



PRIMARY CARE COMMISSIONING COMMITTEE

FRIDAY 13 DECEMBER AT 9.30 AM – 11.00 AM THE BOARDROOM, WILBERFORCE COURT, ALFRED GELDER STREET, HULL, HU1 1UY

Item	Item	Led by	Action	Enclosed/	Time
no			required	Verbal	
1.	Apologies for Absence	Chair	To Note	Verbal	9.30 am
2.	Minutes of the Previous Meeting Held on 25 October & 22 November 2019 To approve as a true and correct record and to authorise the Chair to sign then as such	Chair	To Approve	Enclosed	9.35 am
3.	Matters Arising / Action List from the Minutes 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	Chair	To Discuss	Enclosed	9.40 am
4.	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. Any approved items of Any Other Business to be discussed at item 10	Chair	To Note	Verbal	9.45 am
5.	In relation to any item on the agenda of the meeting members are reminded of the need to declare: (i) any interests which are relevant or material to the CCG; (ii) any changes in interest previously declared; or (iii) any financial interest (direct or indirect) on any item on the agenda. 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) the name of the person declaring the interest; (ii) the agenda item number to which	Chair	Please email: Donna Robin: declarations of including a nition applicable	Please email: Donna Robinson with your declarations of interest including a nil return where applicable donna.robinson6@nhs.net	

Quorum: A minimum of two lay members inclusive of the Chair (or Vice Chair in the Chair's absence)
Representation from NHS England

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	(iii) the nature of the interest; (iv) be declared under this section and at the top of the agenda item which it relates too;				
6.	GOVERNANCE				
6.1			No report ass	igned to this ite	em
7.	STRATEGY				
7.1	Strategic Commissioning Plan for Primary Care and Primary Care Update: Contract Variations, Practice Mergers, List Closures (Standing Item)	Assistant Primary Care Contracts Manager (HP) Strategic Lead – Primary Care (PD)	To Approve	Enclosed	9.50 am
8.	SYSTEM DEVELOPMENT & IMPLEMENTATION				
8.1	Newly Designed Enhanced Services (Standing Item)	Strategic Lead – Primary Care (PD)	No report assigned to this item		
8.2	Extended Primary Care Medical Services – Current and Newly Designed (Standing Item)	Head of Commissioning – Integrated Delivery (ND)	To Approve	Enclosed (Item 8.2 vii to follow)	10.00 am
8.3	Local Quality Scheme for Primary Care Networks - COPD	Head of Commissioning – Integrated Delivery (ND)		To Follow	10.30 am
8.4	Risk Report (Standing Item)	Strategic Lead - Primary Care (PD)	To Discuss	Enclosed	10.40 am
9.	FOR INFORMATION				
9.1	Primary Care Quality & Performance Sub Committee 15 May 2019	Deputy Director of Quality & Clinical Governance / Lead Nurse (DL)	To Note	Enclosed	10.50 am
9.2	 Minutes of Meetings LMC Liaison Primary Care Nursing Steering Group Practice Managers Meeting 	Chair	On Request	Verbal	10.55 am
9.3	My City, My Health, My Care Winter 2020 Newsletter	Chair	For Information	To Table	10.56 am
10.	Any Other Business	Chair	To Note	Verbal	10.58 am
11.	Date and Time of Next Meeting: The next meeting will be held on Friday Wilberforce Court, Alfred Gelder Street, I		at 12.15 pm – 2	2.00 pm, The I	Boardroom,

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