

**CLINICAL PLANNING AND DELIVERY COMMITTEE**

**DRAFT MINUTES**

<b>Date:</b>	<b>23<sup>rd</sup> November 2018</b>	<b>Time:</b>	<b>12:00pm to 2:00pm</b>
<b>Venue:</b>	<b>Committee Room 1 - Surrey Heath House, Knoll Road, Camberley, Surrey GU15 3HD</b>		

	<b>Name</b>	<b>Title</b>
<b>Chair</b>	Dr John Fraser (JF)	Medical Director
<b>Members Present</b>	Jon Fox (JoF)	Head of Primary Care
	Tom Lawlor (TL)	Associate Director of Commissioning
	Caroline Lovis (CL)	Associate Director of Finance
	Edmund Cartwright (EC)	Head of Workforce and Nursing
	Dr Ruth Cureton (RC)	Clinical Lead for Mental Health & Learning Disabilities
	Dr Emma Whitehouse (EW)	Clinical Lead – Cancer & EOLC Lead
	Kevin Solomons (KS)	Associate Director of Medicines Management
<b>In Attendance</b>	Christy Tilney (CT)	Commissioning Manager with a lead for mental health
	Clarence Mpofu (CM)	TIAA (minutes)
	Claire Norfolk (CN)	Programme Manager
<b>Apologies</b>	Rob Morgan (RM)	Interim Managing Director and Chief Finance Officer
	Karen Hampton	Head of Quality
	Dr Rachel Darroch (RD)	Clinical Director of Improvement
	Dr Sarah Stradling (SS)	Clinical Lead Diabetes
	Dr Peter Cureton (PC)	GP Bartlett Group Practice (Frimley Green MC)
	Dr Gail Milligan (GM)	GP Camberley HC & Member of Quality & Clinical Governance Committee
	Michelle Head (MH)	Director of Health and Social Care Integration
	Dr Nicky Townsend (NT)	GP , Medicines Management Lead
	Dr Andy Brooks (AB)	Chief Officer

**FOI NOTICE**

Freedom of Information: Those present at the CPD meeting should be aware that their name will be listed in the minutes of this meeting, which can be released to members of the public on request under Freedom of Information.

Agenda Item No.	Discussions and Actions	By Whom	Deadline
1	<p><b>Welcome and Introductions</b></p> <p>JF welcomed all to the meeting. The meeting was noted as not quorate until EM joins the meeting (joined at 12:10pm).</p>		
2	<p><b>Minutes from last meeting and actions arising</b></p> <p>The minutes from 26<sup>th</sup> October 2018 meeting were agreed as an accurate record of the meeting.</p> <p><b>Action tracker</b> - The actions were reviewed - see updated tracker.</p> <p>It was agreed that the action relating to 'Freestyle Libre' will be discussed under AOB when KS is expected to have joined the meeting.</p> <p><i>EM joined the meeting at 12:10pm</i></p> <ul style="list-style-type: none"> <li>• The action relating to smoking cessation remains open on the action tracker as data is still not fully available. A further update is scheduled for the December 2018 meeting of CPD.</li> <li>• An update was provided by TL regarding the CAMHS action. It was agreed that a draft flowchart will be shared with JF and EW by the end of the following week. A further update to be provided at the December 2018 meeting.</li> </ul> <p>This action is to remain open and be kept on the action tracker. It was stated that communications is still yet to go out and any skills gaps are still being identified.</p> <ul style="list-style-type: none"> <li>• TL provided an update regarding action relating to the Clinical Leads. TL had approached North East Hampshire and Farnham CCG and East Berkshire CCGs with a view to cross-over working for an IT lead. CPD continues to support and approves TL's efforts regarding the engagement of an IT lead from outside the CCG.</li> </ul> <p>JF had also approached a local GP and they had declined by stating that now was not ideal.</p>		
3	<p><b>Declaration of interests</b></p> <p>No declarations were made regarding any of the items on the agenda and which might conflict with the business of the CCG.</p>		



4	<p><b>Integrated Performance Meeting Feedback</b></p> <p>CL updated CPD on the risk management. It was agreed that following the Integrated Performance meeting CPD will review the Risk Register at their December 2018 meeting. It was pointed out that the programme risk register is a standing item on the CPD agenda.</p> <p>CL stated that the Clinical Leads action on the action tracker can be closed as RD (not at this meeting) had suggested that the gap in resource relating Clinical Leads should be on the Risk Register. CL confirmed that this risk will be raised.</p>		
5	<p><b>TNRF2 and Assisted Policies</b></p> <p>TL presented the updates on the following two policy documents which had been updated.</p> <ul style="list-style-type: none"> <li>• List of Procedures with Restrictions and Thresholds</li> <li>• Assisted Conception</li> </ul> <p><b>Summary</b></p> <p>CPD approved the changes highlighted by TL on each of the two policies.</p> <p><b>Actions:</b></p> <ol style="list-style-type: none"> <li>1. <b>It was agreed that EC will update the Governing Body on the changes at their next meeting in December 2018</b></li> </ol>	EC	December 18
6	<p><b>Update on the Community Services Procurement</b></p> <p>CL updated the committee on progress being made regarding the Community Services Procurement</p> <p>CL stated that there will not be anything said within her verbal update to CPD which will cause any potential conflict of interest as everything mentioned will be in the public domain.</p> <p>CL stated that the Community Services Procurement was proceeding as planned.</p>		
7	<p><b>Planning</b></p> <p><b>5.1 Planning for 2019-20 and QIPP/CIP</b></p> <p>TL and CL presented (PowerPoint) to CPD the QIPP/CIP plans which were being worked on for 2019-20.</p>		



	<p>CPD discussed the QIPP plan and CL updated the Committee on the proposed savings and schemes/projects which had been identified.</p> <p><b>5.2 MH Commissioning Intentions</b></p> <p><i>CT joined the meeting at 1pm</i></p> <p>RC with contributions from CT presented (PowerPoint) the MH Commissioning Intentions and this covered the following areas:</p> <ul style="list-style-type: none"> <li>• National Mental Health Priorities (NHS England)</li> <li>• Adult Mental Health 2019-20 Planning Considerations.</li> </ul> <p>CPD were supportive of the work being done and it was highlighted that it will be business as usual for MH from next year.</p> <p><b>Summary</b></p> <p>The presentation was well received and areas to note were around the work on primary care. A plan for implementation is being worked on and lessons to be learnt will be identified when the model has been implemented.</p> <p>It was agreed that an update will be brought back to CPD in February 2019.</p> <p><i>KS joined the meeting at 13:20pm</i></p>		
8	<p><b>Programme Risk Register</b></p> <p>TL updated CPD and CL stated that the gap in resource for Clinical Leads will be included in the Risk Register.</p> <p>TL stated that CPD will discuss in more detail at the December 2018 meeting when the Risk Register will be presented.</p>		
7	<p><b>Any Other Business</b></p> <ol style="list-style-type: none"> <li>1. TL and JF updated the Committee on the IFR Process. JF to ask for the review of the IFR process to include specialist equipment.</li> <li>2. EW updated CPD on the Do Not Attempt Cardio-Pulmonary Resuscitation: Standard Operating Procedure (DNACPR SOP v2). CPD accepted the DNACPR SOP v2</li> <li>3. EW raised some concerns on the Policy and Procedure for the Verification of Expected Death for</li> </ol>		



	<p>Care Homes. EC agreed that he will review and comment on the procedure and escalate appropriately where required.</p> <p>4. KS updated the Committee on the Freestyle Libre action. KS discussed this in light of the NHS England Statement.</p> <p>KS will look at system wide working to align the statement and ensure that the communications is right and published on the website at an appropriate time.</p>		
There were no other matters raised under AOB			

**Next meeting Friday 21<sup>st</sup> December 2018, 12-2pm – Surrey Heath House, CR1**

**Minutes signed and agreed: 21<sup>st</sup> December 2018**

**Chair:**

**Date** \_\_\_\_\_

**Print Name: Dr John Fraser**

DRAFT



## ACTION TRACKER – 2018/19

Original Meeting Date	Agenda Number	Action	Responsible Officer	Deadline/To be completed by:	Status	Comment/Update
23/03/18		<p><b>Smoking cessation</b> To bring to review and update CPD in May as to the reasons that the “opt out” process for smoking cessation was not implemented and recommendations on how to implement successfully.</p>	SI	August 2018	In progress	<p>SI to find out what the quit rate for the Quit 51 service is. SI to collect the above data and bring this item back to CPD in July  <b>July update:</b> Deferred to August meeting  <b>August update:</b> to be deferred until Sept when full information will be presented  <b>September update:</b> Data not presented, rescheduled to October  <b>October 2018 update:</b> This action remains open as data is still not fully available. A further update is scheduled for November 2018.  <b>November 2018 update</b> The action remains open as data is still not fully available. A further update is scheduled for the December 2018 meeting of CPD</p>

Original Meeting Date	Agenda Number	Action	Responsible Officer	Deadline/To be completed by:	Status	Comment/Update
28/09/18		<p><b>CAMHS post interim plan (TL)</b>            TL to clarify the pathway and look at the skill gaps for our GP's,            TL – to produce a flowchart of the referral process and give JF weekly updates on progress.            Item to be added to the CPD agenda in October</p>	TL	October 2018	In progress	<p><b>October 2018 update:</b>            TL stated that a flowchart had been done and this will be discussed with JF. Communications is yet to go out and if there is a skills gap identified. A further update is scheduled for November 2018</p> <p><b>November 2018 update</b>            It was agreed that a draft flowchart will be shared with JF and EW by the end of November 2018.</p> <p>This action is to remain open and be kept on the action tracker. It was stated that communications is still yet to go out and any skills gaps are still being identified.</p>
26/10/18	2	<p><b>Freestyle Libre</b>            KS and EC to report back regarding Freestyle Libre to the next meeting of CPD with recommendations around communications.</p>	KS/EC	November 2018	In progress	<p><b>November 2018 update</b>            KS will look at system wide working to align the statement and ensure that the communications is right and published on the website at an appropriate time. An update to be presented at the December 2018 meeting of CPD.</p>

Original Meeting Date	Agenda Number	Action	Responsible Officer	Deadline/To be completed by:	Status	Comment/Update
26/10/18	5	<p><b>Clinical Leads update</b> TL to approach surrounding ICS for Clinical Leads.</p> <p>JF to approach a local GP as suggested regarding the IT lead role.</p>	<p>TL</p> <p>JF</p>	<p>November 2018</p> <p>November 2018</p>	Closed	<p>TL provided an update regarding action relating to the Clinical Leads. TL had approached North East Hampshire and Farnham CCG and East Berkshire CCGs with a view to cross-over working for an IT lead. CPD continues to support and approves TL's efforts regarding the engagement of an IT lead from outside the CCG.</p> <p>JF had also approached a local GP and they had declined by stating that now was not ideal.</p> <p>It was agreed that this action be closed as the gap in resource for Clinical Leads will be included in the Risk Register. The Risk Register to be presented at the December 2018 meeting of CPD.</p>
23/11/2018	5	<p><b>List of Procedures with Restrictions and Thresholds and Assisted Conception</b></p> <p>It was agreed that EC will update the Governing Body on the changes at their next meeting in December 2018</p>	EC	December 2018		



Original Meeting Date	Agenda Number	Action	Responsible Officer	Deadline/To be completed by:	Status	Comment/Update
23/11/2018	7	<b>MH Commissioning Intentions</b>  A plan for implementation (including work on Primary Care) was being worked on and it was agreed that an update will be brought back to CPD in February 2019	RC/CT	February 2019		
23/11/2018	AOB	<b>IFR Process</b>  JF to ask for the review of the IFR process to include specialist equipment	JF	December 2018		

<b>Status Key:</b>	
	<b>Completed:</b>
	<b>In Progress:</b> Actions noted on action tracker
	<b>Open:</b> Still outstanding. Deadline not met