

Item 5

**CLINICAL COMMISSIONING GROUP (CCG)**

**Minutes of the Primary Care Commissioning Committee held on  
Wednesday 2<sup>nd</sup> September 2015  
in Rooms 1 and 2, Blackburn Central Library,  
Town Hall Street, Blackburn, BB2 1AG**

**PRESENT:**

Mrs Anne Asher	Lay Member – Nurse Representative (Chair)
Mrs Debbie Nixon	Chief Operating Officer
Mr Roger Parr	Chief Finance Officer
Dr Stephen Gunn	Clinical Lead for Primary Care
Mr Paul Hinnigan	Lay Member - Governance
Dr Nigel Horsfield	Lay Member - Secondary Care Doctor (Retired)
Mr Ian Grimshaw	Lay Member

**IN ATTENDANCE:**

Mr Stephen Gough	NHS England
Dr Gifford Kerr	Public Health
Mr Stephen Toumlin	Local Medical Committee
Mr Peter Sellars	Primary Care Transformation and Development Manager
Mrs Hannah Sellers	CCG Development Officer (minutes)

<b>Min No:</b>									
<b>3.01</b>	<p><b>Chair's Welcome</b></p> <p>The Chair welcomed everyone to the meeting and explained that she would be Chairing the meeting in the absence of Mr Joe Slater. The Chair gave a short brief with regards to the content of the agenda and housekeeping.</p> <p>Members of the Committee introduced themselves for the benefit of the public attendee.</p>								
<b>3.02</b>	<p><b>Apologies for Absence and Confirmation of Quoracy</b></p> <p>Apologies for absence were received in respect of:</p> <table border="0"> <tr> <td>Mr Joe Slater</td> <td>Lay Member Chair</td> </tr> <tr> <td>Dr Malcolm Ridgway</td> <td>Clinical Director for Quality and Primary Care</td> </tr> <tr> <td>Mr Mark Rasburn</td> <td>Blackburn with Darwen Healthwatch</td> </tr> <tr> <td>Ms Sally McIvor</td> <td>Blackburn with Darwen Council</td> </tr> </table> <p>The meeting was confirmed as quorate.</p>	Mr Joe Slater	Lay Member Chair	Dr Malcolm Ridgway	Clinical Director for Quality and Primary Care	Mr Mark Rasburn	Blackburn with Darwen Healthwatch	Ms Sally McIvor	Blackburn with Darwen Council
Mr Joe Slater	Lay Member Chair								
Dr Malcolm Ridgway	Clinical Director for Quality and Primary Care								
Mr Mark Rasburn	Blackburn with Darwen Healthwatch								
Ms Sally McIvor	Blackburn with Darwen Council								
<b>3.03</b>	<p><b>Declarations of Interest</b></p> <p>No declarations of interest were made with regards to items on the agenda; however the Chair reminded those present that if during the course of discussion, a conflict of interest</p>								

	became apparent, it should be declared at that point.
<b>3.04</b>	<p><b>Minutes of the Meeting held on 1<sup>st</sup> July 2015</b></p> <p>The minutes of the previous meeting were accepted as an accurate record.</p> <p><b>RESOLVED: That the Minutes of the Meeting held on 1<sup>st</sup> July 2015 were approved as a correct record.</b></p>
<b>3.05.</b>	<p><b>Action Matrix / Matters Arising</b></p> <p>The Action Matrix was reviewed.</p> <p>There were no matters arising from the minutes of the previous meeting.</p>
<b>3.06</b>	<p><b>Confirmation of Amended Times and Duration of Future Meetings</b></p> <p>The Chair confirmed that it had been agreed that meetings of the Primary Care Co-commissioning Committee (PCCC) would be held at the revised time of 10.30am and would be scheduled for 1 hour and 30 minutes, to allow sufficient time to discuss business. The meetings will continue to be held every 2 months, with the next meeting being held on 4<sup>th</sup> November.</p> <p>The Chair advised members that meeting arrangements would be reviewed during the November meeting, to ascertain whether the current schedule remains convenient and can be continued throughout 2016.</p>
<b>3.07</b>	<p><b>Approval of amended Terms of Reference for the Primary Care Co-commissioning Committee.</b></p> <p>The Chair asked Mr Peter Sellars to provide an update on the amendments to the Terms of Reference (ToR).</p> <p>Mr Sellars confirmed that the Local Medical Committee (LMC) had been added to the non-voting membership of the group and an amendment had been made to section 5.2 in respect of this.</p> <p>Mr Sellars also clarified that the name of the Primary Care Co-commissioning Design Team had been amended to the Primary Care Group and section 6.2 had been updated to reflect this.</p> <p>There was some further discussion around the content of the ToR and the following points were noted:</p> <ul style="list-style-type: none"> <li>• The ToRs currently reference the NHS Act 2006 and it was agreed that these references could be removed from the ToR, with a declaration in the opening paragraph that the ToRs are consistent with the NHS Act 2006.</li> <li>• The ToRs require a version number and date and it was agreed that this would be added to the document.</li> <li>• NHS England are not currently listed as a non-voting member and it was agreed that section 5.2 would be amended to reflect this.</li> <li>• Mr Peter Sellars agreed to query the Local Authority and Health and Wellbeing Board representation in regards to who is required to attend meetings.</li> </ul> <p><b>ACTION: Mr Sellars agreed to review the ToR in regards to the comments made and make the necessary amendments.</b></p>

	<p><b>RESOLVED: That due to the further amendments required to the ToR, they could not be approved; a revised version will be presented at the PCCC on 4<sup>th</sup> November 2015.</b></p>
<p><b>3.08</b></p>	<p><b>Approval of Terms of Reference for the Primary Care Group</b></p> <p>The Chair requested that Mr Peter Sellars update members with regards to the changes to the Primary Care Group (PCG), which was previously referred to as the Primary Care Co-commissioning Design Team.</p> <p>Mr Sellars explained that the PCG are the operational group of the PCCC and will carry out the actions arising from the PCCC. The PCG will also recommend service re-design, work streams and development of Primary Care to the PCCC. The ToRs reflect the function of this group and recognise the PCG as a subgroup of the PCCC.</p> <p>Questions and answers followed.</p> <p>There were a few minor amendments to the wording in several areas of the document and these were noted. It was also highlighted that the PCG will only carry out work on actions agreed by the PCCC.</p> <p><b>ACTION:</b></p> <ul style="list-style-type: none"> <li><b>i. The PCG ToR are to be presented to the next Quality, Performance and Effectiveness Committee (QPEC), in addition to the QPEC ToRs for members to confirm their agreement with regards to the relationship between the two meetings and to agree the role of QPEC within the Primary Care structure.</b></li> <li><b>ii. Once the ToRs are approved by QPEC, the Constitution will be updated to reflect the formation of a new sub-committee.</b></li> </ul> <p><b>RESOLVED: That the ToRs were approved subject to the suggested amendments.</b></p>
<p><b>3.09</b></p>	<p><b>Carpal Tunnel Funding Proposal</b></p> <p>Dr Stephen Gunn presented the Carpal Tunnel Funding Proposal and explained that Carpal Tunnel Release Surgery has been carried out at Roe Lee surgery for 8 years and is undertaken by an orthopaedic consultant, in partnership with the GPs.</p> <p>The current funding for the service is £275 per surgical procedure and £23 per consultation which compared against the national tariff for outpatients, is comparatively low. Dr Gunn explained that the paper proposes an increase of £125 per surgical procedure and an increase of £27 per consultation if the patient does not go on to surgery; this would still be significantly lower in cost than hospital treatment and supports the CCG's strategic approach, which is to deliver care in the community wherever possible.</p> <p>Dr Gunn requested that members note the risks relating to the recovery of funds from East Lancashire Hospital Trust, which would be freed by creating capacity within the hospital.</p> <p>Questions and answers followed.</p> <p><b>ACTION: Mr Sellars agreed to review the contracts and service specifications for minor surgery. Mr Sellars will confirm to the PCCC the monitoring arrangements in place and provide assurance to members around these processes.</b></p> <p><b>RESOLVED: That members approved the tariff increase for the Carpal Tunnel Release Service.</b></p>
<p><b>3.10</b></p>	<p><b>Personal Medical Service Premium Update and Proposal</b></p>

	<p>Dr Stephen Gunn presented the Personal Medical Service (PMS) Premium Update and Proposal paper and provided members with a brief update regarding the ongoing PMS review.</p> <p>Dr Gunn explained that the CCG have met with all PMS providers and there is one practice who believe they are providing services above the GMS contract and do not agree that their PMS premium should be withdrawn. Dr Gunn advised that the proposal being presented to members is to create a clinical scrutiny panel who will review the information submitted to the CCG, in order to enable final recommendations to be made.</p> <p>Questions and answers followed.</p> <p>Clarification was given that the PMS Clinical Scrutiny Panel would only review the one PMS GP practice where an agreement has not been reached regarding the PMS premium.</p> <p><b>RESOLVED: That the members of the PCCC:</b></p> <ul style="list-style-type: none"> <li>i. <b>Noted and considered the contents of the report</b></li> <li>ii. <b>Agreed to support the proposal for a clinical review panel and funding for the additional clinical session for the GP panel member.</b></li> <li>iii. <b>Agreed to receive a further report and recommendations at the meeting on 4<sup>th</sup> November 2015.</b></li> </ul>
<p><b>3.11</b></p>	<p><b>Update on Quality and Outcomes Enhanced Service Transformation Scheme</b></p> <p>Dr Stephen Gunn provided members with an update on the development of a proposed new scheme, called the Quality and Outcomes Enhanced Service Transformation (QOEST). The new scheme aims to improve patient outcomes in terms of quality and uniformity of provision of care across Blackburn with Darwen. Dr Gunn also explained that the scheme aims to assist practices by combining existing schemes into one contract and by providing continual funding over a 3 to 5 year basis.</p> <p>Dr Gunn explained that this is a very early update and that a more detailed update would be available following the Clinical Senate on 13<sup>th</sup> October 2015.</p> <p>Questions and answers followed.</p> <p>Dr Gifford Kerr highlighted that Public Health will require clarity around the implications for the Local Authority budget with as much notice as possible.</p> <p><b>RESOLVED: That members noted the content of the update and agreed to continue to support the development of QOEST.</b></p>
<p><b>3.12</b></p>	<p><b>Financial Update</b></p> <p>Mr Roger Parr presented the Primary Care Services, Financial Summary for month 4, asking members to note the forecast Primary Care underspend of £169k which can be attributed in main to prescribing which is being monitored closely by the Medicines Management Team as an identified risk.</p> <p>Mr Parr also highlighted the funds available which have increased £398k.</p> <p>Questions and answers followed.</p> <p>Mr Stephen Gough reported on an investment into Primary Care, where an as yet unconfirmed amount of monies will potentially be made available to CCGs, to utilise for Winter resilience and Primary Care access. This has not been formally announced as yet, however Mr Gough suggested that CCGs consider how they may be able to utilise these</p>

	<p>monies in readiness for the announcement.</p> <p><b>RESOLVED: That members noted the content of the report and the risks highlighted.</b></p>
3.13	<p><b>Prime Minister’s Challenge Fund Update</b></p> <p>Mr Roger Parr presented the Prime Minister’s Challenge Fund Update, advising members of the process thus far and the upcoming developments:</p> <ul style="list-style-type: none"> <li>• The Primary Care Access Centre (PCAC), proposed to be on the Royal Blackburn Hospital site is currently going through a governance process and it is expected that it will be approximately a further year until the PCAC is operational.</li> <li>• The three locality spokes are due to be operational from 14<sup>th</sup> September and these will provide increased access across the borough between Monday and Friday; weekend access will be introduced during October.</li> <li>• GP practices have been approached regarding potential patient signposting and triage services to ascertain the appetite for these types of services amongst Primary Care providers.</li> <li>• The communication and engagement process is ongoing, as is the finance and governance of the pilot which is managed through the Prime Minister’s Challenge Fund Steering Group and supported by the CCG’s Commissioning Business Group.</li> </ul> <p><b>ACTION: Mr Roger Parr agreed to confirm the GP staffing of the locality spokes as requested by Dr Nigel Horsfield.</b></p> <p><b>RESOLVED: That members noted the content of the update.</b></p>
3.14	<p><b>Any Other Business</b></p> <p>There were no other items for discussion.</p> <p>A member of the public asked the Chair if she could raise a number of questions around patients who are carers. There was a brief discussion and Mrs Debbie Nixon agreed that she would discuss the matters further with the member of the public outside of the meeting.</p>
3.15	<p><b>Date and Time of Next Meeting</b></p> <p>The next meeting will be held on 4<sup>th</sup> November at 10.30am in Meeting Rooms 1 &amp; 2 Blackburn Central Library, Town Hall St, Blackburn, BB2 1AG.</p> <p>The Chair thanked everyone for their attendance and input and the meeting closed.</p>