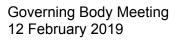


# **WOLVERHAMPTON CCG**

# GOVERNING BODY MEETING 12 FEBRUARY 2019

Agenda item 16

	Agenda item 16		
TITLE OF REPORT:	Summary – Primary Care Commissioning Committee – 6 November 2018 and 4 December 2018		
AUTHOR(s) OF REPORT:	Sue McKie, Primary Care Commissioning Committee Chair		
MANAGEMENT LEAD:	Mike Hastings, Associate Director of Operations		
PURPOSE OF REPORT:	To provide the Governing Body with an update from the meeting of the Primary Care Commissioning Committee on 6 November 2018 and 4 December 2018.		
ACTION REQUIRED:	□ Decision		
PUBLIC OR PRIVATE:	This Report is intended for the public domain.		
KEY POINTS:	Primary Care Quality Report The uptake of flu jabs is increasing week on week and the issue of low stock has now been resolved. Friends and Family Test has seen the best results so far in September 2018 at 2.1%, an increase of 0.7% since April.		
RECOMMENDATION:	The Governing Body is asked to note the progress made by the Primary Care Joint Commissioning Committee.		
LINK TO BOARD ASSURANCE FRAMEWORK AIMS & OBJECTIVES:			
Improving the quality and safety of the services we commission	The Primary Care Commissioning Committee monitors the quality and safety of General Practice.		
Reducing Health     Inequalities in     Wolverhampton	The Primary Care Commissioning Committee works with clinical groups within Primary Care to transform delivery.		
System effectiveness     delivered within our     financial envelope	Primary Care issues are managed to enable Primary Care Strategy delivery.		









### 1. BACKGROUND AND CURRENT SITUATION

1.1. The Primary Care Commissioning Committee met on 6 November 2018 and 4 December 2018. This report provides a summary of the issues discussed and the decisions made at those meetings.

#### 2. PRIMARY CARE UPDATES

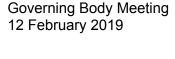
**Primary Care Commissioning Committee – 6 November 2018** 

### 2.1 **Primary Care Quality Report**

- 2.1.1 The Primary Care Quality Assurance Co-ordinator (WCCG), Liz Corrigan, updated the Committee around primary care quality, providing an overview of activity in primary care and assurances around mitigation and actions taken where issues have arisen. The following issues were highlighted:
  - 36 complaints have been received since 1 November 2017 of which 28 are now closed and 8 remain under investigation.
  - Friends and Family Test results remain stable with a 1.8% uptake for the population in Wolverhampton.
  - A GP Retention Scheme has been agreed across the Black Country. A co-design event was held on 25 September 2018 where the following areas of focus were identified:
    - o Portfolio careers
    - Peer mentoring support
    - Pre-retirement coaching

### 2.2 Quarterly Primary Care Assurance Report

- 2.2.1 The Primary Care Transformation Manager (WCCG), Jo Reynolds, provided an overview of the activity taking place from the work programmes within the GP Forward View work and Primary Care Strategy. The following areas were highlighted:
  - QOF+ has been launched with 100% of practices signed up.
  - Extended Access is fully in place, with 100% coverage of the requirement for an additional 30 minutes across Wolverhampton.
  - o Online consultation and triage pilots have been launched in this guarter.
  - o Care Navigation cohort 2 has been launched.









## 2.3 Primary Care Operational Management Group Meeting

- 2.3.1 The Director of Operations (WCCG), Mike Hastings, provided an update from the meeting and highlighted the following:
  - The Project Group Meetings for the Health and Beyond mergers are now underway.
  - Estates work in Wolverhampton has a Bilston focus particularly around the utilisation of buildings in that area.

## 2.4 Primary Care Contracting Update

- 2.4.1 The Primary Care Contracts Manager (WCCG), Gill Shelley, provided an update on primary care contracting and the following was noted:
  - Alternative Provider Medical Contracts Procurement
     The advertisement has been live throughout October 2018 and the evaluation
     and moderation is currently underway with a view of bringing a report to the
     December 2018 Committee meeting outlining the outcome of the procurement
     exercise and preferred bidders.
  - Post Payment Verification (PPV) of the Quality and Outcome Framework (QOF)
     NHS England is supporting the CCG with this piece of work. A practice from
     each model of care group has been chosen at random by the Local Medical
     Committee.
  - Post Payment Verification (PPV) of Local Enhanced Services (LES)
     NHS England is supporting the CCG with this piece of work. The chosen areas to be reviewed are ear syringing and simple and complex dressings.

### 2.5 Healthwatch Wolverhampton: GP Communication

2.5.1 The Primary Care Transformation Manager (WCCG), Jo Reynolds, provided an update on the report recently published by Healthwatch Wolverhampton regarding a survey that focussed on how much communication patients receive from their GP practice and what level of awareness and involvement there is with Patient and Participation Groups.

## 2.6 Thrive into Work Specification

2.6.1 The Primary Care Transformation Manager (WCCG), Jo Reynolds, updated the Committee around a service specification that has been developed in partnership with the Thrive into Work Programme. The purpose of the programme is to enable a targeted approach to recruitment which encourages practices to contact patients who meet the participation criteria to take part in the research programme.

Governing Body Meeting 12 February 2019







### Primary Care Commissioning Committee (Private) – 6 November 2018

2.7 The Committee met in private to receive updates on feedback from a recent LMC meeting, enhance service specification, NHS England consultation around Medicines of Limited Clinical Value and Over the Counter and the current position around the recent Docman issues.

### **Primary Care Commissioning Committee – 4 December 2018**

#### 2.8 **Primary Care Quality Report**

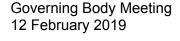
- 2.8.1 Primary Care Quality Assurance Co-ordinator (WCCG), Liz Corrigan, updated the Committee around primary care quality, providing an overview of activity in primary care and assurances around mitigation and actions taken where issues have arisen. The following issues were highlighted:
  - Ms Corrigan had shadowed one of the Infection Prevention Practice visits, which had provided a useful insight into the process.
  - The uptake of flu jabs has been increasing week on week following a slow start. The issue of low stock had now been resolved.
  - Friends and Family Test uptake had seen the best results so far in September 2018 at 2.1%, an increase of 0.7% since April, for the population of Wolverhampton.
  - A Practice Nurse Strategy was being developed at STP level which focusses on staff rentention.

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

2.9.1 The Director of Operations (WCCG), Mike Hastings, provided an update from the meeting and highlighted that discussion continues around primary care estates work in Bilston. It was noted that recent meeting had taken place with a number of local practices and the Local Authority had been very positive.

## 2.10 Primary Care Contracting Update

- 2.10.1 The Primary Care Contracts Manager, Gill Shelley, provided an update on primary care contracting and the following was noted:
  - General Medical Services contract variations had been processed for Penn Manor Medical Centre, Woden Road Surgery, Bradley Medical Centre, Church Street Surgery, Tettenhall Medical Practice, Warstones Medical Practice and Grove Medical Centre.
  - The Quality Outcomes Framework Post Payment verification process, supported by NHS England, was due to take place at the end of February 2019 with practices being given 2 weeks' notice of the visit.











#### 2.11 Enhanced Services

- 2.11.1 The Head of Primary Care (WCCG), Sarah Southall, presented a report around the time limited enhanced services designed to improve performance in meeting a number of NHS Constitutional Standards.
- 2.11.2 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. It was noted that there needs to be an agreed process for when a decision is required and timescales are short.

### 2.12 Unprocessed Files associated with Docman

2.12.1 The IM&T Infrastructure Project Manager (WCCG), Ramsey Singh, provided an update on the impact of a national issue with the Docman Document Management System used by GP Practices. The issue revolved around a large number of documents being sent to practices by providers but not being processed by the system. The CCG had worked with individual practices to collate the information and embed a plan to ensure they are reviewed. It was noted that the majority of outstanding documents had now been reviewed, the vast majority being duplicate copies of documents already in the system and to date no significant impact to patient care had been identified.

### Primary Care Commissioning Committee (Private) – 4 December 2018

2.13 The Committee met in private to receive items around Primary Care Commissioning Intentions, the APMS procurement exercise and the local protocol for interim phased return.

#### 3. CLINICAL VIEW

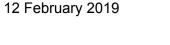
3.1. Not applicable.

#### 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 by the Primary Care Operational Management Group.



Governing Body Meeting





### 6. IMPACT ASSESSMENT

### Financial and Resource Implications

6.1. Any Financial implications have been considered and addressed at the appropriate forum.

### **Quality and Safety Implications**

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

## **Equality Implications**

6.3. Equality and inclusion views are sought as required.

## Legal and Policy Implications

6.4. Governance views are sought as required.

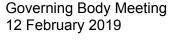
### Other Implications

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

Name: Sue McKie

Job Title: Lay Member for Public and Patient Involvement, Committee Chair

**Date:** 17 January 2019









### 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	N/A	
Public/ Patient View	N/A	
Finance Implications discussed with Finance Team	N/A	
Quality Implications discussed with Quality and Risk Team	N/A	
Equality Implications discussed with CSU Equality and Inclusion Service	N/A	
Information Governance implications discussed with IG Support Officer	N/A	
Legal/ Policy implications discussed with Corporate Operations Manager	N/A	
Other Implications (Medicines management, estates, HR, IM&T etc.)	N/A	
Any relevant data requirements discussed with CSU Business Intelligence	N/A	
Signed off by Report Owner (Must be completed)	Sue McKie	17/01/19

