

<b>Meeting: Primary Care Commissioning Committee</b>			
<b>Meeting Date</b>	26 May 2021	<b>Action</b>	Approve
<b>Item No.</b>	3	<b>Confidential</b>	No
<b>Title</b>	Minutes and Action Log		
<b>Presented By</b>	Mr Peter Bury, Chair		
<b>Author</b>	Lindsay Johnson, Committee Secretary		
<b>Clinical Lead</b>	-		

<b>Executive Summary</b>
The minutes are presented as an accurate reflection of the previous Primary Care Commissioning Committee Part 1 (meeting in public), reflecting the discussion, decisions and actions agreed on 24 <sup>th</sup> March 2021.
<b>Recommendations</b>
It is recommended that the Primary Care Commissioning Committee:- <ul style="list-style-type: none"> <li>• Approve the minutes as an accurate record; and</li> <li>• Note the updates provided against the actions</li> </ul>

<b>Links to CCG Strategic Objectives</b>	
<b>SO1 - To support the Borough through a robust emergency response to the Covid-19 pandemic.</b>	<input checked="" type="checkbox"/>
<b>SO2 - To deliver our role in the Bury 2030 local industrial strategy priorities and recovery.</b>	<input checked="" type="checkbox"/>
<b>SO3 - To deliver improved outcomes through a programme of transformation to establish the capabilities required to deliver the 2030 vision.</b>	<input checked="" type="checkbox"/>
<b>SO4 - To secure financial sustainability through the delivery of the agreed budget strategy.</b>	<input checked="" type="checkbox"/>
Does this report seek to address any of the risks included on the Governing Body Assurance Framework? If yes, state which risk below:	
GBAF	

<b>Implications</b>						
Are there any quality, safeguarding or patient experience implications?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>

Implications						
Has any engagement (clinical, stakeholder or public/patient) been undertaken in relation to this report?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Have any departments/organisations who will be affected been consulted ?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Are there any conflicts of interest arising from the proposal or decision being requested?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Are there any financial Implications?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Has an Equality, Privacy or Quality Impact Assessment been completed?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Is an Equality, Privacy or Quality Impact Assessment required?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Are there any associated risks including Conflicts of Interest?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
Are the risks on the CCG's risk register?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	N/A	<input type="checkbox"/>

Governance and Reporting		
Meeting	Date	Outcome

<b>Title</b>	<b>Minutes of the Primary Care Commissioning Committee 24<sup>th</sup> March 2021 - Meeting in Public</b>		
<b>Author</b>	Lindsay Johnson, Committee Secretary		
<b>Version</b>	v2		
<b>Target Audience</b>	Members of the Primary Care Commissioning Committee		
<b>Date Created</b>	24/3/2021		
<b>Date of Issue</b>			
<b>To be Agreed</b>			
<b>Document Status</b> (Draft/Final)	Draft		
<b>Description</b>	Minutes of the Primary Care Commissioning Committee 24 <sup>th</sup> March 2021 – Meeting in Public		
<b>Document History:</b>			
<b>Date</b>	<b>Version</b>	<b>Author</b>	<b>Notes</b>
26/3/2021	1	Lindsay Johnson	Emailed to Zoe Alderson for review.
19/04/2021	2	Zoe Alderson	Changes incorporated
29/04/2021	2	Lindsay Johnson	Emailed to the Chair to review
<b>Approved:</b>			
<b>Signature:</b>			..... <b>Peter Bury, Lay Member</b> <b>(Chair of the PCCC)</b>

**Primary Care Commissioning Committee**  
**Meeting in Public**

<b>MINUTES OF MEETING</b>
24 <sup>th</sup> March 2021
<b>Chair – Peter Bury</b>

**ATTENDANCE**

**Members**

**Voting members**

Mr Peter Bury, Lay Member for Quality and Performance - **Chair**

Mr Geoff Little, Accountable Officer

Mr Will Blandamer, Joint Executive Director of Strategic Commissioning

Mrs Julie Gonda, Director of Community Commissioning

Mrs Fiona Boyd, Registered Nurse of the Governing Body

Ms Zoe Alderson, Head of Primary Care deputising for Mrs Amy Lepiorz, Deputy Director of Primary Care (noted for quoracy and voting rights).

Ms Carol Shannon-Jarvis, Associate Chief Finance Officer, Deputising for Miss Pat Crawford, Interim Chief Finance Officer (noted for quoracy and voting rights).

**Non-voting members**

Dr Jeff Schryer, CCG Chair

Dr Cathy Fines, Clinical Director- Primary Care

Ms Gail Henshaw, NHS England Representative

Dr Mohammed Jiva, LMC Representative

Mr Richard Rawlinson, LOC Representative

**Others in attendance**

Ms Rachele Schofield, Head of Primary Care

Shenna Paynter, Public Health, Bury Council

Lindsay Johnson, Committee Secretary (minutes)

**MEETING NARRATIVE & OUTCOMES**

<b>1</b>	<b>Welcome, Apologies And Quoracy</b>
1.1	The Chair welcomed all to the meeting and noted apologies had been received from Amy Lepiorz, Lesley Jones, David McCann and Pat Crawford.
1.2	The meeting was confirmed to be quorate and commenced.
<b>2</b>	<b>Declarations of Interest</b>
2.1	The Chair 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> There were no declarations made other than those recorded on the register.		
2.4	<b>Declarations from the previous meeting held on 24<sup>th</sup> February 2021</b> In terms of declarations from the previous meeting, there was an additional sentence to include that Ms Julie Gonda was a patient of Garden City Medical Centre. Although Ms Gonda is a patient at Garden City Medical Centre, this is known as a personal interest and following governance due diligence check, it was confirmed that this personal interest would not have any implications in relation to any decisions made by the Primary Care Commissioning Committee in relation to Garden City Medical Centre. Ms Gonda could be and was a part of those discussions and any decision making.		
<b>ID</b>	<b>Type</b>	<b>The Primary Care Commissioning Committee:</b>	<b>Owner</b>
D/03/01 PCCC Pt1	<b>Decision</b>	Noted the declarations of interest register.	

<b>3</b>	<b>Minutes Of The Last Meeting and Action Log</b>		
3.1	The minutes of the Primary Care Commissioning Committee meeting held on 24 <sup>th</sup> February 2021 were reviewed. It was requested that the title for Miss Pat Crawford be amended to Chief Finance Officer rather than Joint Chief Finance Officer.		
3.2	The action log was referred to and noted accordingly and the following action updated:-		
3.3	D/02/10 PCCC Pt1 Mr Blandamer advised the Committee that discussions were underway with GB Partnership to explore feasibility across sites along with the opportunity to improve the primary care facility. Mr Blandamer outlined that a more detailed update would be provided at the next PCCC meeting on 26 <sup>th</sup> May 2021.		
<b>ID</b>	<b>Type</b>	<b>The Primary Care Commissioning Committee:</b>	<b>Owner</b>
D/03/02 PCCC Pt1	<b>Decision</b>	Taking into account the amendment in the job title for Miss Crawford, approved the minutes of the meeting held on 24 <sup>th</sup> February 2021 as a true and accurate record.	LJ
A/03/01 PCCC Pt1	<b>Action</b>	Feasibility Update to be added onto the agenda for the May PCCC meeting. Post meeting note: On the agenda at Part 2 meeting.	LJ

<b>4</b>	<b>Public Questions in relation to the agenda</b>		
4.1	There were no public members present at the meeting and no questions had been received either in advance or on the day.		

<b>5</b>	<b>Garden City Medical Centre Procurement Process – Procurement &amp; Evaluation Update</b>		
5.1	A verbal update was provided in this matter and it was noted that the contract was to be awarded to SSP Health as the new provider at Garden City Medical Centre who had been successful as part of the procurement and evaluation process.		

5.2	The Committee was advised that that a number of meetings would now commence both with the incoming provider as well as the outgoing provider to ensure that the new provider was in situ by 8 <sup>th</sup> June 2021.		
5.3	The Committee noted this verbal update and welcomed further updates at the PCCC meetings as and when appropriate.		
	<b>Type</b>	<b>The Primary Care Commissioning Committee:</b>	<b>Owner</b>
D/03/03 PCCC Pt1	<b>Decision</b>	Noted the verbal update provided and of the new provider, SSP be awarded the contract as the new provider at Garden City Medical Centre, following successful completion of the procurement process.	

<b>6</b>	<b>Primary Care Workstream End of Year Report</b>		
6.1	This report provided Primary Care Commissioning Committee with an overview of the work undertaken within 2020/21 under the primary care workstream. The Committee was informed that the primary care workstream incorporated the work programmes of primary care, medicines optimisation and until recently the referral booking and management teams.		
6.2	The paper outlined the main pieces of work undertaken in each quarter of 2020/21 as well as providing an overview of the developing thoughts for 2021/22 priorities.		
6.3	Ms Alderson highlighted to the Committee that as with all parts of the health and social care system, 2020/21 had been a challenging year for both members of the primary care teams and primary care providers and that immediate response was carried out in changing the strategic and operational plans in order to deal with the Covid-19 pandemic. This meant that the traditional workstream governance was replaced by the system command and control response with most of the primary care response at the beginning of the pandemic being coordinated via health and care silver group.		
6.4	<p>Ms Alderson also highlighted to the Committee some key points as listed below;</p> <ul style="list-style-type: none"> <li>• Daily bulletins with GPs have now moved to weekly</li> <li>• Fortnightly webinars continue</li> <li>• Working with GP Federation Business Continuity processes were strengthened including both buddy and hub type models being explored.</li> <li>• Assisted a GP Practice in temporarily moving into Rock Health Care in order to support potential Covid Management Service expansion.</li> <li>• Delivered Digital First Offer (Ask My GP) within a very short timescale. It was noted that all practices (apart from 2) use this system.</li> <li>• Prior to Primary Care Network (PCN) Directed Enhanced Service (DES), work was carried out around aligning practices with older peoples Care Homes.</li> <li>• Quarter one saw the passing of Dr Al- Dubaisi, the lead GP and contract holder of Garden City Medical Practice, from Covid-19 and work then commenced around procurement for replacement services at Garden City Medical Centre.</li> <li>• Quarter four required the whole of the Primary Care Team to be involved in the vaccination programme.</li> </ul>		
6.5	Ms Alderson concluded the item informing the Committee on the likely priorities for Primary Care for 2021/22. Ms Alderson stated that a view was welcomed from the		

	Committee in relation to the priorities as well as identifying anything additional to be added, refocused or considered.
6.6	The Chair acknowledged that this was a very comprehensive report and the agenda item was opened up for discussion.
6.7	Ms Gonda stated that the report was very positive and it reflected the flexibility of the GP practices and how the teams across Primary Care and Community Care had worked. She said that it was important to recognise the strength of relationships that have been further developed and this was essential to remain in place for continued successful working in the future. Ms Gonda gave recognition to the Primary Care Team for all the work carried out.
6.8	Dr Schryer gave credit to the Primary Care Team in doing a great job over the last year. He said that Bury has a really good reputation in Primary Care with great relationships with practices. Dr Schryer recognised the collaborative work with Primary Care Teams, the GP Federations and the PCNs also.
6.9	Mr Blandamer gave thanks to the Primary Care Team and the work achieved during a very difficult and challenging time.
6.10	In terms of the priorities for 2021/22 Dr Schryer agreed with the outline provided, however also suggested that as the CCG moves into the Integrated Care System (ICS) structure, consideration should be given around this, linking in with PCNs and neighbourhoods.
6.11	Mr Blandamer said he also wanted to support the strength and model of the neighbourhood team working and working in the context of integrated delivery and collaborative architecture, along with any opportunities that may come from within the white paper in order to ensure that Primary Care is at the heart of what we do.
6.12	Ms Alderson confirmed that the comments provided would be incorporated and a more detailed workplan would be produced.

ID	Type	The Primary Care Commissioning Committee:	Owner
D/03/04 PCCC Pt1	<b>Decision</b>	Received the report and noted the work of the Primary Care Workstream during 2020/21.	
D/03/05 PCCC Pt1	<b>Decision</b>	Provided a view on the 2021/22 priorities for the Primary Care Workstream as detailed above.	
A/03/02 PCCC Pt2	<b>Action</b>	Ms Alderson to incorporate the comments made by PCCC in terms of priorities for 2021/22.	ZA

<b>7</b>	<b>APMS Enhanced Service Report 2021/2022</b>
7.1	The Committee was presented with an overview of three additional Locally Commissioned Services (LCS) delivered by one provider on behalf of the borough. The Committee was informed that these services were due to expire 31 <sup>st</sup> March 2021.
7.2	These were as follows; <ul style="list-style-type: none"> <li>• Bradshaw House Bail Hostel</li> <li>• Pediatric Phlebotomy</li> </ul>

	<ul style="list-style-type: none"> <li>The Elton Unit (Priory)</li> </ul>
7.3	Ms Alderson stated that the Committee was being asked to support the extension of these Enhanced Services (ES) for up to a maximum of 12months.
7.4	The Committee was provided with a summary on each of each of the services.
7.5	A question was asked about the Pediatric Phlebotomy and how the risk would be mitigated? It was advised that some of the workforce issues that were identified were around staffing due to the pandemic and as such access had been affected. Ms Alderson did advise the Committee however that a piece of work was taking place around the number of people attending and accessing the services and the numbers referred.
7.6	Ms Alderson confirmed that a report would be brought back to a later Primary Care Commissioning Committee meeting with a timeline of reviews and reminded the Committee that based on the outcome of reviews, changes to requirements/notice to be served is subject to a 3 months' notice period.

ID	Type	The Primary Care Commissioning Committee:	Owner
D/03/06 PCCC Pt1	<b>Decision</b>	Noted the contents of the paper.	
D/03/07 PCCC Pt1	<b>Decision</b>	Supported a maximum of up to 12 months extension for all three enhanced services named within the paper along with the acknowledging that should changes to requirements/notice served at an earlier date (based on the outcome of reviews) would be subject to a 3 month notice period.	

<b>8</b>	<b>Decommissioning of Bury GP Federation Medical Service Provision at Bealeys Community Hospital</b>
8.1	The paper was introduced which outlined that Bury Local Care Organisation had recently concluded a review, followed by a public consultation of Intermediate Care (IMC) services in Bury. The outcomes of review, together with the recommendations were discussed at the Strategic Commissioning Board, a public meeting, on 4 January 2021.
8.2	The Primary Care Commissioning Committee was informed that as a result of the review, and the consultation, a decision was taken to restructure the IMC bed stock across Bury and that this had implications in relation to the GP Medical Service Provision at Bealey's Community Hospital.
8.3	The Committee was provided with the paper which advised them of the decommissioning of Medical Service Provision at Bealey Community Hospital by the GP Federation. They were also made aware that as Medical Service Provision falls within the Bury GP Federation Bealey Provision / Extended Working Hours Contract held with Bury GP Federation notice is required to be formally served on this part of the Contract.
8.4	The report confirmed that formal correspondence had been sent to Bury GP Federation



	regarding the decommissioning of this element of the contract, stating the contractual 3-month notice period effective from 1 <sup>st</sup> April 2021 to close of play on 30 <sup>th</sup> June 2021 and that an associated contract variation will also be issued to ensure the GP Federation continue to provide the Extended Working hours service across Bury following the decommissioning of the Bealey element of this contract.
8.5	The agenda item was opened up for discussion.
8.6	Dr Schryer enquired if there was a financial saving in relation to the decommissioning of GP Federation Medical Service. He was advised that there would be however discussions were also taking place with the LCO as part of medical input into other facilities so a financial value could not yet be confirmed.
8.7	Mr Blandamer confirmed that he supported the paper and said that he wished to clarify for the minutes that this request was in relation to the intermediate care and that work was underway in identifying other opportunities to use Bealey's Community Hospital and as such the decision did not pertain to a decision around the closure of Bealey's Community Hospital. Mr Blandamer advised the Committee that Bealey's Community Hospital was currently being used as a vaccination centre.

ID	Type	The Primary Care Commissioning Committee:	Owner
D/03/08 PCCC Pt1	<b>Decision</b>	Received notification to decommission the medical service provision at Bealey's Community Hospital provided by Bury GP Federation.	
D/03/09 PCCC Pt1	<b>Decision</b>	Noted the update from Mr Blandamer that confirmed that this was in relation to the intermediate care service and that work was underway in identifying other opportunities for the use of Bealey's Community Hospital.	

9	Primary Care Finance Report
9.1	Ms Shannon-Jarvis introduced the report which outlined that in 20/21 in response to the COVID 19 pandemic a national top down command and control framework was put in place by NHSE/I.
9.2	Ms Shannon-Jarvis explained that for the first half of the year a financial framework was put in place under which the CCG received a baseline allocation based on expenditure to February 2020 uplifted for inflation and growth. In addition to this, based upon expenditure to month 6, the CCG received a retrospective allocation of £7.1m to contribute to COVID related and business as usual expenditure and £8.2m (with £4.1m shown to month 6) planned non recurrent surplus draw down. This enabled the CCG to report a balanced position for the first 6 months of 2020/21.
9.3	For the second half of 2020/21, the Committee was informed that the CCG needed to do manage day to day expenditure within its notified allocation and that the CCG notified baseline allocation for month 7 to 12 is £168.8m with additional allocations received to month 11 of £8.3m.
9.4	In summary, this brings the total CCG allocation for the year to £359.3m of which £72.9m relates to Primary Care Services.

9.5	Ms Shannon-Jarvis then provided a summary to the Committee with regard to Month 11. She outlined that primary care services were reporting a small year to date underspend of £0.01m with a forecast outturn of £0.01m overspend.
9.6	In relation to prescribing this was showing a £0.3m underspend year to date which was forecast to continue to year end. The Committee was informed that delegated co-commissioning was reporting a small underspend of £0.04m to month 11 with £0.05m forecast outturn and that the remaining primary care services are £0.3m overspent at month 11 with a forecast £0.4m overspend at year end. The Committee was informed that this was as a result of the continuation of the Covid Management Service.
9.7	Ms Shannon-Jarvis concluded the update advising that to date the CCG had incurred £11.1m of expenditure on COVID related costs and that of this, £2.3m related to primary care services and that the costs related to the covid vaccination roll in the primary care sector sit outside of CCG budgets.
9.8	The Committee received the report and update as provided by Ms Shannon-Jarvis.

	Type	The Primary Care Commissioning Committee:	Owner
D/03/10 PCCC Pt1	<b>Decision</b>	Noted the Financial Framework in place for 2020/21.	
D/03/11 PCCC Pt1	<b>Decision</b>	Noted the Financial position at month 11 for primary care services and primary care co-commissioning.	
D/03/12 PCCC Pt1	<b>Decision</b>	Noted the COVID related expenditure of £2.3m relating to primary care services.	

<b>10</b>	<b>Closing Matters</b>
10.1	There were no other matters to report and the meeting was closed at 13.05.

Reference	Action	Assigned to	Due Date	Comments	Status
A/03/02 PCCC Pt2	Primary Care Workstream End of Year Report - Ms Alderson to incorporate the comments made by PCCC in terms of priorities for 2021/22.	ZA	01/05/2021	This action has been completed and any comments incorporated accordingly.	Completed