

**Minutes of West Norfolk Primary Care Commissioning Committee`
Part One (Quorate)
Held on 1st June 2018 2pm
Council Chamber, Town Hall, Saturday Market Place, Kings Lynn PE30 5DQ**

Present:

Voting Members

Hilary De Lyon (Chair)	(HDL)	Lay Member (Audit) and Deputy Chair	WNCCG
Sarah-Jane Ward	(SJW)	Director of Quality Assurance	WNCCG
Sue Hayter	(SH)	Governing Body Nurse	WNCCG
Tim Bishop	(TB)	Lay Member (Patient & Public Involvement)	WNCCG

Non Voting Participants

Steve Lloyd	(SL)	Head of Primary Care	WNCCG
Dr Imran Ahmed	(IA)	CCG Governing Body GP Member	WNCCG
Lindsey Tibble	(LT)	Patient Representative	
Peter Brown	(PB)	Patient Representative	
Elizabeth Nockolds	(EN)	Representing Health & Wellbeing Board	BCKLWN
Dr Ian Hume (18.49 onwards)	(IH)	Medical Secretary	N&W LMC
Fiona Theadom	(FT)		NHS England

In Attendance:

Abi Betts	(AB)	Commissioning Support Officer	WNCCG
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Apologies:

John Webster	(JW)	Chief Officer	WNCCG
Ross Collett	(RC)	Director of Operations	WNCCG
Howard Martin	(HM)	Chief Finance Officer	WNCCG
Heather Farley	(HF)	Head of Corporate Affairs	WNCCG
Michelle Barry (Chair)	(MB)	Lay Member	WNCCG
Emma Kriehn-Morris	(EKM)	Deputy Chief Finance Officer	WNCCG
Alex Stewart	(AS)	Chief Executive	Healthwatch Norfolk
Parveen Mercer	(PM)	Assoc Director Primary Care (STP)	GYWCCG

ACTION

18.44 CHAIR's OPENING COMMENTS AND APOLOGIES

Apologies were received as above. SH welcomed members to the meeting in the absence of HDL (Deputy Chair) who was delayed joining the meeting until item 18.49. Michelle Barry will be Chairing this Committee from the next meeting. All circulated papers will be taken as read.

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

There were no questions received from members of the public.

18.46 DECLARATIONS OF INTEREST

The Chair noted the circulated list. There were no other conflict of interests declared pertinent to today's Agenda.

18.47 NOTIFICATION OF ANY ITEMS OF URGENT BUSINESS

SL asked the Committee to confirm that they were happy to accept the two late papers :

Item 18.62 New activity report for N&W PCCCs to report on NHSE contractual activity. NHSE will be producing these on a bi-monthly basis for CCG primary care

leads with the most recent one for each PCCC. This should be added to Part 2 papers

Item 18.53 Paper for approval by Members on Managing Inappropriate Prescribing, submitted by Sarah-Jane Ward. This should be added to Part One papers

Members confirmed they were happy to deal with these two items today.

18.48 MINUTES OF THE PREVIOUS MEETING HELD ON 23rd March 2018

Page 2, item 18.29 Second sentence amended to read 'There were no other potential conflicts of interest declared pertinent to today's Agenda.'

Subject to the above amendment, members agreed the Minutes were a true record of the meeting.

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

Action 1. No update available. Action to remain on log

Action 2. SL introduced Abi Betts (AB) new commissioning support officer who has undertaken this piece of work. 1.7% of total WN population missed a GP/Nurse/HCA appointment in April (2,738 instances), spread fairly evenly across the Practices. Members queried the value of identifying how many were patient booked or system-generated and outcomes if split between GP/Nurse/HCA. Action on DNA rates is included in national High Impact Changes work. Action complete.

Action 3. Update contained in the Part Two paper at 18.61 Action to remain on log.

Action 4. Update for next meeting. Action to remain on log. SL updated the members on KL Winter Pressure findings which indicated that the scheme had not been used fully. Noted that lessons learnt will be included in 18/19 Winter schemes. At the invitation of TB, SL will be attending a future PPG meeting to inform the group on results.

Action 5. FT Updated the meeting that agreement has been obtained for East Anglia procurement exercise for translation services (including medical and dental services). Tender process being in Autumn 2018, contract commencement April 2019. Update for next meeting. Action to remain on log.

Action 6. SJW confirmed that financial risks recognised would be entered onto the log but kept corporately at the present time. Action complete.

Action 7. SL reported that he could not identify any interaction between the WNCCG, the Purfleet Trust and WNKLBC. Action complete.

18.50 DECISIONS LOG

The Chair noted the circulated Decision Log.

18.51 PRIMARY CARE COMMISSIONING COMMITTEE RISKS

SJW talked to the circulated report. Members noted that there were currently no significant 'red' risks on the Corporate Risk Register or the Governing Body.

18.52 FINANCE REPORT

SJW reported that there is no Finance Report at this meeting as month 1 accounts are not produced.

Members discussed how the current projects might present as foreground or background risks and how these would be represented and highlighted to this Committee via the Risk Register and the Finance Report.

18.53 QUALITY REPORT

SJW provided a verbal report highlighting:

- Quality Visits commence next week
- No Serious Incidents or Significant Events to report
- July 9th GP Members Forum/Community Partners Event, attended by NHSI national lead Healthcare Acquired Infection to focus on Anti-Microbial Stewardship

Managing Inappropriate Prescribing

SJW talked to the circulated paper highlighting how this had already been considered and approved by the membership of clinicians at CLEX but requires consideration by this Committee. It is a framework for discussion by Primary Care colleagues if the prescribing data or prescribing practices show a potential concern.

TB queried if the information contained on the Front Sheet did reflect the content of the paper in sufficient depth. The Chair queried whether there was training available for members on correct population of the front sheet. SJW felt that there was no specific training on this issue and perhaps the template needed to be amended to drive more informed population.

ACTION: SJW to discuss with HF on template amendment.

IH expressed concern that the LMC had not been fully consulted on this paper at an earlier stage in development and did not reflect some of the contributing factors. SJW agreed to have further discussions outside the meeting to agree the content before asking the Committee to approve the paper. Members discussed whether the paper should be returned to Great Yarmouth & Waveney for their discussion and development or develop this policy for West Norfolk and share our observations. Members discussed the difficulty of writing a policy with sufficient detail for clinicians whilst trying to balance transparency for non-clinicians and members of the public.

ACTION: SJW to meet with LMC colleagues to refine content of paper before re-submission.

18.54 PRIMARY CARE OPERATIONAL REPORT

SL talked to the circulated report highlighting:

- Primary Care Engagement – Time for Care Programme. Further to the recent successful event, collaboration on the Productive General Practices Quick Start will be 8 half-days over 8 consecutive weeks, dealing with two topics per practice. Development of submission now in progress.
- GP Forward View – Extended Access. Shared trajectory with West Norfolk Health submitted to NHS England, followed up by assurance call. Milestones in line with national timelines.
- Sustainability and Resilience Funding. One practice has submitted a bid so far. Progress on this will be updated.

SL clarified that all practices had been offered the chance to participate in the IT ETTFSchemes and those Practices that had agreed to participate were moving forward with implementation. IH acknowledged the difficulty for Practices managing the core work of the Practice whilst attempting to implement new systems and expressed concern that those Practices most in need to IT improvement were not best placed to absorb the extra workload involved in implementation.

IH queried if the Patient 500 project governance would remain compliant post GDPR (General Data Protection Regulation). SL confirmed that it would be compliant. The Chair commented that GDPR monitoring would recognise organisations demonstrating active progress towards 100% compliance along with those already fully compliant.

18.55 Primary Care Contract Changes 2018/19

FT noted that the circulated paper was for information purposes only.

18.56 DATE OF NEXT MEETING

Friday 27th July 2pm

There being no further business the meeting closed.