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<b>Author</b>	Harvi Higgins		
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<b>Approved:</b>			
<b>Signature:</b>			
			..... <b>Mr Andrew Clough, Chair</b>

# Primary Care Commissioning Committee Part 1

## MINUTES OF MEETING

Wednesday 24 August 2016

Chair – Mr Andrew Clough

## ATTENDANCE

### Members (voting):

Mr Andrew Clough, Lay Member(Chair)  
Mr David McCann, Lay Member  
Ms Margaret O'Dwyer, NHS Bury CCG  
Miss Rachel Coaker, NHS Bury CCG (on behalf of Mr Mike Woodhead)  
Mrs Amy Lepiorz, NHS Bury CCG  
Mrs Lesley Jones, Public Health

### Members (non-voting)

Dr Kiran Patel, CCG Chair  
Miss Sara Roscoe, NHS England  
Ms Barbara Barlow, Healthwatch

### Advisors in attendance:

Mrs Lisa Featherstone, NHS Bury CCG

### Other organisations in attendance

### Apologies

Mrs Pat Jones-Greenhalgh, Bury Council, Health and Wellbeing Board representative  
Mr Stuart North, NHS Bury CCG  
Mr Mike Woodhead, NHS Bury CCG  
Dr Jeff Schryer, Clinical Director Bury CCG  
Dr Mo Jiva, Rochdale and Bury Local Medical Council (LMC) Representative  
Mrs Anne Brown, Patient Cabinet

### Members of the public

Mr Duncan Buckley, Siemens Healthcare

### Quorum requirements

The meeting was quorate.

## MEETING NARRATIVE & OUTCOMES

### 1 Apologies for absence

Apologies for absence were received from those detailed above.

It was noted that Miss Rachel Coaker was attending on behalf of Mr Mike Woodhead, with full delegated authority.

<b>2</b>	<b>Declaration of Interests</b>
	<p>Mr Clough invited declarations of conflicts of interest in respect of the previous meeting and items on today's agenda.</p> <ul style="list-style-type: none"> <li>• Previous Meeting</li> </ul> <p>No additional declarations of interest, other than those already recorded were raised in respect of the previous meeting.</p> <ul style="list-style-type: none"> <li>• Today's Agenda</li> </ul> <p>No additional declarations of interest, other than those already recorded were raised in respect of the previous meeting.</p> <p><b>The Primary Care Commissioning Committee:</b></p> <ul style="list-style-type: none"> <li>• <b>noted the Register of Conflicts declared in respect of the members of the Primary Care Commissioning Committee and the associated business of the meeting.</b></li> </ul>

<b>3</b>	<b>Minutes from the last meeting</b>
	<p>The minutes were accepted as an accurate record and no amendments were required.</p> <p><b>The Primary Care Commissioning Committee:</b></p> <ul style="list-style-type: none"> <li>• <b>approved the minutes.</b></li> </ul>

<b>4</b>	<b>Action Log</b>
	<p>The Action Log was reviewed and it was noted that all actions were either completed or included on the agenda and would be discussed during the course of the meeting.</p>

<b>4b</b>	<b>APMS update</b>
	<p>Mr Clough advised that the Primary Care Commissioning Committee had met in private, subject to Clause 7.5 of the Terms of Reference, to discuss the specification and assessment criteria relating to the APMS procurement.</p> <p>It was formally noted that due to conflicts of interest, Mr McCann had not attended the private meeting and had not received the papers associated with the discussion item.</p> <p>Mr Clough confirmed that the Committee had formally approved the APMS specification and assessment criteria, subject to formal clarification on the weighting criteria to be re-confirmed to members by e-mail.</p> <p>It was noted that a further update, including the outcome of the APMS procurement exercise would be shared at the November meeting, initially in a private meeting but with the formal outcome being noted during the public session when appropriate.</p> <p><b>The Primary Care Commissioning Committee:</b></p> <ul style="list-style-type: none"> <li>• <b>noted the update.</b></li> </ul>

ID	Type	Risk/Issue/Action/Decision/Outcome Description	Owner
DC/00/00/0/00	Decision		
AC/16/08/24/01	Action	APMS update to be presented to the Primary Care Commissioning Committee in November	Amy Lepiorz

<b>5</b>	<b>Primary Care Finance Report</b>
	<p>Miss Coaker presented the finance report which sets out the financial position at Month 4. Financial performance is on track although with an underspend of £5k at the current time. Miss Coaker advised that the total quantum agreed in respect to NHS Bury CCG is £583k, however</p>

final confirmation that the full level of funding required will be received remains outstanding at month 4. This is a key risk, however is being managed through close liaison and support from NHS England, with the expectation that the full values will be agreed over the next month.

Miss O'Dwyer queried whether the CCG had been aware of the inherited risks when the due diligence was signed off. Miss Coaker and Dr Patel confirmed that the CCG knew of the pressure, although the actual numbers were unknown, and had agreed to work with NHS England to address the gap.

Mr McCann clarified whether the shortfall, if indeed this materialised, would be mitigated by NHS England and whether this would be a recurrent or non-recurrent concern. Dr Patel advised that the funding will fall into the baseline and therefore shouldn't be an ongoing pressure.

Mr Clough asked if the inherited risks should be added to the corporate risk log as it is a potential risk. Miss O'Dwyer reflected that the risk register for the Primary Care Commissioning Committee needs to be developed as there are currently no risks on the CCG's risk register reflecting Primary Care, and this should be developed from a finance perspective by Mr Woodhead as the CFO.

Mr McCann noted the paper was useful and queried at what point the CCG could be assured asked for a more considered report to be presented to the next meeting.

**The Primary Care Commissioning Committee**

- **noted the contents of the report and the risks identified to the delivery of the 2016/17 financial position.**

<b>6</b>	<b>Whitefield Health and Care Centre Risk Register</b>
	<p>Miss Coaker advised that the paper is being presented following a request from the Primary Care Commissioning Committee on 22nd June 2016 for a further update, including the risk register, to be provided.</p> <p>Reflecting on the minutes from the previous meeting, Mr McCann suggested that it would be helpful for the responsible officer for the Whitefield Project to present a comprehensive update and provide a level of assurance to the Primary care Commissioning Committee that is currently absent, as there are concerns in respect to the project that are not reflected on the risk register presented.</p> <p>It was agreed a more detailed update would be provided to the next meeting, with any queries in the interim to be forwarded to Miss Coaker.</p> <p><b>The Primary Care Commissioning Committee</b></p> <ul style="list-style-type: none"> <li>• <b>noted the contents of this paper.</b></li> </ul>

<b>7</b>	<b>Extended Working Hours and Vulnerable Patient Service</b>
	The item was deferred to the September meeting.

ID	Type	Risk/Issue/Action/Decision/Outcome Description	Owner
DC/00/00/0/00	Decision		
AC/16/08/24/02	Action	Extended Working Hours and Vulnerable Patient Services to be presented to the Primary Care Commissioning Committee in September	Amy Lepiorz

<b>8</b>	<b>Primary Care Strategy update</b>
	Mrs Lepiorz advised the Primary Care Strategy is presented to the Committee to provide an update on the further progress and development since the previous update to the committee.

Mrs Lepiorz advised that a framework has been developed and shared with each of the Sectors for their input to support the shaping of the final strategy, however also reflected that the Strategy will incorporate all four primary care contractors given the changing landscape of Primary Care.

At the core of the strategy is an 'asset' based approach which focusses on the strengths of Bury. Mrs Lepiorz invited feedback and comments on the paper.

Mrs Jones welcomed the development of the strategy and noted there would be some benefit in ensuring this is shared within the partnership arena, including the Health Overview and Scrutiny, early in its development.

Mr McCann reflected that like all strategies the aspiration and high level direction of travel are relatively easy to articulate, however mapping the detail into deliverables provides some challenge and queried what the timescale is for this.

Mrs Lepiorz confirmed the high level plan is being developed for January 2017 and a 5 year strategy is also being written, which will be aligned to the direction of the GM strategy, and detailed project plans will be developed after this. Miss O'Dwyer commented the paper is presented to the committee today as an early draft to keep it informed of the work being done and the changing landscape of Primary Care and the LCO.

Dr Patel commented the strategy will continue to develop and adapt to the changing landscape of Primary Care and that it is important that stakeholders are appreciative of what Primary care will look like in 5 years time rather than the current state, and it is on this basis that contributions are made. Mrs Jones supported this and reflected that this is a key conversation to have with stakeholders.

Mr Clough commented that the Primary Care Nursing didn't appear to be reflected within the body of the framework and requested consideration be given to including this forum in the engagement exercise.

**The Primary Care Commissioning Committee:**

- **noted the planned approach to the primary care and well-being strategy and the progress made to date.**

**9 MCP Emerging Models of Care**

Miss O'Dwyer advised that the MCP Emerging Models of Care paper is shared with the Committee for information.

The paper sets out the contractual framework as an with an option for Primary Care to be part of in the future. The consultation period for the framework is open until the end of September. The paper is high level and the framework has been published. Miss O'Dwyer noted the framework has contracts for much longer terms than the 5/10 years planned by Bury CCG.

Mr Clough asked if there were any reports on how Stockport CCG is progressing with the strategy. Miss Roscoe stated Stockport CCG are a vanguard and have started the process for procurement. Manchester CCG are not a vanguard and are progressing a joint venture.

Dr Patel noted the paper shows there will be less GP practices in the future. It is a fundamental change of where GP services are going in the next 5 years. There are lots of options but this may be the best one. Dr Patel commented that stakeholders need to be sighted on this process early on through the GP Federation.

**The Primary Care Commissioning Committee -**

- **noted MCP Emerging Models of Care paper**

<b>10</b>	<b>Find and Treat/Primary Care Model For Deprived Communities</b>
	<p>Mrs Jones provided a verbal update on The Find and Treat agenda, which is being undertaken by the Local Authority. A group has been put together by the Local Authority to decide how it will be applied and how to work with deprived areas. Some analytical work has been done across Manchester and this will be fed into a framework for Greater Manchester and connected to local strategy.</p> <p><b>The Primary Care Commissioning Committee:</b></p> <ul style="list-style-type: none"> <li>• noted the update.</li> </ul>
<b>11</b>	<b>Minutes from the GP Fed contract meeting</b>
	The minutes were received by Primary Care Commissioning Committee
<b>12</b>	<b>Primary Care Quality Improvement Group minutes</b>
	The minutes were received by Primary Care Commissioning Committee
	<b>Next Meeting</b>
	28 September 2016, 12:00 – 1:30pm 503/504 Townside Primary Care Centre, Bury