

**WOLVERHAMPTON CLINICAL COMMISSIONING GROUP
PRIMARY CARE JOINT COMMISSIONING COMMITTEE**

Minutes of the Primary Care Joint Commissioning Committee Meeting
Held on Tuesday 6th September 2016
Commencing at 2.00 pm in the Stephenson Room, Technology Centre,
Wolverhampton Science Park

MEMBERS ~

Wolverhampton CCG ~

		Present
Pat Roberts	Chair	Yes
Dr David Bush	Governing Body Member / GP	Yes
Dr Manjit Kainth	Locality Chair / GP	Yes
Dr Salma Reehana	Locality Chair / GP	No
Steven Marshall	Director of Strategy & Transformation	Yes
Manjeet Garcha	Executive Lead Nurse	Yes

NHS England ~

Alastair McIntyre	Locality Director	Yes
Gill Shelley	Senior Contract Manager (Primary Care)	Yes
Anna Nicholls	Contract Manager (Primary Care)	No
Emma Cox	Senior Finance Manager	Yes

Independent Patient Representatives ~

Jenny Spencer	Independent Patient Representative	Yes
Sarah Gaytten	Independent Patient Representative	Yes
Peter Price	Vice Chair	No

Non-Voting Observers ~

Katie Spence	Consultant in Public Health	Yes
Donald McIntosh	Chief Officer – Wolverhampton Healthwatch	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
Peter McKenzie	Corporate Operations Manager (WCCG)	Yes
Jane Worton	Primary Care Liaison Manager (WCCG) (Minute Taker)	Yes
Trisha Curran	Interim Accountable Officer (WCCG)	Yes
Claire Skidmore	Chief Finance and Operating Officer (WCCG)	Yes
Laura Russell	Primary Care PMO Administrator	Yes

Welcome and Introductions

PCC180 Ms Roberts welcomed attendees to the meeting and introductions took place.

Apologies for absence

PCC181 Apologies were submitted on behalf of Dr Helen Hibbs, Peter Price, Ros Jervis, and Anna Nicholls.

Declarations of Interest

PCC182 Dr Kainth and Dr Bush declared that, as GPs they had a standing interest in all items related to primary care.

Ms Gaytten and Ms Spencer declared that, in their role as employees of the University of Wolverhampton, they worked closely with practices to arrange placements for student nurses and therefore had a standing interest in 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 2nd August 2016

PCC183 **RESOLVED:**

That the minutes of the previous meeting held on 2nd August 2016 were approved as an accurate record.

Matters arising from the minutes

PCC184 **GP Peer Review Terms of Reference**

It was noted the Terms of Reference were shared with the Committee for information.

RESOLVED: That the above is noted

Committee Action Points

PCC185 **Minute Number PCC121 - Primary Care Joint Commissioning Committee Terms Of Reference**

It was noted this item was on the meeting agenda.

Minute Number PCC174 – Wolverhampton CCG Update

Mr Hastings confirmed he had responded to Wolverhampton LMC queries within in the 7 day deadline.

Minute Number PCC174 – Primary Care Support England (PCSE)

Ms Worton confirmed an e-mail went out to all Practice Managers on the 11th August requesting PCSE feedback. All the responses had been collated and sent to NHS England where the information will be discussed in a forum meeting between Capita Services and NHS England. It was confirmed any feedback would be escalated back to the CCGs this could be fed back to the GP Practices.

Minute Number PCC175 – GP Peer Review

It was noted this item was on the meeting agenda.

Minute Number PCC176 – Acute Discharge Process

Mr Blankley confirmed he had met with Dee Harris and discussions have commenced regarding prescribing within the acute discharge process.

Minute Number PCC176 – Premises Charges

Mr Hastings agreed to chase Anna Nicholls regarding this action.

Minute Number PCC177 – Workforce Strategy

This item is due to be presented at the October meeting.

RESOLVED: That the above is noted.

NHS England Update – Primary Care Update

PCC186 Mr McIntyre presented the NHS England update to the Committee outlining the latest developments in primary care nationally and locally. Mr McIntyre highlighted to the Committee the deadline for delegated applications for full delegation is the 5th December 2016. The outcomes of the approval process will be communicated in January 2017 with the go live date for new delegated arrangements on the 1st April 2017.

Mr McIntyre stated the application documents will be published within the next month and asked for the CCG to ensure they are prepared in order to meet this deadline. Mr McKenzie confirmed that the CCG will be provided a report on this process to the Wolverhampton CCG Governing Body Meeting next month.

Ms Roberts queried the Primary Care Commissioning Activity Report and who would be submitted the return to UNIFY. It was confirmed that NHS England would complete this return on behalf the CCG. Mr McIntosh asked if the completed return would be shared with the Committee, Ms Shelley agreed this would be shared at the October meeting.

Ms Roberts queried in relation to the GP Resilience Programme it notes that comments are invited on this document by 2nd September 2016 and asked if the CCG have/or needed to make a response. Mr Hastings confirmed there is a programme of work on the GP Forward view, which NHS England has held a workshop that the CCGs were in attendance. Mr Hastings agreed to confirm and report back.

RESOLUTION: Primary Care Commissioning Activity return to be shared with the Committee in October 2016.

Mr Hastings agreed to report back if the CCG had/or needed to make a response on the GP Resilience Programme document.

NHS England Finance Update

PCC187 Ms Cox presented the Wolverhampton CCG's (2016/217) GP Services month 4 finance position report to the Committee. The forecast outturn is £33.1m delivering a breakeven position. The allocation has reduced by £881k, in relation to month 2 transfer of budget allocations from NHS England to the CCG due to contracts now being held by the CCG.

A number of reviews have been carried in month 4 in relation to GP forecasts including;

- Recalculation of Global Sum Payments, PMS and APMS Contract payments based on the July 2016 updated list sizes
- Review of QOF outturn for practices who had not received their 2015/16 finalised position in month 2
- Review of DES Forecasts based on practice sign up

A drawdown of £45k against the 0.5% contingency was required to deliver a breakeven position, with a balance of £125k remaining for further in year cost pressures. Ms Curran queried whether any unspent contingency reserves would roll over to 2017/2018. It was noted that it was not possible to roll over the contingency reserve however, at month 10 discussions take place around how any remaining money could be allocated, which the CCG will start to forecast and plan for in advance.

RESOLVED: That the above is noted.

Wolverhampton CCG Update

PCC188 Mr Hastings provided the following update to the Committee in relation to Wolverhampton CCG Primary Care:

Estates and Technology Transformation Fund (ETTF) – The outcome of all bid applications will be received by November 2016, therefore no commitments can be made until the outcomes are received.

Estates – A lot of progress has been achieved in relation to the Locality Hubs for the better care fund.

Digital Road Map – Positive feedback has been received in relation to the plans that have been submitted. There have been good stakeholder relationships and the plan is making good progress and the plan continues to be refined which will be submitted as a final submission within the next few weeks.

Capita / Primary Care Support England - Feedback is awaited via the Primary Care Operational Group Meeting in respect of outcome/concerns from the forum meeting held with NHS England and Capita, where GP responses are discussed.

Vertical Integration – There are three GP Practices currently integrated with RWT with another two waiting expressing an interest.

RESOLVED: That the above is noted.

Primary Care Programme Board Update July 2016

PCC189 Ms Garcha presented an update on the delivery of the work being undertaken by the Primary Care Programme Board. The Interpreting Procurement closing date had been extended until the 30th August 2016 and a review of the bidders will take place during September. The new contract will start on the 1st December 2016.

In relation to the Community Equipment Procurement a paper had been presented to the Commissioning Committee in August with a view of taking a joint procurement process with Wolverhampton City Council. The assurance provided at the Commissioning Committee is that Wolverhampton City Council will procure a like for like service. The Commissioning Committee have rejected this proposal and agreed for the Wolverhampton CCG to go ahead and procure their own services. It was confirmed the joint discussions with Wolverhampton City Council has delayed the process by six months.

A paper was presented to the meeting in August on Choose and Book, Advice and Guidance, where it was confirmed that advice and guidance services are not available for Neurology and Geriatric Medicine. After a number of escalations it has been highlighted there are vacant posts within these specialties. Further work is being undertaken to understand if GPs are using the service overall and the system correctly. These discussions will take place at the next Clinical Reference Group in September.

A new proposal for Atrial Fibrillation had been presented to the QIPP Board, where the Board reviewed the options available. It was agreed to introduce a scheme as a pilot within one Locality for a 12 month period, with a view to start in line with the flu vaccination process. Discussions took place around when the pilot should be undertaken and around the targeted age group for Atrial Fibrillation.

Ms Garcha provided an update on the timeline for Primary Care Review (Basket and Minor Injuries) which was as follows:

- Sign off of the costing template at the July 2016 Finance and Performance Committee.
- Review of specifications with revised tariffs at the August 2016 Clinical Reference Group.
- Proposal to be shared for support at the Septembers LMC Officers Meeting.

An A&E chest pain audit had been undertaken and indicated out of the 21 patients reviewed only one patient was deemed suitable for CDU. This is now being addressed through contact discussions with The Royal Wolverhampton Trust.

RESOLVED: That the above is noted

Primary Care Operations Management Group Update

PCC190 Mr Hastings provided an overview of the key areas covered at the Primary Care Operational Management Group Meeting which took place on the 23rd August 2016.

Ms Roberts asked if the Primary Care Operational Management Group were happy with the percentage of returns and the comments received in relation the Friends and Family Test results. Mr Hastings confirmed that the responses are reviewed, however there are two GP Practices who fail to submit data even after support has been given. The Primary Care Operational Management Group have agreed to give the GP Practices a month to improve performance and if no improvement has been made this will be brought to the Committee recommending a breach notice.

RESOLVED: That the above is noted

Mr Marshall left the meeting

Terms of Reference

PCC191 Mr McKenzie informed the Committee the Terms of Reference were reported upon in June 2016. It was noted at the June meeting further changes would

need to be undertaken, following publication of an updated Guidance on Managing Conflict of Interest for CCGs by NHS England.

The amended Terms of Reference were shared with the Committee highlighting the changes, the main changes are the inclusion of the Lay Member for Finance and Performance within the Committee Membership (as a Deputy Chair) and GP members no longer having formal voting rights. It has also included clarification that CCG's requirements around registration of interest apply to NHS West Midland Representatives.

Mr McKenzie highlighted at this point no changes have been made to the Committee's remit and responsibilities. As part of the process for applying for full delegation of Primary Care, the CCG will need to establish a Primary Care Committee and have discussions on whether any additional functions will be delegated to the Committee by the CCG.

It was noted that the two independent patient representatives needed to be added to the membership of the committee.

RESOLVED: That subject to the amendment to the membership to include the patient representatives, the Terms of Reference be approved.

Any Other Business

PCC192 Primary Care Full Delegation

It was confirmed the application needs to be submitted by the 5th December 2016 and full delegation of Primary Care will commence as of the 1st April 2016.

RESOLVED: That the above is noted.

Date, Time & Venue of Next Committee Meeting

PCC193 Tuesday 4th October 2016 at 2.00pm in PC108, Wolverhampton Science Park