# WOLVERHAMPTON CLINICAL COMMISSIONING GROUP PRIMARY CARE COMMISSIONING COMMITTEE

# Minutes of the Primary Care Commissioning Committee (PUBLIC) Tuesday 22nd May 2018 at 2.30pm Stephenson Room, Technology Centre, Wolverhampton Science Park

# MEMBERS ~ Wolverhampton CCG ~

		Present		
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Sue McKie	Chair	Yes		
Dr David Bush	Locality Chair / GP	Yes		
Dr Manjit Kainth	Locality Chair / GP	No		
Dr Salma Reehana	Clinical Chair of the Governing Body	Yes		
Steven Marshall	Director of Strategy & Transformation	Yes		
Sally Roberts	Chief Nurse	Yes		
Les Trigg	Lay Member (Vice Chair)	Yes		

# NHS England ~

Bal Dhami	Contract Manager	Yes

# Independent Patient Representatives ~

Sarah Gaytten	Independent Patient Representative	No
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# Non-Voting Observers ~

Tracy Cresswell	Wolverhampton Healthwatch Representative	Yes
Dr Gurmit Mahay	Vice Chair – Wolverhampton LMC	No
Jeff Blankley	Chair - Wolverhampton LPC	Yes

#### In attendance ~

Mike Hastings	Associate Director of Operations (WCCG)	Yes
Dr Helen Hibbs	Chief Officer (WCCG)	Yes
Peter McKenzie	Corporate Operations Manager (WCCG)	Yes
Gill Shelley	Primary Care Contracts Manager (WCCG)	Yes
Sarah Southall	Head of Primary Care (WCCG)	Yes
Jane Worton	Primary Care Liaison Manager (WCCG)	Yes
Tony Gallagher	Chief Finance Officer (WCCG)	Yes
Simon Bourne	Management Consultant (Strategy Unit CSU)	Yes
Jo Reynolds	Primary Care Development Manager (WCCG)	Yes
Ranjit Khular	Primary Care Transformation Manager (WCCG)	Yes
Dr R Gulati	Wolverhampton GP	Yes
Dr Asghar	Wolverhampton GP	Yes
Laura Russell	Primary Care PMO Administrator (WCCG – minutes)	Yes

#### Welcome and Introductions

WPCC208 Ms McKie welcomed attendees to the meeting and Introductions took

place.

# **Apologies**

WPCC209 Apologies were submitted on behalf of Sarah Gaytten and Dr Kainth.

#### **Declarations of Interest**

WPCC210 Dr Bush, Dr Reehana, Dr Gulati and Dr Asghar declared that, as GPs they

have a standing interest in all items relating to Primary Care.

#### Minutes of the Meeting held on the 6th February 2018

WPCC211 It was reported there was a spelling mistake on page 4 under WPCC184

last bullet point it should read smoking cessation not smoking sensation.

Apart from this amendment the minutes of the meeting held on the 6th February 2018 were approved as an accurate record.

RESOLVED: That the above was noted.

#### **Matters Arising from the Minutes**

WPCC212 There were no matters arsing from the minutes.

#### **Committee Action Points**

WPCC213 Minute Number PCC302a - Premises Charges (Rent Reimbursement)

The cost directives are still awaited.

Minute Number WPCC117 - Provision of Services post Dr Mudigonda

retirement from a partnership to a single hander The update is due in September 2018.

Minute Number WPCC186 - Pharmacy First Scheme for all patients

The report is due at the August 2018 meeting.

#### **Quarterly Finance Report**

WPCC214

Mr Gallagher provided a report to the Committee on the CCGs financial position at Month 12 (March 2018). Mr Gallagher reported that the final delegated primary care allocations for 2017/18 is £35.650M. The outturn

is £34.428 delivering an underspend position of £1.221m.

The outturn indicates an underspend of £1,221m across delegated primary care of which £790k is against other GP services which relates to the release of accruals relating to pre-delegation. The CCG has received the income to offset expected expenditure. However, as a result of a lower level of actual spend being incurred, the CCG is reporting a non recurrent benefit of £790k.

Mr Gallagher noted that since the CCG had full responsibility for delegated primary care it has developed the strategy to be aligned to the five year forward view. This has given benefits to patients and the public including:

- Saturday Hub Opening
- Improved Access Opening
- Providing training for Practice Nurses

The CCG will ensure tighter monitoring of schemes to ensure the resource is fully committed.

RESOLUTION: The Committee noted the content of the report and the assurance provided.

#### **QOF+ Scheme 2018/19**

WPCC215

Mr Bourne presented the QOF+ Scheme 2018/19 Business Case, Equality Impact Assessment and Quality Impact Assessment to the Committee. The Data Protection Impact Assessment was not made available and will be circulated following the meeting.

The new scheme will be for practices to participate in and will be offered to all Wolverhampton Member Practices. The scheme will focus on tackling three priority areas, Diabetes (Pre-diabetic), Alcohol and Obesity. The purpose of the scheme is to prevent ill health and patients developing disease associated with the three priority areas.

The Committee were informed that member practices were engaged in discussions regarding the priority areas. An external review was commissioned the by the CCG in January and February 2018, which undertook a scoping and review of national evidence in order to determine the evidence base for interventions for the three priority areas. In March the first draft of the scheme was shared with clinicians across primary care including Group Leads, Clinical Reference Group and LMC. In relation to the implementation this will be working within practices and supported by IMT facilitators, as there is a risk practice will experience difficulties in implementing if support is not provided by the CCG. The scheme will be measured by using the Graphnet system.

NOTE: Dr Bush, Dr R Gulati, Dr Asghar and Dr Reehana left the meeting whilst discussions and decisions were taken regarding the report and its recommendations.

The Committee discussed in the length the scheme in particular around the payment and method of calculating the QOF+ points. There were queries made regarding the method being used. It was noted level of payment made to practices will be dependent on the number of QOF+ points they accrue, out of a total of 100 available points. These have been

distributed between the QOF+ indicators. It has been decided based on GP feedback not to incorporate a sliding scale as used previously as they wanted something they could understand and that was achievable. The Committee were informed that quarterly monitoring would be taking place.

The Committee agreed to the QOF+ Scheme.

### **RESOLUTION: The Committee agrees that:-**

- The Business Case, EIA and QIA were approved.
- The DPIA will be to follow

Note: Mr Simon Bourne left the meeting

NOTE: Dr Bush, Dr R Gulati, Dr Asghar and Dr Reehana joined the meeting.

# **Primary Care Quality Report**

WPCC216 Ms Roberts presented the report to the Committee an provided the following updates:

- Infection Prevention The CCG and Infection prevention teams are continuing to support those practices who have received red ratings.
- Friends and Family Test The figures for March 2018 submission show that they are better than regional and national averages. The overall responses remain positive (82% would recommend their practice) however it is still lower than national average at (89%). A Friends and Family Test Policy has been developed and has been shared with LMC who have approved it, this will come to the committee for approval.
- **Complaints** The CCG does not have an oversight of GP complaints dealt within the surgery. NHS England are now sharing this information and this is being triangulated with other data.
- **Serious Incidents -** There are currently two serious incidents that are currently under investigation.
- **CQC inspections** to date from April 2017, 18 practices have received an inspection, of which 16 have been rated good and 2 rated as requires improvement.
- Workforce the workforce plan has been redefined in line with STP and national drivers. The working in Wolverhampton video is now complete and will be used to promote Wolverhampton as a place to work. The CCG continue to attend relevant workforce fairs locally. There is work being undertaken around international recruitment of GPs with a bid being recently submitted. The CCG are also working on adopting Walsall CCGs strategy on revalidation for practice nursing.

**RESLOUTION:** That the report was noted for assurance. Governing Body Report - Primary Care Strategy Committee Update

WPCC217

Mrs Southall presented to the Committee the report which has been shared and approved by the Governing Body in April 2018. The report provided an overview of the discussions that took place at the Milestone Review Board with particular focus on to key programmes of work (Primary Care Strategy and General Practice Forward View). The Committee reviewed the content and accepted the report as assurance of the work being undertaken by the Primary Care Team.

**RESOLUTION:** That the above report was noted.

#### **Primary Care Operational Management Group Update**

WPCC218

Mr Hastings reported to the Committee the Operational Management Group had not met within the month as the meeting was cancelled. Mr Hastings noted that work is being undertaken to review the Contract Review Process and the CCG are working with Infection Prevention at RWT on the new regulations.

**RESOLUTION:** That the above report was noted.

# **Primary Care Counselling Service**

Note: Mr Khular joined the meeting

WPCC219

Mr Khular provided the Committee with an update report on the progress made against the Primary Care Counselling Service which is funded from PMS premium monies.

Mr Khular noted that the Primary Care Counselling service was commissioned as a six month pilot that commenced in June 2017. The pilot was then subsequently extended following a positive evaluation. A contract for a three year service has been operational since the 1<sup>st</sup> April 2018, and was awarded to a consortium led by Relate Birmingham.

The report provided details of the activity, referrals and the reasons for those referrals. The Committee queried the recoding of the data, it was noted that they are collecting demographics and that they are working with the Mental Health Commissioner to ensure the measuring is correct and this in linked in with IAPT.

The Committee also queried the clinical view section of the report, and noted they needed to be mindful the patient is not counted twice; also patients are not using this service as an alternative to using the healthy minds service.

**RESOLUTION:** That the above report was noted.

#### **Document Management**

WPCC220 Ms Reynolds presented to the Committee the following documentation:

- Business Case
- Service Specification
- Equality Impact Assessment

- Data Protection Impact Assessment
- Quality Impact Assessment

Ms Reynolds asked the Committee to consider and review the above with a view to approve, so the specification can be advertised and a supplier be identified. Ms Reynolds stated that Document Management is part of the GPFV regarding training admin staff to enable the skills to manage clinical correspondence effectively. The aim of the programme is to free up GP time be enhancing the admin role.

The Committee queried how the programme of work would be monitored, it was stated that an audit would be undertaken in six months' time and will be monitored and managed at Group Level.

# **RESOLUTION: The Committee agrees that:-**

• The Business Case, Service Specification and supporting impact assessments were approved.

## **Improving Access**

WPCC221

Ms Reynolds shared with the Committee the Improving Access 2018/19 Business Case that has been prepared along with the following supporting documents:

- Service Specification
- Equality Impact Assessment
- · Data Protection Impact Assessment
- Quality Impact Assessment

Ms Reynolds asked the Committee to receive and consider the Business Case and supporting documents to approve the continuation of this programme of work.

Ms Reynolds informed the Committee Improving access is a nationally mandated service for extending opening times of primary care on a hub basis. A requirement is to deliver 1.5 hours extra per evening (Monday to Friday after 6.30pm) and Saturday and Sunday. The deadline to achieve this is the 1<sup>st</sup> September 2018 and delivery plans have been submitted by practice groups to demonstrate how they will achieve this trajectory.

The Committee reviewed the business case and supporting documentation and approved to the continuation of this programme of work.

#### **RESOLUTION: The Committee agrees that:-**

• The Business Case, Service Specification and supporting impact assessments were approved.

#### **Out of Area Registration**

WPCC222

Mrs Reynolds provided a report and following documentation to the Committee:

Service Specification

- Equality Impact Assessment
- Data Protection Impact Assessment
- Quality Impact Assessment

The Committee considered the documents provided and approved the out of area registration: In hours urgent primary care enhanced service.

RESOLUTION: The Committee approved the out of area registration for In hours urgent primary care enhanced service.

## **Any Other Business**

WPCC223

The Committee agreed to cancel the next Public Committee meeting and the Private Committee meeting at an earlier time of 2.00pm.

RESOLVED: That the above was noted.

# **Date of Next Meeting**

WPCC224

Tuesday 3<sup>rd</sup> July 2018 at 2.00pm in the Stephenson Room, 1st Floor, Technology Centre, Wolverhampton Science Park.