

Title	Minutes taken at the meeting of the Primary Care Commissioning Cttee		
Author	Danny Lansley		
Version	0.2		
Target Audience	Primary Care Commissioning Committee/Members of the Public		
Date Created	30/11/2016		
Date of Issue			
To be Agreed	21/12/16		
Document Status (Draft/Final)	Draft		
Description	Minutes of the PCCC 23.11.16		
Document History:			
Date	Version	Author	Notes
	0.1	Danny Lansley	
	0.2		A Lepiorz reviewed
Approved:			
Signature:			
		 Mr Peter Bury, Chair

Primary Care Commissioning Committee

MINUTES OF MEETING

Wednesday 23 November 2016

Chair – Mr Peter Bury

ATTENDANCE

Committee Members

Voting Members:

Mr Peter Bury, Lay Member - Quality and Performance, Chair
Mr David McCann, Lay Member – Patient and Public Involvement, Vice Chair
Mrs Fiona Boyd, Governing Body Nurse
Mrs Lesley Jones, Director of Public Health, Bury Council
Mrs Amy Lepiorz, Deputy Director of Primary Care
Mr Stuart North, Chief Officer
Ms Margaret O’Dwyer, Director of Commissioning and Business Delivery
Mrs Clare Postlethwaite, Associate Chief Finance Officer (On behalf of Mike Woodhead)

Non-Voting Members:

Mrs Anne Brown, Patient Cabinet Member
Mrs Wendy Craven, Bury and Rochdale LOC Representative
Mr Paul McCrory, Bury and Rochdale LDC Representative
Mr Mohamed Patel, Greater Manchester LPC Representative
Dr Kiran Patel, CCG Chair
Dr Jeff Schryer, Clinical Director

Others in attendance

Mr Danny Lansley, Corporate Governance Manager, Bury CCG
Mr Darren Buckley, Siemens Healthcare - Public

MEETING NARRATIVE & OUTCOMES

1 APOLOGIES FOR ABSENCE

1.1 Apologies were received from:

Mrs Barbara Barlow, Healthwatch Bury
Dr Mo Jiva, Bury and Rochdale LMC Representative
Miss Sara Roscoe, NHS England
Mr Mike Woodhead, Chief Finance Officer

1.2 It was noted for the purpose of the minutes that Mrs Postlethwaite was attending on behalf of Mr Woodhead and would count towards the quorum along with assuming voting rights.

2	DECLARATIONS OF INTEREST		
2.1	The Committee considered the published declarations of interest for each member against the business of the meeting. No further declarations were made.		
ID	Type	Risk/Issue/Action/Decision/Outcome Description	Owner
DC/23/11/16/1	Decision	The Committee noted the register of interests.	

3	MINUTES FROM THE LAST MEETING		
3.1	The minutes from the previous meeting held on 26 th October 2016 were considered and approved as a true and correct record.		
ID	Type	Risk/Issue/Action/Decision/Outcome Description	Owner
DC/23/11/16/2	Decision	The Committee agreed that the minutes of the meeting held on 26th October 2016 were approved as a true and correct record.	

4	ACTION LOG		
4.1	<p>The Committee considered the log of outstanding actions from previous meetings. Of the three presented:</p> <ul style="list-style-type: none"> • AC/26/10/16/1 – Completed and closed • AC/26/10/16/2 – On track for December meeting • AC/26/10/16/3 – The report was on the agenda for this meeting 		
ID	Type	Risk/Issue/Action/Decision/Outcome Description	Owner
DC/23/11/16/3	Decision	The Committee agreed that the action log was noted.	

5	PRIMARY CARE HEALTH AND WELLBEING STRATEGY		
5.1	Mrs Lepiorz presented the draft strategy for the Committee to consider. Before the development of this strategy there had been no clearly articulated document for Primary Care. The CCG had liaised with the sectors to produce a framework which was then developed into the document presented. A range of stakeholders have been involved in the consultation which would close on 2 nd December 2016, with the aim of bringing the final version for approval at the next meeting of the Committee.		
5.2	Mr McCann commented that the strategy was an exemplary piece of work but queried how strategy would be resourced if approved at the next meeting. Dr Schryer concurred that resources could be an issue but this strategy was wider than just Bury.		
5.3	Mrs Craven stated that it was good to see all 4 contractors of primary care included in the document, creating a level playing field. On the theme of inclusion, Dr Schryer added that it was great to see a strategy which referenced the environment in which the CCG will be operating in the future through the OCO and LCO.		
ID	Type	Risk/Issue/Action/Decision/Outcome Description	Owner
DC/23/11/16/4	Decision	The Committee noted the work to date on the Primary Care Health and Wellbeing Strategy.	

6	EXTENDED WORKING HOURS		
6.1	Ms O'Dwyer presented the specification for the Extended Working Hours (EWH) including a Vulnerable Patients Service (VPS) to the Committee for decision. A draft specification had been shared with the Committee in September but has been refined. The proposal is for a pilot of two years delivered jointly by the local GP Federation and BARDOC. Whilst being developed in the original context of the Prime Ministers		

	Challenge Fund it also supports moves to reduce demand on acute facilities.
6.2	Since the last time it was presented to the Committee the major change to the proposal is to reduce the number of sites from 5 to 3. This will help to sustain the rota of GPs working. The proposal was to deliver this from Radcliffe, Moorgate and Prestwich. The Committee were comfortable with this aspect of the proposal. Mrs Jones asked what the scope was for moving sites during the pilot. Dr Patel believed that this would be as hard or as easy as the provider made it but reassured that there was a positive working relationship with the GP Federation.
6.3	Dr Patel stated that work around standardising extended working hours across Greater Manchester had started and would like to see a degree of flexibility within the pilot to enable this to happen. <i>Mr North arrived at 12.55</i>
6.4	The Committee discussed this approach and came to the conclusion that the need for flexibility should be built into the evaluation criteria of the pilot rather than needing a specific decision of the Committee.
6.5	Mr McCann went to talk about communication if a positive decision is made, he considered that a 'hard launch' was required to publicise what was being done. Dr Schryer agreed and felt it would show the CCG's commitment to the Quality Premium indicator around patient satisfactions rates in making an appointment with Primary Medical Care. The chair added this was a good message in light of the urgent care proposals.

ID	Type	Risk/Issue/Action/Decision/Outcome Description	Owner
DC/23/11/16/5	Decision	<p>The Committee agreed:</p> <ul style="list-style-type: none"> • To support the proposed service redesign. • To support the proposal for a two year pilot with inbuilt flexibility to respond to any work at a Greater Manchester level. • The pilot should be delivered from Radcliffe Primary Care Centre, Moorgate Primary Care Centre and Prestwich Health Centre. • To note the funding source will be the Better Care Fund. 	

*** Following the consideration of this item there was a variation in the agenda order*

7	PREMISES CHARGES
7.1	Mrs Postlethwaite gave a verbal update to the Committee on progress with primary care estate issues and charges. The outcomes were not yet ready for a formal report but this would be provided in the future.
7.2	Community Health Partnerships had carried out a number of utilisation surveys of premises, this was theoretical and high level. It was felt that their recommendations for unused spaces were not deliverable and so further work was required.
7.3	There had also been some long running estate issues at individual practices. Once it was clear where the liability sat the issues had resolved themselves. Mrs Postlethwaite and Mrs Lepiorz are working on an accommodation process to bring these to a swift conclusion in the future. Dr Schryer identified a practice in the south sector which had

	<p>been struggling with its phone system and questioned how the CCG was supporting practices. Mrs Postlethwaite replied that progress had been made and this was part of the learning to implement in the future as why it had stalled for over 6 months. Responsibility normally lies with CHP or Property Services. In terms of showing support, this would be formalised as part of the process described previously.</p>		
7.4	<p>The last area of focus had been charging mechanism, finance colleagues have been attempting to match invoices to the levels of funding which the CCG. The next step is to understand what is delivered.</p>		
7.5	<p>Mrs Jones asked if there had been joined up discussions between the CCG and Bury Council about the move to market rent. Mrs Postlethwaite stated that this was a national directive and at a meeting with Property Services they recognised that there is not enough funding.</p>		
ID	Type	Risk/Issue/Action/Decision/Outcome Description	Owner
DC/23/11/16/6	Decision	The Committee noted the update provided.	

8	PRIMARY CARE FINANCE REPORT		
8.1	<p>The Committee were provided with an update on primary care finances. The year to date position was an underspend of £32k. The projected overspend is due to contract overperformance. There are some prudent assumptions in the forecasting which aren't materialising as predicted.</p>		
8.2	<p>Ms O'Dwyer asked if the forecast variance was as a result of taking on delegated commissioning. Mrs Postlethwaite replied that all overspend is within the gift of the CCG through enhanced services and contracting. Mr North added that the contingency fund may cover any overspend.</p>		
ID	Type	Risk/Issue/Action/Decision/Outcome Description	Owner
DC/23/11/16/7	Decision	The Committee noted the report.	

*** Mrs Postlethwaite left the meeting following the conclusion of this item.*

9	QUALITY IN PRIMARY CARE CONTRACT – Q2 OUTCOMES		
9.1	<p>Mrs Lepiorz presented a report on performance to the end of quarter two for the delivery of Greater Manchester standards for Quality in Primary Care. As agreed by the Committee there are five standards in the contract and Mrs Lepiorz highlighted areas of non-compliance.</p>		
9.2	<p>A previous report had recommended decisions to be made about withholding payments for non-compliance, upon reflection however, it was felt more prudent to do this internally given that there is a crossover between the membership of the Committee and the Dispute Resolution Panel.</p>		
9.3	<p>Mrs Lepiorz drew Committee members attention to the section of the report highlighting further issues and what was being done to address them. Mrs Boyd asked how the CCG was validating self-declarations. Dr Schryer responded that practices are aware they will be audited in the future.</p>		
9.4	<p>Ms O'Dwyer reminded Committee members that there was an action to look at contract specifications to ensure recommendations for recouping monies was compliant. Mrs Lepiorz confirmed this was the case.</p>		

9.5	The Chair commented on the rationale of taking financial penalties from struggling practices. Mrs Lepiorz stated that all practices had been given until the end of quarter one to ensure they were achieving the standards.		
9.6	Mr McCann questioned if there was a view from general practice if the scheme was equitable and was still acting as an incentive. Dr Schryer believed that practices were engaged, there may be some consternation over the minutiae of individual performance measures but this was only natural.		
9.7	Mrs Jones asked if it was possible to show the scale of improvement in future reports, i.e. can outcomes be identified and demonstrated. This was provide a good news story. Dr Schryer cautioned that there needed to be a balance between exception reporting and good news stories but this would be investigated.		
ID	Type	Risk/Issue/Action/Decision/Outcome Description	Owner
DC/23/11/16/8	Decision	The Committee noted the contents of the report and recognised internal discussions had taken place with regard to withholding or recouping payments.	
AC/23/11/16/1	Action	Investigate changes to the format of the report to show how outcomes are being achieved and scale of improvement.	A Lepiorz

*** Mrs Craven left the meeting following the conclusion of this item.*

10	CQC		
10.1	The Committee considered a report providing an overview of CQC inspection results in Bury. Not included in the report were the results for Woodbank and The Elms which had been assessed as requiring improvement.		
10.2	When the full results for Bury are analysed a large number of practices were scored as requiring improvement under the Safe standard. Mrs Boyd questioned what was done to understand the root cause of this. Dr Schyer stated that a lot of this was down to lack of DBS checks which can be rectified easily.		
10.3	Mr North added he had seen a full analysis of results across Greater Manchester and Bury was unique in having no practices rated as inadequate and all practices being rated as Good under the 'Caring' standard.		
ID	Type	Risk/Issue/Action/Decision/Outcome Description	Owner
DC/23/11/16/9	Decision	The Committee noted the report.	

*** Mr McCrory left the meeting following the conclusion of this item.*

11	PRIMARY CARE COMMISSIONING RISK REGISTER		
11.1	Ms O'Dwyer presented a proposal regarding the primary care risk register. The first iteration provided at the last meeting wasn't felt to have recognised that the Committee was a decision making body in its own right and not a sub-committee of the Governing Body. In the same way as the Governing Body operates, the proposal was to only report risks scored above 15 to the Committee with all others being monitored by the Primary Care Workstream, and issues escalated when needed.		
ID	Type	Risk/Issue/Action/Decision/Outcome Description	Owner
DC/23/11/16/10	Decision	The Committee approved the principle that only	

		risks scored at level 15 or above will be reported to the Committee and delegated authority to monitor the full risk register to the Primary Care Workstream Meeting.	
--	--	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--

12	PRIMARY CARE WORKSTREAM NOTES		
-----------	--------------------------------------	--	--

12.1	The Committee received an update from the Primary Care Workstream meeting.		
------	----------------------------------------------------------------------------	--	--

ID	Type	Risk/Issue/Action/Decision/Outcome Description	Owner
DC/23/11/16/11	Decision	The Committee noted the report.	

	Next Meeting
--	---------------------

	Wednesday 21 December 2016, 12:00 – 13:30 503/504 Townside Primary Care Centre, Bury
--	-----------------------------------------------------------------------------------------