of costings and timelines.</p>	
11	<p>Procurement – Pipeline and Current Initiatives</p> <p>Lisa Manson (LM) highlighted to the Committee that there was currently a piece of work ongoing to review the contracts database to produce a procurement timeline for the BNSSG CCG. Once the timeline had been produced the CCG could review which procurement methods are advantageous for each contract.</p>	
12	<p>Strategic Finance Committee Terms of Reference</p> <p>Sarah Carr (SC) presented the Terms of Reference (ToRs) to the Committee noting that the ToRs and governance arrangements had been discussed at various groups and reviewed by Internal Audit. The input from CCG colleagues and Internal Audit had been taken into account and reflected in the updated ToRs. The ToRs for all the Committees would be reviewed again at the Governing Body in May for final sign off.</p> <p>The Committee discussed the idea of presenting key messages of the Committees rather than minutes to the Governing Body and SC suggested that a prompt at the end of the agenda be added to remind Committee members to discuss key themes for the Governing Body.</p> <p>Danielle Neale highlighted the SFC membership noting the requirement for GP representation on the Committee. SC explained that Kate Rush, Clinical Lead for the CCG, was leading on this piece of work and this would be resolved by May.</p>	
13	<p>Review Forward Work Programme</p>	

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	Sarah Truelove requested comments on the forward work programme and asked that these be emailed before the next meeting.	
14	<p>Any Other Business</p> <p>Sarah Truelove thanked Danielle Neale, Ryan Richards, Janet Biard and Dr David John for their attendance at the SFC meetings and thanked them for all their contributions.</p>	
15	<p>Review of Committee Effectiveness</p> <p>The Committee reviewed the meeting noting that there had been a large number of apologies for this meeting. The Committee agreed that the item regarding the 3 R's should have been provided with more time for discussion.</p>	

Lucy Powell
PA to CFO