

NHS EL CCG Primary Care Committee

Minutes of the meeting held on Wednesday, 9 May 2018
2:30pm at Walshaw House

PRESENT:

Michelle Pilling	Member - Quality & Patient Engagement/Deputy Lay Chair : Chair
Jackie Hanson	Director of Quality & Chief Nurse
Kirsty Hollis	Chief Finance Officer
Dr Tom Mackenzie	GP Locality Lead
David Swift	Lay Member – Governance
Collette Walsh	Head of Commissioning – Integrated Care
Mark Youlton	Chief Officer

In Attendance:

Debra Atkinson	Head of Corporate Business
Lisa Cunliffe	Primary Care Development Manager
Sarah Danson	Assistant Contracts Manager, NHS E
David Massey	Executive Lead PL, Local Medical Committee
Cllr Lian Pate	EL Health & Wellbeing Partnership Representative
Kathryn Burton	In attendance for Item 6.3

Min Ref:		ACTION
18:86	<p>Welcome & Chairs Update</p> <p>Michelle Pilling was chairing the meeting on behalf of Naz Zaman who was unable to attend and had sent her apologies. Michelle welcomed all members to the meeting.</p>	
18:87	<p>Apologies</p> <p>Apologies were received from Naz Zaman, Sharon Martin, Dr Dziobon, Melanie Rawes, Jackie Forshaw. Collette Walsh was attending on behalf of Sharon Martin.</p>	
18:88	<p>Governance</p> <ul style="list-style-type: none"> ▪ Declarations of Interest: There were no additional declarations of interest to note. ▪ Quoracy: The meeting was quorate. [5 members required] 	
18:89	<p>Minutes of the meeting held on 11 April 2018</p> <p>It was noted that Collette Walsh was in attendance but not listed as present. Subject to this amendment, the minutes of the meeting held on 11 April 2018 were approved as an accurate record.</p>	
18:90	<p>Action Matrix</p> <p>The Action Matrix was presented and updated as follows.</p>	

	<p>17.136 MoU Collette Walsh updated, confirming that a meeting had been arranged with NHS E on 21 May. NHS E felt there is little scope to amend the agreement and it was recognised that the new commissioning framework may replace the MoU, however to move forward further discussion would take place on 21 May. Update to the June meeting.</p> <p>17.170 Patient Online Lisa Cunliffe confirmed that she had raised concerns with Stuart Cooper, IT Systems Manager, regarding the time lag of the search details. This was acknowledged and would be raised with the NHS National Digital Team. It was proposed to run some searches to obtain a more accurate position and the Data Quality Team will support practices to do this. The Chair felt this would be helpful to practices and would provide a fairer position.</p> <p>The question was raised as to whether the CCG would be monitored on this through the Assurance Meetings with NHSE. It was understood that NHSE are monitored in terms of uptake and the Transformation Team link into this. The Chair suggested a baseline audit be carried out.</p> <p>18.74 Fairmore Practice The Equality Impact Assessment had been received and the Committee had approved the relocation of the Practice. The move date was originally planned for 1 May but this had now moved to 1 June to allow more time to consult with patients.</p>	
<p>18:91</p>	<p>Matters Arising</p> <p>18:91.1 Primary Care Transformation Group ToR</p> <p>Following discussion at the previous meeting, the ToR had been review and were presented for ratification.</p> <p>It was highlighted that the Transformation Group is very primary care focused and reports as appropriate to three primary care groups. However in terms of membership, there is no representative from the Quality Team or from community providers, highlighting the need to consider what it is delivering then match the membership.</p> <p>Action:</p> <ul style="list-style-type: none"> ▪ David Massey to replace Stephen Toulmin as the LMC representative. ▪ Consider at the next meeting of the Primary Care Transformation Group. ▪ Further discussion at the Executive Team meeting before sign off at the Primary Care Committee. 	
<p>18:92</p>	<p>Primary Care Committee ToR Review</p> <p>Debbie Atkinson presented the ToR confirming that the changes to Membership were ratified by the GB in November 2017 with a request for a review in 6 months time.</p> <p>It was noted that a vacancy had now occurred on the Committee following the resignation of Dr Daly. It was therefore proposed that the additional GP and Practice Manager who were currently attending in a non-voting capacity, become voting members of the Committee to ensure ongoing clinical and primary care representation.</p>	

	<p>Members felt it was appropriate for them to be round the table, recognising that the GP and Practice Manager were appointed through an interview process and were not elected to the Committee. As the Committee receive a lot of confidential information, particularly in Part 2 relating to General Practitioners, it was agreed there would be a need to consider how to manage the detailed discussions. The Chair referred to concerns raised by the Council of Members about being fully representative and felt there is a role for both.</p> <p>The LMC felt it is important to have clinical representation and felt that most GPs would act in an independent role in the same way as a Practice Manager would. It may be necessary to consider certain items on the agenda if there was considered to be a conflict of interest.</p> <p>David Swift queried the wording in Para 32 of the ToR, noting that initially NHSE issued the ToR as a model document. It was agreed this should be amended to read 'The decisions of the Committee shall be within delegated limits'.</p> <p>Action:</p> <ul style="list-style-type: none"> ▪ Consider the membership outside the meeting and provide an update to the next meeting. 	
<p>18:93</p>	<p>E-Declaration Submission</p> <p>Sarah Danson presented the report which identified that following a review of the E-Declaration submission, two Practices have recurring breaches in respect of question Q5S – The practice records patients' consent for minor surgery including curettage and cautery and, in relation to warts, verrucae and other skin lesions, cryocautery (GMS Schedule 2 Para 8, PMS subject to local agreement).</p> <p>The practices were sent a verification letter but no response was received for 2016/17.</p> <p>Following discussion it was proposed that a verification letter be issued to both practices requesting confirmation of the answers provided. If not compliant a remedial notice will be issued to both practices, stressing that GDPR will be effective from 25 May 2018.</p>	
<p>18:94</p>	<p>GP Participation on Health Education England Basic Trainers Course</p> <p>Kathryn Burton, Postgraduate Education Development Manager, was in attendance for this item. She advised that a very successful GP training programme had been developed over the last 18 years and the EL GP Specialty Training Programme is the second largest within the NW Deanery. The report provided a summary of issues impacting on GP Trainer numbers, particularly over the next five years it is likely that up to 20 GP trainers will retire.</p> <p>The Committee were asked to consider supporting GPs who wish to become trainers through payment of backfill to attend 3 Basic Trainers Course modules in Year 1 at £450 per day which was the HE England rate.</p> <p>Discussion followed which highlighted the need to be equitable across the workforce and support all clinical professionals in primary care.</p>	

	<p>Lisa Cunliffe advised that the CCG does not often provide back fill monies, but will fund training and venues. Practices struggle to release people to train and there is a need to look at a strategy across all clinical posts. The Chair asked how other CCGs are managing this and was advised that East Lancashire is ahead of other CCGs in this respect.</p> <p>It was proposed that the Workforce Group explore further as to how to do this more equitably to support the work that Kathryn is doing, particularly as Primary Care Networks develop. Lisa confirmed there are a number of different funding streams, through the GP Forward View and NHS E Transformation Team. It was also noted that the training was due to commence during May.</p> <p>Mark Youlton felt it was important to support the recommendations but to develop a plan regarding the investment of primary care development monies, linking with other sources of funding ie: GPFV monies or HE England and consider how other health professionals can be supported. There was also a need to be mindful that we don't have a complicated arrangement.</p> <p>Members supported the recommendation for payment of packfill. It was also agreed that a condition of the funding would be that the Practice would have to repay the support funding if the GP did not go on to become a HE England accredited GP Trainer.</p>	
18:95	<p>Co-Commissioning Management Group Minutes</p> <p>Members received the minutes of the Co-Commissioning Group for information.</p>	
18:96	<p>Any Other Business</p> <p>18.96.1 Items for Inclusion on the Corporate Risk Register There were no new items for inclusion on the Risk Register.</p>	
18:97	<p>Date & Time of Next Meeting</p> <p>The next meeting was confirmed as Wednesday, 13 June 2018 at 2:30pm.</p>	
<p>RESOLUTION: “That representatives of the press and other members of the public be excluded from the remainder of the meeting having regard to the confidential nature of the business to be transacted, publicity on which would be prejudicial to the public interest.” (Section 1[2] Public Bodies (Admission to Meetings) Act 1960.</p>		