

**NHS DORSET CLINICAL COMMISSIONING GROUP**  
**GOVERNING BODY MEETING**  
**MATTERS ARISING - PART ONE**

Report of the Chair on Matters Arising from Part 1 of the Minutes of the NHS Dorset Clinical Commissioning Group Governing Body meeting held on 16 November 2016.

**1. Purpose**

To report to the Governing Body on any matters arising from the draft minutes of the last Governing Body meeting.

**2. Recommendation**

That the Governing Body notes this report and directs any action it sees fit.

**3. Background Information**

This report covers all outstanding action points contained in the minutes and is required in order that the Governing Body can be satisfied that all action points in the action column have either been done, are being done or will be done in accordance with the timescale contained in the minute, if any.

**8.1 Draft Operational Plan 2017-18 to 2018-19**

8.1.3 The Governing Body **approved** the content of the draft Operational Plan 2017-18 to 2018-19 and delegated authority to the Chair and Chief Officer to make final amendments and to approve the Operational Plan for submission to NHS England.

**TG – Actioned.**

**9.2 Performance Report (including Quality Premium)**

9.2.5 The Governing Body was concerned regarding the reported 0% diagnostic performance for RBCHFT for patients waiting over 6 weeks for treatment and whether this had been aggregated. The Governing Body directed the Chief Finance Officer to clarify this matter.

**PV - The diagnostic performance was raised with RBCHFT at the contract review meeting on the 24 November 2016. Clarification was confirmed that the performance was rounded to the nearest %, but compliance was achieved.**

**Actual diagnostic % performance reported in RBCHFT scorecard is April 99.96%, May 99.98%, June 100%, July 99.98% and August 99.78%. Verbal assurance was also provided by Deputy Chief Operating Officer on these performance percentages.**

- 9.2.8 The Locality Lead for Purbeck sought clarity regarding paragraph 2.68 that reported that Dorset Healthcare University NHS Foundation Trust (DHUFT) had not achieved the standard of 'the percentage of people on the caseload with a long term condition who had individualised care plans' in Purbeck. The Governing Body directed that the Chief Finance Officer clarify outside of the meeting.

**PV - A specific Purbeck KPI exists for a Purbeck Community Matron service and information is received through DHUFT in terms of activity, and KPIs exist around caseload.**

## 9.3 Finance Report

- 9.3.3 It was noted some patients chose to have private sector operations due to the shorter waiting times. There could also be a monetary incentive for consultants once they had fulfilled their NHS obligations. The Chief Finance Officer and Secondary Care Consultant member agreed to meet to look at how to achieve the best benefits from job planning.

**PV/GT - A meeting to be arranged with DCH Chief Operating Officer, to assess consultant Job Plans.**

## 9.10 Update Report on Children's Safeguarding

- 9.10.2 The CCG had been actively involved in the Multi-Agency Safeguarding Hub (MASH). This would bring together the three local authorities, DHUFT, safeguarding advisers and the Dorset Police in one hub to enable safeguarding concerns to be received and actioned on a multi-agency basis. It was anticipated the MASH would be fully functional by Spring 2017.
- 9.10.3 The Governing Body was concerned regarding feedback of information to GPs and the Director of Nursing and Quality was directed to pursue this with the Assistant Clinical Chair outside the meeting.

**SSh – A communications plan for the MASH has been developed and will be commenced in January.**