

PRIMARY CARE COMMISSIONING COMMITTEE

FRIDAY 27 APRIL 2018 AT 9.15 AM – 10.15 AM
THE BOARDROOM, WILBERFORCE COURT, ALFRED GELDER STREET,
HULL, HU1 1UY

Item no	Item	Led by	Action required	Enclosed/ Verbal	Time
1.	Apologies for Absence	Chair	To note	Verbal	09:15 am
2.	Minutes of the Previous Meeting Held on 23 February 2018 <i>To approve as a true and correct record and to authorise the Chair to sign then as such</i>	Chair	To approve	Enclosed	09:16 am
3.	Matters Arising / Action List from the Minutes <i>In accordance with the CCG's Constitution and Standards of Business Conduct, no discussion shall take place upon the Minutes expect upon their accuracy or where the Chair considers discussion appropriate</i>	Chair	To discuss	Enclosed	09:18 am
4.	Notification of Any Other Business <i>Any proposed item to be taken under Any Other Business must be raised and, subsequently approved, at least 24 hours in advance of the meeting by the Chair.</i> <i>Any approved items of Any Other Business to be discussed at item 10</i>	Chair	To note	Verbal	09:22 am
5.	Declarations of Interest <i>In relation to any item on the agenda of the meeting members are reminded of the need to declare:</i> <i>(i) any interests which are relevant or material to the CCG;</i> <i>(ii) any changes in interest previously declared; or</i> <i>(iii) any financial interest (direct or indirect) on any item on the agenda.</i> <i>Any declaration of interest should be brought to the attention of the Chair in advance of the meeting or as soon as they become apparent in the meeting. For any interest declared the minutes of the meeting must record:</i> <i>(i) the name of the person declaring the interest;</i> <i>(ii) the agenda item number to which the interest relate;</i> <i>(iii) the nature of the interest;</i>	Chair	For Completion: https://portal.yhcs.org.uk/group/hull-ccg/declarations-of-interest-form		09:23 am

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	<i>(iv) be declared under this section and at the top of the agenda item which it relates too;</i>				
6.	GOVERNANCE				
	There are no items of Governance to discuss				
7.	STRATEGY				
7.1	Strategic Commissioning Plan for Primary Care: Hull Primary Care “Blueprint”	Head of Primary Care (PD)	Nothing to report		
7.2	GMS, PMS and APMS Contracts: Primary Care Update	Assistant Primary Care Contracts Manager (HP) Commissioning Lead Primary Care (ND)	To approve	Enclosed	09.24 am
7.3	Physician Associate Roles in Primary Care	Head of Primary Care (PD)	To note	Enclosed	09.40 am
8.	SYSTEM DEVELOPMENT & IMPLEMENTATION				
8.1	Newly Designed Enhanced Services (Standing Item)	NHS England Representative	Nothing to report		
8.2	Extended Primary Care Medical Services – Current and Newly Designed (Standing Item)	Commissioning Lead Primary Care (ND)	Nothing to report		
8.3	Risk Report (Standing Item)	Head of Primary Care (PD)	To discuss	Enclosed	09.45 am
8.4	Integrated Delivery Framework and Local Quality Premium	Head of Primary Care (PD) / Head of Performance & Programme Delivery (EB)	To follow		
8.5	GP International Recruitment	Commissioning Lead Primary Care (ND)	To note	Enclosed	09.50 am
8.6	Safeguarding Adults policy for Primary Care March 2018	Designated Professional for Safeguarding Adults (DB)	To note	Enclosed	09.55 am
8.6i	Primary Care Safeguarding Adults Policy January 2018	Designated Professional for Safeguarding Adults (DB)	To note	Enclosed	10.00 am
8.7	Primary Care Communications and Engagement Update	Senior Communications Officer (RI)	To note	Enclosed	10.05 am
9.	FOR INFORMATION				
9.1	Primary Care Quality & Performance Sub Committee Minutes – 30.01.18	Director of Quality & Clinical Governance/ Executive Lead Nurse	For information	Enclosed	10.10 am
9.2	Chair’s Update Report	Chair	For information	Enclosed	10.12am

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9.3	Minutes of Meetings <ul style="list-style-type: none"> • LMC Liaison • Primary Care Nursing Steering Group • Practice Managers Meeting 	Chair	For information	On request	10.13am
10.	Any Other Business	Chair	To discuss	Verbal	10.14 am
11.	Date and Time of Next Meeting: The next meeting will be held on Friday 29 June at 9.15am – 11.00am, The Boardroom, Wilberforce Court, Alfred Gelder Street, Hull, HU1 1UY				

COMMISSIONING CYCLE AND POTENTIAL CONFLICTS OF INTEREST

Notes:

- The illustrations given below should not be considered to be prescriptive in every instance.
- These are guidelines and both the materiality of the conflict and the significance of the issue should be considered carefully by the Chair in deciding on how to manage the conflict.
- It is the responsibility of the Chair to review the agenda and operate caution in terms of deferment or referral if necessary.
- Chairs to also consider potential conflicts of interest arising from verbal reports.
- Links should be considered to strategy direction e.g. is the introduction of a Local Enhanced Service in line with the strategy?
- If significant/complete conflict of interest at a locality level the matter could be referred to the CCG for decision.

Interest	Financial (Self, partner or close associate)	Personal (Self)	Personal (Partner or close associate)	Competing Loyalties
Needs assessment	Fully participate	Fully participate	Fully participate	Fully participate
Decide priorities	Discuss but cannot vote	Discuss and vote	Discuss and vote	Discuss and vote
Review commissioning proposals	Remain but cannot speak or vote	Remain but cannot speak or vote	Remain but cannot speak or vote	Discuss and vote
Design services (ensure a fully inclusive process)	Discuss and vote	Discuss and vote	Discuss and vote	Discuss and vote
Review prioritised business cases	Leave the room	Remain but cannot speak or vote (unless interest is deemed not prejudicial)	Remain but cannot speak or vote (unless interest is deemed not prejudicial)	Discuss and vote
Procurement/contracting	Leave the room	Remain but cannot speak or vote (unless interest is deemed not prejudicial)	Remain but cannot speak or vote (unless interest is deemed not prejudicial)	Discuss and vote
Performance Management	Remain but cannot speak or vote (unless significant and then leave the room)	Remain but cannot speak or vote (unless significant and then leave the room)	Remain but cannot speak or vote (unless significant and then leave the room)	Discuss and vote
Review Health Outcomes	Fully participate	Fully participate	Fully participate	Fully participate