# WOLVERHAMPTON CLINICAL COMMISSIONING GROUP PRIMARY CARE COMMISSIONING COMMITTEE

# Minutes of the Primary Care Commissioning Committee (PUBLIC) Tuesday 4 December 2018 at 2.00pm PA108, Creative Industries Building, Wolverhampton Science Park

# MEMBERS ~

### Wolverhampton CCG ~

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

# NHS England ~

Bal Dhami	Contract Manager	No
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# 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	No

# In attendance ~

Mike Hastings	Director of Operations (WCCG)	Yes
Peter McKenzie	Corporate Operations Manager (WCCG)	Yes
Gill Shelley	Primary Care Contracts Manager (WCCG)	Yes
Liz Corrigan	Primary Care Quality Assurance Coordinator (WCCG)	Yes
Sarah Southall	Head of Primary Care (WCCG)	Yes
Ramsey Singh	IM&T Project Manager (Infrastructure) (WCCG)	Yes
Sam Squire	Student Nurse (WCCG/UoW)	Yes
Diane North	PMO Administrator (WCCG – minutes)	Yes
Janette Rawlinson	Chair of SWB PCCC – Lay Person	Yes

# Welcome and Introductions

WPCC431 Ms McKie welcomed attendees to the meeting and introductions took place. Diane North was welcomed as the new PMO Administrator responsible for the administration of the meeting.

## Apologies

WPCC432 Apologies were submitted on behalf of Ms H Hibbs, Ms S Roberts, Dr Kainth, Ms S Gaytten, Dr D Bush, Mr S Marshall and B Dhami.

## **Declarations of Interest**

WPCC433 Dr Reehana declared that as a GP she had a standing interest in all the items relating to primary care.

Ms McKie declared that in her role for Walsall and Wolverhampton on the Child Death Overview Panel, she has a standing interest in all items related to Primary Care

As these declarations did not constitute a conflict of interest, all participants remained in the meeting whilst these items were discussed.

#### Minutes of the Meeting held on the 6 November 2018

WPCC434 The minutes from the meeting held on the 6 November 2018 were agreed as an accurate record.

### **RESOLVED:** That the above was noted.

#### Matters Arising from the Minutes

WPCC435 There were no matters arising from the minutes.

#### **RESOLVED:** That the update was noted.

### **Committee Action Points**

# WPCC436 Minute Number WPCC411 – Healthwatch Wolverhampton: GP Communication Report Following a query at the previous meeting, it was clarified that 9 out of 506 (1.78%) patients surveyed has stated that they did not want to have communication from their Practice.

It was also noted that the recommendations in the report would be considered by the Primary Care Operations Management Group to inform a report from the Primary Care Team on the CCG's response to the Healthwatch Recommendations.

# Primary Care Quality Report

- WPCC437 Mrs Corrigan presented the monthly Primary Care Quality Report to the Committee and highlighted the following key points:
  - Mrs Corrigan had shadowed the Infection Prevention (IP) nurses on a Practice visit. This had provided useful insights into the processes. There had been a query about whether the recommendations made following the visit were monitored. Mrs Corrigan advised that, other than for more significant recommendations (that were monitored by exception), an annual follow up was made.
  - It was reported that the uptake of flu jabs was increasing week on week following the slow start. The issue of low stock had been resolved by rules around moving stock between Practices being relaxed. The Committee was assured that Practices were not moving vaccines themselves, rather the CCG and Public Health were coordinating the transfer of stock safely between Practices to maintain the cold chain. The Primary Care Flu group are planning to meet again in January 2019 to review this year's flu activity and in March 2019 to plan for next year.
  - No new serious incidents had occurred and those being monitored had been resolved. There is one new performer issue, which will be reviewed by the NHS England Practice Performer Intelligence Gathering Group (PPIGG) in the coming week. No new complaints data had been received from NHS England.
  - Friends and Family Test (FFT) uptake had seen the best results so far in September 2018 at 2.1% an increase of 0.7% since April for the population in Wolverhampton. It was noted that the comparative figures in the table did not add up to 100% as they were based on averages and therefore subject to rounding. Practices that had not submitted their data were being monitored in line with the FFT policy. In response to a query it was confirmed that some Practices have had issues submitting reports which is monitored on a monthly basis. Although the data shows high levels of "other" being recorded as a method of response, anecdotal evidence shows that these are, in fact, responses through check-in screens that Practices are unsure how to categorise.
  - It was reported in reference to Workforce Development that work continues to promote student placements and apprenticeships and a new reporting tool would be used to present figures in a revised format from 2019 onwards.
  - A Practice Nurse Strategy was being developed at STP level which focussed on retention in particular. It was clarified that the reference to first 5s' related to newly qualified GPs in their first five years of practice.
  - It was reported that an issue with the Digital Clinical Supervision pilot usage of Skype was being resolved. Mr Hastings advised the CCG has worked with the IT Service provider to develop a policy for Skype and he can assist in resolving the issue if user names could be supplied.

# **RESOLVED:** That the update was noted.

# Primary Care Operational Management Group Update

- WPCC438 Mr Hastings presented the Primary Care Operational Management Group Update, highlighting that matters discussed included: -
  - An update on the transition work with MGS Medical Centre. This was winding down as the only issues outstanding related to transferring patient records, as Primary Care Support England (PCSE) were only able to process a limited amount at a time.
  - Discussions continued around Primary Care Estates work in Bilston. A recent meeting with a number of practices and the Local Authority had been very positive. There are opportunities for improvements as a result of plans to build new houses in the Willenhall to Walsall corridor starting initially with 450 houses in Bilston and work has been undertaken to develop a feasibility study and options appraisal.
  - An update on work to support the mergers of Health and Beyond Practices had been considered and discussed. Clinical system mergers had now taken place.

# **RESOLVED:** That the update is noted.

# Primary Care Contracting Update

WPCC439 Ms Shelley provided an update on primary care contracting to the committee

The report highlighted a number of variations to General Medical Services (GMS) contracts. This included various variations to contracts at Penn Manor Medical Centre, Woden Road Surgery, Bradley Medical, Church Street, Tettenhall Medical Practice, Warstones Medical Practice and Grove Medical (Health & Beyond). In response to a query, Ms Shelley confirmed that the contract changes at Woden Road would not cause an issue with clinical cover as the practice had recruited additional salaried GPs.

It was also reported that a Quality Outcomes Framework (QOF) Post Payment verification process, supported by NHS England, was due to take place at the end of February with practices being given two weeks' notice of the visit. A Practice from each model of care group has been chosen at random by the Local Medical Committee to participate.

# **RESOLVED:** That the update was noted.

# Enhanced Services (November 2018-March 2018)

WPCC439 Ms Southall presented the report on behalf of Ms Reynolds following a discussion at the previous meeting of the committee on time limited enhanced services designed to improve performance in meeting a number of NHS Constitutional Standards.

The Committee had agreed to approve the service specification in principle at its last meeting due to the need to commence the service, subject to circulation of

the full specification. Clinical input had been sought from the CCG Chair and Accountable Officer and further minor changes had been made to the specification and it was agreed that the final version would be shared. It was noted that there was occasionally need for urgent decision making of this type by the Committee and there was a discussion about how to effectively progress this. It was agreed that the Primary Care Operational Management Group would develop a process that would ensure robust decision making, with appropriate clinical input into developing service specifications.

# **RESOLVED:**

- 1) That the final version of the Service Specification be circulated to Committee members.
- 2) A process for urgent approvals be developed by the Primary Care Operational Management Group.
- 3) That the update was noted.

# **Unprocessed Files associated with Docman**

WPCC440 Mr Singh presented the report, which provided an update on the impact of a national issue with the Docman Document Management system used by GP Practices.

It was highlighted that the issue, which had resulted in a large number of documents sent to practices by providers not being processed by the system. This had first come to light in August 2018 following a communication from NHS England and that, as directed by NHS Digital, individual CCGs have taken ownership of the local response. The CCG had worked with individual Practices to collate the information to understand the volume of affected documents and then put a plan in place to review them. It was agreed the CCG would financially support Practices to undertake the additional work involved. The majority of outstanding documents had now been reviewed, the vast majority had been duplicate copies of documents already in the system and to date no significant impact to patient care had come to light.

The report also gave details of work to identify possible contributing factors to the issue which had included:

- Inefficient knowledge and skills transfer to staff as the system had been installed a number of years ago. This meant alerts & error messages for unprocessed documents were not always picked up by users.
- The file path to unprocessed documents was long and difficult to locate and not advised to users on installation.
- A lack of communication from Docman who felt that the system was working as designed.
- The version of the Docman software used by the majority of practices is dependent on another piece of software to work effectively and Clinical correspondence had been received in incompatible files formats.
- The increased complexity of the health economy meant that new services and providers used the system.
- A number of PCs had been replaced in Primary Care through the CCG's hardware replacement programme. This had resulted in the loss of some local configuration settings.

Recommendations for work to respond to these issues included contacting service providers to remind them to send correspondence in compatible formats and to prioritise the rollout of the upgraded version of Docman. This is a 'hosted solution', that will ensure that responsibility for addressing issues with the processing of documents would fall to the supplier rather than individual practices. It was proposed to start this work in January 2019, completing by the end of March 2019.

During the discussion it was queried whether investing further in the system was a good idea, given the issues experienced. In response, the concerns were noted but it was highlighted that, as a health economy, there had been significant investment in the system which helped to ensure that document management in Primary Care and Acute Care would be as seamless as possible.

It was acknowledged that alternatives were available and that, although the upgraded Docman 10 was an improvement, there were still some issues in using it. It was noted that a new healthcare standard for document exchange was being developed which could impact on the use of Docman across the health economy. The Primary Care Operations Management Group was asked to review the potential to use alternative systems.

A question was raised about the total cost to the CCG of supporting practices to review and action the unprocessed documents. It was reported that some claims were still being received and, once they were all received this would be reported to the committee.

Dr Reehana highlighted that the response to the issue by the CCG's Information Management and Technology and Primary Care Teams had been excellent and appreciated by practices.

# **RESOLVED**:

- 1) That the Primary Care Operations Management Group review whether alternatives to Docman could be utilised.
- 2) That, when confirmed, the total cost to the CCG of supporting practices to review documents be reported.
- 3) That the update be noted.

# **Any Other Business**

# WPCC441 Next Meeting

It was agreed that due to the short timescale for submission of papers because of the Christmas and New Year holiday that the meeting of 8<sup>th</sup> January 2019 would be cancelled.

# Date of Next Meeting

WPCC442 Tuesday 5 February 2019 at 2.00pm in the PA125 Stephenson Room, Technology Centre, Wolverhampton Science Park