

# Nottingham North and East

## Clinical Commissioning Group

### Primary Care Commissioning Committee Unratified Minutes of the Public Meeting held on Thursday 7 March 2019 - 14:30 – 15:40

Meeting Room 1, the Civic Centre Arnot Hill Park, Arnold, Nottingham, NG5 6LU

#### Members

Mike Wilkins	Lay Member – Primary Care (Chair)
Terry Allen	Lay Member – Financial Management & Audit
Dr Caitriona Kennedy	GP Representative
Esther Gaskill	Head of Primary Care Quality
	Greater Nottingham Clinical Commissioning Partnership
Ian Livsey	Deputy Chief Finance Officer
	Greater Nottingham Clinical Commissioning Partnership
Sharon Pickett	Director of Primary Care
	Greater Nottingham Clinical Commissioning Partnership

#### In attendance

Fiona Daws	Corporate Governance Officer (minutes)
	Greater Nottingham Clinical Commissioning Partnership
Julie Kent	Contract Manager
	NHS England
Rachael Rees	Head of Primary Care & MCP Development
	Greater Nottingham Clinical Commissioning Partnership
Julia Wong	Assistant Contracts Manager
	NHS England

#### Apologies

Jonathan Bemrose	Chief Finance Officer
	Greater Nottingham Clinical Commissioning Partnership
Nichola Bramhall	Chief Nurse and Director of Quality
	Greater Nottingham Clinical Commissioning Partnership
Janet Champion	Lay Member
Paramjit Panesar	GP Representative
Amanda Sullivan	Accountable Officer
	Mid Nottinghamshire CCGs and Greater Nottingham Clinical Commissioning Partnership

#### Member's cumulative attendance 2018/19

Name	Possible to date	Actual	Name	Possible to date	Actual
Mike Wilkins	5	5	Esther Gaskill <sup>#</sup>	5	5
Terry Allen	5	3	Ian Livsey <sup>#</sup>	5	4
Janet Champion <sup>1</sup>	3	2	Param Panesar	5	1
Sharon Pickett	5	5	Caitriona Kennedy	5	1
Jonathan Bemrose <sup>#</sup>	1	0	Independent GP Advisor – vacant <sup>#</sup>	1	0
Amanda Sullivan <sup>#</sup>	1	0	Gary Thompson <sup>#</sup>	1	0
Nichola Bramhall <sup>#</sup>	1	0			

<sup>1</sup> Membership ceased September 2018

<sup>#</sup> Membership updated in line with TOR changes effective January 2019.

**Item****Introductory Items****PCCC 19 001 Welcome and apologies**

Mike Wilkins welcomed everyone to the public meeting of the Nottingham North and East Primary Care Commissioning Committee.

Apologies were noted as above.

**PCCC 19 002 Confirmation of quoracy**

It was confirmed that the meeting was quorate.

**PCCC 19 003 Declarations of interest for any item on the agenda**

No areas of interest were declared in relation to any items on the agenda.

The Chair reminded members of their responsibility to highlight any interests should they transpire as a result of discussions during the meeting.

**PCCC 19 004 Management of any real or perceived conflicts of interest**

Not required as no conflicts of interest had been identified.

**PCCC 19 005 Questions from the public**

It was confirmed that no questions from the public had been received.

**PCCC 19 006 Minutes of the meeting held on 12 December 2018**

The minutes were agreed as an accurate record and will be signed by the Chair, subject to the following amendment:

Jonathan Bemrose is to be deleted from "in attendance" on page one.

**PCCC 19 007 Matters arising and actions from the meeting held on 12 December 2018**

An update on the following action points was provided:

**PCCC 18 068 – Ivy Practice**

Members received confirmation that:

- NHS England had written to the Ivy Medical Group seeking assurance that Thursday afternoon working will be put in place and relevant timescales. The response detailed various setbacks that had been encountered by the practice.
- A new Advanced Nurse Practitioner is due to commence, with a new salaried GP starting in April 2019, facilitating opening on a Thursday.
- An action plan that specifies how and when the requirement to open on Thursday afternoons will be met has been requested from the practice along with an offer of support from the Local Medical Council (LMC).

The Committee acknowledged that:

- The practice is required to open on Thursday afternoons with effect from 4 April 2019 as this was a condition of approval of the original application for merger of the Ivy Medical Group with the Apple Tree practice and the merger of the two practices took place over a year ago.
- The practice has experienced various challenges.
- There is now increased capacity at the practice.

**PCCC 18 071 – Second Splenectomy Audit**

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Members received confirmation that discussions have taken place to enable the splenectomy audit to be worked into eHealthscope. This item can be closed.

There were no actions or other matters arising in relation to the minutes.

## Agenda Items

### PCCC 19 008

#### **NNE Primary Care Commissioning Committee Terms of Reference**

Mike Wilkins presented this item and highlighted the following:

- a) An overarching summary of the changes was provided to the Committee including:
  - The Terms of Reference (TOR) have been presented and approved at the NNE Governing Body meeting in January 2019.
  - GPs move from being part of the membership to being in attendance. This will be consistent across the Greater Nottingham Clinical Commissioning Partnership.
  - An independent GP role is included as part of the membership after reference to the Conflicts of Interest statutory guidance and the decision making process. This would be a new member for Nottingham North and East CCG.
  - The same challenge exists regarding quoracy as other meetings in common.
  - The terms of reference retain the ability to make urgent decisions with the option that this can take place virtually.
  - There is an allowance for deputies to attend as part of the delegation agreement.

The following items were raised in discussion:

- b) There is a transitional phase of moving toward holding meetings in common and membership is being worked through and is yet to be confirmed
- c) Each locality can consider who their locality GP representative could be for maximising the local voice.
- d) The Committee acknowledged the benefit of an independent GP advisor, which the Governance team are progressing.
- e) Lay member reorganisation is being considered to cover all six Clinical Commissioning Groups.

The Committee:

- **RECEIVED** the Primary Care Commissioning Committee terms of reference.

### PCCC 19 009

#### **General Practice Enhanced Delivery Service (GPEDS)**

Rachael Rees presented this item and highlighted the following:

- a) The specification for the GPEDS for 2019/20 has been reviewed and updated and is presented for information.
- b) The expected annual contract value is in two parts – funding and quality indicators.
- c) Clinical indicators have been further reviewed and updated in light of changes to the Quality Outcomes Framework indicators for 2019/20.

The following items were raised in discussion:

- d) The New York heart failure tool is applicable in a heart failure clinic setting rather than general practice setting, however, it is referred to within the

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specification as it is generic. There is not a heart failure service in NNE which means that GP practices in the CCG won't be able to achieve the targets. It was confirmed that this would not have any detrimental financial impact on GP practices in NNE CCG.

- e) It was acknowledged that continuation of GPEDS in 2019/20 with no reduction in funding demonstrated the CCG's commitment to supporting and investing in general practice.
- f) The budget for 2019/20 is the same as for 2018/19.

The Committee:

- **RECEIVED** the GPEDS specification.

### Action:

- **Rachael Rees will discuss the value of the heart failure tool with Dr Ian Trimble as it is applicable in a heart failure clinic setting rather than general practice setting and referred to within the generic specification.**

## PCCC 19 010

### Extended Access Update

Rachael Rees presented this item and highlighted the following:

- a) The service is provided by Primary Care Integrated Services Nottingham North and East (PICS NNE).
- b) PICS is commissioned to provide 30 mins per 1,000 population (equating to 76 hours per week). The service commenced on 1 September 2018 on a rota basis agreed by all practices with a mixed skill set which includes GP, Advanced Nurse Practitioner, Practice Nurse, Health Care Assistant and Pharmacists.
- c) Based on the last five months' data:
  - Average utilisation rates are 75%.
  - Monday and Thursday show the highest "did not attend" rates.
  - Saturday and Sunday includes a high proportion of elderly patients.
- d) For further report clarity, Rachael Rees will include a colour key and number values on the bar charts.
- e) No formal patient feedback has been requested; however this is due to take place over next few months.
- f) PICS have contacted practices regarding screening as there is limited opportunity with current resources.
- g) The service will be promoted up to and over the Easter period.
- h) Technical problems have been experienced regarding moving to the NHS 111 service, however, progress is ongoing and will need to be implemented by October 2019.

The following items were raised in discussion:

- i) Members were assured that the majority of patients are successfully dealt with.
- j) There is still some capacity that can be utilised.
- k) Members received clarification that the GP out of hours (OOH) service is being managed by the urgent care team and that there is no current impact on the service due to the Extended Access arrangements.
- l) Urgent day appointments/on the day booking will be prioritised and pressure is already being felt for this type of appointment.

The Committee:

- **NOTED** the update on Extended Access.

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### Action:

- **Rachael Rees will circulate the colour key and number values referred to within the charts.**
- **Rachael Rees will collate the same information from the other CCGs and share with the Committee.**

## PCCC 19 011

### Finance Update

Ian Livsey presented this item and highlighted the following:

- a) It is forecasted for both NNE Clinical Commissioning Group and Greater Nottingham Clinical Commissioning Partnership that the revenue resource limit will be achieved. The Acute area remains a concern.
- b) There is an overspend against the Sherwood Forest Hospitals NHS Foundation Trust budget and also has untransacted Quality, Innovation, Productivity and Prevention (QIPP) challenges.
- c) Continuing Health Care and Prescribing are underspent.
- d) The primary care co-commissioning delegated budget for NNE Clinical Commissioning Group will not be overspent.
- e) Billing models are still awaited for this current year from NHS Property Services.

The following items were raised in discussion:

- f) Members acknowledged the amount of work that has been undertaken to improve the accuracy of estate recording with NHS Property Services across Greater Nottingham Clinical Commissioning Partnerships.

The Committee:

- **APPROVED** the financial update.

## Quality

## PCCC 19 012

### Primary Care Quality Highlight Report

Esther Gaskill presented this item and provided a verbal update, highlighting the following:

- a) **Whyburn Practice** Intelligence regarding patient feedback and neighbouring practices' experience continues to be collated and reviewed regarding whilst the procurement process progresses.
- b) **Peacock Practice** Seeking assurance on quality and safety at the Peacock Practice is ongoing and formal quarterly assurance meetings are held with Integrated Medical Holdings (IMH) Group Limited, practice staff, NHSE and CCG colleagues.
- c) **Om Practice** A Care Quality Commission (CQC) inspection has been undertaken at the Om Practice on 21 February 2019 and the outcome is awaited. A previous inspection rated the practice as 'Requires Improvement'.
- d) **Plains View Practice** underwent a CQC inspection yesterday (5 March 2019).
- e) Park House practice was inspected on 7 February 2019 and received an overall 'Good' rating, with 'Requires Improvement' in the Effective domain. The practice is required to ensure all Patient Group Directions are appropriately completed and improve outcomes for people with long term conditions and mental health in line with CCG and national averages.

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No items were raised in discussion:

The Committee:

- **NOTED** the verbal update regarding quality highlights.

## Closing items

### PCCC 19 013 Any other business

Sharon Pickett gave a summary of the GP contract reform, including the context surrounding the change and highlighted the following:

#### **Workforce/Workload**

- a) The Additional Role Reimbursement Scheme will commence from 1 July 2019. Total funding will rise over the next five years to fund workforce expansion and will support the “NHS Long Term Plan”.
- b) Primary Care will develop a more holistic team approach to cover a whole range of issues.

#### **Indemnity Costs**

- c) A new Clinical Negligence Scheme for General Practice will start from 1 April 2019. All NHS GP service providers (including Out of Hours provision) will be eligible to become scheme members. Membership subscription payments will be met by NHS England through a centrally-held primary care allocation.

#### **Improving the Quality Outcomes Framework (QOF)**

- d) Twenty eight indicators (31% of the scheme) will cease in April 2019 and emphasis shifting instead to creating two Quality Improvement modules, prescribing and end of life care, within a new Quality Improvement domain.

#### **Network Contract Directed Enhanced Service (DES)**

- e) This goes live July 2019 with payments made up of both new and existing funding. Full details of the contract are not yet known.
- f) Each network will have a named accountable Clinical Director and a Network Agreement.
- g) All Network Contracts within a single Clinical Commissioning Group will be confirmed at the same time.
- h) Extended hours will need to be provided for 100% of the population of the Primary Care Network and this links in to Thursday afternoon opening, evenings and weekends. The current extended hours DES covers 49% of the population.

There were no items raised in discussion.

### PCCC 19 014 Risks identified during the course of the meeting

No risks were identified.

### PCCC 19 015 Date of next meeting:

16 April 2019