

Item: 9.1

PRIMARY CARE QUALITY & PERFORMANCE SUB COMMITTEE

**MINUTES OF THE MEETING HELD ON TUESDAY 04 AUGUST 2020,
11.30AM – 1.30PM, VIA MICROSOFT TEAMS**

PART 1

PRESENT:

Debbie Lowe, Deputy Director of Quality & Clinical Governance/Lead Nurse, Hull CCG (Chair)
E Butters, Head of Performance and Programme Delivery, Hull CCG
J Crick, Associate Medical Director, Hull CCG
P Davis, Strategic Lead – Primary Care, Hull CCG
K Memluks, Commissioning Lead - Quality, Hull CCG
E Opare-Sakyi, NECS Medicines Optimisation Pharmacist, North of England
H Patterson, Primary Care Contracts Manager, NHS England
R Thompson, Head of Nursing and Quality, Hull CCG, Hull CCG

IN ATTENDANCE:

J Adams, Personal Assistant, Hull CCG - (*Minute Taker*)

WELCOME AND INTRODUCTIONS

The Chair welcomed everyone to the meeting and those present introduced themselves.

1. APOLOGIES FOR ABSENCE

C Hurst, Engagement Manager, Hull CCG

2. MINUTES OF THE MEETING HELD ON 13 MAY 2020

The minutes held on the 13 May 2020 were approved as a true and accurate record.

Resolved

(a)	The minutes of the meeting held on 13 May 2020 amendments to be completed.
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3. MATTERS ARISING / ACTION LIST

All actions were marked as closed.

All other actions were marked as complete.

Resolved

(a)	All Actions were marked as closed.
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4. NOTIFICATION OF ANY OTHER BUSINESS

Any proposed items 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.

Resolved

(a)	There were no items of any other business to be discussed at this meeting.
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5. DECLARATIONS OF INTEREST

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

Name	Agenda Item No	Nature of Interest

Resolved

(a)	There were no declarations of interest noted.
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6. COVID 19 AND PRIMARY MEDICAL CARE SERVICES

The Strategic Lead – Primary Care presented the Covid-19 and Primary Medical Care Services to note.

The purpose of this report is to provide the Primary Care Quality and Performance Sub Committee with assurance in regard to the provision of Primary Care Medical Services in the context of the COVID-19 pandemic.

A Hull and East Riding incident management structure was put in place in response to the incident. In respect of primary care services the key group established to management the incident and which has a weekly call. In addition to the TCG there is a Primary Care Resilience Group which has bi-weekly calls and is focused more on operational issues.

A single mailbox is available for any queries from practices in relation to COVID-19. A rota of Hull and East Riding primary care team staff is in place to cover the inbox and respond directly to queries or seek the information required from the appropriate source.

To provide CCG assurance and to monitor the impact of the COVID-19 pandemic on delivery of primary care services, a daily situation report (SITREP) has been

developed. The SITREP covers all 33 practices across Hull (and all practices in East Riding of Yorkshire CCG) and reports their current situation at practice and PCN level.

The SITREP is completed every day by 12pm by either the Practice Manager, nominated lead within the PCN or CCG Link Manager. The PCN level SITREP is then uploaded onto the NHS Futures Collaboration Platform where a consolidated SITREP is created for the whole city (and a consolidated report for East Riding of Yorkshire CCG practices).

Overall a RAG rating is completed by the practices as follows:

Green – No concerns, expecting challenges but confident contingency plans can be effective, Amber – Contingency plans currently adequate however close to not being able to meet essential demands, Red – Concerns about being able to meet essential demands safely

To date the vast majority of practices have self-report as Green with a couple of Ambers which have in the main subsequently reverted to Green. An update of the latest available position will be provided at the meeting.

Resolved

(a)	The Primary Care and Performance Sub Committee Members noted the contents of the COVID-19 and Primary Medical Care Services.
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7. ENHANCED PRIMARY AND COMMUNITY SUPPORT TO CARE HOMES

The Strategic Lead – Primary Care presented the Enhances Primary and Community support to Care Homes to note.

The purpose of this report was to provide the Primary Care Quality and Performance Sub Committee with an update on the enhanced primary and community support to care homes.

In support of the CCG's frailty work, and in anticipation of the Network DES requirements, work had commenced pre-COVID-19 to analyse care home resident data to support the alignment of care homes to PCNs. It was recognised that this would be a challenging piece of work as the geographic nature of Hull CCG means that practices have registered patients in multiple care homes and many care homes have their residents registered at multiple practices.

The number of CQC registered care homes in the city and within the scope of the service was 82 which includes a number of small facilities for people with learning disabilities. In addition 2 small care homes for people with learning disabilities in Wawne within the East Riding of Yorkshire were added, following agreement with East Riding of Yorkshire CCG, given their geographic proximity to Hull.

Each PCN have been asked to put an action plan in place to support the care homes, the Strategic Lead – Primary Care and the Commissioning Lead – Quality would monitor these action plans once these have all been received.

The Enhanced health in care home DES requirements are discussed and agreed in a task and finish group which reports to the care home oversight Group any issues

that require a decision need to be escalated to the Care Quality Board. The current governance of the care home oversight group is being reviewed.

Resolved

(a)	The Primary Care and Performance Sub Committee Members noted the contents of the Enhanced Primary and Community support to care homes.
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8. TERMS OF REFERENCE

The Commissioning Lead – Quality presented the Terms of Reference to discuss.

The following amendments were discussed to the Terms of Reference.

- Primary Care networks no links within the TOR (The Strategic Lead – Primary Care to provide some wording)
- Care Home Quality Board to be added
- Finance for medical services was now going to be presented at the PCCC rather than this committee
- The Engagement Manager been on the membership for this meeting would be discussed outside of this meeting
- A member from each team for quoracy to be named within the Terms of reference – Quality Team – Primary Care team – a member from the resources team.

The Commissioning Lead – Quality would update the Terms of reference and the final version would be presented at the next Primary Care Quality and Performance Sub Committee for information.

Resolved

(a)	The Primary Care and Performance Sub Committee Members discussed the Terms of Reference.
(b)	The Commissioning Lead – Quality would update the Terms of reference with the amendments discussed and the final version would be presented at the next Primary Care Quality and Performance Sub Committee for information.

9. FOR INFORMATION

PRIMARY CARE COMMISSIONING COMMITTEE MINUTES 01 APRIL 20 TO BE NOTED.

9. ANY OTHER BUSINESS

Contact trace – A contact trace requirement for staff members process will be put in place in the coming months. North Lincolnshire CCG has a model in place that Hull, East Riding and North Lincolnshire will also take this approach.

10. DATE AND TIME OF NEXT MEETING

Wednesday 16 September, 14.30pm – 16.30pm, Via MST

Abbreviations

CHCP	City Health Care Partnership
CKD	Chronic Kidney Disease
CoM	Council of Members
CQC	Care Quality Commission
FFT	Friends & Family Test
HUTHT	Hull University Teaching Hospital Trust
HSCIC	Health and Social Care Information Centre
Hull CCG	Hull Clinical Commissioning Group
Humber TFT	Humber Teaching NHS Foundation Trust
IAGC	Integrated Audit and Governance Committee
ICC	Integrated Care Centre
NHSE	NHS England
PAG	Professional Advisory Group
PALS	Patient Relations
PCCC	Primary Care Commissioning Committee
PCQPSC	Primary Care Quality & Performance Sub Committee
QSG	Quality Surveillance Group
SLT	Senior Leadership Team
TOR	Terms Of Reference