

**WOLVERHAMPTON CCG
PRIMARY CARE COMMISSIONING COMMITTEE
7th May 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:	<input type="checkbox"/> Decision <input checked="" type="checkbox"/> Assurance
PUBLIC OR PRIVATE:	This report is intended for the public domain.
KEY POINTS:	<ul style="list-style-type: none"> • The AMPS mobilisation work with Health & Beyond is now completed. • Two ETTF funded building developments are in progress with works to be completed at Newbridge by June and at East Park by the end of the year. • A room booking system is to be introduced across primary care enabling practices to improve space utilisation and billing arrangements. • CQC are starting their Annual Regulatory Review via telephone interviews with practices. • Dentistry, Optoms and Pharmacy Primary Care Services are remaining with NHS England for 19/20.
RECOMMENDATION:	To provide the Committee with an update on the Primary Care Operational Management Group.
LINK TO BOARD ASSURANCE FRAMEWORK AIMS & OBJECTIVES:	
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	Operational issues are managed to enable Primary Care Strategy delivery.



financial envelope	
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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
Friday 12th April 2019 at 11am
CCG Main Meeting Room, Wolverhampton Science Park, WV10 9RU

Present

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

Item		
1.	Welcome and Introductions	

2.	Apologies Apologies for absence were received from, Hemant Patel, Sarah Southall & Dr S. Vij, Steve Barlow, Jeff Blankley, Liz Corrigan.	
3.	Declarations of Interest There were no declarations of interest declared at this meeting.	
4.	Primary Care Operational Management Group Minutes	
4.1	<u>Minutes from Wednesday 6th March 2019</u> The Minutes taken from the meeting on Wednesday 6 th March 2019 were signed off and recorded as an accurate record. Apart from under Section 9.1	
4.2	<u>Serious Incident</u> Should read ' <i>Serious Incident is being investigated</i> '.	
4.3	<u>Action Log</u> Items on the action log were discussed.	
5.	Notes of the Clinical Reference Group Meeting	
5.1	<u>Clinical Reference Notes –20th February 2019</u> The Clinical Reference Group notes were reviewed at for information purposes.	
6.	Risk Profile	
6.1	<u>Risk Register</u> There were no new risks submitted this month	
7.	Matters Arising There were no matters arising.	
8.	Primary Care Updates	
8.1	<u>Review of Primary Care Matrix</u> JW provided an update. The APMS Mobilisation process is now complete. This is in the transition phase and contracts have been signed. JW has met with Joanne Round and John Seymour to discuss. All actions and logs have been closed. An issue about the back log of work that had been left. Health and Beyond are completing a piece of work to analyse numbers. They will discuss this with RWT. This has been logged on the internal risk register for this project. Feedback at the next meeting to see what the improvements are. Details can also be put in the GP Bulletin.	
8.2	<u>Forward Plan for Practice System Migrations Mergers and Closures</u> Rosevilla's branch site has been closed. RS confirmed that the reimbursement for estates will come back into the central budget. RS informed the ODS team in Exeter to close the practice and delete from their system; however RS was notified the information needed to come via the practice. RS has notified the practice of this. Work will commence on Bilston Urban Village and Pennfields. Once they have gone live then the Bilston Urban Village and Ettingshall merge will commence.	
8.3	<u>Estates Update/LEF</u> The work on the Newbridge site is to be completed by June. East park have also	



	<p>started building work which is due to be completed by the end of this financial year.</p> <p>NHS have confirmed that the funding for the other ETTF scheme has been signed off for Alfred Squire.</p> <p>JR to look into doing a press release for the Newbridge site.</p> <p>Void space – this is an ongoing issue.</p> <p>Any services that require a room within GP practices can be directed to a new room booking system. TK to meet with Andrew to discuss how this is carried out in Sandwell and Walsall. Training will also need to be sought to be able to use the new system.</p> <p>Design Bureau have completed an analysis over at the Bilston Health centre for Utilisation. Following on from this they will do a landscape model of whole of Wolverhampton. They will then create a mini dashboard of utilisation in Wolverhampton in terms of estate, condition etc. This will link with the Primary Care dashboard.</p>	
<p>8.4</p>	<p><u>Primary Care Networks</u></p> <p>Members meeting took place on Wednesday 3rd April, information around the handbook and guidance that has been received around the DES was disseminated and network formations discussed. Practices are required to submit initial network registration form by 15th May, commissioners to confirm and approve network areas by 30th May, each network needs to have all GP practices signed up to the DES via CQRS by 30th June, with the Network DES commencing 1st July. There are discussions being held between practices as to how the networks are formed, it is anticipated that there will be movement between the Practice groups due to the logistics of networks being geographically based.</p> <p>Currently, extended access will remain at practice group level. Plans are in place for delivery of 45 mins per 1000 patients extended access across all groups, with Unity working with VI to provide access to VI patients on behalf of the trust. Advertising is in place to promote extended access over the Easter weekend.</p>	
<p>8.5</p>	<p><u>Primary Care STP Update</u></p> <p>The Black Country GP Retention Intensive Support Site (GPRISS) Celebration Event was held on the 27th March, and provided a chance to share the initial outcomes of a number of successful workforce schemes that have been put in place to support GPs to stay in general practice. The programme of work has been recognised for the success it has achieved, and has been extended for a further year. Wave 2 of first fives will be launched during April, with further requests for portfolio careers being received.</p>	
<p>8.6</p>	<p><u>Care Quality Commission Update</u></p> <p>The Annual Regulatory Review has begun. This started off with Cannock Road and Ashmore Park. Provider information collection is an introductory call to the</p>	



	<p>GP practice. It is to inform the practice of the process and to collect information such as date, time and who will be present and how they want to receive the call. Information is collected at that time. This is not an inspection.</p> <p>All the information given and taken is only over the telephone. Once the information has been received, YD does the annual review. This then gets reviewed by the immediate manager and following on from this a decision is made regarding a visit to site. A letter will be sent out to the practices following on from this.</p> <p>Outcome of the PIC call is collecting intelligence from the practice themselves.</p>	
8.7	<p><u>Public Health Update</u> There are some issues reported with TB in the Whitmore's area. These are ongoing and a big risk to Public Health at the moment.</p>	
8.8	<p><u>NHS England Update</u> No updated provided.</p>	
8.9	<p><u>Wolverhampton Local Medical Committee Update</u> No updated provided.</p>	
8.10	<p><u>Pharmaceutical Involvement in Primary Care</u> No updated provided</p>	
8.11	<p><u>NHS England Update - DES Position for 19-20</u> It was reported that the GP Contracting Team within NHS England are in the process of updating the specifications in respect of the three nationally Directed Enhanced Services (DES) that are to be re-commissioned for the financial year 2019/2020 on behalf of West Midland CCG's. Currently, Practices can sign up to provide Minor Surgery, Learning Disability and Extended Hours DES services to their registered patients. The updated DES specifications will be shared with the respective CCG primary care leads for approval before circulation to Practices. It was noted that the extended hours DES is to be commissioned for a three month period from 1 April 2019 to end of June 2019, after which point it would be provided by the Primary Care Networks.</p> <p>GS informed the Group that her understanding was that the Minor Surgery DES was to be decommissioned nationally from April 2019 and the CCG had developed a locally commissioned minor surgery service. BD reconfirmed that the minor surgery DES was available for individual practices to participate in for 2019/2020. It was agreed to clarify the position and confirm if the MS DES is to be offered to Practices within the Wolverhampton CCG area.</p> <p>Action: GS to confirm if the Minor Surgery DES is to be offered to Practices for 2019/2020 financial year.</p> <p>MH asked if there were any plans to delegate any other NHS E commissioned Primary Care Services to the CCG. The services specifically referred to were Dentistry, Optoms and Pharmacy Primary Care Services. BD informed the Group that his understanding was that these primary care services were remaining with</p>	



	NHS England for 19/20.	
9. 9.1	Primary Care Quality Update <u>Primary Care Quality Report</u> No Update provided.	
10. 10.1	Primary Care Contracting <u>Collaborative Contract Review Programme</u> Dr Whitehouse visit was carried out. 16 actions were identified. 7 of which were related to Public Health. No major concerns raised. Thornley Street – visit to be carried out shortly. Following on from this will be Dr Sharma and Dr Mudigonda.	
10.2	<u>Primary Care Contracting Update</u> Updates as follows provided by GS; Letter from Dr Bilas who is giving his intention to subcontract from RWT from 3 rd June. He has been asked to complete the assurance framework .This will go to the Primary Care Commissioning Committee in May for approval. Paperwork is currently being processed by NHS England to add Dr Sharma on to the contract for IH Medical Practice. APMS Mobilisation – Mobilisation has gone well. Working with Arden and Gem CSU around Patient Consultation around the closure of Wood road surgery closure this will commence on 7th May 2019.	
11. 11.1	Discussion Items <u>Improving the Interface between Primary & Secondary Care – Clinicians – Toolkit 2018</u> A workshop was held across the STP to see how we can work together. The care query process is around the interface between primary and acute care.	
12.	Any other Business No items were discussed under any other business.	
13.	Date and time of Next Meeting – Wednesday 1 st May 2019 at 1.00-2.30pm in the Main Meeting Room	

2. CLINICAL VIEW

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

3. PATIENT AND PUBLIC VIEW



3.1. Patient and public views are sought as required.

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: 18.4.19

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	N/A	



Inclusion Service		
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

