

West Yorkshire & Harrogate Joint Committee of Clinical Commissioning Groups

DRAFT Minutes of the meeting held in public on Tuesday 3rd May 2022

Held virtually by Microsoft Teams

Members	Initials	Role and organisation
Marie Burnham	MB	Independent Lay Chair
Ruby Bhatti	RB	Lay member
Stephen Hardy	SH	Lay member
Dr James Thomas	JT	Chair, NHS Bradford District and Craven CCG
Helen Hirst	HH	Chief Officer, Bradford District and Craven CCG
Dr Steven Cleasby	SC	Chair, NHS Calderdale CCG
Dr Khalid Naeem	KN	Chair, NHS Kirklees CCG
Carol McKenna	CMc	Chief Officer, NHS Kirklees CCG
Dr Jason Broch	JB	Chair, NHS Leeds CCG
Dr Adam Sheppard	AS	Chair, NHS Wakefield CCG
Mel Brown	MBr	Commissioning Director for Integrated Care, NHS Wakefield CCG (deputy for Jo Webster)
Associate members		
Dr Charles Parker	CP	Chair, NHS North Yorkshire CCG
Apologies		
Tim Ryley	TR	Chief Officer, NHS Leeds CCG
Robin Tuddenham	RT	Chief Officer, NHS Calderdale CCG
Jo Webster	JW	Chief Officer, NHS Wakefield CCG
In attendance		
Karen Coleman	KC	Communications and Engagement Lead, West Yorkshire Health and Care Partnership
Stephen Gregg	SG	Governance Lead, Joint Committee of CCGs (minutes)
Ian Holmes	IH	Director of Strategy and Partnerships (Designate) NHS West Yorkshire Integrated Care Board
Anthony Kealy	AKe	Locality Director, NHS England & NHS Improvement
Catherine Thompson	CT	Director, Planned Care Programme, West Yorkshire Health and Care Partnership
Jonathan Webb	JWb	Director of Finance (Designate), NHS West Yorkshire Integrated Care Board

Item No.		Action
01/22	Welcome, introductions and apologies	
	The Chair welcomed everyone to the meeting. Apologies were noted. The Chair said that it was anticipated that there would be one more meeting of the Joint Committee in June 2022.	

Item No.		Action
02/22	Declarations of Interest	
	<p>The Chair asked Committee members to declare any interests that might conflict with the business on today's agenda</p> <p>The Chair advised that she had taken on the role of Chair of the South West Yorkshire Partnership NHS Foundation Trust on 1 December 2021. This did not present a direct conflict of interest as the Chair remained independent of the CCGs.</p>	
03/22	Questions and deputations	
	No questions had been received from members of the public:	
04/22	Minutes of the meeting in public – 10th October 2021	
	The Committee reviewed the minutes of the last meeting.	
	The Joint Committee: Approved the minutes of the meeting on 10 th October 2021.	
05/22	Actions and matters arising – 10th October 2021	
	SG advised that all actions on log were complete. There were no matters arising.	
	The Joint Committee: Noted the action log.	
06/22	Harmonisation of commissioning policies	
	<p>Catherine Thompson (CT) presented the report.</p> <p>As part of the transition process from CCGs to the ICB, work had been undertaken to harmonise commissioning policies and clinical thresholds across West Yorkshire. The first set of 19 policies was presented today. Some of this work had already been undertaken as part of the Improving Planned Care programme, including the national Evidence Based Interventions programme. The work had explored current differences and sought to align thresholds across all places, with the primary aim of ensure equity across all places before the establishment of a single commissioning body.</p> <p>There had been significant clinical involvement in each place with both primary and secondary care and the proposals had been presented to the Joint Committee's PPI Assurance Group. Where amendments were required to policies, these had been harmonised to the least stringent threshold currently in place in WY and the Quality Equality Impact Assessment indicated no negative impacts.</p> <p>The change in thresholds presented potential risks in terms of increased access to some procedures in some places. It was proposed that the impact of the changes would be reviewed at 6 and 12 months.</p> <p>Carol McKenna noted that the changes may have financial implications which were as yet unquantified and that early review would be important. She also highlighted the need to finalise the arrangements for dealing with Individual Funding Requests. CT advised that work had been carried out to ensure that processes were consistent, with further work underway to confirm the mechanics in each place.</p> <p>Jonathan Webb highlighted the need to reflect in the Joint Committee's recommendation the need to build in early reviews of the impact of the changes.</p>	

Item No.		Action
	<p>The Joint Committee:</p> <p>a) Agreed the nineteen harmonised commissioning policies and clinical thresholds for adoption, pending the transfer of core functions from the clinical commissioning groups to the new statutory ICB on 1 July 2022.</p> <p>b) Agreed that the activity and financial impacts of the changes be reviewed after 6 and 12 months.</p>	
07/22	Risk management	
	<p>Stephen Gregg (SG) presented the significant risks to the delivery of the Joint Committee work plan. Controls, assurances and planned mitigating actions were set out for each risk. There were currently 8 risks scored at 12 or above after mitigation. The report to the next meeting would include the transition of these risks to the statutory ICB.</p>	
	<p>The Joint Committee: Reviewed the risks to delivery of the Joint Committee workplan and noted the actions being taken to mitigate the risks.</p>	
	Any other business	
	There was none.	

Next Joint Committee in public – Tuesday 7 June 2022, 11am.