

**DRAFT Minutes of West Norfolk Primary Care Commissioning Committee
Part One (Quorate)
Held on 29th June 2017 3pm
Education Room, Town Hall, Saturday Market Place, Kings Lynn PE30 5DQ**

Present:

Rob Bennett (Chair)	(RB)	Lay Member (Finance)	WNCCG
Hilary De Lyon	(HDL)	Lay Member (Audit) and Deputy Chair	WNCCG
John Webster	(JW)	Chief Officer	WNCCG
Chris Randall	(CR)	Chief Finance Officer	WNCCG
Chris Humphris	(CH)	Director of Operations	WNCCG
Steve Lloyd	(SL)	Head of Primary Care	WNCCG
Heather Farley	(HF)	Head of Corporate Affairs	WNCCG
Emma Kriehn-Morris	(EKM)	Deputy Chief Finance Officer	WNCCG
Dr Ian Mack	(IM)	CCG Chair	WNCCG
Michelle Barry	(MB)	Lay Member	WNCCG
Peter Brown	(PB)	Patient Representative	

In Attendance:

Arlene Sheppard	(AMS)	Note Taker	WNCCG
Ross Collett	(RC)	Director of Operations (from 1 Aug 2017)	WNCCG
Sarah Haverson	(SH)	Commissioning Support Officer	WNCCG
Dr Mark Funnell (from 17.65 onward)	(MF)	GP Vida Healthcare	
Melvyn Peveritt (from 17.65 onward)	(MP)	Head Of Finance Vida Healthcare	

Apologies:

Alex Stewart	(AS)	Chief Executive	Healthwatch Norfolk
Elizabeth Nockolds	(EN)	Representing Health & Wellbeing Board	BCKLWN
Lindsey Tibble	(LT)	Patient Representative	
Dr Ian Hume	(IH)	Medical Secretary	N&W LMC
Tim Bishop	(TB)	Lay Member (Patient & Public Involvement)	WNCCG
Sue Hayter	(SH)	Governing Body Nurse	WNCCG

ACTION

17.58 CHAIR'S OPENING COMMENTS AND APOLOGIES

Apologies were received as above. The Chair welcomed new members and thanked Sarah Haverson for circulation of the comprehensive briefing materials covered in the previous session.

17.59 QUESTIONS FROM THE PUBLIC ON AGENDA ITEMS OR OTHER RELEVANT SUBJECTS

There were no questions raised from members of the public.

17.60 DECLARATIONS OF INTEREST

The Chair noted the circulated list. IM reminded the meeting of his status as a salaried GP

17.61 NOTIFICATION OF ANY ITEMS OF URGENT BUSINESS

No items were notified to the meeting.

17.62 MINUTES OF THE PREVIOUS MEETING HELD ON 26 MAY 2017

The meeting agreed that the Minutes of the last Committee were a true record of the

meeting.

17.63 ACTION LOG /MATTERS ARISING (not covered elsewhere on the agenda)

Action 1. Clarification of Finance Report item 2.4. has been received need no further action. Action complete.

Action 2. CR awaiting more information on a) back up provisions for collections b) performance monitoring procedures and c) clarity on two way/one way break clause at end of each year. Any information received before the next PCCC should be circulated to members. Action to remain on log.

Action 3. Discussions with NHS England awaited Mid-Aug to identify what other contracts they hold, using due diligence information provided as a baseline. Noted that many of these contract may apply to larger geographical areas and be beyond WNPCCC control. Action to remain on log.

Action: Add risk around lack of locality control of Primary Care Contracts to corporate risk register.

Action 4. Awaiting confirmation from NHS England in writing that any adjustments made to the 17/18 budget did not impact on West Norfolk. We continue to actively look for 16/17 items that can be recharged. Redate action to next meeting. Action to remain on log.

Action 5. Material circulated previously. Action complete

17.64 DECISIONS LOG

The Chair noted the circulated Decision Log. SL updated the meeting with progress on item 5. Demand Management in Primary Care. Feedback has been received from Practices and an amended document will be circulated along with the Local Enhanced Services paperwork.

17.65 WNCCG GB RISK UPDATE

HF explained how identified risks are managed through committees to the Governing Body to appear on either the Governing Body Assurance Framework (GBAF) or the Corporate Risk Register. A Primary Care Commissioning Committee Risk Register will be raised to submit identified risks to this Committee.

Members discussed the circulated extract from the GBAF and agreed that this broad item needed to be broken down into more specific risks.

Suggestions:

- that Primary Care workplan actions may not be achieved
- Depletion of GP and ancillary workforce
- Rent reviews
- Transition governance
- Patient safety and Quality / CQC Compliance
- Finance
- Development of Primary Care at scale / Development of WN Health
- Estates /Availability of 3rd Party Capital

Action: SL to populate a PCCC Risk Register and identify operational risks from the Corporate Risk Register relevant to the work of this committee.

Initially the PCCC will view GBAF level risks and the Corporate risk register level

risks to ensure oversight role carried out correctly.

Members considered the current scoring of the GBAF extract circulated and agreed it should not change. Will review at the next meeting.

17.66 FINANCE REPORT

CR noted that due to staffing shortages the amendments to reporting documents have not yet been finalised. Commented that the impact of rent reviews on the current year is not clear and should be noted as a risk on the forthcoming PCCC register.

EKM highlighted the position of the Primary Care Reserves and the work going on to understand the NHS England methodology and approach to the budget assignment.

CR noted as a risk the patchy quality of the information being received requires checking for consistency and correctness.

CR noted as a risk the lack of NHS England staff assigned for Primary Care work, currently 1.6FTE for the whole of Norfolk.

The upcoming meeting with NHS England in mid-August will include these concerns to obtain assurance.

Members commented that it would be helpful to see a percentage variance figure going forward and also data presented in a way that was readable on an A4 or A3 page.

17.67 2017/18 – LOCAL ENHANCED SERVICES (LES)

CH introduced the circulated amended paper outlining the options in turn and recommending option A. CR noted that he was comfortable that Option A remained within the current cost envelope. He highlighted to members that the CCG is awaiting notification of where in the 17/18 Budget the PMS release monies were located but the amount has been confirmed in writing by NHS England.

Discussion of background to the assumptions around 15% element of profit and 2.5% figure for Overheads included. CH noted that if these services were provided outside the LES it could very well increase costs significantly. Members discussed the historical background to the current LES arrangement in West Norfolk making comparison with other localities more difficult. There are no plans yet to agree a common approach to benchmarking.

MB left the meeting at this point.

PB queried if the staffing oncosts had been included in calculations and SL confirmed that they had.

CR commented on the confidence around the level of GP capacity to deliver the services and how the outcomes of the 16/17 programme can be demonstrated against the 17/18 provision. CH responded that Practices are already delivering the majority of these services currently. Practices have no compulsion to accept the LES agreement. JW reinforced the importance of clear delivery of outcomes. Monthly monitoring is in place and would be expanded to include all participating practices.

DECISION: Members agreed (contingent on PMS release monies location) 17/18 LES Services are commissioned and paid for based upon Option A – maintain previous year's payment basis, and increase the amount paid for the Treatment Room LES to recognise the increase in PMS release.

17.68 DATE OF NEXT MEETING

The Chair explained to members that during July the WNCCG staff will be depleted by an accumulation of various staffing factors resulting in capacity issues to prepare and attend the scheduled July meeting on 21st July.

The Chair and JW proposed the July meeting be cancelled and utilising the 18th August for Committee business in conjunction with some development activity.

Members suggested that some work on strategy would be welcome and align with the Norfolk & Waveney STP Primary Care Workstream.

Next meeting will be held on Friday 18th August 2017 at 2pm , Education Room, Town Hall, Saturday Market Place, Kings Lynn PE30 5DQ

There being no further business the meeting closed at 4.02pm

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