Putting good health into practice

Minutes **Finance and Information Group** 13th November 2017, 10.00-12.30pm Meeting Room 1, Civic Centre, Arnot Hill Park, Arnold, NG5 6LU

Present:

Lay Member – Financial Management & Audit (Chair)
Director of Operations
Director of Contracting – South CCGs
Clinical Lead
Deputy Chief Finance Officer – South CCGs
Contracts & Information Manager

In attendance:

Fiona Callaghan (FC) Janet Soo-Chung (JSC) Louisa Hall (LH)

Head of PMO **Turnaround Director** Corporate Administration Officer (Minute taker)

Apologies:

Sharon Pickett (SPi) Sam Walters (SW)

Deputy Chief Officer Accountable Officer

Cumulative Record of Members Attendance (2017/18

Name	Possible	Actual	Name	Possibl e	Actual
Terry Allen	7	7	Sam Walters	7	1
Hazel Buchanan	7	4			
Maxine Bunn	7	7(4x deputy)			
Dr James Hopkinson	7	6			
lan Livsey	7	7			
Sergio Pappalettera	7	7			
Sharon Pickett	7	7			

Purpose of Group

As per the Terms of Reference of the Finance & Information Group (FIG), this group has delegated authority from the Governing Body to monitor budgets and activity and ensure their delivery against plan, reporting all deviations and respective corrective action to the Governing Body. The FIG will also oversee the financial planning process, agreeing the financial plan assumptions and principles.



Item		Action
FI 17/086	Welcome and Apologies	
	Terry Allen (TA) welcomed members to the meeting. Apologies were noted as above.	
	The Group acknowledged congratulations to Jonathan Bemrose being appointed as the Chief Finance Officer for Greater Nottingham CCGs.	
	Quoracy was confirmed.	
FI 17/087	Declarations of Interest	
	The Chair reminded committee members of their obligation to declare any interests they may have on any issues arising at Finance and Information Group meetings that might conflict with the business of the CCG.	
	Declarations of Finance and Information Group were listed in the CCG's Register of Interests. Terry Allen (TA) noted that the Register was available either via the secretary to the FIG Group or the CCG website at the following link:	
	http://www.nottinghamnortheastccg.nhs.uk/contact-us/freedom-of- information/conflicts-of-interest/	
	No Declarations of Interest were made in relation to the agenda.	
FI 17/088	Minutes and Actions of the previous meeting	
	The minutes of the meeting held on the 9 th October 2017 were approved as a true and accurate record with the following agenda items revisited:	
	Actions completed:	
	<u>FI 17/077</u> : Jonathan Bemrose is liaising with Kevin Watkins as an ongoing action. <u>FI 17/080</u> : Data shared by Maxine Bunn. <u>FI 17/082</u> : SPa shared findings with Dr James Hopkinson.	
FI 17/089	Finance update	
	Ian Livsey (IL) gave an update with the following points highlighted to the Committee:	
	 M7 will deteriorate by £0.5million with £3.8 million reserves to offset the overspend. Deserves and mitiactions are now exhausted. Current forecast 	
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	 shows the CCG will not have mitigations for this and therefore, will need to share spend between South CCGs. This will require discussion at the next Governing Body meetings. This figure also includes stroke with half of the mitigations in the forecast. Acute sees a £600,000 overspend, mainly due to the NUH contract position and un-transacted QIPP. £142,000 increase mainly due to a one-off high cost patient. Offset with the risk share. Community is at £90,000 underspend in month, however, still overspent in year to date. Issues were continence and the community un-transacted QIPP. Continence did not hold a 	
	 budget therefore in terms of performance, this shows as underspend but with no budget, this appears as an overspend. Community forecast for 2nd half of year to reduce the £239,000 with approximately £350,000 over the 4 CCGs. Running costs continue to be under. Prescribing: £94,000 over month with £379,000 year to date. No Cheaper Stock Obtainable could be the main reason. This is estimated to reach between £3-6 million. The issue has been raised on the national agenda. An overspend on Stoma is currently being reviewed. M7 data based on M6 slam shows that outpatient is currently positive with referrals are decreased. Still on trend. IL explained the forecast out-turn: planned recurrent surplus of £1.2million. Overspend recurrently is £5.6million with a deficit position of £4.5 million. Deficit into next year's financial looking at £12-13 million with even less reserves. 	
	A discussion was held around the rate of increase on overspend and reserves. It was queried if the group should see NUH's cumulative position drop.	
FI 17/090	Financial Turnaround:	
	 Fiona Callaghan (FC) presented the feedback from Deep dive to the group with the following points raised: Indicating a different position to NHSE therefore QIPP schemes will need to be reviewed. Increased savings from medicines management. 	
	• £281,000 for Mental Health investment view to hit target for IAPT.	
	 Current delivery profile £900,000 below plan for M6. In month savings for August look lower as Contract Values had not been done until July. October position should continue to go up. 2018/19 targets and QIPP schemes around £34 million against £44 million with about 28 existing schemes. The position is improved than last year but leaves challenges going forward. This may result in a change in risk appetite. Schemes or contracts could be reduced/ tightened further. 	



	PMO team starting to review 144,000 contracts line by line with	
	a need to look at others CCGs perspective to ensure the risk appetites between the CCGs are the same. Need to ensure	
	that the CCG continues to review as the ACS will not be up	
	and running until 2019/2020. It was acknowledged that this will	
	be easier with one joint Finance group to explore more schemes. Paper to be taken to Governing Body with pre-	
	digested thoughts and feedback.	
	 SROs delivery tracker shows £6.7 million against a target of 	
	£12.3million. Some risk has effectively been factored in.	
FI 17/091	M05/ M06 Contract Challenges Report	
	Maxine Bunn (MB) updated the group further on the M05 Contract	
	challenges report.	
	The Group acknowledged the report.	
	MB informed the group that the value of the challenge is what is put in	
	by the CCG and this may be incorrect, however, once work is more	
	aligned with the provider, this may change.	
	This different encode the OOOs as it is bread with sector both its for	
	This different across the CCGs as it is based on the actual activity for the CCGs, hence variable against activity.	
FI 17/092	Activity Report Month 6:	
	Sergio Pappalettera (SPa) gave an update on M6 activity:	
	Key Points were as follows:	
	 Little change from last month, referrals continue to be lower than last year which is having an effect on outpatient first 	
	than last year which is having an effect on outpatient first.Emergency admissions are higher than last year throughout	
	the first 6 months of the year. Main area of overspend.	
	 Overspend is about 15 % 	
	• Non-elective: a lot of overspend is driven by activity and QIPP.	
	 Drop in emergency admission from GPs, this needs to be analysed to see if this is GP or consultant driven. 	
	 M6 position better at NUH than last month. 	
	 Trends are nearly all down in that month however, does not 	
	include the un-transacted QIPP.	
	 Fast track getting better not worse. 	
FI 17/093	NUH and Circle Phasing Profiles:	
	SPa informed the Group that the following agenda item came from an action at the previous Governing Body meeting for Andy Hall.	
	deternation of previous coverning body meeting for Andy Hall.	
	SPa updated the members on the action of analysing the activity	
	profiles to ensure nothing untoward. Sergio presented this information in graph format as the query raised included the forecast of position	
	looked worse for NNE compared to other CCGs. It was confirmed that	



	there is nothing untervend. The data provided by CDs confirmed Andy	
	there is nothing untoward. The data provided by SPa confirmed Andy Hall's comments.	
FI 17/094	Finance Risk register:	
	IL presented the list of risks that has been updated to reflect comments from last FIG meeting.	
	The Group discussed a change to the risk register regarding the local authority cuts acting on NNE's service and position. The members agreed to keep the rating as a 9 and not to downgrade.	
FI 17/095	FIG in the new Accountability Framework:	
	TA presented on this item and the discussion held between TA and Janet Soo-Chung (JSC) on how to develop the framework as promptly as practically possible and how to standardise this as a single joint committee. FC added that a common reporting system will be required. The Committee were updated on the development of the Greater Nottingham Finance group. This group will meet monthly and 2 dates have been scheduled. FC demonstrated a partly populated reporting template to show how information would be reported. This could potentially reduce multiple reports each month. A query was raised on how QIPP and financial recovery align with general finance and how to consider performance reporting. MB added that a meeting has taken place on how to link QIPP and performance reporting with finance with Andy Hall leading on this. TA questioned if this is practical for all information be captured in this report as it is quite detailed. It was highlighted that some reporting is difficult to understand at Governing Body meetings and therefore needs to be the right level to engage the audience as intended and to ensure GPs can feed back to practices.	
	FC confirmed that the draft terms of reference and membership are being refined. It was added that the draft report has been tested it as CCG first rather than for Greater Nottingham. Data will be reported whether off or on track for finance and delivery which is taken from the Cube to make up the QIPP dashboard. This will be tracked back to actual activity not forecasting.	
	Areas for progression were highlighted with what is doing well and potential new ideas. Detail on every scheme including risks identified by each SRO with a focus on the top 5 schemes delivering the majority of the QIPP targets.	
	It was added that the SRO reports and the QIPP tracker have been embedded. It was requested for comments on content and	



	presentation by the end of the week with an aim for a first draft for the first joint meeting.
	FC added that any project that is 25% off trajectory will need the relevant SRP at Deep Dive with NHSE.
	Terms of reference to be drafted and shared with the group and then confirm membership.
	Locality FIG will co-exist against the joint one.
FI 17/096	*Risks identified during the course of the meeting
	None identified
FI 17/097	*Any Other Business
	None received
	Date, Time and Venue of Next Meeting
	11 th December 2017 10am-12.30pm, Meeting Room 1, Civic Centre, Arnot Hill Park