

PLANNING AND COMMISSIONING COMMITTEE

MINUTES OF THE MEETING HELD ON FRIDAY 5 JUNE 2020, 9.30 AM

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Present

V Rawcliffe, NHS Hull CCG (Clinical Member) – (Chair)
A Oehring, NHS Hull CCG, (Clinical Member)
B Ali, NHS Hull CCG, (Clinical Member)
M Balouch, Hull CCG, (Clinical Member)
D Lowe, NHS Hull CCG, (Dep Director of Quality and Clinical Governance / Lead Nurse)
I Goode, NHS Hull CCG, (Lay Member) (Chair)
J Dodson, NHS Hull CCG, (Director of Integrated Commissioning)
K Ellis, NHS Hull CCG, (Deputy Director of Commissioning)
M Whitaker, NHS Hull CCG, (Practice Manager Representative)
P Davis, NHS Hull CCG, (Strategic Lead Primary Care)
S Lee, NHS Hull CCG, (Associate Director, Communications and Engagement)
T Fielding, Hull CC, (Assistant Director Health and Wellbeing/Deputy DPH)
D Storr, NHS Hull CCG (Deputy Chief Finance Officer)

IN ATTENDANCE:

D Robinson, NHS Hull CCG, (Minute Taker)
K McCorry, North of England Commissioning Support, (Medicines Optimisation Pharmacist)
S Milner, NHS Hull CCG (Senior Finance Manager)
J Mitchell, Associate Director of IT for the CCG's across the Humber

WELCOME & INTRODUCTIONS

The Chair welcomed everyone to the meeting.

1. APOLOGIES FOR ABSENCE

M Bradbury, NHS Hull CCG, (Strategic Lead Mental Health and Learning Disabilities)
B Dawson, NHS Hull CCG, (Strategic Lead Children, Young People & Maternity)

2. MINUTES OF PREVIOUS MEETING HELD ON 1 MAY 2020

The minutes from 1 May 2020 were submitted for approval and taken as a true and accurate record.

Resolved

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| (a) | The minutes of the meetings held on 1 May 2020 were taken as a true and accurate record and signed by the Chair. |
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3. MATTERS ARISING FROM THE MEETING

06.09.19 – 6.2 - Centralised Stoma and Continence Prescribing Service - The Medicines Optimisation Pharmacist advised that progressing the prescribing service had been placed on hold due to the COVID – 19 pandemic; a report was being prepared for late June, it was therefore agree to bring a paper around the Centralised Stoma and Continence Prescribing Service to the September Committee.

06.12.19 - Overview of the 2019 Hull Health And Wellbeing Survey – Committee Members agreed that the action to undertake a workshop for Hull CCG and Hull CC had been superseded.

03.01.20 – 6.2c – NICE Medicines Update – Committee Members were advised that HUTH had no plans to roll out point-of-care creatinine testing due to lack of capacity. It was agreed to remove from the action list.

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.

Two reports had been requested to be considered; Adult Social Care Services During Covid 19 Crisis and Adult Social Care Infection Control Grant which would be taken at agenda item 10.1.

Resolved

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| (a) | The Planning and Commissioning Committee noted that there were two additional item of Any Other Business to be discussed. |
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5. GOVERNANCE

5.1 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 to which the interest relates;
- (iii) the nature of the interest which the Action taken
- (iv) be declared under this section which at the top of the agenda item which it relates too;

The following declarations of interest declared.

| Name | Agenda No | Nature of Interest and Action Taken |
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Resolved

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| (a) | The Planning and Commissioning Committee noted there was one declaration made. |
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5.2 GIFTS AND HOSPITALITY

There had been no declarations of Gifts or Hospitality made since the Planning and Commissioning Meeting in May 2020.

Resolved

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| (a) | Members of the Planning and Commissioning Committee noted there were no gifts and hospitality declared. |
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5.3 RISK REGISTER

The Director of Integrated Commissioning presented a report to brief Committee Members of the risks aligned with planning and commissioning that are included on the CCG's corporate risk register.

Committee Members were advised discussions had taken place around the content and level of update required for both the Corporate Risk Register and Board Assurance Framework.

Resolved

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| (a) | Members of the Planning and Commissioning Committee noted the report. |
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5.4 CHARIS ANNUAL REPORT

The Chair presented the annual report on the activities of the Planning and Commissioning Committee during 2019/20.

It was stated that the annual report set out how the Planning and Commissioning Committee meet and deliver the terms of reference of the Committee and would be subsequently received by the CCG Board.

Members acknowledged they had read and understood the report.

Members were asked if they would like to add anything to the report, members expressed their contentment with the contents of the report.

Resolved

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| (a) | Members of the Planning and Commissioning Committee endorsed the Chair's Annual Report. |
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5.5 TERMS OF REFERENCE

The Deputy Director of Commissioning presented the draft amendments to the Planning and Commissioning Committee Terms of Reference (ToR) for review and agreement.

Committee Members were advised that the ToR had been slightly amended and incorporated the relevant links with committees to support the oversight and delivery of joint/aligned commissioning outcomes/work programmes.

Resolved

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| (a) | Members of the Planning and Commissioning Committee approved proposed amendments as identified within the amended Terms of Reference. |
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6. STRATEGY

6.1 PUBLIC HEALTH BY EXCEPTION

The Assistant Director Health and Wellbeing/Deputy DPH advised Committee Members that the services which had been stood down or scaled back in accordance with national guidance in relation to managing the COVID 19 outbreak are now reviewed with providers to ascertain what was required moving forward.

A comprehensive briefing around the Test, Track and Trace system, a public health responsibility, was given, the following points were highlighted;

- There are 3 tiers of the test and trace service:
 - Tier 1 - PHE & LA Support for complex cases.
 - Tier 2 - Contact made to interview individuals who had a positive test result to identify their close contacts (undertaken by clinicians).
 - Tier 3 - Contact made to close contacts of individuals who had received a positive result (undertaken by trained call handlers).

The data collated would be used to identify outbreaks or clusters of cases within the city.

Resolved

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| (a) | Members of the Planning and Commissioning Committee noted the update provided. |
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6.2 MEDICINES MANAGEMENT

6.2a CLINICAL COMMISSIONING DRUG POLICIES (STANDING ITEM)

There was no report assigned to this item to discuss.

6.2b HULL & EAST RIDING PRESCRIBING COMMITTEE (HERPC) SUMMARY OF NEW DRUGS OR CHANGES IN USAGE APPLICATIONS AND TRAFFIC LIGHT STATUS

The Medicines Optimisation Pharmacist provided an update on recent new drugs or change in usage applications and traffic light status.

It was stated that the following new Prescribing Guidelines had been provided and approved by Hull and East Riding Prescribing Committee.

Brolucizumab – Added to formulary – Red (CCG Commissioned)

Dinoprostone – Extension of use to include off license use in children with ductus arteriosus in line with BNFC – Red (CCG Commissioned but in tariff)

MHRA Drug Safety Update (DSU) – Esmya Licence suspended – Remove from formulary.

Resolved

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| (a) | Members of the Planning and Commissioning Committee noted the report. |
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6.2b2 PRESCRIBING GUIDANCE

The Medicines Optimisation Pharmacist provided a report for the Planning and Commissioning Committee to consider and approve a Prescribing Guidance from the Hull & East Riding Prescribing Committee.

The guidance had also been included in a Hull University Teaching Hospital NHS Trust communication statement for GPs.

Committee Members were advised that the Vitamin B12 and bariatric surgery guidance had been and been agreed at HERPC on 20 May 2020 for a 6 month period.

It was stated that as a result of COVID 19 pandemic pressures on services and the requirement of vulnerable groups to self-isolate; the Bariatric team are aware that some patients are unable to access timely vitamin B12 injections and have worked to issue practical guidance on the use of oral vitamin B12 in the short term. This is guidance which has been originally issued by the British Obesity and Metabolic Surgery Society (BOMSS).

Resolved

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| (a) | Members of the Planning and Commissioning Committee approved the Vitamin B12 and bariatric surgery guidance for the short term. |
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6.2c NICE MEDICINES UPDATE (STANDING ITEM)

The Medicines Optimisation Pharmacist provided an update of changes or additions to NICE publications, and their implications for CCG Commissioners.

The NHS Hull Clinical Commissioning Group Summary of NICE Guidance form had been altered to include a RAG rating which indicates who was responsible for the action.

The Committee Members were asked to note the February 2020 NICE Guidance summary, in particular:

TA622 - Sotagliflozin with insulin for treating type 1 diabetes - NICE state this guidance is applicable to Primary care, Commissioner: CCG – the guidance was discussed at HUTH Drugs and Therapeutics Committee and had been added to formulary as per TA.

TA623 - Patiromer for treating hyperkalaemia - NICE state this guidance is applicable to Secondary care – acute, Commissioner: CCG, NICE state to assess costs locally – the guidance was discussed at HUTH Drugs and Therapeutics Committee – Added to formulary as per TA.

QS 191- Cerebral palsy in adults - NICE state this guidance is applicable to NHS hospital trusts, community care providers and primary care, Commissioner: CCG - Implementation to be reviewed via Quality Meetings with HUTHT.

QS 192 - Intrapartum care: existing medical conditions and obstetric complications - NICE state this guidance is applicable to Secondary care – acute Commissioner: CCG, NICE state this will be cost neutral, Implementation to be reviewed via Quality Meetings with HUTHT.

NG152 - Leg ulcer infection: antimicrobial prescribing, NICE state this guidance is applicable to Primary care, Community health care and Secondary care - acute Commissioner: NHSE & CCG, Primary care antibacterial Guideline will be reviewed with microbiology input.

NG153 - Impetigo: antimicrobial prescribing, NICE state this guidance is applicable to Primary care, Commissioner: CCG, Primary care antibacterial Guideline will be reviewed with microbiology input, Primary care antibacterial Guideline will be reviewed with microbiology input.

NG154 - Neonatal parenteral nutrition, NICE state this guidance is applicable to Secondary care - acute and Tertiary care, Commissioner: NHSE & CCG, Implementation to be reviewed via Quality Meetings with HUTHT.

It was stated that due to the COVID 19 pandemic HUTHT are undertaking quality meetings by exception and outcomes would be added to the Quality and Performance Committee to ensure there was no delay in guidance being received.

Resolved

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| (a) | Members of the Planning and Commissioning Committee noted the report. |
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6.2d Primary Care Rebate Scheme

The Strategic Lead for Primary Care provided a report to update the Committee on the Primary Care Rebate Scheme policy and process for approval and subsequent submission to the Integrated Audit and Governance Committee (IAGC).

Committee Members were advised the CCG Integrated Audit & Governance Committee in January 2020 identified a requirement to refresh the Primary Care Rebate Scheme Policy and process.

The Pharmaceutical Price Regulation Scheme (PPRS) is the mechanism by which the Department of Health ensures that the NHS has access to branded medicines at a reasonable price.

It was stated that an Equality Impact Assessment of the policy has been approved. The following areas within the policy had been amended:

- The roles and responsibilities of committees which have a part in the decision making for rebates has been reviewed and updated
- Provision of an annual report on rebate schemes has been included
- Provision of a summary of the clinical discussion at Planning and Commissioning Committee (PCC) will be provided to IAGC

A discussion occurred around the process for extending rebate schemes where they are offered on identical terms and conditions. It was agreed and would be proposed

to the IAGC Chair that if extensions were offered on the same terms an extension that they could be agreed without coming back to the PCC to be re-approved.

It was noted that the Deputy Chief Finance Officer could not sign off any contracts as indicated in section 14 of policy but would ensure contracts were signed as required.

Resolved

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| (a) | Members of the Planning and Commissioning Committee approved the refreshed Primary Care Rebate Scheme policy and process with the caveat that the Chair of IAGC approves the proposal around the process for extending rebate schemes. |
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6.3 INTEGRATED COMMISSIONING

6.3a ICOB/CIC GENERAL UPDATE/NOTES

The Director of Integrated Commissioning advised Committee Members the next Committees in Common would be held on the 24th June 2020 and would incorporate Adult Social Care Infection Control Grant, Home Care Contract and Re-Commissioning of Services for Children and Young People Aged 0 – 19.

Resolved

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| (a) | Members of the Planning and Commissioning Committee noted the update. |
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6.4 INTEGRATED DELIVERY

6.4A PROJECT EXCEPTIONS

Unplanned Care

Talk before you Walk material is being cascaded to patients advising them to call 111 to be triaged, they will then be advised of the correct service to attend,

Children, Young People and Maternity

Work is being completed on the SEND Accelerated Progress Plan.

Cancer

Weekly meetings have commenced; to review the impacts of reduction in referrals, late diagnosis and the length of wait for diagnostics.

Planned Care

An elective care hub for Humber, Coast and Vale Integrated Care System (ICS) is in the process of being developed. Within the hub the three acute trusts would work together for the whole population of the ICS. At present none of the trusts had excess capacity, additional capacity is being sought within the independent sector.

There are in excess of over 300 cases over the 52 week target for Hull and East Riding.

Mental Health and Learning Disabilities

Dr Balouch advised that there remains a long wait when calling the crisis line, it was suggested that clinicians could have a priority line as when email are sent there is a slow response time of 2 – 3 hours which is not appropriate if a patient is in practice and requires assistance.

Primary Care

The request for GP appointments has increased. Discussion are taking place Humber FT who had offered to support primary care networks with mental health support.

All care homes now have a named clinical lead, work has commenced aligning care homes to Primary Care Networks. A Standard Operating Procedure is being prepared for primary care to support care homes.

Technology is in place for the 82 care homes in the city to hold appointments remotely.

The work with care homes should mean over time, with new residents moving into residential/nursing care that residents within any given care home be aligned to certain practices or PCNs (not withstanding patient choice). This should make for better communications between a practice/PCN and their aligned care homes. The hope is for more proactive care.

Medicine Management

The medicines management work plan had been placed on hold due to the COVID 19 pandemic. A summary of the work plan has been completed and will be presented to the Programme Delivery Board.

Resolved

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| (a) | Members of the Planning and Commissioning Committee noted exceptions. |
| (b) | The Deputy Director of Commissioning to ascertain if there is a direct crisis line for Clinicians to contact when accompanied by patients. |

7. SYSTEM DEVELOPMENT AND IMPLEMENTATION

7.1 PROCUREMENT UPDATE (STANDING ITEM)

There was no report was no report assigned to this item to discuss.

8. STANDING ITEMS

8.1 REFERRALS TO AND FROM OTHER COMMITTEES

There were no items to refer to another Committee.

9. REPORTS FOR INFORMATION ONLY

9.1 QUALITY & PERFORMANCE MINUTES

The minutes of the Quality and Performance Committee on 26 February 2020 were circulated for information.

Resolved

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| (a) | Members of the Planning and Commissioning Committee noted there were no minutes to circulate. |
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10. GENERAL

10.1 ANY OTHER BUSINESS

The Director of Integrated Commissioning presented reports on; Adult Social Care Infection Control Grant and Adult Social Care Services During COVID 19 crisis; for endorsement prior to being submitted to the Committees in Common on 22 June 2020 for approval.

Adult Social Care Infection Grant

It was stated that funding allocated to the local council would be split into two portions which would be allocated as follows 75% of the money was mandated for care homes, the care homes had to commit to using the capacity tracker and 25% of the money could be used at the discretion of the council, it was proposed to use this discretionary portion to support Domicillary Care.

Adult Social Care Services During COVID 19 Crisis

It was noted that the council are presently faced with responding to unprecedented pressures in Adult Social Care and are looking at pragmatic solutions to support delivery. Following representations from the Homecare sector it was considered appropriate to review the contractual arrangements that the Council operates to provide greater flexibility of operation and to help the suppliers to manage the financial pressures that are falling upon them.

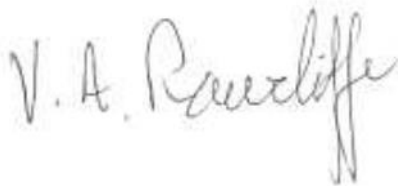
Member were advised to contact Dr Amy Oehring and Joy Dodson if they had any further questions regarding the Adult Social Care Infection Control Grant and Adult Social Care Services During COVID 19 crisis reports prior to the Committees in Common meeting.

Resolved

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| (a) | Members of the Planning and Commissioning Committee endorsed Adult Social Care Infection Control Grant and Adult Social Care Services During COVID 19 crisis reports. |
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10.2 DATE AND TIME OF NEXT MEETING

The next meeting would be held on **3rd July 2020, 9.30 Via GoToMeetings.**



Signed:

(Chair of the Planning and Commissioning Committee)

Date: 3rd July 2020

Abbreviations

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| A&E | Accident and Emergency |
| ADHD | Attention Deficit Hyperactivity Disorder |
| APMS | Alternative Provider Medical Services |
| ASC | Adult Social Care |
| BCF | Better Care Fund |
| BHC | Bransholme Health Centre |
| CAB | Citizens Advice Bureau |
| C&YP | Children & Young People |
| CHC/CC | Continuing Healthcare and Children's/Continuing Care Provider |
| CHCP | City Health Care Partnerships |
| COM | Council of Members |
| CQC | Care Quality Commission |
| DOIs | Declarations of Interests |
| EHaSH | Early Help and Safeguarding Hub |
| EPaCCS | Electronic Palliative Care Co-ordination System |
| EQIA | Equality Impact Assessment |
| ERoY | East Riding of Yorkshire |
| HCC | Hull City Council |
| HCP | Health Care Professional |
| HCV | Humber Coast and Vale Cancer Alliance |
| HERPC | Hull and East Riding Prescribing Committee |
| HSCN | Health and Social Care Network |
| HUTHT | Hull University Teaching Hospital NHS Trust |
| Humber TFT | Humber Teaching NHS Foundation Trust |
| IAGC | Integrated Audit and Governance Committee |
| IBCF | Integrated Better Care Fund |
| ICOB | Integrated Commissioning Officer's Board |
| IFR | Individual Funding Request |
| IPC | Integrated Personal Commissioning |
| ITT | Invitation to Tender |
| IRP | Independent Review Panel |
| JCF | Joint Commissioning Forum |
| LA | Local Authority |
| LDR | Local Digital Roadmap |
| LAC | Looked after Children |
| LRM | Local Resolution Meeting |
| MDT | Multidisciplinary Team |
| MH | Mental Health |
| MSK | Musculo-Skeletal |
| MSD | Merck Sharpe Dohme |
| NHSE | NHS England |
| NICE | National Institute for Health and Care Excellence |

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| NHSI | NHS Improvement |
| PCCC | Primary Care Commissioning Committee |
| PCN | Primary Care Network |
| PDB | Programme Delivery Board |
| PHBs | Personal Health Budgets |
| PHE | Public Health England |
| PMLD | Profound and Multiple Learning Difficulties |
| PTL | Protected Time for Learning |
| SCR | Summary Care records |
| SHO | Senior House Doctor |
| SPD | Sensory Processing Disorder |
| SATOD | Smoking Status at Time of Delivery |
| SLIP | System Lead Interoperability Pilot |
| SOP | Standard Operating Procedure |
| SSSS | Specialist Stop Smoking Service |
| TCP | Transforming Car Programme |
| ToR | Terms of Reference |
| YHCR | Yorkshire & Humber Care Record |