

**WOLVERHAMPTON CCG**  
**PRIMARY CARE JOINT COMMISSIONING COMMITTEE**  
**7<sup>th</sup> June 2016**

<b>Title of Report:</b>	<b>Update Report on Primary Care Programme Board Activity May 2016 (PCPB)</b>
<b>Report of:</b>	Manjeet Garcha Chair PCPB
<b>Contact:</b>	Manjeet Garcha
<b>Primary Care Joint Commissioning Committee Action Required:</b>	<input type="checkbox"/> <b>Decision</b> <input checked="" type="checkbox"/> <b>Information</b>
<b>Purpose of Report:</b>	To update the PCJCC on PCPB activity for May 2016
<b>Public or Private:</b>	Public
<b>Relevance to CCG Priority:</b>	1,2a,2b,3,4 &5
<b>Relevance to Board Assurance Framework (BAF):</b>	
• <b>Domain 1:</b> A Well Led Organisation	
• <b>Domain 2a:</b> Performance – delivery of commitments and improved outcomes	
• <b>Domain 2b:</b> Quality (Improved Outcomes)	
• <b>Domain 3:</b> Financial Management	
• <b>Domain 4:</b> Planning (Long Term and Short Term)	



- **Domain 5:** Delegated Functions

**Domain 5: Delegated functions:** When approved this will include primary care and may, in time, include other services. This is in addition to the assurances needed for out-of-hours Primary Medical Services, given this is a directed rather than delegated function.



## **1. BACKGROUND AND CURRENT SITUATION**

- 1.1. The Primary Care Programme Board meets monthly and it was agreed that there will be a monthly summary report presented to the PCJCC.

## **2. MAIN BODY OF REPORT**

Summary of activity discussed on May 12th 2016.

- 2.1 .1 Primary Care In Reach Team (PITS) Business case, EIA, QIA and Bradley Resource Centre Specification approved by PCB
- 2.1.2 Interpreting Procurement paper presented. Timelines for open procurement and two stage restricted process were discussed and the Board agreed that open procurement was the preferred option. This work has now commenced and CSU are providing support.
- 2.1.3 Community Equipment Procurement – project lead confirmed that a meeting is arranged with LA on 23<sup>rd</sup> May 2016 to determine what impact undertaking a joint procurement will have on procurement timelines.
- 2.1.4 Future activity is as per plan for 2016/17 schemes.
- 2.1.5 Atrial Fibrillation, a new proposal for QIPP presented by Dr D De Rosa. A very positive sounding scheme which was seen to be of a possible good quality scheme for patients with AF. Project to be scoped and presented back to the Board in the near future. The capacity in the team is being reviewed to progress this soon.
- 2.1.6 Improved and strengthened process for administration of the board in line with PMO office for all the boards.

## **2.2 CLINICAL VIEW**

Clinical view is afforded by the Director of Nursing and Quality and also Dr Dan De Rosa, CCG Chair. Dr DeRosa has recently requested to attend meetings if his diary will allow and also to be sent papers and minutes etc. so there is opportunity to provide comment.

## **3. PATIENT AND PUBLIC VIEW**

- 3.1 The PCPB ensures that all schemes have an EIA completed and patient and public views are sought as per requirement.



#### **4. RISKS AND IMPLICATIONS**

##### Key Risks

- 4.1 The PCPB has reviewed its risk register and it is in line with the CCG requirement.

#### **5.0 Financial and Resource Implications**

- 5.1 All exceptions are reported to the QIPP Board and full discussion held re risk and mitigation.

#### **6.0 Quality and Safety Implications**

- 6.1 Quality and Risk Team are fully sighted on all activity and the EIAs include a Quality Impact Assessment which is signed off by the CCG Head of Quality and Risk

#### **7.0 Equality Implications**

- 7.1 A robust system has been put in place whereby all schemes have a full EIA undertaken at the scoping stage.

#### **8.0 Medicines Management Implications**

- 8.1 There are no implications in this report regarding medicines management, however, full consultation is sought with Head of Medicines Management for all schemes presented.

#### **9.0 Legal and Policy Implications**

- 9.1 There are no legal implications.

#### **10.0 RECOMMENDATIONS**

- 10.1 To **RECEIVE** and **Note** the actions being taken.

Name: Manjeet Garcha  
Job Title: Director of Nursing and Quality  
Date: 29<sup>th</sup> May 2016



### REPORT SIGN-OFF CHECKLIST

This section must be completed before the report is submitted to the Admin team. If any of these steps are not applicable please indicate, do not leave blank.

	Details/ Name	Date
Clinical View	M Garcha Dr De Rosa	12 <sup>th</sup> May 2016
Public/ Patient View		
Finance Implications discussed with Finance Team	QIPP BOARD	May 2016
Quality Implications discussed with Quality and Risk Team	M Garcha / S Southall	May 12 <sup>th</sup> 2016
Medicines Management Implications discussed with Medicines Management team	Nil	12 <sup>th</sup> May 2016
Equality Implications discussed with CSU Equality and Inclusion Service	J Herbert	12 <sup>th</sup> May 2015
Information Governance implications discussed with IG Support Officer		
Legal/ Policy implications discussed with Corporate Operations Manager		
Signed off by Report Owner (Must be completed)	M Garcha	29 <sup>th</sup> May 2016

