



CCSD Board Meeting Minutes

Date/Time 16/10/2024

11:30 - 13:00

Location Grant Thornton LLP UK London offices

/Microsoft Teams

Attendees	Independent chair (non- voting)	Voting members	Non-voting members	Support services provider (Grant Thornton, GT)	
	Zoltan Varga (ZV) (joined virtually)	Ayodele (Ayo) Kazeem (AK) – AXA Health Lesley Doyle (LD) – Vitality Health Matthew Calver (MC) – Aviva Timothy Woodman (TW) – BUPA (joined virtually) Martin Rennison (MR) – Spire Healthcare, rotating provider representative John Shepherd, Ramsay Health, rotating provider representative	Jenny Murray (JM) – Healthcode John Hopgood (JH) – IHPN (joined virtually)	Peter Saunders (PS) Andrew Plumtree (AP) Catherine Baldwin (CB) Zelie Kasten (ZK) Joshua Reeves (JR) Phil Woolley (PWo) Naomi Sloan (NS)	
Apologies	Anne Coyne (AC) – PHIN; Phil Wright (PW) - GT				

Minutes taken by Catherine Baldwin (CB)

Item	Description	Action
1	Welcome, introduction and apologies	
	 Welcome and introduction by Chair. Apologies received from AC and PW Competition law reminder given by Chair. The Chair asked all present to confirm that they had received and read the papers shared prior to the meeting, and that there were no objections to the agenda items and timings proposed. All confirmed. The Chair thanked GT for the preparation in advance of the meeting. 	
2	Acknowledgment of minutes and action log No amendments to the July minutes were received ahead of the meeting, These were accepted by all as an accurate reflection of discussions. Four actions remain <i>In Progress</i> or <i>On Hold</i> following the July Board meeting. Work on mapping is ongoing and a full update was an additional agenda item GT are working with Healthcode to understand the use of diagnostic codes A review of secondary licences has been delayed due to the support needed for the provider licence roll out ZV is progressing meeting with individual Board members	2024-3.1 ZV to complete 1-2-1 meetings and share key points summary with Board members. Relates to action 9.1 from July 2024 Board. Due 15 th November 2024 2024-3.2 GT to

- ZV shared a summary of key insights from his conversations so far:
 - Agreement that GT had done a good job stabilising CCSD with particular praise for the preparation of Board materials
 - CCSD codes continued to serve the purpose they were created for
 - The selection and prioritisation of projects needed to be considered, including looking at anticipated volumes before commencing. One major project per year was considered sufficient.
 - The ongoing development and impact of AI was discussed with Board members sharing the impact this was having within their own organisations. More consideration is needed about how this can be used within CCSD.
 - There continue to be challenges within the Working Group with capacity limited in some instances. There is a need for clinical evidence to be provided at code submission stage.
 - There is still a need to improve the accuracy of coding and the ease of use of CCSD
 - Sign up to existing training and education resources has been less than anticipated.
 More work needs to be done to understand and improve this including considering other forums where CCSD could support, such as at the Independent Doctors Federation and BMA.
- ZV will aim to complete these conversations in the next weeks and will provide the Board with a summary of the key points raised to him.

Healthcode to understand how volume data could be used to support new code request at a Working Group level. **Due 30**th **November 2024**

2024-3.3 GT to liaise with Healthcode around potential education events. **Due 31**st **October 2024.**

Mapping of CCSD to OPCS (update and next steps)

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- Work on a mapping framework from CCSD to OPCS was first presented to the Board in July 2024. Since then Grant Thornton (GT) have held a number of conversations with internal and external stakeholders to progress this work.
- Clarification was request around the purpose of this work and it was re-iterated that this
 work was agreed to and supported by the Board at the start of 2024 and will have crosssector benefits. There may also be benefit for CCSD in identifying areas where there are
 gaps in the current schedule.
- Testing of the draft mapping has been identified as a key area to ensure the quality of the framework. Conversations are underway with providers and some data has been provided. GT will complete the testing process and include and update on this in the full mapping update.
- Access to the mapping framework was discussed and it was agreed that the mapping
 framework would be accessible for those who pay for a CCSD licence. Conversations are
 ongoing with the website developer about how this could be included in the new website
 designs. Details on this, along with maintenance and update of the mapping framework,
 will be included in the November update.
- Grant Thornton have met with NHS Digital to discuss the intellectual property around OPCS. The meeting was positive and no major concerns were raised. NHS Digital have asked for a statement of intent and are looking into the terms of the original agreement made when CCSD was devised. The Board agreed clarity was needed regarding NHS Digital's involvement in the mapping framework going forwards.
- The Board discussed the supporting mechanisms around this work which will need to include the regularity of updates, in line with CCSD and OPCS updates.
- Once testing has been completed a full version of the mapping document along with an SOP will be shared with Board for review. It was agreed this would be done via email in order to get agreement before the next formal meeting.
- A review a year after launch was suggested and agreed to by Board members. This
 should involve reflections on how the mapping has been implemented within the sector
 and include 1-2-1 engagement session feedback to understand the impact of the
 mapping framework.

2024-3.4 GT to complete mapping and share results and learning in full mapping update. This update will include the proposed SOP for use of the mapping framework **Due 29th November 2024**

2024-3.5 GT to draft statement of intent for NHS Digital **Due** 31st October 2024

2024-3.6 GT to conduct a review if the impact and use of the mapping framework a year after launch. **Due December 2025**

4 Ways of working update

- The CCSD Board approved work on the internal and external Ways of Working as part of the 2024 workplan. The objectives behind this remain to reduce the manual processes involved in CCSD operations and enable time to be spent in other areas include code development, training and communication. Chanes will also enable greater collaboration, shared learning, data led insight and help the right information to be captured at the right time. Since the last Board update key activities have included:
 - An internal GT workshop which brought together CCSD stakeholder feedback and reviewed current processes
 - Commissioning of the current website provider to update the website, enabling some of the process changes
 - Convening of a steering group including members of Board and Working Group to ensure changes work for the sector, and provide check and challenge
- It was reiterated that the impact of these changes are anticipated to be seen across the
 sector. Improvements in internal GT processes and increased use of automation will
 enable GT to support the Working Group more, and dedicate more time to the review of
 codes at the point of submission. Changes to the website will also improve engagement
 with CCSD codes and support users in finding the correct code. Key updates were given
 around the impact of these changes for:
 - Communication, engagement and branding
 - Infrastructure, technology and systems
 - Maintaining the schedule
 - Operations and processes
 - Development projects
- The proposed timeline was reviewed, and it was confirmed that Board. Working Group
 and the wider sector will be provided with training resources for the new website and
 process changes to support a smooth adoption within the sector.
- Additional to the process and infrastructure changes it was recognised that culture in some areas would need to change in order for CCSD to achieves its ambitions. It was recognised that this may take time and that some changes would need to happen slower than others to allowed the sector to adopt this, especially at a Working Group level.
- The Board requested an update on the impact of this work in a year, to include both
 quantitative and qualitative feedback. KPIs should be identified now and reported on over
 the next year. Examples of this suggested included the time taken from a code
 submission to a decision being made by Working Group and surveying website users.

2024-3.7 GT to draft a set of KPIs which will be monitored over the next 12 months to demonstrate the impact of this work. A full update to be presented to Board in 12 months. **Due December 2025**

2024-3.8 GT to continue to progress Ways of Working project, and include an update in the next Board papers. **Due February 2025**

2024-3.9 GT to ensure that training materials are drafted and shared with the sector to support a smooth transition for the new ways of working. Due December 2025

CCSD development update

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- The provider licence update has continued to be rolled out throughout 2024 and is requiring more support from GT than anticipated. IHPN supported with amplifying communications, especially during the consultation phase. It was recognised that there were greater challenges in ensuring communications went to the right individual in NHS and small independent provider organisations. IHPN hold a monthly engagement session with smaller members and it was suggested that a GT representative could join the meeting.
- It was confirmed that GT credit control are supporting the process where payment is not
 forthcoming. If organisations do not pay this will eventually result in access to CCSD
 being cut off and conversations are going between GT and the insurer group about how
 this would be managed. Insurance organisations ownership and support on this will be
 crucial.
- MR and JS offered their support as provider representatives to Board to support peers in understanding the provider roll out.
- GT held a well-received engagement session with small insurers. This highlighted some
 engagement issues where licence holders were not aware of the resources available to
 them. GT have supported access and provided training to those organisations. GT will

2024-3.10 GT to reach out to IHPN regarding a representative at a small provider meeting. **Due 31**st **October 2024**

2024-3.11 GT to work with MR and JS to use their role to support the provider licence roll out. **Due** 31st October 2024

	hold twice yearly engagement sessions with the group.	
6	 Progress against the CCSD strategy was discussed by the Board. It was recognised that good progress had been made in a number of areas with additional major developments includes the robotic assisted surgery codes. Board members agreed that one major development project in a year was sufficient. Potential areas for focus in 2025 were discussed and it was agreed that a piece of discovery work would be done to understand the potential for CCSD code use in the outpatient setting. Alongside this further work will be done to embed the good practice which has been commenced, especially around training and education. Once the workplan has been drafted and approved support will be needed from Board members for the outpatient discovery work and in realising the potential of the work which has been commenced thus far. Other potential areas including high cost drugs and code bundles were briefly discussed but not viewed a high priority for 2025 development given existing mechanisms in place It was clarified that one major development project was distinct from the continued maintenance and improvement of the schedule at a Working Group level, which includes work proposed on Radiotherapy and Cardiology codes. 	2024-3.12 GT to draft 2025 workplan and share with Board by the end of 2024 for sign off via email.
7	 Working Group update Working Group has seen an improvement in the last cycle with more requests reviewed and approved outside of the meeting. GT will continue to track this and report to Board. The chair asked the Board if there was additional information which would support their understanding of Working Group activity. The Board requested information on the time from code receipt to publication and information on who requests have been received from. For the future it was discussed that a clear definition of complete was needed for reporting purposes. 	2024-3.13 GT to include information on the time from code receipt to publication and information on who requests have been received from in the next Board update. Due February 2025
8	 Update on sector working Healthcode reflected that CCSD and particularly Robotic Assisted Surgery code use is up, reflecting that this was a good choice in development project. IHPN and PHIN have both supported GT progress work outside of the Board cycle. 	2024-3.14 GT to continue to work with Healthcode and monitoring RAS code usage
9	 AOB The Board will have 3 meetings in 2025, which will be a split of virtual and F2F. JS and MR will continue as the Board's rotating provider representatives as proposed by the provider group. There was no concern about this from other Board members. AP is leaving Grant Thornton and was thanked for his support and work with CCSD both at GT and in previous roles. All Board members wished him well for the future and praised him in being instrumental in moving CCSD to its current position in the sector. 	2024-3.15 GT to share Board meeting dates for 2025. Due 29 th November