



Wiltshire

Clinical Commissioning Group

**MINUTES OF WILTSHIRE CLINICAL COMMISSIONING GROUP (CCG)
PRIMARY CARE COMMISSIONING COMMITTEE MEETING
HELD ON TUESDAY 26 JUNE 2018, 13.30HRS AT SOUTHGATE HOUSE, DEVIZES**

Voting Members Present:		
Christine Reid	CR	Chair, Lay Member, Public and Patient Involvement
Dr Mark Smithies	MS	Vice Chair, Secondary Care Doctor
Linda Prosser	LP	Interim Chief Officer (<i>until 14:05hrs</i>)
Sujata McNab	SM	Deputy Chief Financial Officer
Dr Toby Davies	TD	GP Chair of Sarum
Dr Andrew Girdher	AG	GP Chair of NEW
Jo Cullen	JC	Director of Primary and Urgent Care
Dina McAlpine	DMcA	Director of Nursing and Quality / Registered Nurse
Dr Richard Sandford-Hill	RSH	Clinical Chair of the CCG
In Attendance:		
Tracey Strachan	TS	Deputy Director of Primary Care
Victoria Stanley	VS	Commissioning Manager/ Locality Lead
Sarah MacLennan	SMac	Associate Director of Communications and Engagement
Sharon Woolley	SW	Board Administrator
Emma Higgins	EH	Quality Lead (<i>for item 8 only</i>)
Apologies:		
Dr Helen Osborn	HO	Medical Advisor
Baroness Jane Scott	JS	Leader, Wiltshire Council
Carol Cusack	CC	Director of Primary Care, Local Medical Committee (LMC)
Mark Harris	MH	Chief Operating Officer
Steve Perkins	SP	Chief Financial Officer
Dr Catrinel Wright	CW	GP Interim Chair of West

ITEM NUMBER		ACTION
PCCC/18/06/01	Welcome and apologies for absence CR welcomed everyone to the meeting. The above apologies were noted.	
PCCC/18/06/02	Declarations of Interests Members were reminded of their obligation to declare any interest they may have on any issues arising at the meeting which might conflict with the business of the Wiltshire Clinical Commissioning Group (CCG). There were none declared. The meeting was quorate.	
PCCC/18/06/03	Minutes of the meeting held on 27 March 2018 The minutes of the meeting held on 27 March 2018 were approved as an accurate record, with the amendment of adding Dr Lindsay Kinlin to the list of attendees.	
PCCC/18/06/04	Action Tracker The action tracker was reviewed and updated. PCCC/18/01/07 - Updated figures had been shared with Clinical Exec. CLOSED	

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	<p>PCCC/18/03/09.0 - June workforce survey now underway. Results would be shared. CLOSED</p> <p>All other actions were marked as completed or closed.</p>	
PCCC/18/06/05	<p>Matters Arising There were no matters arising.</p>	
PCCC/18/06/06	<p>For Approval: Primary Care Commissioning Committee Terms of Reference CR requested any comments from Members concerning the revised Committee Terms of Reference.</p> <p>SMac reported that the new providers of the Healthwatch service had been invited to attend the Governing Body and PCCC meetings as they were entitled to a place.</p> <p>Discussions took place concerning representatives from the Health and Wellbeing Board and Public Health. It was agreed that letters should be sent to Baroness Jane Scott and Tracey Daszkiewicz.</p> <p>ACTION: PCCC/18/06/06.0 - JC to draft letter of invite to Tracey Daszkiewicz to request a representative from Public Health upon the Committee.</p> <p>ACTION: PCCC/18/06/06.1 - JC to draft letter to Baroness Jane Scott to request a change in representative from the Health and Wellbeing Board to attend Committee meetings.</p> <p>The Committee approved the Primary Care Commissioning Committee Terms of Reference and recommended them to the Governing Body for agreement.</p>	<p>JC</p> <p>JC</p>
PCCC/18/06/07	<p>Wiltshire CCG</p> <p>CR proposed that the agenda format be amended to reflect that the CCG now had full delegation of primary care services. This would be changed for the September Committee meeting.</p> <p>➤ National Update</p> <p>a) NHS England General Practice Resilience Programme Guidance 2018-19 TS reported that the new GP Resilience Programme guidance had now been released. Wiltshire's proposal was in line with the guidance, but further development was needed.</p> <p>➤ Local Update:</p> <p>b) Update Report from Primary Care Operational Group (PCOG) - 18 May 2018 TS went through the meeting summary of the May PCOG meeting, which had been held virtually due to low attendance. Three papers had been discussed for recommendation. The Three Chequers status had since changed, the proposal would not be progressing. The Lodge and Primary Care Offer papers were on the Committee agenda for discussion.</p> <p>c) Update on Delegated Transitional Plan VS talked through her presentation. 45 of the 49 functions and processes had been fully transferred to date. A full transition would be completed by the end of July 2018. Formal support from NHS England would cease in</p>	

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	<p>October 2018.</p> <p>Included within the list of functions yet to transfer was the interpretation and translation services management. It was expected that there would be a need to procure this service.</p> <p>ACTION: PCCC/18/06/07c.0 - Further information concerning the procurement of the management of the interpretation and translation services to be brought to the September Committee meeting.</p> <p>Complaints would still be managed by NHS England, however, from June NHS England can share these with the CCG if the patient has provided consent. A business case was to be prepared to enable the electronic file transfer to take place. To date only hard copy files have been handed over.</p> <p>VS felt that the biggest risk to the CCG through this transition into full delegation was that of staff capacity, although teams have managed to absorb the work load. JC added that there were a number of issues still to resolve to reduce the risk to the CCG, including the legacy issues and the handover of files. This was also reflected for the Finance Team who were validating the finance information that had been handed over. There was also no direct relationship with Primary Care Support England which was raising concerns. It was suggested that NHS England should attend these Committee meetings until full transition was completed and risk and issues were resolved.</p> <p>ACTION: PCCC/18/06/07c.1 - Attendance of NHS England at Primary Care Commissioning Committee meetings to be requested until functions are fully transitioned.</p> <p>TS informed Members that a Financial Timeliness Policy was to be developed. More recently, case funding bids were being submitted late. The Policy would be brought to the Committee for sign off. There may be a need to delegate authority to the Committee or senior members of the Primary Care Team to enable timely approval of payments.</p> <p>ACTION: PCCC/18/06/07c.2 - Financial Timeliness Policy to be brought to the September Committee meeting for approval.</p> <p>d) Wiltshire Care Model The update concerning the Wiltshire Care Model Design principles was noted.</p> <p>e) Update on Special Allocation Scheme Service Provision VS explained that the Special Allocation Scheme service was originally commissioned in 2004. This service now formed part of the functions to yet be transferred from NHS England. Governance and legacy issues needed to be resolved first, and assurance given from NHS England.</p> <p><i>(14.00hrs - EH joined the meeting)</i></p> <p>Further details would be brought to the September meeting, and would include the development of the pathway. The Information Governance Group would be involved in this function transfer as consideration would need to be given to holding patient data.</p>	<p>VS</p> <p>LP</p> <p>TS</p>

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	<p>ACTION: PCCC/18/06/07e - Paper concerning the Special Allocation Scheme Service Provision to be brought to the September Committee meeting.</p> <p><i>(14.05hrs – LP left the meeting – and delegated authority to JC for the remainder of the meeting)</i></p> <p>f) Q4 GP Forward View Assessment A copy of the letter from Debra Elliot of NHS England had been circulated with the meeting papers.</p> <p>Improved access to GP's was to be in place by October 2018 and was progressing. The CCG's Quarter One Assurance meeting to be held in July would have a GP Forward View focus.</p> <p>g) Estates Update TS reported that improvement grants had been received. Confirmation of the budget from NHS England had not yet been received, but it had been agreed in principal. Business cases were to be developed. The Larkhill site was to be developed with the MOD, but would not be finished in time for the arrival of the troops. Porta cabins were to be used in the interim.</p> <p>➤ For Approval:</p> <p>h) The Lodge Surgery – GMS Space Increase VS explained that The Lodge Surgery was requesting approval of an additional six metres square of space to utilise for general medical services.</p> <p>The Committee approve the additional space requested.</p> <p>CR requested that future decision papers indicated if they had already been reviewed and recommended by the Primary Care Operational Group. This would aid Committee discussion and decision making.</p> <p>i) Extended and Core Hours VS explained that the review of core hours across Wiltshire surgeries had been carried out; confirming the GP core hours, assessing sub-contractor arrangements and short term closure of surgeries. A summary was shown on page seven of the report. DMcA felt that the impact of arrangements and short term closures needed to be understood as it would relate to the patient safety domain for quality. VS would progress, along with ensuring that there was no duplication of payment.</p> <p>The Committee approved the paper and the three recommendations.</p>	
PCCC/18/06/08	<p>Primary Care - Quality Report EH talked through the Quality Report. The graphs demonstrated the level of primary care incidents reported. Since April 2017, 46 incidents had been reported by practices to the National Reporting and Learning System, with medication being the highest category. Through attendance at the GP Clinical Governance Meetings, the Quality Team ensured that learning from incidents was shared.</p> <p>A need to discuss flu planning with primary care had been identified. Planning for this year's flu campaign would commence shortly. The C.diff Task and Finish Group would reconvene in August.</p> <p>Pages eight and nine looked at the themes and trends of the Patient Advice and</p>	

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	<p>Liaison Service and complaints. Access to services had the highest amount of concerns raised. This information had been shared with NHS England, who would investigate and respond to patients directly.</p> <p>The graph on page 11 indicated the friends and family test recommendation rate. The number of those practices not complying with NHS England's guidance on submission of the test data had increased. The Quality Team would focus their support with those practices, and those with a low recommendation rate. Patient experience action plans had been developed.</p> <p>a) Quality Schedule The Quality Schedule had now been signed off. The Committee noted the schedule.</p> <p>b) Care Homes Project Update EH referred Members to the fourth slide of the presentation, which identified care home emergency admissions. Admissions from the Sarum area had increased. The Cathedral Care Home Project was to first engage and focus its support with care homes in the Salisbury area. The 'Plan, Do, Study, Act' (PDSA) cycle would be followed to then rapidly upscale the project.</p> <p>JC questioned if the out of hours was affecting admissions, and suggested that this be jointly mapped out.</p>	
PCCC/18/06/09	<p>a) Primary Care Offer</p> <ul style="list-style-type: none"> - Locality Services TS talked through her presentation. Business cases were being developed for Primary Care Offer locality services. This would link with the Improved Access Offer, which was currently being discussed by localities. - Walk in Centre This item was withdrawn from the meeting. <p>ACTION: PCCC/18/06/09 - Update concerning the Salisbury Walk in Centre to be given at the July Governing Body meeting.</p> <p>b) Improved Access Update A pilot service was being developed by the working group.</p>	JC
PCCC/18/06/10	<p>2018/19 Primary Care Budget SM reported that a 2.8% growth was expected against the primary care budget, but a 0.8% reduction in allocations. A question concerning absorption had been raised with NHS England; a response was awaited. This risk would be reflected in the finance report for Governing Body. The £498k indemnity adjustment had been reinvested into other areas of primary care. Rent costs were also an ongoing risk.</p> <p>The 2018/19 Local Enhanced Services budget indicated a reserve of £655k. This would be held to support any emerging in year pressures.</p>	
PCCC/18/06/11	<p>Patient and Public Involvement CR reported that two Patient Participation Group (PPG) Forums were being organised for October, to take place in Devizes and in the south of the County. The CCGs Comms Team were attending PPG meetings as regularly as possible, despite reduced capacity.</p>	

ITEM NUMBER		ACTION
PCCC/18/06/12	<p>Any Other Business</p> <p>a) PCCC Annual Report To support the CCGs governance and assurance arrangements, each sub-committee of the Governing Body were requested to produce an annual report of the Committees activities. The timescale for a PCCC report would be looked into.</p> <p>ACTION: PCCC/18/06/12 - SW to review timescale for PCCC Annual Report production.</p>	SW
	The meeting concluded at 14.45hrs	

**Date of next Primary Care Commissioning Committee Meeting:
 25 September 2018 – 15.30 – 17.00hrs**