

## Item: 2

### PRIMARY CARE COMMISSIONING COMMITTEE MINUTES OF THE MEETING HELD ON FRIDAY 26<sup>th</sup> JUNE 2020.

#### GoToMeeting

#### PART 1

#### PRESENT:

##### Voting Members:

J Stamp, NHS Hull CCG (Lay Representative) Chair  
E Sayner, NHS Hull CCG (Chief Finance Officer)  
I Goode, NHS Hull CCG (Lay Representative)  
K Marshall, NHS Hull CCG (Lay Representative)  
J Crick, Hull City Council (Consultant in Public Health Medicine) deputising for J Weldon (Hull City Council Director of Public Health)  
Dr D Roper, NHS Hull CCG (Chair of NHS Hull CCG)  
J Dodson, NHS Hull CCG (Director of Integrated Commissioning)  
D Lowe, NHS Hull CCG (Deputy Director of Quality and Clinical Governance / Lead Nurse)

##### Non-Voting Attendees:

Dr B Ali, NHS Hull CCG (GP Member)  
S Barrett, LMC, (Chief Executive)  
Dr M Balouch, NHS Hull CCG (GP Member)  
P Davis, NHS Hull CCG (Strategic Lead - Primary Care)  
N Dunlop, NHS Hull CCG (Head of Commissioning - Integrated Delivery)  
G Day, NHS England & NHS improvement (Head of Primary Care - NY and Humber)  
Dr J Moulton, NHS Hull CCG (GP Member)  
M Napier, NHS Hull CCG (Associate Director of Corporate Affairs)  
H Patterson, NHS England & NHS Improvement, (Primary Care Contracts Manager)  
Dr V Rawcliffe, NHS Hull CCG (GP Member)  
M Whitaker, NHS Hull CCG (Practice Manager Representative)  
S Lee, NHS Hull CCG (Associate Director of Communications and Engagement)

#### IN ATTENDANCE:

R Thompson, NHS Hull CCG (Head of Nursing and Quality)  
D Robinson, NHS Hull CCG (Minute Taker)

#### WELCOME AND INTRODUCTIONS

The Chair welcomed everyone to the meeting.

#### 1. APOLOGIES FOR ABSENCE

##### Voting Members:

E Latimer, NHS Hull CCG (Chief Officer)  
J Weldon, Hull City Council, (Director of Public Health and Adults)  
Dr A Oehring, NHS Hull CCG (GP Member)  
C Linley, NHS Hull CCG (Interim Director of Nursing and Quality)

**Non-Voting Members:**

M Harrison, Healthwatch (Delivery Manager)

Cllr G Lunn, (Health and Wellbeing Board Representative/Elected Member)

**2. MINUTES OF THE MEETING HELD ON 24 April 2020**

The minutes of the meetings held on 24 April 2020 were approved after minor typos had been amended.

**Resolved**

(a)	The minutes of the meeting held on 24 April 2020 were approved as a true and accurate record of the meetings 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 April 2020 was provided for information, and the following updates were provided:

Committee Members were advised that 100% GP practices in Hull were now compliant and undertaking online consulting.

**Resolved**

(a)	Members of the Primary Care Commissioning Committee noted the update that there were no outstanding actions on the Action List from the meeting held on 24 April 2020.
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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;

<b>Name</b>	<b>Agenda No</b>	<b>Nature of Interest and Action Taken</b>
Vince Rawcliffe	7.1, 8.4,8.5,8.6	Personal Interest – Member of family works within the Modality – Hull Division – The declaration was noted
James Moulton	7.1, 8.4,8.5,8.6	Financial Interest – Partner at Modality Partnership Hull, The declarations were noted
Masood Balouch	7.1, 8.4,8.5,8.5	Financial Interest – works at Haxby Group the declaration was noted
Bushra Ali	7.1, 8.4,8.5,8.6	Financial Interest – Partner at Modality Partnership Hull and member of Modality PCN with Dr Cook , The declarations were noted
Mark Whitaker	7.1, 8.4,8.5,8.6	Financial Interest – PM at Newland Practice, the declarations were noted.

### **Resolved**

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

### **6.1 COMMITTEE TERMS OF REFERENCE**

The Strategic Lead - Primary Care presented an updated Terms of Reference (ToR) for the Primary Care Commissioning Committee to approve and thereafter submit to the NHS Hull CCG Board.

It was noted that the Primary Care Commissioning Committee would need to endorse the Terms of Reference (ToR) which would then be referred to the Integrated Audit and Governance Committee for approval prior to submission to the Board.

It was noted that changes and new additions to the ToR had been undertaken utilising track changes and comment boxes.

The following changes had been included in the ToR

- Reflection of new NHS England and NHS Improvement organisation
- Amendments reflecting changes in job roles and titles within the CCG

It was noted that the Network DES section referenced the Additional Roles Reimbursement Scheme and that the Humber Coast and Vale Primary Care Programme Board had been added to the independencies.

The Membership of the Committee had been amended reflecting changes of roles within NHS Hull CCG.

It was agreed that NHS Hull CCG Governing Body, Lay Representative Strategic Change should be Vice Chair of the Committee.

### **Resolved**

(a)	Members of the Primary Care Commissioning Committee considered and endorsed the revised Terms of Reference.
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## 6.2 CHAIR'S ANNUAL REPORT

The Strategic Lead - Primary Care presented the Chair's Annual Report on the activities of the Primary Care Commissioning Committee during 2019/20.

It was stated that there was confusion around attendance record of Julia Weldon, Director of Public Health and Adults and J Crick, NHS Hull (Consultant in Public Health Medicine) who deputises for J Weldon (Hull City Council Director of Public Health).

A wide and varied discussion occurred around the recording of attendances it was agreed that a review of a more accurate way of recording representation would be undertaken by the Chair of Integrated Audit and Governance Committee and the Associate Director of Corporate Affairs ensuring all the relevant information was captured and be consistent across all committees.

### Resolved

(a)	Members of the Primary Care Commissioning Committee endorsed the Chair's Annual Report.
(b)	Members of the Primary Care Commissioning Committee endorsed that the Chair's Annual Report be submitted to the CCG Board to be assured that the Primary Care Commissioning Committee had fulfilled its functions as set out in the terms of reference for the Committee and in line with the delegation agreement.
(c)	Members of the Primary Care Commissioning Committee agreed that a copy of the Annual Report be sent to NHS England and NHS Improvement – North East and Yorkshire.
(e)	Members of the Primary Care Commissioning Committee agreed that a review of the recording of representation be undertaken by the Chair of Integrated Audit and Governance Committee and the Associate Director of Corporate Affairs

## 7. STRATEGY

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

Dr James Moulton, Dr Bushra Ali, Dr Masood Balouch declared financial interests as partners in GP practices in agenda item 7.1. Mark Whittaker declared a financial interest as a Practice Manager in a GP Practice in agenda item 7.1. Dr V Rawcliffe declared a financial interest as close associate works within a PCN in agenda item 7.1. The declarations were noted. All remained on the call for that agenda item.

The Assistant Primary Care Contracts Manager NHSE, Strategic Lead - Primary Care NHS Hull CCG and Head of Commissioning NHS Hull CCG provided a report to update the Committee on the Strategic Commissioning Plan for Primary Care and to present primary medical care matters including contract issues within Hull and to provide national updates around primary medical care.

It was stated that Quality and Outcomes Framework (QOF) for 2019/20 had been automatically signed off due to COVID-19. On looking at the achievement figures, there were some discrepancies between QOF achievement 18/19 and 19/20. NHS

England received the breakdown of QOF data for Humber, Coast and Vale (HCV) for 19/20 achievement in comparison to 18/19 achievement from NHS Digital as well as a letter from Calculating Quality Reporting Service (CQRS) which contained instructions for CCGs in relation to protecting.

## **Resolved**

(a)	Members of the Primary Care Commissioning Committee noted the NHS England updates.
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## **8. SYSTEM DEVELOPMENT & IMPLEMENTATION**

### **8.1 NEWLY DESIGNED ENHANCED SERVICES – PRIMARY CARE NETWORK & THE GP NETWORK CONTRACT DES**

There were no newly designed enhanced services to discuss.

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

There were no extended Primary Care Medical Services to discuss.

### **8.3 RISK REGISTER**

The Strategic Lead – Primary Care NHS Hull CCG provided the risk report with regard to the primary care related risks on the corporate risk register.

It was noted that there were currently 40 risks on the CCG Risk Register, 6 of which related to primary care. All of the risks included within the report were rated as high risk and score 8 or above.

It was stated that all generic risks arounds COVID had been updated and that practices and PCNs were now developing models of service delivery to minimise risk of staff needing to self-isolate had signed up to the network DES.

There were no proposed changes to risk levels.

902 – Extreme Risk around the development and implementation of CCG primary care workforce strategy and associated initiatives – It was stated that the risk had changed due to Black and Minority Ethnic (BAME) risk assessments in primary care. It was noted that the risk had diminished because of the change in the service delivery model and increased triage and non face-to-face interventions. This was balanced by, an increase in risk because of the application and staff risk assessment that may have an impact on the local workforce, including BAME staff. It was agreed that this should be recorded as an additional risk on the risk register to give it the focus it deserves.

It was noted that the additional risk would be worked up and shared with the Primary Care Commissioning Committee virtually prior to being added to the risk register and go to the Integrated Audit and Governance Committee.

915 - Development of a Communications and Engagement plan with patients. It was felt that there was a high risk if patients were resistant to the implemented changes during the COVID pandemic and they would like to go back to the old model which at

present cannot be implemented. The Committee where advised that the CCG had a statutory duty to engage with patients and the public around potential changes that were to be made permanent. A survey is currently being undertaken and the outcomes would be shared with the Committee. It was noted that the survey will run between 13 July 2020 – 10 August 2020 and would provide a clear indication on patient feelings. An interim findings paper would be brought to part 2 of the August 2020 Primary Care Commissioning Committee.

#### **Resolved**

(a)	Members of the Primary Care Commissioning Committee noted the updates provided in the Risk Register.
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#### **8.4 PRIMARY CARE DELEGATED FINANCE REPORT TO MAY 2020**

Dr James Moulton, Dr Bushra Ali Dr Masood Balouch declared financial interest as partners in GP practices in agenda item 8.4. Mark Whittaker declared a financial interest as a Practice Manager in a GP Practice in agenda item 8.4. Dr V Rawcliffe declared a financial interest as close associate works within a PCN in agenda item 8.4. The declarations were noted. All stayed on the call for that agenda item.

The Chief Finance Officer presented a report to brief the Primary Care Commissioning Committee on the financial position within the Primary Care delegated budgets.

Committee Members were made aware the that the nature of primary care contracts was that the funding in the main follows the patients and was negotiated at a national level.

It was stated that at month 2 the CCG had reported a year to date overspend of £240k within its Primary Care delegated budgets under Primary Care Networks (PCN).

It was noted that the information within the report was produced on a monthly basis and would be brought to each Primary Care Commissioning Committee for information.

NHS Hull CCG had submitted retrospective COVID claims through to NHS England.

Concern was raised around the risk that the criteria for COVID related claims may change after month five. NHS Hull CCG and the LMC would work together to prioritise on how the money was allocated.

#### **Resolved**

(a)	Members of the Primary Care Commissioning Committee noted the Finance Report as at the end of May 2020.
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#### **8.5 ENHANCED PRIMARY AND COMMUNITY SUPPORT TO CARE HOMES**

Dr James Moulton, Dr Bushra Ali Dr Masood Balouch declared financial interest as partners in GP practices in agenda item 8.5. Mark Whittaker declared a financial interest as a Practice Manager in a GP Practice in agenda item 8.5. Dr V Rawcliffe

declared a financial interest as close associate works within a PCN in agenda item 8.5. The declarations were noted. All stay on the call for that agenda item.

The Strategic Lead – Primary Care NHS Hull CCG presented a report to provide the Primary Care Commissioning Committee with an update on the enhanced primary and community support to care homes.

Committee Members were updated on the work that had been undertaken in care homes across the city.

NHS Hull CCG had received communication from NHS England advising that a Primary Care and Community Support Group should be established to support care homes in the following three areas:

- a) Delivery of a consistent, weekly 'check in', to review patients identified as a clinical priority for assessment and care ;
- b) Development and delivery of personalised care and support plans for care home residents;
- c) Provision of pharmacy and medication support to care homes.

All care homes allocated to NHS Hull CCG had been aligned to a Primary Care Network (PCN) thereafter each PCN looked at how they would deliver services to care homes which had been aligned to them.

There are 82 care homes within the city boundary, with an additional 2 in Wawne, which had been aligned to a Hull PCN which would be receiving the services.

Work with the NHS Hull CCG Quality Team and Hull City Council had been undertaken reflecting requirements of both health and social care in supporting care homes. As a result a broader care home support plan for Hull had been developed. The plan covers the following areas:

- Governance and assurance
- Data - including market analysis and capacity in the sector
- Infection prevention and control - including advice, guidance and training
- Testing - including Track, Trace and Isolate
- PPE and clinical equipment - including training and provision of pulse oximetry
- Workforce support - including mutual aid, psychological and well-being support
- Clinical support – as set out above and including follow-up of discharges from hospital into care homes
- Financial support
- Communication

Training had been undertaken in care homes around Infection, Prevention and Control (IPC) as part of an enhanced package into care homes. The impact of this

work, with a focus on outcomes and quality would be monitored by the Care Home Group which meets weekly.

Following discussions with the Clinical Directors of PCN's it was agreed that any new residents to care homes and residents not registered within the PCN would be encouraged to register with a GP practice within the PCN. Clinical leads within PCNs would articulate the benefits of undertaking this. It was stated patient choice of practice remains and the process would evolve over a period of time.

It was noted that there was an issue around cross boundary where there was a care home in an East Yorkshire PCN with a number of patients registered to Hull GP Practices.

It was acknowledged that there was an Enhanced Health in Care Homes Service as part of the Network DES commencing in October 2020 which had resources attached per care home bed, and hence the enhanced primary and community support to care homes was an interim arrangement.

### **Resolved**

(a)	Members of the Primary Care Commissioning Committee considered the Enhanced Primary and Community support to care homes report.
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## **8.6 NETWORK DES – EARLY CANCER DIAGNOSIS**

Dr James Moulton, Dr Bushra Ali, Dr Masood Balouch declared financial interest as partners in GP practices in agenda item 8.6. Mark Whittaker declared a financial interest as a Practice Manager in a GP Practice in agenda item 8.6. Dr V Rawcliffe declared a financial interest as close associate works within a PCN in agenda item 8.6. The declarations were noted. All remained on the call for that agenda item.

The Head of Integrated Delivery NHS Hull CCG presented a report to provide the Primary Care Commissioning Committee with an update on the Network DES – Early Diagnosis in Cancer and local delivery plans.

Committee Members were advised that NHS Hull CCG and the Cancer Alliance were looking towards priority work and supporting the delivery of the national primary care ambitions. Locally, a Primary Care Strategy and Delivery Group had been established which includes local representatives from the Cancer Alliance and CCGs across Humber, Coast and Vale. The group would support the delivery of the national long term plan outcomes and the Primary Care Network DES – Early Diagnosis in Cancer.

The Head of Integrated Delivery had been invited to the Primary Care Strategy and Delivery Group to represent the primary care element for Hull and East Riding, and a delivery plan had been compiled to look at how practices were delivering the DES.

James Crick posed the question as to whether the Public Health from Hull and East Riding Local Authorities and Public Health England were linked into the Primary Care Strategy and Delivery Group. It was stated that clarity would be sought around this and if they were not linked in then an invitation would be sent.



## Resolved

(a)	Members of the Primary Care Commissioning Committee considered the Network DES – Early Cancer Diagnosis report and endorsed the proposed delivery plan.
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## 9. FOR INFORMATION

### 9.1 PRIMARY CARE QUALITY & PERFORMANCE SUB COMMITTEE

The Primary Care Quality & Performance Subcommittee minutes for 15 January 2020 where circulated for information.

### 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 28 August** at 12.15 pm – 14.00 pm via GoToMeetings.

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

Date: 28 August 2020

### Abbreviations

APMS	Alternative Provider Medical Services
CQRS	Calculating Quality Reporting Service
DES	Direct Enhanced Service
GPRP	GP Resilience Programme
GMS	General Medical Service
HUTHT	Hull University Hospital NHS Trust
NHSE	NHS England
PCN	Primary Care Network
P&CC	Planning & Commissioning Committee
PCCC	Primary Care Commissioning Committee
PCQPSC	Primary Care Quality & Performance Sub-Committee (PCQPSC).
PMS	Personal Medical Service
PPG	Patient Participation Group
Q&PC	Quality & Performance Committee
QOF	Quality and Outcomes Framework
STP	Sustainability and Transformation Partnerships
ToR	Terms of Reference