



Item: 11.4

# PRIMARY CARE COMMISSIONING COMMITTEE MINUTES OF THE MEETING HELD ON WEDNESDAY 9<sup>TH</sup> DECEMBER 2020.

#### **MS Teams Meeting**

#### PART 1

#### PRESENT:

### **Voting Members:**

J Stamp, NHS Hull CCG (Lay Representative) Chair

I Goode, NHS Hull CCG (Lay Representative)

K Marshall, NHS Hull CCG (Lay Representative)

Dr D Roper, NHS Hull CCG (Chair of NHS Hull CCG)

C Linley, NHS Hull CCG (Interim Director of Nursing and Quality)

E Daley, NHS Hull CCG, (Interim Chief Operating Officer)

D Storr, NHS Hull CCG, (Deputy Chief Finance Officer deputising for E Sayner, Chief Finance Officer)

# **Non-Voting Attendees:**

P Davis, NHS Hull CCG (Strategic Lead - Primary Care)

N Dunlop, NHS Hull CCG (Head of Commissioning - Integrated Delivery)

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)

#### IN ATTENDANCE:

Dr Saskia Roberts, LMC (Medical Director)

D Robinson, NHS Hull CCG (Minute Taker)

## WELCOME WHICH INTRODUCTIONS

The Chair welcomed everyone to the meeting.

# 1. APOLOGIES FOR ABSENCE

#### **Voting Members:**

E Latimer, NHS Hull CCG (Chief Officer)

E Sayner, NHS Hull CCG (Chief Finance Officer)

J Weldon, Hull City Council, (Director of Public Health and Adults)

# **Non-Voting Members:**

Dr B Ali, NHS Hull CCG (GP Member)

S Barrett, LMC, (Chief Executive)

Dr M Balouch, NHS Hull CCG (GP Member)

Dr J Moult, NHS Hull CCG (GP Member)

M Whitaker, NHS Hull CCG (Practice Manager Representative)

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

Dr A Oehring, NHS Hull CCG (GP Member)

M Harrison, Healthwatch (Delivery Manager)

S Lee, NHS Hull CCG (Associate Director of Communications and Engagement)

G Day, NHS England & NHS improvement (Head of Primary Care - NY and Humber)

#### 2. MINUTES OF THE MEETING HELD ON 23 OCTOBER 2020

The minutes of the meeting held on 23 October 2020 were approved as a true and accurate record.

#### Resolved

(a) The minutes of the meeting held on 23 October 2020 were approved as a true which accurate record of the meeting which would be formally signed by the Chair.

#### 3. MATTERS ARISING FROM THE MEETING

The Action List from the meeting held on 23 October 2020 was provided for information but not discussed. The Chair advised that all actions would deferred until the February 2021 Primary Care Commissioning Committee.

#### Resolved

(a) Members of the Primary Care Commissioning Committee noted that the actions would be deferred until the February 2021 Primary Care Commissioning Committee.

## 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 which Action Taken
Vince Rawcliffe	8.1	Personal Interest – Member of family works within the Modality – Hull Division – The declaration was noted

#### Resolved

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(2)	The above declaration of interest were noted.
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#### 6. GOVERNANCE

There were no items of Governance to discuss.

#### 7. STRATEGY

#### 7.1 APMS Contracts - CHRISTMAS 2020 BANK HOLIDAY OPENING

The Assistant Primary Care Contracts Manager NHS England and the Strategic Lead - Primary Care, NHS Hull CCG provided a report to update the Committee on a request from Northpoint Medical Practice to close on Saturday 26<sup>th</sup> December with re-provision of the 4 hrs on another day during the Christmas period.

It was noted Christmas Day this year falls on Friday 25<sup>th</sup> December 2020 with Boxing Day falling on Saturday 26<sup>th</sup> December 2020. As Boxing Day falls on a Saturday, the Bank Holiday substitute day was Monday 28<sup>th</sup> December 2020.

As a result, an APMS practice had queried opening on Saturday 26<sup>th</sup> December and had requested whether they could either

- (a) not open as it should be a Bank Holiday or
- (b) re-provide the 4hrs hours on another day as it was a Saturday which contractually they should be open.

All Committee Members contributed to a complex discussion around whether the practice should open when they were scheduled to or to transfer the hours to an alternate day when the need may be greater. It was noted that consideration needed to be given to ensuring that patients had appropriate access to primary care services over this period.

It was noted that the Extended Access Services (EAS) would be providing appointments on Saturday 26<sup>th</sup> December 2020 and would be accessible by all patients including those subject to APMS contracts. Extended Access Services would be heavily weighted on 26<sup>th</sup> December 2020 which appointments could be booked via 111 if required.

It was noted that if the closure was approved then all other APMS practices would have to be offered the same arrangements.

Members were advised that there would be no benefit to patients of closing on 26<sup>th</sup> December 2020 and using these hours on alternative days as cover had already been arranged between 29<sup>th</sup> December 2020 – 31<sup>st</sup> December 2020.

Committee Members voted with 6 out of 7 voting members not supporting the request to close Northpoint Practice on 26<sup>th</sup> December 2020.

#### Resolved

- (a) Members of the Primary Care Commissioning Committee declined the request from Northpoint Practice to close on Saturday 26<sup>th</sup> December with re-provision of the 4hrs on another day during the Christmas period.
- (b) In light of this decision members of the Primary Care Commissioning Committee did not extend the offer of closing on 26<sup>th</sup> December to the other to affected APMS practices.

#### 8. SYSTEM DEVELOPMENT & IMPLEMENTATION

# 8.1 EXTENDED PRIMARY CARE MEDICAL SERVICES - ADULT FOSTERING AND ADOPTION MEDICALS IN PRIMARY CARE SERVICE SPECIFICATION

The Head of Commissioning - Integrated Delivery provided a report following the approval of an options appraisal in June 2020. The purpose of the paper was to present the service specifications, recommended tariff and funding request for the Adult Fostering which Adoption Medicals in Primary Care.

Committee Members were reminded that the Primary Care Commissioning Committee had approved the option that Adult Fostering and Adoption Medicals should sit within Primary Care at the June 2020 meeting. Following this, work had been undertaken to refine the service specification, including working up recommended tariffs relating to this service.

The Medical Director of LMC stated that some of the comments forwarded from the LMC in relation the service specification had not been reflected or documented.

The comments included:

- What the anticipated workload would be around managing prospective applications, as well as reviewing existing applications.
- Additional clarification around the Medical Examiner role.
- Time frames around the provision of the reports.

The Head of Commissioning - Integrated Delivery advised that the service specification had been shared with the Clinical Directors of the PCNs with no adverse comments being received.

It was agreed that the Commissioning Manager would revisit the service specification to ensure all of the comments received from the LMC where fully incorporated within the documents.

Discussion around the costing and tariff occurred with the following points being highlighted:

- Where would the audit results go?
- Who would monitor the audit result?
- Who would complete the quality audit?
- Who would responsible for monitoring the audits?

The Interim Director of Nursing and Quality advised Committee Members that the Senior Leadership Team had agreed that the Medical Advisor role would sit within

the Quality Team at the CCG. Part of the Medical Advisor role would be to provide quality assurance and to ensure the audits are undertaken to a satisfactory level.

It was noted that there had to be reference around the quality of the activity incorporated into the tariff. It was questioned as to how quality of the activity could be reflected within the tariff. The Interim Director of Nursing stated that the tariff should not be a flat payment as the activity of each audit could take different lengths of time. It was noted that if the final submission was of insufficient quality the payment would be questioned.

Clarification was requested on what the £25K specified in document would be used for.

Clarification was given that the payment mechanisms flow chart identified that the payment process was different for fostering and adoption, and it was noted that in some instance's payment was being made for reports which had not been quality assured.

The Chair advised that the service specification needed to be more precise around:

- The Quality and Assurance Pathway
- Incorporation of the LMC queries

Committee Members agreed that additional work was required on the service specification. The Chair stated with agreement from Committee Members that work should be completed on the service specification and in light of the tight timescales that this should be circulated virtually for approval outside of the meeting cycle.

#### Resolved

- (a) Members of the Primary Care Commissioning Committee requested that the service specification be more precise around quality assurance and consideration of the points raised by the LMC
- (b) Members of the Primary Care Commissioning Committee requested that further work be undertaken around the tariff proposals.
- (c) Members of the Primary Care Commissioning Committee approved the use of the PMS Premium to support funding of the Adult Fostering which Adoption Medicals Service.
- (d) Members of the Primary Care Commissioning Committee approved in principle the commissioning of Adult fostering which adoption medicals from 1<sup>st</sup> April 2021 at PCN level to be delivered by individual practices, once the final service specifications and tariff had been agreed by the Committee.

#### 9. FOR INFORMATION

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

There were no Primary Care Quality & Performance Sub Committee minutes to circulate.

#### 10. ANY OTHER BUSINESS

There were no items of Any Other Business.

# 11. DATE WHICH TIME OF NEXT MEETING

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The next meeting would be held on **Friday 26**<sup>th</sup> **February 2021** at 12.15 pm - 14.00 pm via MS Teams.

Signed:

(Chair of the Primary Care Commissioning Committee)

Date: 26 February 2021

# **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 which Outcomes Framework		
STP	Sustainability which Transformation Partnerships		
ToR	Terms of Reference		