

**NHS NORTHCUMBRIA CLINICAL COMMISSIONING GROUP
MINUTES OF PRIMARY CARE COMMISSIONING COMMITTEE**
Thursday, 8 March 2018 13:00 hours
Botcherby Community Centre, Carlisle

Present

(Voting Members):	Jon Rush	CCG Governing Body Chair (Chair) JR
	Ruth Gildert	CCG Governing Body Nurse Rep (RG)
	Caroline Rea	Director of Primary Care & ICC Development
	David Rogers	CCG Accountable Officer (DR)
	Charles Welbourn	Chief Finance Officer CCG (CW)

(Non-Voting Members):	Alan Edwards	ICC GP Lead (AE)
	Colin Patterson	Clinical Lead Primary Care & ICC Devt CCG (CP)

In Attendance

(Non-Voting):	Sue Gallagher	Patient Participation Group Rep (SG)
	Andrew Gosling	Primary Care Commissioner CCG (AG)
	Helen Horne	Healthwatch (HH)
	Jenny Long	Primary Care Asst Contracts Manager NHSE (JL)
	Andrea Loudon	Primary Care Devt Medicines Lead (AL) Items 1- 6
	Jen Park	Primary Care & ICC Senior Administrator (JP)
	Brenda Thomas	Governing Body Support Officer CCG (BT)

PCCC 9/18. **AGENDA ITEM 01: Welcome & Apologies**

JR welcomed the Committee. Apologies were received from: Peter Thornton - Cumbria County Council, Niall McGreevy - ICC GP Lead.

PCCC 10/18. **AGENDA ITEM 02: Declarations of Interest**

JR reminded Committee members of their obligation to declare any interest they may have on any issues arising at committee meetings which might conflict with the business of NHS North Cumbria Clinical Commissioning Group.

Declarations declared by member of the Primary Care Commissioning Committee are listed in the CCG's Register of Interests. The register is available either via the secretary to the Governing Body or the CCG website at the following link <http://www.northcumbriaccg.nhs.uk/about-us/how-we-make-decisions/declaration-of-interests/declarations-of-interest-register---2016-17-final-version.pdf>

Declarations of interest from today's meeting

Colin Patterson and Alan Edwards declared an interest in agenda item 6 – General

Practice Quality Improvement Scheme, agenda item 7 – Gain Share 2018/19 and agenda item 8 – Extended Access to Primary Care as they are practicing GP's.

There were no further declarations of interest received.

PCCC 11/18. **AGENDA ITEM 03: Minutes and actions of meeting held 18 January 2018**

The following changes to be made to the minutes:

'Observers' to be removed from the attendance list and attendees to be added into the 'In Attendance' section.

The minutes were then accepted as being an accurate record.

The following comments were received on the action log:

17/016 Matters arising: JP will now reflect alongside agenda items whether they are for information / approval / discussion. Item now closed.

17/017 Matters Arising: CR looking as to whether a primary care nurse might be available from the practice nurse forum to sit on the Committee. Action to be changed to a target date of 19 July 2018.

JR informed the Committee that Les Hanley is no longer a member of the Committee and is looking for a replacement from current Lay Members.

PCCC 12/18. **AGENDA ITEM 04: Matters Arising**

There were no matters arising.

PCCC 13/18. **AGENDA ITEM 05: Questions from members of the public present**

No questions had been received prior to the meeting and none were raised during the meeting.

PCCC 14/18. **AGENDA ITEM 06: General Practice Quality Improvement Scheme**

AL presented a paper informing the Committee of the amendments made to the draft Quality Improvement Scheme which had been previously presented to the Committee on 18 January 2018. AL advised that the report was to seek approval of the draft Quality Improvement Scheme for 2018-20.

AL stated that approval had been received from the CCG Executive Committee.

CR advised that the Local Medical Committee (LMC) had been consulted and that an email had been received from the LMC offering their support to the proposed scheme.

The LMC comments were read out as follows: "Various LMC GP members and PMs have sent comments which have been collated and sent to Andrea Loudon. Andrea responded and has taken most of them on board. The LMC would want to be involved with a half yearly review so that, if there are any common concerns raised by the practices, they can be addressed and, if required, the QIS could be adjusted

accordingly. We would comment that some of the metrics have been stretched and that the CCG needs to monitor them to ensure that they are achievable. We are grateful for the involvement that we have had and look forward to continue working with the CCG on its development.”

JR informed the Committee that the existing scheme, which had been approved by the Governing Body, had already been running for two years. Now that the CCG has delegated commissioning responsibility from NHS England it was for the Primary Care Commissioning Committee to approve.

Proposed by DR
Seconded by RG

Resolved:

The Committee approved the GP Quality Improvement Scheme 2018-20.

PCCC 15/18. **AGENDA ITEM 07: Gain Share 2018/19**

CR presented a report proposing that the gain-share arrangement which had previously run in 2016/17 and 2017/18 should be continued into 2018/19. The scheme allows GP practices working in Integrated Care Communities (ICCs) to re-invest a proportion of savings from reductions in prescribing and direct access diagnostics.

CR advised that North Cumbria CCG Executive Committee had supported the proposed one year extension to existing arrangements on 22 February 2018 and for this arrangement be reconsidered on a yearly rolling basis.

CR quoted email support from the LMC which stated that “whilst the LMC has not been involved with the Gain Share for 2018/19 the LMC doesn’t see that there are any major concerns other than there are little savings to be made. There isn’t any real extra workload issues with it.”

Discussion took place around why last year’s scheme was not as successful as first year.

Proposed by CW
Seconded by RG

Resolved:

The Committee approved the GP ICC gain-share agreement for 2018/19.

PCCC 16/18. **AGENDA ITEM 08: Extended Access to Primary Care**

CR presented the report advising that by 1 October 2018 the CCG is required to commission extended access to Primary Care (General Practice).

CR informed the Committee that this would be a large price of work for practices and the CCG. This would also involve some significant changes for the public accessing pre bookable appointments. CR advised that practices in Workington have piloted extended access through the Prime Ministers Challenge Fund.

Extended Access will give patients improved access to General Practice ensure the population has access pre bookable appointments from 8am-8pm on weekdays and at times to be confirmed on Saturdays and Sundays. CR informed the Committee that at present the North Cumbria population North Cumbria CCG has better access than the national average to GP Primary Care but that this is variable across practices.

Subsequent discussion took place around some of the issues yet to be addressed including the potential procurement process, staffing and input from patient participation groups.

Resolved:

The Committee noted the update.

PCCC 17/18. **AGENDA ITEM 09: List Closure Application**

JL presented the application from Whitehaven Medical Practice for a temporary list closure.

At the Committee on 18 January a list closure application was approved for 3 months as an emergency application due to staffing difficulties. JL advised that the practice had now submitted an application for a period of 12 months on the basis that they would re-open the list earlier if the staffing situation within the practice changed before the end of the 12 month period.

JL advised that Queen Street Medical Practice, one of the neighbouring practices also had their list closed but this is due to reopen on 31 March 2018. Mansion House Surgery, also a neighbouring practice, confirmed to NHS England that if the application was approved then they would need to consider an application to close its own list.

In the absence of the LMC their email quoted “the NEW Cumbria LMC would strongly support this list closure application.”

CR advised that the Primary Care team at the CCG strongly support this closure application.

There were two options with this application:

Option 1 – Approve the list closure for a period of 12 months.

Option 2 – Reject the application.

Proposed by DR

Seconded by CW

Resolved:

The Committee approved the list closure application by Whitehaven Medical Practice.

PCCC 18/18. **AGENDA ITEM 10: Review of the Committee’s Performance, Training Requirements, TORs and Frequency of Meetings**

AG advised that the report was to consider the functions that the Committee had

been asked to undertake in its first 12 months of operation and to consider the effectiveness with which it had discharged those responsibilities. Also within the report was the Committees Terms of Reference which were due for annual review.

AG informed the Committee that the CCG's Internal Audit function had recently undertaken a review of the Committee. The Committee noted that the outcome of the audit was that "governance, risk management and control arrangements provide substantial assurance that the risks identified are managed effectively. Compliance with the control framework was found to be taking place."

AG advised that the Terms of Reference were to be reviewed yearly. Discussion took place around the content of the terms of reference. It was noted that an amendment had been made to section 11.3 including the narrative, "In the case of low level decisions that may arise from time to time, the Chair shall use his / her discretion in making a decision in isolation. Should the Chair choose to make a decision in this way then they will report this to the next Committee meeting for ratification."

It was agreed that Brenda Thomas would be removed from the Terms of Reference as an attendee and would attend when required.

Proposed by CR
Seconded by RG

Resolved:

The Committee considered the functions that the Committee had been asked to undertake in its first twelve months of operation and the effectiveness with which it has discharged those responsibilities. The Committee approved the Terms of Reference with the proposed changes.

PCCC 19/18. **AGENDA ITEM 11: Primary Care Team Update**

CR gave thanks to the Primary Care team for the work they had progressed in her absence.

CR expressed her concern over the pressures General Practice is currently facing.

CW to give a finance update at a Committee meeting in the new financial year.

Resolved:

The Committee noted the updates.

PCCC 20/18. **AGENDA ITEM 12: Any other urgent items of business**

No other items of business were received.

PCCC 21/18. **AGENDA ITEM 13: Date and time of next meeting approved:**

17 May 2018, 14:30 hours: St. Michael's Church, Workington.

The meeting closed at 14:33 hrs

Primary Care Clinical Commissioning Committee Action Log					
ACTION REFERENCE	MINUTE REFERENCE	ACTION	OWNER	TARGET DATE	STATUS
17/014	PCCC 39/17	AGENDA ITEM 07: Violent Patient Scheme When renewing the DES specifications for practices include in the process a check to see if any other practices would like to join the scheme.	Kay Wilson	17 May 2018	
17/017	PCCC 4/18	AGENDA ITEM 04: Matters Arising AG to progress a primary care nurse being identified to sit on the Committee	Andrew Gosling	19 July 2018	
17/018	PCCC 19/18	AGENDA ITEM 11: Primary Care Team Update CW to give a finance update at a Committee in the new financial year.	Charles Welbourn	19 July 2018	