

<b>Title</b>	<b>Minutes of the Primary Care Commissioning Committee 25/09/2019- Meeting in Public</b>		
<b>Author</b>	Julie Hall, PA to the Director of Commissioning & Business Delivery		
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30/09/2019	0.1	J Hall	Initial draft submitted to A Lepiorz for review
30/09/2019	0.2	J Hall	Amendments received from A Lepiorz, minutes then forwarded to the Chair for any further changes.
<b>Approved:</b>			
<b>Signature:</b>			..... <b>Peter Bury, Lay Member (Chair of the PCCC)</b>

# Primary Care Commissioning Committee

## Meeting in Public

### MINUTES OF MEETING

25<sup>th</sup> September 2019

Chair – Peter Bury

## ATTENDANCE

### Members

#### Voting members

Mr Peter Bury, Lay Member, Chair

Mr Geoff Little, Accountable Officer

Mrs Sue Hargreaves, Assistant Chief Finance Officer, Non Acute & Primary Care (representing Mr Mike Woodhead)

Miss Margaret O'Dwyer, Director of Commissioning and Business Delivery

Mrs Lesley Jones, Director of Public Health, Bury Council

Mrs Amy Lepiorz, Deputy Director of Primary Care

Mrs Fiona Boyd, Nurse Lay Member

#### Non-voting members

Dr Jeff Schryer, CCG Chair

Mrs Ann Gough, NHS England

Ms Barbara Barlow, Healthwatch representative

Mr Richard Rawlinson, LOC representative

Mr Paul McCrory, LDC representative

Dr Cathy Fines, Clinical Director

### Others in attendance

Julie Hall, PA (minutes)

Mrs Zoe Alderson, Head of Primary Care

## MEETING NARRATIVE & OUTCOMES

### 1 Welcome, Apologies And Quoracy

1.1 Mr Bury welcomed those present to the meeting and noted apologies had been received from:

- Mr David McCann, Lay Member
- Mr Mohamed Patel, LPC Representative
- Mr Mike Woodhead, Chief Finance Officer
- Mrs Julie Gonda, Health and Wellbeing Board Representative

1.2 It was noted that Mrs Hargreaves was attending on behalf of Mr Woodhead, with full delegated authority to act on his behalf. The meeting was confirmed to be quorate.

### 2 Declarations of Interest

2.1 Mr Bury reminded the Primary Care Commissioning Committee members of their obligation to declare any interest they may have on any issues arising from agenda

	items which might conflict with the business of NHS Bury Clinical Commissioning Group.
2.2	Declarations made by members of the Primary Care Commissioning Committee are listed in the CCG's Register of Interests which is presented under this agenda and also available from the CCG's Corporate Office or via the CCG website.
2.3	<b>Declarations of interest from today's meeting</b> Declarations of interest were raised by Mrs Fiona Boyd in relation to taking up a secondment to Tameside and Integrated Care NHS FT as Head of Nursing - Urgent Care, Mrs Boyd will send an updated Declaration of Interest form so that the register can be updated. Dr Cathy Fines in relation to her inclusion in the planning phase of the Uplands and Dr Jeffrey Schryer in relation to the Uplands item in terms of his Practice being based in Prestwich.
2.4	<b>Declarations of interest from the previous meeting</b> It was noted that there were no declarations of interest in relation to the previous meeting.

ID	Type	The Primary Care Commissioning Committee:	Owner
PCCC/09/01	Decision	Noted the published register of interests.	

### 3 Minutes Of The Last Meeting and Action Log

3.1	<b>Minutes</b> The minutes of the Primary Care Commissioning Committee meeting held on 24 <sup>th</sup> July 2019 were considered and agreed as a correct record.
3.2	<b>Action Log</b> The action log was reviewed and it was noted that the single item was marked as closed.

ID	Type	The Primary Care Commissioning Committee:	Owner
PCCC/09/02	Decision	Approved the minutes of the meeting held on the 24 <sup>th</sup> July 2019 as a true and correct record.	
PCCC/09/03	Decision	Noted the updates provided in relation to the action log.	

### 4 Public Questions

4.1	There were no public questions asked.
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### 5 Neighbourhood Networks

5.1	Mrs Lepiorz presented a paper updating the Committee on work undertaken since the last meeting.
5.2	Mrs Lepiorz reported there had been further progress since producing the paper, these included: <ul style="list-style-type: none"> <li>• The project plan has been updated; some actions have slipped due to time constraints.</li> <li>• Further work has been undertaken on the Memorandum of Understanding which has been shared.</li> <li>• A working group has been established which meets every two weeks to scrutinise the project plan. The communications and marketing plans will be available in the next week or so.</li> <li>• The agreed plan has been submitted to the Greater Manchester Health and Social Care Partnership.</li> </ul>

5.3	<p>The following points were raised and considered:</p> <ul style="list-style-type: none"> <li>• Miss O'Dwyer asked Mrs Gough whether the paper covered everything that was expected. Mrs Gough confirmed that the paper was robust and had been shared with Laura Browse and Ben Squires; feedback is awaited.</li> <li>• Mrs Gough reported that the process will soon be known in terms of what the share of the Primary Care Network (PCN) development funds will be. This funding will be able to support a lot of what is within the paper once the allocation is known. One million pound has been retained at a Greater Manchester (GM) level to cover off anything that can be undertaken at scale basis; a lot of commonality may be seen through. The remaining £1.3m will be shared directly with GP Federations, and PCNs; the payment rate is to develop more bespoke plans for individual PCNs. This will be divided on a population basis; there will be a requirement to demonstrate that PCNs have been taken through the matrix and show what the funding will be spent on.</li> <li>• Miss O'Dwyer reported that once the MoU is signed Mr Little would write to Jon Rouse.</li> <li>• Miss O'Dwyer queried where the decision was taken to retain £1m at GM level. Mrs Gough reported that a task and finish group had been established; there had been an ask from the Locality Leaders Group for members to put themselves forward to sit on the task and finish group; Mrs Gough was unsure if Bury was represented on the task and finish group. The decision to retain the £1m at GM level was taken at that group. There will be a sense check from CCGs with regard to wider training to make the best use of the limited finding available; this is where the list of commonality is expected.</li> <li>• Mrs Lepiorz reported that the MoU should be signed and in place by the next meeting, however this would depend on feedback received.</li> </ul>
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ID	Type	The Primary Care Commissioning Committee:	Owner
PCCC/09/04	Decision	Considered the contents of the report and appended components and provided comments.	

6	Quality In Primary Care (QiPC) Contract- Phase 5 Project Approach
6.1	Mrs Lepiorz presented a paper outlining the project approach for commissioning the Quality in Primary Care Contract (QiPC) (Phase 5).
6.2	<p>The project approach consists of three stages;</p> <ol style="list-style-type: none"> <li>i) Scope and outcomes; the outcomes are close to being finalised.</li> <li>ii) Indicators and measures</li> <li>iii) Contracting – stage where it will need to be agreed the contracting will take place with; the LCO or GP Practices. Currently contracting is with GP Practices.</li> </ol>
6.3	The Committee is asked to approve the approach and design on how this is proposed to be undertaken and confirm they are comfortable with the contract.
6.4	<p>The paper was discussed and the following points considered:</p> <ul style="list-style-type: none"> <li>• Mrs Jones welcomed the approach and commented that improvement was also an important factor.</li> <li>• Mr Little referred to the engagement events where discussion took place around the indicators and differences in targets by locality; Mr Little queried why there were differences. Mrs Lepiorz reported that this is open to suggestions. The agreed outcomes/indicators in the contract will be built on neighbourhood achievements.</li> <li>• Dr Schryer raised concern around the timescales and whether the outcomes</li> </ul>

were near to being agreed.

- Dr Schryer suggested thinking about a three year contract which has clauses included to enable changes rather than a one year contract; this may not be ready by April.
- Miss O'Dwyer queried what the appetite was from GPs re the outcomes. Mrs Lepiorz reported that the consensus is that this is the same as the strategic framework so why have anything different.
- Miss O'Dwyer referred to the timing of February 2020 to get to the final version and commented that at this time last year the financial allocation had not been agreed. Miss O'Dwyer suggested that the resource envelope may need to be abated. Mrs Lepiorz agreed this was difficult in terms of what is measured in order to reach outcomes. The conversation regarding the length of contract will be followed up. Mrs Hargreaves agreed the timescales were challenging and asked that finance colleagues be involved as early as possible re the financial envelope. Mrs Hargreaves suggested payments should be as previously paid and should not be incentivised.
- Miss O'Dwyer referred to contracting with the LCO and commented that this needs to be given some thought as the CCG cannot contract with the LCO; thought needs to be given as to who within the LCO the CCG can contract with. Mrs Lepiorz reported that conversations had taken place with the LCO with regard to which partners could be contracted with; this issue will go through the LCO Board for discussion. The LCO and CCG have to work together to see what is possible.
- Dr Schryer referred to the current standards and asked if these were going to be refreshed or stay the same for the QiPC contract. Mrs Gough explained that CCGs are currently being asked to comment on whether all GM Standards are being utilised and the value of them going forward. The answers will be collated into a report. Mrs Lepiorz reported that there would be a local interpretation including which GM standards these will deviate from.

Mrs O'Dwyer commented that piece of work has been undertaken. Nine standards were introduced regarding raising standards; these were presented in a report to Directors of Commissioning. Only 2 or 3 systems were fully compliant with the Standards; Bury was one of them.

The Partnership ask was for a collective view to move that to an outcomes arrangement; if the Partnership can support that would be helpful. There could be a hybrid version as there is recognition a lot of systems are looking at including the same outcomes.

- Dr Fines asked if there was any evidence of impact on quality in the healthcare economy with regard to these Standards. Mrs Lepiorz confirmed that a local piece of work is being undertaken looking at reanalysing outcomes, the next piece of work to be done will look to see if there are any changes seen in what is being measured. The impact cannot be evidenced due to the outcomes having so many variables. Dr Fines suggested this piece of work needs to be undertaken across GM rather than just Bury.

Miss O'Dwyer commented that it became apparent following the Urgent Care review in Bury, that a lot of people in Bury are not aware of changes in services which has led to insufficient progress being made. Dr Fines suggested that this shows people are not contacting Primary Care services.

- Mrs Jones commented that the indicators/measures are not constructed in a way that drives quality improvement; the thresholds on some are quite low.

	Constricting outcomes/payments will drive up outcomes/impact.		
	<b>Type</b>	<b>The Primary Care Commissioning Committee:</b>	<b>Owner</b>
PCCC/09/05	Decision	Approved the project approach for commissioning the Quality in Primary Care Contract (Phase 5).	

<b>7</b>	<b>GP Patient Satisfaction Results</b>		
7.1	Mrs Lepiorz presented a paper which gave an overview of the GP Patient Survey results for Bury CCG and details around next steps to improve results for 2020.		
7.2	In Bury CCG, 8,941 questionnaires were sent out, and 2,897 were returned completed. This represents a response rate of 32%. The measure around Quality will continue to be reviewed each year to improve results.		
7.3	<p>The following points were considered:</p> <ul style="list-style-type: none"> <li>• Ms Barlow queried how the surveys were distributed to patients. Mrs Lepiorz stated that patients are randomly selected and sent a survey via a national source.</li> <li>• The survey is sent through the post and again patients are randomly selected. This test forms part of the quality visits to Practices; if results are poor this will trigger a conversation with the Practice.</li> <li>• Ms Barlow suggested that there must be a better, less costly way to gather patient satisfaction data.</li> <li>• Dr Fines commented that GPs do their own survey and getting through to the surgery on the phone is always a problem; demand outstrips capacity.</li> </ul>		
<b>ID</b>	<b>Type</b>	<b>The Primary Care Commissioning Committee:</b>	<b>Owner</b>
PCCC/09/06	Decision	Received the report and noted the next steps.	

<b>8</b>	<b>Primary Care Risk Register</b>		
8.1	The Committee received the Primary Care Risk Report for noting. The Uplands Health Centre will continue to feature as a high level risk. The focus will be on the output of the feasibility of LIFT.		
<b>ID</b>	<b>Type</b>	<b>The Primary Care Commissioning Committee:</b>	<b>Owner</b>
PCCC/09/07	Decision	Received the risk report;	
PCCC/09/08	Decision	Noted the risks on the risk register as reflected in Appendix A;	
PCCC/09/09	Decision	Noted that this risk was last reviewed in January 2019 and is not due to be reviewed again until January 2020;	
PCCC/09/10	Decision	Noted the summary position; and	
PCCC/09/11	Decision	Noted that no risks from the PCCC risk register are reported onto the Corporate Risk Register.	

<b>9</b>	<b>Primary Care Workstream Update</b>		
9.1	The Committee received the Primary Care workstream update for information.		
<b>ID</b>	<b>Type</b>	<b>The Primary Care Commissioning Committee:</b>	<b>Owner</b>
PCCC/09/12	Decision	Noted the briefing being presented	

<b>10</b>	<b>Closing Matters/Forward Plan</b>		
10.1	<p>The forward plan was noted and accepted.</p> <ul style="list-style-type: none"> <li>• Mr McCrory queried whether the Committee was aware of the conversations around some functions that the Local Area Team currently undertakes moving to</li> </ul>		

BSA/NHS and certain things being removed from prescriptions that are in the GP BNF. Dr Schryer commented that he was not aware of any prescribing changes. Mrs Lepiorz agreed to look into the prescribing issue raised and report back to Mr McCrory.

Mrs Gough commented that some functions were moving to the BSA and agreed to check which functions will transfer to BSA and make sure CCGs are aware.

- Miss O'Dwyer asked that the revised Terms of Reference for the Primary Care Commissioning Committee submitted to NHS England be circulated to the Committee.

ID	Type	The Primary Care Commissioning Committee:	Owner
PCCC/09/13	Decision	The forward plan was noted and accepted.	
PCCC/09/01	Action	Mrs Gough to check which functions will transfer to BSA and feedback.	Mrs Gough
PCCC/09/02	Action	Mrs Lepiorz to check if any prescriptions are being removed from prescriptions that are in the GP BNF and feedback to Mr McCrory.	Mrs Lepiorz
PCCC/09/03	Action	Julie Hall to circulate the revised Terms of Reference to the Committee.	Julie Hall

DRAFT





## Primary Care Commissioning Committee Action Log

Status	Date agreed	Action	Update	Responsible
Closed	24-Jul-19	PCCC/07/01- Ms Barlow to be included on the distribution list for future PCCC meetings.	Completed.	AL
Closed	24-Jul-19	PCCC/07/02- Mrs Hargreaves to liaise with the Primary Care Team with regard to SMI.	Completed.	SH
Closed	24-Jul-19	PCCC/07/03- Memorandum of Understanding (MoU) is to be included for discussion at the next meeting in September.	Completed.	AL
Closed	24-Jul-19	PCCC/07/04- The ToR are to be amended to reflect the agreed changes at 1.5 & 7.1 and an updated version is to be circulated.	ToR submitted to NHSE. Revised ToR to be circulated.	MOD
Closed	24-Jul-19	PCCC/07/05- The delegated and non-delegated figures are to be included in the next primary care finance report.	Close action - will be included in the report at the November meeting.	SH
Open	25-Sep-19	PCCC/09/01 - Mrs Gough to check which functions will transfer to BSA and feedback.		AG
Open	25-Sep-19	PCCC/09/02 - Mrs Lepiorz to check if any prescriptions are being removed from prescriptions that are in the GP BNF and feedback to Mr McCrory.		AL
Closed	25-Sep-19	PCCC/09/03 - Julie Hall to circulate the revised Terms of Reference to the Committee.	Completed - ToR circulated on 30.9.19	J Hall