

**WOLVERHAMPTON CCG**

**PRIMARY CARE COMMISSIONING COMMITTEE**  
**Tuesday 4<sup>th</sup> April 2017**

<b>TITLE OF REPORT:</b>	Primary Care Operational Management Group Update
<b>AUTHOR(s) OF REPORT:</b>	Mike Hastings, Associate Director of Operations
<b>MANAGEMENT LEAD:</b>	Mike Hastings, Associate Director of Operations
<b>PURPOSE OF REPORT:</b>	To provide the Committee with an update on the Primary Care Operational Management Group.
<b>ACTION REQUIRED:</b>	<input type="checkbox"/> <b>Decision</b> <input checked="" type="checkbox"/> <b>Assurance</b>
<b>PUBLIC OR PRIVATE:</b>	This Report is intended for the public domain
<b>KEY POINTS:</b>	<ul style="list-style-type: none"> <li>• Full Delegation - The Primary Care Medical Services Delegation Agreement has now been signed which outlines how NHS England will delegate to the CCG and which powers will be reserved.</li> <li>• CQC Primary Care Update - The inspection programme for 2016/2017 has been completed</li> <li>• Primary Care Quality Update - The infection prevention rates for the month of January have improved. There were seven Practices who have not submitted Friends and Family Data for the month of January.</li> </ul>
<b>RECOMMENDATION:</b>	The committee are asked to note the progress made by the Primary Care Operational Management Group.
<b>LINK TO BOARD ASSURANCE FRAMEWORK AIMS &amp; OBJECTIVES:</b>	
1. Improving the quality and safety of the services we commission	The Primary Care Operational Management Group monitors the quality and safety of General Practice.



2. Reducing Health Inequalities in Wolverhampton	The Primary Care Operational Management Group work with clinical groups within Primary Care to transform delivery.
3. System effectiveness delivered within our financial envelope	Operational issues are managed to enable Primary Care Strategy delivery.

## 1. BACKGROUND AND CURRENT SITUATION

1.1. The Primary Care Operational Management Group met on Tuesday 20<sup>th</sup> March 2017 and this report is a summary of the discussions which took place.

## 2. MAIN BODY OF THE REPORT

### 2.1. Primary Care Quality Update

A review of the Quality Matters process is being undertaken and this will include the process of how closed matters are handled due to issues raised by the GPs.

The infection prevention rates were received from the Practices visits that have been undertaken for January and there has been an overall improvement.

Friends and Family submission data for the month of January 2017 was shared with the Group, there were seven Practices who did not submit data. It was highlighted there had been issues with the CQRS not showing data as submitted although the Practices have submitted data and this issue is being investigated.

### 2.2. Contract Visit Programme

The collaborative joint contract review pilot visits are due to be completed by the end of March 2017. The programme for the next six months is currently being arranged and an update will be provided at the next meeting.

### 2.3. Online Access Update

The practices online access programme continues which provides support to patients to sign up to patient online. There are different methods being introduced to support those Practices who are struggling to meet the 10% target.



## 2.4 Full Delegation

The CCG are expected to receive the final Memorandum of Understanding by the end of March 2017. The Task and Finish Group continues to meet to discuss the impact and plans for contractual changes across the CCG. The Primary Care Medical Services Delegation Agreement has now been signed which outlines how NHS England will delegate to the CCG and which powers will be reserved.

## 2.4. Zero Tolerance Scheme

It was reported the policy will come into effect from the 3<sup>rd</sup> April 2017 and they are currently out for expressions of interest for the service provider.

## 2.5. CQC Primary Care Update

The inspection programme for 2016/2017 has been completed and there were similar trends across the visits which have been identified and were discussed. The plan for quarter one and two of the 2017/2018 visit programme will be dedicated to following up visits either by desk top or telephone.

## 2.6. General Practice Forward View Implementation Plan update

An overview of the live projects from the GP Five Year Forward View was presented to the Group. This provided detailed on the progress and status of each project and going forward a programme of work will be developed and monitored which will link in with the Primary Care Strategy programme of work.

## 3. CLINICAL VIEW

- 3.1 A clinical representative from LMC attends the meetings and gives views on all discussions.

## 4. PATIENT AND PUBLIC VIEW

- 4.1. Patient and public views are sought as required.

## 5. KEY RISKS AND MITIGATIONS

- 5.1. Project risks are reviewed as escalated from the programme.



## 6. IMPACT ASSESSMENT

### *Financial and Resource Implications*

6.1. The group has no authority to make decisions regarding Finance.

### *Quality and Safety Implications*

6.2. A quality representative is a member of the Group.

### *Equality Implications*

6.3. Equality and Inclusion views are sought as required.

### *Legal and Policy Implications*

6.4. Governance views are sought as required.

### *Other Implications*

6.5. Medicines Management, Estates, HR and IM&T views are sought as required.

**Name: Mike Hastings**

**Job Title: Associate Director of Operations**

**Date: 27<sup>th</sup> March 2017**



### 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.**

	<b>Details/ Name</b>	<b>Date</b>
Clinical View	<b>N/A</b>	
Public/ Patient View	<b>N/A</b>	
Finance Implications discussed with Finance Team	<b>N/A</b>	
Quality Implications discussed with Quality and Risk Team	<b>N/A</b>	
Equality Implications discussed with CSU Equality and Inclusion Service	<b>N/A</b>	
Information Governance implications discussed with IG Support Officer	<b>N/A</b>	
Legal/ Policy implications discussed with Corporate Operations Manager	<b>N/A</b>	
Other Implications (Medicines management, estates, HR, IM&T etc.)	<b>N/A</b>	
Any relevant data requirements discussed with CSU Business Intelligence	<b>N/A</b>	
<b>Signed off by Report Owner (Must be completed)</b>	<b>Mike Hastings</b>	<b>27.03.17</b>

