

## Item: 2

### PRIMARY CARE COMMISSIONING COMMITTEE MINUTES OF THE MEETING HELD ON FRIDAY 26 OCTOBER 2018, THE BOARDROOM, WILBERFORCE COURT, HULL, HU1 1UY

#### PART 1

#### PRESENT:

##### Voting Members:

J Stamp, NHS Hull CCG (Lay Representative) Chair  
E Daley, NHS Hull (Director of Integrated Commissioning)  
K Marshall, NHS Hull CCG (Lay Representative)  
Dr D Roper, NHS Hull CCG (Chair of NHS Hull CCG)  
E Sayner, NHS Hull CCG (Chief Finance Officer)  
S Smyth, NHS Hull CCG (Director of Quality and Clinical Governance/Executive Nurse)  
J Weldon, Hull CC (Director of Public Health and Adult Social Care)

##### Non-Voting Attendees:

G Baines, Healthwatch (Delivery Manager)  
P Davis, NHS Hull CCG (Strategic Lead - Primary Care)  
G Day, NHS England (Head of Co-Commissioning)  
N Dunlop, NHS Hull CCG (Commissioning Lead for Primary Care)  
S Lee, NHS Hull CCG (Associate Director of Communications and Engagement)  
Cllr G Lunn, (Health and Wellbeing Board Representative/Elected Member)  
Dr J Moulton, NHS Hull CCG (GP Member)  
M Napier, NHS Hull CCG (Associate Director of Corporate Affairs)  
Dr A Oehring, NHS Hull CCG (GP Member)  
H Patterson, NHS England, (Assistant Primary Care Contracts Manager)  
Dr R Raghunath, NHS Hull CCG (GP Member)  
Dr V Rawcliffe, NHS Hull CCG (GP Member)  
M Whitaker, NHS Hull CCG (Practice Manager Representative)

#### IN ATTENDANCE:

P Heaford, NHS Hull CCG (Note Taker)

#### WELCOME AND INTRODUCTIONS

The Chair welcomed everyone to the meeting.

#### 1. APOLOGIES FOR ABSENCE

##### Voting Members:

P Jackson, NHS Hull CCG (Lay Representative)  
E Latimer, NHS Hull CCG (Chief Officer)

##### Non-Voting Members:

A Booker, Local Medical Committee  
Dr S Richardson, NHS Hull CCG (GP Member)

## 2. MINUTES OF THE MEETING HELD ON 24 AUGUST 2018

The minutes of the meeting held on 24 August 2018 were approved, subject to the following minor amendments:

Item 7.1, paragraph 6, “practice” to be removed from the beginning of final line on page 3.

Item 7.2, paragraph 2, line 4 to be amended to read ....and “International GP” Recruitment Programme

Item 9.2, to be amended to read ... the contents of the “Chair’s” update report.

### Resolved

(a)	The minutes of the meeting held on 24 August 2018 were approved as a true and accurate record of the meeting, subject to the minor amendments above, and would be formally signed by the Chair.
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## 3. MATTERS ARISING FROM THE MEETING

The Action List from the meeting held on 24 August 2018 was submitted for information and it was noted that all actions had now been closed.

### Resolved

(a)	Members of the Primary Care Commissioning Committee noted the completed Action List from the meeting held on 24 August 2018
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## 4. NOTIFICATION OF ANY OTHER BUSINESS

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.

There were no items of any other business to be discussed.

## 5. DECLARATIONS OF INTEREST

In relation to any item on the agenda of the meeting, members were 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 number item number to which the interest relates;
- (iii) the nature of the interest and the Action taken
- (iv) be declared under this section and at the top of the agenda item which it relates to;

Name	Agenda No	Nature of Interest and Action Taken
James Moulton	8.1	Financial Interest - GP Partner Faith House (Modality - Hull Division) Left the room for this item

<b>Name</b>	<b>Agenda No</b>	<b>Nature of Interest and Action Taken</b>
Vince Rawcliffe	8.1	Financial Interest - GP Partner New Hall Surgery (Modality - Hull Division) Left the room for this item
Amy Oehring	8.1	Financial Interest - GP Partner Sutton Manor Left the room for this item
Raghu Raghunath	8.1	Financial Interest – GP Partner James Alexander Left the room for this item
Mark Whitaker	8.1	Personal Interest – Practice Manager, Dr Nayar – Newland Health Centre Left the room for this item

## **Resolved**

(a)	The above declarations of interest were noted.
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## **6. GOVERNANCE**

There were no items of Governance to discuss.

## **7. STRATEGY**

### **7.1 STRATEGIC COMMISSIONING PLAN FOR PRIMARY CARE AND PRIMARY CARE UPDATE**

The Assistant Primary Care Contracts Manager, NHS England (NHSE) presented a report to update the Committee on the Strategic Commissioning Plan for Primary Care and present primary medical care matters including contract issues within Hull.

Members were requested to consider the following two contract change applications which had been submitted for approval:

#### **Wolseley Medical Centre - redefinition of practice boundary application**

The practice had applied to redefine its boundary, this was due to pressures in workload and was linked to the application below to close the practice list. The proposed boundary would remove east Hull and Hessle Road and would affect new registrations only.

It was reported that there had been no comments received from any other practices in relation to this proposed boundary change and members of the Primary Care Commissioning Committee approved the redefinition of the practice boundary application for Wolseley Medical Centre.

#### **Wolseley Medical Centre - list closure application**

The practice had applied to temporarily close its practice list for 6 months, which would be subject to review in 3 months.

The reasons for this application were largely due to recruitment issues and a decreasing workforce. The practice was working with the grouping to access support and was in the process of consulting with patients. The Chief Finance Officer stated that it was important to remember that groupings were to encourage sustainability and resilience not to impose a way of working.

In order to manage the workload, the practice had also applied to redefine its boundary to remove the east of the River Hull for new patient registrations.

The Delivery Manager (Healthwatch) questioned whether, in relation to Loran Residential Home, new patients would be taken on. Further clarity would need to be sought in this matter.

Members considered the list closure application and agreed that there was not enough information at the current time to make an informed decision and that more work would be needed with the practice to develop a supportive approach and an action plan to turn things around.

It was important for the CCG to ensure that there was a consistent approach and this would be looked at again at the next meeting.

## **NHS ENGLAND & CCG UPDATES**

### **International Recruitment**

The Head of Commissioning – Integrated Delivery reported that, as part of the local International GP Recruitment programme, Hull CCG had held a “taster weekend” from Thursday 27 September 2018 until Sunday 30 September 2018. Four Spanish candidates had attended the weekend giving them the opportunity to:

- receive further information in relation to the Induction & Refresher (I & R) Scheme;
- spend time in a local GP practice observing clinics and gain an understanding of how primary care fitted in with the wider organisation of the NHS;
- visit the local area, and
- meet representatives from the CCG, NHS England and Health Education England

It was reported that initial feedback from both the candidates and local GP practices had been very positive and a full evaluation report would be presented at the International GP Recruitment Programme Board to be held on 22 November 2018.

Of the four candidates, two were already qualified as Family Medicine Doctors and could now progress with specialist language support to help them meet the General Medical Council (GMC) requirements for competency in English, prior to entering the I & R scheme and relocation to the UK. The remaining two would qualify as Family Medicine Doctors in May 2019 and could then be supported with their language assessments. A further taster weekend in Hull had been planned for April 2019.

### **Extended Access Service**

Members were advised that, on the 1 October 2018, the new Extended Access Service, Access+, had been launched in Hull. This was in response to the requirements detailed within the refreshed NHS Operational Planning and Contracting Guidance 2017 – 2019, to provide extended access to GP services, including evenings and weekends, for 100% of the population by 1 October 2018.

Following a short and challenging mobilisation period, the service provider had met the requirement to deliver 100% of the capacity (149.5hrs per week) to the full patient population. Whilst the service was not yet required to submit utilisation reports until after the first Quarter, as part of mobilisation the following information had been provided on the first two weeks of the service delivery:

- Week one utilisation of appointments - 43%
- Week two utilisation of appointments - 46%
- 24 out of the 39 GP practices across the city had actively used the service and booked appointments for their patients

- Healthcare professionals available within the service were: GPs, Advanced Nurse Practitioners (ANPs), Practice Nurses, Physiotherapists, Clinical Pharmacists and Health Care Assistants

It was reported that some elements were still being worked through and a list of competencies was being developed.

The Provider continued to work through their mobilisation plan which included a communications and engagement plan for local GP Practices and the public. The national communication material re Extended Access had been delayed until the end of November.

Members of the Primary Care Commissioning Committee expressed their thanks to all those involved, in recognition of the huge amount of work carried out to procure and mobilise the service.

The Chief Finance Officer stated that it would be important to capture learning, along with management and clinical leadership shown throughout the programme from an internal perspective.

### **Delegation agreement**

It was reported that the Variation Agreement provided by NHS England to update the Delegation Agreement between the CCG and NHS England to reflect the General Data Protection Regulation (GDPR) had been formally signed by the CCG Chief Officer and the Chief Financial Officer of NHS England. It was noted that this would not materially change any of the arrangements for delegated commissioning.

### **Resolved**

(a)	Members of the Primary Care Commissioning Committee noted the updates provided within the report;
(b)	Members of the Primary Care Commissioning Committee approved the redefined practice boundary for Wolseley Medical Centre;
(c)	Members of the Primary Care Commissioning Committee deferred making a decision in relation to the application for a list closure for Wolseley Medical Centre, pending the provision of more information, along with an action plan. The application would be considered again at the next meeting.
(d)	Further clarity would be sought in relation to whether new patients at Loran Care Home would be taken on if the list closure was to be approved.

## **8. SYSTEM DEVELOPMENT & IMPLEMENTATION**

### **8.1 NEWLY DESIGNED ENHANCED SERVICES – MINOR SURGERY**

Dr James Moulton, Dr Vince Rawcliffe, Dr Amy Oehring, Dr Raghu Raghunath and Mark Whitaker declared a financial interest in the following item and left the room.

The Strategic Lead - Primary Care presented a report which provided an update on minor surgery services and sought approval for contracting arrangements from April 2019.

It was noted that, the August meeting of the Primary Care Commissioning Committee had been informed of an intention to commission minor surgery at scale through the

GP groupings from April 2019 and, as a result, the current contracts with practices for the provision of minor surgery services had been extended to March 2019 in order for the preparatory work for this to be undertaken. Work had been carried out with the existing providers to review and scope the procedures to be included within the minor surgery service (Appendix 1 of the paper referred)

Karen Marshall expressed some concern in relation to clinical triage via the Individual Funding Review (IFR) process and the Associate Director of Corporate Affairs provided assurance that there was a distinction between prior approval and IFR. It was agreed that further discussion would need to take place outside of this meeting to review the minor surgery and dermatology service scope, with Dr Roper providing clinical input, and also wider discussion around communication would be needed.

Members of the Primary Care Commissioning Committee approved the proposal to commission minor surgery services at scale from the 5 practice groupings from April 2019.

**Resolved**

(a)	Members of the Primary Care Commissioning Committee noted the content of the report;
(b)	Members of the Primary Care Commissioning Committee approved the proposal to commission minor surgery services at scale from the 5 practice groupings from April 2019, and
(c)	Further discussion would need to take place to review the scope of the minor surgery and dermatology service.

Dr James Moulton, Dr Vince Rawcliffe, Dr Amy Oehring, Dr Raghu Raghunath and Mark Whitaker re-entered the room.

**8.2 EXTENDED PRIMARY CARE MEDICAL SERVICES – CURRENT AND NEWLY DESIGNED**

There were no items of newly designed enhanced service to discuss.

**8.3 RISK REPORT**

The Strategic Lead - Primary Care presented the risk report with regard to the primary care related risks on the corporate risk register.

It was noted that there were currently 26 risks on the CCG Risk Register, 5 of which were related to primary care.

Updates to the risks provided were noted and further discussion took place in relation to the following two specific risks:

**Risk 915** – it was further reported that the Overview and Scrutiny Commission now formed part of the formal engagement work.

The Chair stated that an assurance framework should be developed for this committee to offer advice and guidance.

**Risk 902** – Karen Marshall queried whether the rating for this risk was correct. The Director of Quality and Clinical Governance/Executive Nurse advised that a watching

brief was being kept on the diminishing workforce and evidence and intelligence would need to be incorporated.

The Head of Co-Commissioning for NHS England advised that they were currently in the process of rolling out the Apex Insights software tool which would be available to all practices and would assist in understanding the current workforce position and demand for services.

The Strategic Lead - Primary Care stated that a more detailed review of the risk and rating would be carried out.

### **Resolved**

(a)	Members of the Primary Care Commissioning Committee noted the updates provided in the Risk Register, and
(b)	A more detailed review of the Risk 902 and its rating would be carried out.

## **9. FOR INFORMATION**

### **9.1 PRIMARY CARE QUALITY & PERFORMANCE SUB COMMITTEE**

The Minutes of the meeting held on 18 July 2018 were submitted for information and taken as read.

### **9.2 CHAIR'S UPDATE REPORT – 24 AUGUST 2018**

Committee Members noted the contents of the Chair's Update report.

### **9.3 MINUTES OF MEETINGS**

Minutes of the following meetings could be obtained if required:

- **LMC Liaison**
- **Primary Care Nursing Steering Group**
- **Practice Managers Meeting**

## **10. ANY OTHER BUSINESS**

There were no items of Any other Business.

## **11. DATE AND TIME OF NEXT MEETING**

The next meeting would be held on **Friday 14 December 2018** at 9.15am – 11.00am, The Board Room, Wilberforce Court, Alfred Gelder Street, Hull, HU1 1UY

Signed: \_\_\_\_\_  
(Chair of the Primary Care Commissioning Committee)

Date: \_\_\_\_\_

## **Abbreviations**

APMS	Alternative Provider Medical Services
CHCP	City Health Care Partnership
CoM	Council of Members
ECP	Emergency Care Practitioner
GPRP	GP Resilience Programme
HEE	Health Education England
NHSE	NHS England
P&CC	Planning & Commissioning Committee
PCCC	Primary Care Commissioning Committee
PCJCC	Primary Care Joint Commissioning Committee
PCMSPF	Primary Care Medical Services Provider Forum
PCQPSC	Primary Care Quality & Performance Sub-Committee (PCQPSC).
PPG	Patient Participation Group
Q&PC	Quality & Performance Committee
STP	Sustainability and Transformation Partnerships