

Item 5

CLINICAL COMMISSIONING GROUP (CCG)

**Minutes of the Primary Care Commissioning Committee held on
Wednesday 4th November 2015
in Rooms 1 and 2, Blackburn Central Library,
Town Hall Street, Blackburn, BB2 1AG**

PRESENT:

Mr Joe Slater	Lay Member (Chair)
Dr Malcolm Ridgway	Clinical Director for Quality and Effectiveness
Mr Roger Parr	Chief Finance Officer
Dr Stephen Gunn	Clinical Lead for Primary Care
Mrs Anne Asher	Lay Member – Nurse Representative
Mr Paul Hinnigan	Lay Member - Governance
Dr Nigel Horsfield	Lay Member - Secondary Care Doctor (Retired)
Mr Ian Grimshaw	Lay Person Representative

IN ATTENDANCE:

Ms Sarah Danson	NHS England
Ms Helen Lowey	Public Health
Mr Stephen Toulmin	Local Medical Committee
Mr Peter Sellars	Primary Care Transformation and Development Manager
Mrs Hannah Sellers	CCG Development Officer (minutes)

Min No:									
4.01	<p>Chair's Welcome</p> <p>The Chair welcomed everyone to the meeting and gave a short brief with regards to the content of the agenda and housekeeping.</p>								
4.02	<p>Apologies for Absence and Confirmation of Quoracy</p> <p>Apologies for absence were received in respect of:</p> <table border="0"> <tr> <td>Mrs Debbie Nixon</td> <td>Chief Operating Officer</td> </tr> <tr> <td>Ms Sally Mclvor</td> <td>Blackburn with Darwen Council</td> </tr> <tr> <td>Gifford Kerr</td> <td>Public Health</td> </tr> <tr> <td>Stephen Gough</td> <td>NHS England</td> </tr> </table> <p>There was no representative present from Blackburn with Darwen Healthwatch.</p> <p>The meeting was confirmed as quorate.</p>	Mrs Debbie Nixon	Chief Operating Officer	Ms Sally Mclvor	Blackburn with Darwen Council	Gifford Kerr	Public Health	Stephen Gough	NHS England
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4.03	<p>Declarations of Interest</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 discussions, a conflict of interest became apparent, it should be declared at that point.</p>								

<p>4.04</p>	<p>Minutes of the Meeting held on 2nd September 2015</p> <p>The minutes of the previous meeting were reviewed and accepted as an accurate record.</p> <p>RESOLVED: That the Minutes of the Meeting held on 2nd September 2015 were approved as an accurate record.</p>
<p>3.05.</p>	<p>Action Matrix / Matters Arising</p> <p>The Chair raised an item of business surrounding a Chair's Action which had been taken in relation to Alternative Provider Medical Services (APMS) contract lengths and advised that he would table the paper later in the meeting.</p> <p>Mr Paul Hinnigan raised the potential winter resilience monies which had been referred to by Mr Stephen Gough in the previous meeting. It was confirmed that this would be covered under item 13 of the agenda, Improved Access To Primary Medical Care Services Bid Proposal.</p> <p>The Action Matrix was reviewed and clarification on outstanding items was provided as follows:</p> <p>3.09: Mr Peter Sellars confirmed that contract reviews for minor surgery will take place on a quarterly basis going forward.</p> <p>3.13: Mr Roger Parr clarified that the Prime Minister's Challenge Fund Locality Spokes are staffed by 1 GP in each spoke.</p>
<p>4.06</p>	<p>Dates and Times of Future Meetings</p> <p>Future dates and times of PCCC meetings were discussed and it was agreed that the meeting should be held on a different day to the CCG's Governing Body Meetings going forward, to provide alternative options for members of the public who wish to attend these meetings. It was also agreed that meetings should be held over lunch time to make it easier for CCG member practices to attend if they wish.</p> <p>It was agreed that the next meeting would be held during the first week of January 2016 between 12.30 and 2.00pm and that there would be a meeting on 22nd June 2016 between 12.30 and 2.00pm, in line with the APMS bid sign off.</p> <p>The Chair confirmed that the meeting dates for March, May, September and November would be reviewed and dates would be circulated to members.</p>
<p>4.07</p>	<p>Approval of amended Terms of Reference (ToR)</p> <p>The ToR for the PCCC were approved subject to an amendment in quoracy arrangements. It was proposed that the committee would be quorate if 4 voting members are present, 1 of whom must be a CCG executive officer. The proposal was agreed.</p> <p>It was also requested that the Primary Care Group (PCG) review the reporting arrangements into the PCCC and consider a regular update report to the committee.</p> <p>ACTION:</p> <ul style="list-style-type: none"> i. ToR to be amended to reflect that in order for the meeting to be quorate, 4 voting members must be present including 1 CCG executive officer. ii. PCG to consider a regular update report for the PCCC.

	<p>RESOLVED: That the ToR were approved subject to the requested amendment.</p>
<p>4.08</p>	<p>Quality and Outcomes Enhanced Services Transformation (QOEST) Update</p> <p>Dr Malcolm Ridgway presented the QOEST update, providing the PCCC with a briefing on recent developments, which have focused on the amalgamation of existing schemes. Dr Ridgway highlighted the work being carried out around claiming processes for practices, explaining the aim to provide consistency for practices through a single claiming system. Dr Ridgway reported that work is ongoing around quality monitoring and the processes surrounding the collation of quality data. Dr Ridgway highlighted the overall aims of the scheme as improving quality, improving access and making General Practice sustainable for the future.</p> <p>Dr Ridgway concluded by identifying the next steps in the implementation of the scheme; a final draft of the scheme will be presented to the committee in January 2016, following which practice engagement will take place between January and March 2016. The scheme will be launched in April 2016 and subsequent to this further work will be carried out to implement the plans which are being developed in the current stage.</p> <p>Questions and answers followed.</p> <p>RESOLVED: That the PCCC</p> <ol style="list-style-type: none"> i. noted the content of the update ii. agreed to support the work programme iii. agreed to receive regular updates
<p>4.09</p>	<p>Delegated Decision Making Review</p> <p>Dr Malcolm Ridgway presented the paper and asked the PCCC to consider the options put forward in relation to delegated decision making arrangements for the PCCC.</p> <p>The options were highlighted as:</p> <ul style="list-style-type: none"> • Delegate to the CCG Executive Team (recommended) • Delegate to Chair's Action • Retain full decision making authority to PCCC <p>There was a considerable discussion and concerns were raised that if the recommended option was chosen, there would be no lay member present during the decision making process. Assurance was provided by Mr Roger Parr, that decisions would only be made outside the committee in extenuating circumstances and that these decisions would be taken for ratification to the PCCC; if a decision was not agreed by the committee the CCG may need to give serious consideration to reversing it.</p> <p>It was agreed that the recommendation on delegated decision making arrangements could not be approved until further information was provided around the types of decisions that could and could not be taken. The PCCC requested that a revised paper is presented at the next meeting, providing examples of the types of circumstances where delegated decision making arrangements would not be appropriate.</p> <p>ACTION: Mr Peter Sellars to liaise with the appropriate CCG officers to ensure a revised paper is presented to the PCCC in January 2016, providing examples of circumstances where delegated decision making arrangements would not be appropriate.</p> <p>RESOLVED: That a revised paper would be presented to the PCCC in January 2016.</p>

<p>4.10</p>	<p>Personal Medical Services (PMS) Contract Update</p> <p>Dr Malcolm Ridgway provided a brief update regarding the withdrawal of the PMS premium, which is the amount of monies received by PMS practices in excess of the General Medical Service (GMS) practices. Dr Ridgway reiterated discussions from earlier meetings, highlighting that all but one of the Blackburn with Darwen practices had agreed that they were not providing services over and above similar GMS practices and therefore it had been agreed that the premium would be withdrawn from April 2016.</p> <p>As one practice had submitted further evidence regarding additional services, a clinical scrutiny panel had taken place to review the evidence and make a decision on future commissioning arrangements. Dr Ridgway reported that the panel considered that although the practice were providing some services outside of the GMS contract, they were not aligned to current commissioning intentions and therefore a decision had been made to withdraw the PMS premium.</p> <p>RESOLVED: That the PCCC endorsed the decision to withdraw the PMS premium.</p>
<p>4.11.1</p>	<p>Alternative Provider Medical Services (APMS) Contract Update</p> <p>Dr Malcolm Ridgway declared a conflict of interest relating to a personal relationship with a potential bidder. Although Dr Ridgway presented the update, no decisions were made and he did not take part in any further discussions which arose from this item of business.</p> <p>Dr Ridgway presented the update and highlighted the procurement timetable and key dates. Dr Ridgway tabled the APMS Service Specification and apologised that it had not previously been circulated to the PCCC. A brief explanation of the contract was provided by Dr Ridgway who explained the specification was in the main a standard contract, highlighting the key differences between APMS and GMS as extended hours services, an extended contract length of 10 plus 2 years and participation in the QOEST scheme</p> <p>Dr Ridgway advised members that the specification requires agreement by 30th November 2015 and members agreed the specification which had been put forward. Dr Ridgway asked the PCCC to contact him with any further questions surrounding the specification within the next few days.</p> <p>RESOLVED: That the PCCC</p> <ul style="list-style-type: none"> i. received and considered the contract update ii. agreed and ratified the APMS Service Specification. iii. agreed the use of the standard APMS contract
<p>4.11.2</p>	<p>APMS Contract Length (Chair's Action)</p> <p>Mr Peter Sellars explained the rationale for extending the APMS contract length which is to provide more consistency for the patients of the practice and to increase potential bidder interest. Mr Sellars described that the existing contract length is 5 plus 2 years and that the proposal which had been put forward was to increase the contract length to 10 plus 2 years.</p> <p>RESOLVED: That the PCCC ratified the decision taken by the Chair, to increase the APMS contract length to 10 plus 2 years.</p>
<p>4.12</p>	<p>Improved Access To Primary Medical Care Services Bid Proposal</p> <p>Dr Malcolm Ridgway presented the proposal and provided members with an update on the recent discussions of the Lancashire Primary Care Co-commissioning Management Group. The group have been involved in discussions regarding a new model for Primary Care and</p>

	<p>have discussed the requirement for models to meet the needs of each CCG's population. A Primary Care Transformation Team is being formed and they will be heavily involved in the work surrounding new models of care across Lancashire. Dr Ridgway highlighted the requirement for 7 day access across Primary Care and how this needs to be appropriate to the requirements of patients in each CCG area.</p> <p>Dr Ridgway explained that the bid made is for recurrent funding from NHS England which would help to facilitate a model which is seen as a continuation of the Prime Minister's Challenge Fund (PMCF) Pilot. A bid has been submitted by each CCG and the Blackburn with Darwen bid equates to £3.00 per head, based on the population.</p> <p>Questions and answers followed.</p> <p>RESOLVED: That the PCCC</p> <ul style="list-style-type: none"> i. agreed and ratified the submission bid ii. agreed for work to continue regarding evaluation of the PMCF pilot and in the development of future models for General Practice and Urgent Care
4.13	<p>North West Physician Associate Pilot Programme Proposal</p> <p>Dr Stephen Gunn presented the proposal which provided information around the interest expressed by Blackburn with Darwen CCG, East Lancashire CCG and East Lancashire Hospital Trust (ELHT) to support the newly created role of Physician Associate. Dr Gunn explained the new role, which has been created in acknowledgement of the pressures on Primary Care and aims to assist in alleviating these pressures.</p> <p>Dr Gunn outlined the funding model, detailed on page 2 and highlighted the funding support provided by Health Education North West (HENW) and three local universities. Dr Gunn asked members to note the cost per student of £9000 per year, over 2 years, for 2 Physician Associates. It was confirmed that the monies required had been identified in the budget. Blackburn with Darwen member practices have been asked to express an interest in taking part in the pilot programme and following the first 2 years, these practices would need to advertise a vacancy for the role of Physician Associate.</p> <p>Questions and answers followed.</p> <p>Following discussions around potential Primary Care roles, it was agreed that a second recommendation should be added, to explore the range of possibilities available to support a sustainable future for Primary Care, linking in with the Pennine Lancashire workforce plans.</p> <p>RESOLVED: That the PCCC</p> <ul style="list-style-type: none"> i. ratified the decision to support the North West Physician Associate Pilot Programme ii. recommended that further possibilities around Primary Care workforce are investigated, linking with the Pennine Lancashire workforce plans
4.14	<p>CCG Assurance Framework 2015/16 Delegated Functions - Self-certification Q2</p> <p>Dr Malcolm Ridgway presented the quarter 2 Delegated Functions Self Certification and asked the PCCC to approve the document, prior to its submission for sign off to the Clinical Chief Officer and Chair of the Audit Committee.</p> <p>RESOLVED: That the PCCC approved the CCG Assurance Framework 2015/16 Delegated Functions - Self-certification Q2.</p>
4.15	<p>CCG Assurance Framework 2015/16 Delegated Functions - Self-certification Q1</p>

	<p>Dr Malcolm Ridgway presented the quarter 1 Delegated Functions Self Certification, which had already been signed off by the Clinical Chief Officer and Chair of the Audit Committee and submitted, due to the NHS England timeframes.</p> <p>RESOLVED: That the PCCC noted the previously submitted CCG Assurance Framework 2015/16 Delegated Functions - Self-certification Q1.</p>
4.16	<p>Primary Care Services – Financial Summary</p> <p>Mr Roger Parr presented the month 6 financial summary for information, highlighting the current Primary Care overspend which can be attributed in main to the prescribing budget.</p> <p>RESOLVED: That the PCCC noted the content of the report, the overall position at the end of September 2015 and the risk highlighted.</p>
4.17	<p>Any Other Business</p> <p>As there was no other business, the Chair thanked everyone for their attendance and input and the meeting closed</p>
4.18	<p>Date and Time of Next Meeting</p> <p>The next meeting will be held on 7th January 2016 at 12.30am in Meeting Rooms 1 & 2 Kings Court, 33 King Street, Blackburn, BB2 2EF.</p>