

## Business Planning & Clinical Commissioning Minutes

**Thursday 18<sup>th</sup> January 2018 9:30-11:30 am**  
**Board Room, King Edward Hospital, Windsor, SL4 3DP**

<b>Present</b>	<b>Title</b>
John Lisle (JL)	Accountable Officer, BE CCG
Lalitha Iyer (LI)	Medical Director, BE CCG
Debbie Fraser (DF)	Deputy Director of Finance & Performance, BE CCG
Catriona Khetyar (CK)	Head of Medicines Optimisation, BE CCG
Jackie McGlynn (JMG)	Clinical Director & GP , Bracknell & Ascot CCG
Jim O'Donnell (JOD)	Clinical Chair & GP, Slough CCG
Karen Maskell (KM)	Lay PPI, Bracknell & Ascot CCG
Nithy Nandra (NN)	Clinical Director & GP, Slough CCG
Mike Connolly (MC)	Lay PPI, Slough CCG
Fiona Slevin-Brown (FSB)	Director of Strategy & Operations, BE CCG
William Tong (WT)	Clinical Chair & GP, Bracknell & Ascot CCG
Huw Thomas (HT)	GP, WAM CCG

<b>Apologies</b>	<b>Title</b>
Sarah Bellars (SB)	Director of Nursing & Quality, BE CCG
Adrian Hayter(AD)	Clinical Chair & GP, WAM CCG

<b>In Attendance</b>	<b>Title</b>
Zara Devine (ZD)	PA, Director of Strategy & Operations Director of Nursing & Quality, BE CCG
Emma Willing (EW)	AD for Mental Health, LD, Children's & Families BE CCG
Anna Wilson-Doyle (AWD)	Senior Project Support Officer, BE CCG
Ben Cox (BC)	Commissioning Manager, BE CCG
Rachel Wakefield (RW)	AD of Urgent Care & Operations, BE CCG

<b>Item No</b>	<b>Item</b>	<b>Action</b>
<b>1</b>	<b>Welcome and Apologies</b>	
	The Chair JL welcomed members to the meeting and noted the above apologies.	
	<b>Conflicts of Interest</b> No new conflicts were registered.	
<b>3</b>	<b>Minutes of the Last Meeting</b> The minutes of the last meeting held on 21 <sup>st</sup> December 2017 were agreed as an accurate record.	
<b>4</b>	<b>Action log</b> The action log was updated accordingly.	
<b>5</b>	<b>ASD Autistic Spectrum Hub Business Case</b> The recommendations is for the CCG to fund a project team for 6months to monitor and analyse the current demands on the service, along with	

	<p>planning the next steps to help reduce waiting times and provide a collaborative service for adults and children. The intension is to work of collaboratively with split cost with the local authorities across Berkshire totalling c£21k per partner. The total cost is c£167k. NHSE have expressed their interest around the project with the potential to offer funding.</p> <p>Concerns were raised around the active early involvement of service users and families, it was noted the CCG are working closely with the Autism group.</p> <p>Discussions took place around the role of the project team, the team will explore what is needed to improve the service with the potential to extend the team to allow them to implement the new service. It was suggested the CCG should develop a service specification based on the evidence collated and advise for multi-agency procurement.</p> <p>Discussions took place around the current cost to the system including placements and whilst these figures are not clear, due to hidden costs around both conditions it would be possible to pull together a rough costing.</p> <p>This service would be a first to provide for adults and children with both conditions. BHFT are keen for a service to cover all ages due to the gaps in the current service during transition from 18-25 years olds. It was noted there are some cases in which children are diagnosed and treated privately then return to the NHS causing issue, the exact number of cases is not yet know.</p> <p>The total cost of the service would be c£334k if West Berkshire do not share the cost, East Berkshire CCG will need to fund c£80k, the committee were asked to make their decision based on East Berkshire CCG funding full £80k investment, with the potential to receive funding from NHSE and shared costs with system partners.</p> <p>It was suggested to take this case to System Leaders.</p> <p>The committee approved the business case.</p>	
6	<p><b>Paediatric Hotline Business Case</b> Following the case for change that was presented to the committee in August 2017 this business case proposes a new pathway and extended paediatric hotline to address the increasing demand.</p> <p>The recommendations is an invest to save project of £130k for a paediatric consultant Monday – Friday 9am-8pm and an administrator at the trust.</p> <p>Discussions took place around the estimated savings which are based on current tariffs c£278k pa. it was suggested to follow the Frimley South model with a consultant in A&amp;E for the north to reduce PAU costs.</p> <p>Assurance needs to be in place that the same service is accessible across the trust both North and South.</p> <p>It was noted of the 54 calls received in a day only 50% prevent an admission, concerns were raised over the cost of the hotline which will act</p>	

	<p>as an advice and guidance. Along with concerns over the previous trial of an extended hotline which did not reduce NEA to A&amp;E. Negotiations have taken place to lower the cost of the service but were unsuccessful. The committee were informed the costs are capped and cannot increase if activity increases.</p> <p>Concerns were raised around the lack of awareness and engagement with members on this service proposal along with the complexity of the process for out of hours advice. It was suggested for a community service to be implemented to help reduce out of hours admissions.</p> <p>It was noted this is an investment case and assurance is needed that the additional consultant will not be distributed elsewhere in the trust.</p> <p>The clinicians were asked on how often they have used this service.  JOD had used this service twice in the last month  JMG had used this service once and the advice given was to send the child to A&amp;E  NN had used the service twice  HT had not used the service  The clinicians felt the service would have increased usage if the hotline was available for more than 1 hour per day.</p> <p><b>ACTION: The Business Planning committee is to review the service outcomes achieved at 12months.</b></p> <p>The committee approved the business case with the following points:</p> <ul style="list-style-type: none"> <li>• Assurance the same service will be provided across the trust</li> <li>• A review is carried out after 12 months to assess the outcomes.</li> <li>• Educate GP's and service users on the service.</li> </ul> <p><b>ACTION: To provide education / brief of the service to GP's and the public.</b></p>	<p>ALL</p> <p>CK</p>
7	<p><b>18/19 Planning update</b>  FSB informed the committee a full update will be provided at the next Governing Body, the planning guidance has not yet been received. Weekly meetings will be scheduled to address the details set out in the guidance, local performance is currently being mapped.</p> <p>The first draft submission is due on 20<sup>th</sup> February 2018 with final submission due on 4<sup>th</sup> April 2018.  ACTION: To circulate a local narrative of the guidance to members.</p> <p><b>Ophthalmology update</b>  The committee were informed discussions have taken place with Frimley who have agreed to provide an in house service to cover inpatients and A&amp;E. This is an interim arrangement for 12months in which during this time the CCG will need to work with RBH, Frimley and members to design a community service. There will be workshops to plan the service redesign in April &amp; May and the committee were informed to contact Mo or Sangeeta should they wish to be involved.  The triage out-patient service will be at RBH and Frimley.</p>	

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<p>Communications will go out to members to inform them of the referral process, there is no change to the current phone number or out of hours service.</p> <p><b>ICDMH- update</b> The STP programme delivery board approved the ICDMH business case, the local steering groups will be responsible for designing the model and identifying any additional staffing needed within financial envelope.</p> <p><b>Meeting Review</b> It was felt a more detailed summary was needed for the paediatric hotline and to be presented to all members groups before coming for approval. The committee felt there was the time to discuss the business cases efficiently.</p>	
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**Next meeting:**  
**Thursday 22<sup>nd</sup> February 10:45am -12:15pm**  
**Room2 , King Edward VII Hospital, St Leonards Road, Windsor, SL4 3DP**