

WOLVERHAMPTON CCG PRIMARY CARE COMMISSIONING COMMITTEE 2nd April 2019

TITLE OF REPORT:	Primary Care Operational Management Group Update		
AUTHOR(s) OF REPORT:	Mike Hastings, Director of Operations		
MANAGEMENT LEAD:	Mike Hastings, Director of Operations		
PURPOSE OF REPORT:	To provide the Committee with an update on the Primary Care Operational Management Group.		
ACTION REQUIRED:	□ Decision⊠ Assurance		
PUBLIC OR PRIVATE:	This report is intended for the public domain.		
KEY POINTS:	 APMS practice mobilisation following the procurement exercise is progressing well The Newbridge practice extension is on schedule for completion in May this year Work continues with NHS Property Services to reconcile payment arrangements for practices Primary Care Networks are in formation following the publication of the latest guidance. This will change how practice groups are currently arranged for care delivery The flu vaccination campaign for school children has been very successful following the distribution of a cartoon book campaign 		
RECOMMENDATION:	To provide the Committee with an update on the Primary Care Operational Management Group.		
LINK TO BOARD ASSURANCE FRAMEWORK AIMS & OBJECTIVES:			
 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	Operational issues are managed to enable Primary Care		

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delivered within our	Strategy delivery.
financial envelope	

1. BACKGROUND AND CURRENT SITUATION

1.1. Notes from the last Primary Care Operational Management Group are set out below.

Primary Care Operational Management Group Wednesday 6th March 2019 at 2.30pm CCG Main Meeting Room, Wolverhampton Science Park, WV10 9RU

Present:

Mike Hastings	(MH)	WCCG Director of Operations (Chair)
Steve Barlow	(SB)	WCC Health Protection Lead Practitioner
Liz Corrigan	(LC)	WCCG Primary Care Quality Assurance Co-ordinator
Tally Kalea	(TK)	WCCG Commissioning Operations Manager
Peter McKenzie	(PMcK)	WCCG Corporate Operations Manager
Hemant Patel	(HP)	WCCG Head of Medicines Optimisation
Jo Reynolds	(JR)	WCCG Primary Care Transformation Manager
Mandy Sarai	(MS)	WCCG Business Support Officer
Ramsey Singh	(RS)	WCCG IM&T Infrastructure Project Manager
Phil Strickland	(PS)	WCCG Governance & Risk Coordinator
Jane Worton	(JW)	WCCG Primary Care Liaison Manager
Apologies: Bal Dhami Yvette Delaney Marion Janavicius Gill Shelley Sarah Southall Dr S. Vij	(BD) (YD) (MJ) (GS) (SS) (SV)	NHS England Senior Contracts Manager Inspector for Primary Medical Services Care Quality Commission (Central West) WCCG Contracts Manager Committee WCCG Primary Care Contracting Manager Head of Primary Care (Wolverhampton CCG) & GPFV GP at Whitmore Reans Health Centre Programme Director (Black Country STP)

Item		
1.	Welcome and Introductions	
2.	Apologies Apologies for absence were received from Yvette Delaney, Gill Shelley, Hemant Patel, Sarah Southall & Dr S. Vij.	
3.	Declarations of Interest There were no declarations of interest declared at this meeting.	
4. 4.1	Primary Care Operational Management Group MinutesMinutes from Wednesday 6th February 2019The Minutes taken from the meeting on Wednesday 6th February 2019 were	

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	Clinical Commissioning	y Group
4.2	signed off and recorded as an accurate record. Action Log Items on the action log were discussed.	
	Them's on the action by were discussed.	
5. 5.1	Notes of the Clinical Reference Group Meeting Clinical Reference Notes –23 rd Januarys 2018	
	The Clinical Reference Group notes were looked at for information purposes.	
6.	Risk Profile	
6.1	Risk Register	
	There were no new risks submitted this month.	
	Docman This is due for renound, DC to might this up with \/D	
	This is due for renewal. PS to pick this up with VP. NHS/ PS Risk	
	NHS/PS Debt needs to go on the risk register.	
7.	Matters Arising	
	There were no matters arising.	
8.	Primary Care Updates	
8.1	Review of Primary Care Matrix	
	MGS Medical Practice - all actions associated around them leaving the VI	
	Programme have now been signed off. They have joined 'Our Health Partnership'	
	since last October and the CCG will continue to help and support the practice through regular meetings. The next meeting will take place following the mock	
	CQC inspection being undertaken at the practice.	
	APMS Mobilisation Project Group meetings continue to take place. Risk registers	
	are attached to meeting papers which reference the risks alongside the mitigation in place to address this.	
	Forward Plan for Practice System Migrations Mergers and Closures	
	Rose Villas scheduled to close. This is due to commence on 20 th March 2019.	
	A notice has been handed in for branch lines and this will be suspended.	
	Bilston Urban Village – Migration for clinical system has been scheduled for Wednesday12 th June 2019.	
	Pennfields – Migrations scheduled for Wednesday 10 th July 2019.	
	LDR Meeting took place Wednesday 6 th March 2019. Following on from this a	
	national NHS App will go live on 17 th June 2019.	
8.2	Estates Update/LEF	
	TK gave an Estates Update. Newbridge ETTF development will be completed in	
	May.	
	East Park surgery is currently having planning issues so a data has not been	
	East Park surgery is currently having planning issues so a date has not been agreed for them to start building work.	
	Agreement from NHSE Finance so that future developments can now request	
1	100% funding for their rent reimbursements. Capital funding from PS for the	

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Alfred Squire practice is being considered.

Main objective is to try and consolidate some of the service charges and lease agreements that the practice acquires from NHS PS. Regular meetings set up with facilities manager and the Business Managers.

CCG have Commissioned PCH to do an estates gap analysis across Wolverhampton which follows on from the Estates surveys that were completed 3 years ago. This will be commissioned over the next year.

8.3 Primary Care Networks

The group have seen the report attached to the papers and the content is also reflected in the PCGPFV report that goes to Primary Care Commissioning Committee.

Primary Care Networks are being established across the CCG and STP areas. Final guidance on the PCN DES and the requirements contained within this will be available from 28th March. There will be a number of funding streams attached to workforce for networks, as well as the allocation attached to the DES, with a timeline of the next 5 years. There is a requirement that access will also be integrated with PCNs. MH asked for estates to be included in discussions, as space for these additional staff will need to be considered.

The group agreed with the outline Milestone Plan and associated work programme, and recommended Primary Care Commissioning Committee also agreed the work programme.

8.4 Primary Care STP

Highlight report was presented to the group. Workforce continues to be the main focus of the STP programme of work, with significant activity and engagement taking place before the closure of the GPRISS. Workforce trajectories have been revised. PCNs are being discussed across the STP and will follow the national timeline.

The group recommended that Primary Care Commissioning Committee agreed the programme going forward.

- 8.5 <u>Care Quality Commission Update</u> No update provided.
- 8.6 Public Health Update

Successful campaign took place for targeting school children. Fun colourful animated booklets were produced and sent to circa 28000 pupils. Data shows Wolverhampton have the highest increase for flu vaccine uptake in all age groups in schools. This ranges between 7.8 &10%. Which means an extra 3,500 pupils received the vaccinations this year.

Over 65s vaccinations there seems to be a national problem with vaccine availability. These are managed locally via CCG and PH. Data shows a decrease in uptake compared to 2018 however drop was less than other areas. Work

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	Clinical Commissioning	dioup
	needed to plan for next season. Discussion was held regarding the success of improved marketing for children's cohort and whether this would also work for over 65s. Public Health to consider.	
	Under 65s at risk vaccine uptake is an area for concern. Discussions about what to do are ongoing; possibly consider contacting other areas who have better success.	
	Cancer screening is another area for concern which has been highlighted to SB. Both screening and 2 week's waiting list figures are of poor	
	Health checks and contract visits are going really well.	
8.7	NHS England Update No updated provided.	
8.8	Wolverhampton Local Medical Committee Update No updated provided.	
8.9	Pharmaceutical Involvement in Primary Care No updated provided	
9	Primary Care Quality Update	
9.1	Primary Care Quality Report	
	Infection Prevention All seems fine with the Infection Prevention audits. <u>Serious Incident</u> Serious Incident has come via PPIGG and had contributed towards the death of a patient. This is ongoing. On a monthly basis a newsletter will be developed for serious incidents and this will be shared with practice as well as the Primary Care Operational Management Group.	
	Quality MattersA couple of these are overdue and are being chased with the Practice Managers.ComplaintsNo new complaints.Friends and Family Test	
	LC to contact Mohan at Dr Mudigonda's practice. Up to date figures will be provided at the next meeting. <u>CQC</u> One report received from Tudor Road. No issues.	
	<u>Workforce Development</u> Practice Nurse Retention scheme is being prepared at STP Level. PA received £32,000 to support this from NHSE.	
	Once all the meetings have been completed PA will collate the information. Practice Nurse Strategy is currently being finalised and will go to Primary Care Commissioning Committee next month. Following this there will be a launch in the summer.	

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9.2	Collaborative Working Model: Practice Issues and Communication Log Update will be provided at the April Meeting.	
10. 10.1	Primary Care Contracting Collaborative Contract Review Programme	
	Ashfield Surgery had review which took place on 11 th February.	
	Dr Whitehouse is due for review on 19 th March.	
	JW to incorporate some assurance with the Primary Care Networks with the collaborate contract process. This is ongoing.	
10.2	Primary Care Contracting Update GS to provide update at the next meeting.	
10.3	APMS Risk Log Covered as above	
11.	Discussion Items	
11.1	Improving the Interface between Primary & Secondary Care – Clinicians – Toolkit 2018 The Clinical Leadership will be key to this and STP funding for Clinical Leadership to be used for peer review to demonstrate good practice. Got examples of good practice from Dudley and Wolverhampton. Need to look at what Stakeholders need to be involved in across the area. This includes general practice and	
	hospitals. Report to include key people from RWT.	
12.	Any other Business No items were discussed under any other business.	
13.	Date and time of Next Meeting -Friday 12 th April 2019, at 1pm in the Main Meeting Room	

2. **CLINICAL VIEW**

A clinical representative from LMC attends the meetings and gives views on all 2.1. discussions.

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3. PATIENT AND PUBLIC VIEW

Patient and public views are sought as required. 3.1.

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4. KEY RISKS AND MITIGATIONS

4.1. Project risks are reviewed as escalated from the programme.

5. IMPACT ASSESSMENT

Financial and Resource Implications

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

Quality and Safety Implications

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

Equality Implications

- 5.3. Equality and Inclusion views are sought as required. *Legal and Policy Implications*
- 5.4. Governance views are sought as required.

Other Implications

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

Name: Mike Hastings Job Title: Director of Operations Date: 28.1.19

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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
	N1/A	
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)	Mike Hastings	25.1.19

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