

**Tower Hamlets
Clinical Commissioning Group**

Primary Care Co-Commissioning Committee Minutes Part I

Tuesday, 19 January 2016, 3-5pm

Education Room, Tower Hamlets Archive Library, 277 Bancroft Road,
London E1 4DQ

1 General Business

1.1 Welcome, introductions and apologies

1.1.1 Present

Name	Role	Organisation
Cate Boyle (Chair)	Vice Chair - Lay Member (Patient and Public Engagement)	NHS TH CCG
Maggie Buckell	Registered Nurse Member –Primary Care GB Board Lead	NHS TH CCG
Mariette Davis	Lay Member (Governance)	NHS TH CCG
Dr Tan Vandal	Secondary Care Specialist Doctor	NHS TH CCG
Martin Marshall	Independent Clinical Advisor	NHS UCL
Jane Milligan	Chief Executive Officer	TH CCG
Henry Black	Chief Finance Officer	TH CCG

1.1.2 In attendance

Name	Role	Organisation
Attracta Asika	NHS England Representative	NHSE
Jenny Cooke	Deputy Director of Primary Care	NHS TH CCG
Jackie Applebee	London Medical Centre	LMC
Lynne Smith	PA and Administrator (Minute Taker)	NHS TH CCG
Alison Goodlad	Head of Primary Care (NE London) (NHS England)	NHSE
Nicola Hagdrup	GP Representative	TH CCG
Chima Olugh	Primary Care Commissioning Manager	TH CCG
Karen Bollan	Healthwatch Representative	Healthwatch
Virginia Patania	Practice Manager Representative	NHS TH CCG
Archna Martha	Director of Performance and Quality	NHS TH CCG

1.1.3 Apologies

Name	Role	Organisation
Somen Banerjee	Director of Public Health	LBTH
Luke Addams	Director of Adult Services	LBTH

1.0 General Business

1.2 Welcome, Introductions and Apologies

The Chair welcomed everyone to the committee meeting and introductions were made as there was a new member to the committee Alison Goodland from NHS England.

Apologies noted at 1.1.3.

1.3 Declarations of Interest

The Chair asked Members for any declarations of interest.

The complete register of interests is published on the NHS Tower Hamlets Clinical Commissioning Group's (CCG) website: <http://www.towerhamletsccg.nhs.uk/about/conflict-of-interest-register.htm>

Declarations of interest were noted as follows:-

Virginia Patania and Karen Bollan have some involvement with the vulnerable practices work that is being undertaken by NHS England which will be discussed on the agenda.

Nicola Hagdrup is involved with the CKD NIS.

1.3 Minutes of the last meeting

Mariette Davis suggested that Martin Marshall's organisation as stated on the minutes should read NHS TH CCG and not NHS UCL.

There was one outstanding action point and it was confirmed that the Operating Model had now been read. Mariette Davis also asked that from a governance perspective she is sent another copy for a final read.

2.0 Governance

2.1 BAF Risks

Jenny drew the committee's attention to the BAF risks register which states we have two risks for Primary Care. With regard to these risks we need to make sure that as a committee we have total assurance and confidence. The BAF risks will be presented bi-monthly at the committee. These risks should be used as a decision making tool but would require a thorough understanding. It was agreed that risk training should be scheduled for a future meeting.

Action 1: Risk training to be scheduled for a future committee meeting.

2.2 Programme Board Summary

Jenny discussed the summary commenting that the NIS contracts for next year were currently being looked at and that we are also looking at a plan for communicating the GP Patient Survey results to the practices.

For the Transformation fund the CCG have now put in a bid for Estates and Workforce and with regard to Support for Vulnerable Practices there is a ten million pound programme for support for practices that have been identified as struggling.

The subject was raised of how we would manage sub committee's such as the Programme Board that feed in to the committee and articulate conflicts of interest. The assurance was made that any conflicts of interest at the Programme Board would be overseen by Isabel Hodgkinson the chair of the meeting. It was noted that the changes for the Programme Board from Maggie Buckell chair to Isabel Hodgkinson had not been communicated to the committee. Actions were agreed that a diagram should be put together which shows the up to date attendees for the Programme Board. Any changes in future should also be noted at the beginning of the Programme Board Summary.

Action 2: A list of the Programme Board attendees will be supplied to the committee.

3.0 Finance

3.1 Finance Report

There were no significant changes to report. We are on target to break even for this financial year with regard to QIPP. An action was agreed for QIPP 16/17 to be presented at the next meeting.

Action 3: QIPP challenge for 16/17 to be presented at the next committee meeting.

4.0 Contracts

4.1 Update on Workstreams One and Two

It has been a busy two months, for Workstream one we have enlisted three pilot practices and are currently talking to a fourth. The practice observations are now booked in with data also being collected. The idea of these visits is to create a snapshot of the practice. The data collected include a patient profiles, patient satisfaction, staff satisfaction, finance and. The QI methodology is based on microsystems from Dartmouth University.

The feedback from practices is that that they feel that listened to and valued.

On finishing the pilot there will be an evaluation and discussion about how to offer this programme at scale. We are also trying to earmark funding from the NHS England Vulnerable Practices scheme to roll out this programme across Tower Hamlets

For Workstream Two we have now set up the reference group meetings with a wide range of membership. The first workshop is on the 20th January and one of the aims of the meeting is to find out what it feels like for each individual i.e. what does it feel like for a Pharmacist etc. There are also a series of practice visits that have been set up for Primary Care and Sam Everington to attend along with some patient engagement groups.

4.2 PMCF Update

The Primary Care team recently attended the TIC meeting to present the business case which subject to some clarification regarding evaluation has been approved. There are now four hubs open that are booking patients and we have employed four Pharmacists who have just

completed training to be independent prescribers. There will be a relaunch of patient engagement and communications along with availability of some activity data and a dashboard. Jackie Applebee raised concerns about the service and whether it is wise to raise patient's expectations about weekend appointments always being available.

4.3 PMS Update

We have now obtained legal advice from Capstick's solicitors who have informed us that there are a lot of inconsistencies in the contracts and that they are not fulfilling statutory requirements. On this basis we need to issue new contracts and we intend to apply the standard NHS England PMS contract that will be available soon. We have also got assurance that we can extend the break clause in APMS contracts.

5.0 Performance and Operations

5.1 Quality and Performance

It was noted that the colour ratings on the NHS England data were confusing and a request was made that Attracta should instead provide a summary of the report for the next committee meeting with the rag rating to be red, amber and green.

Action 4: Attracta Asika to provide a summary of the Quality and Performance data for the next meeting. Ratings should be red, amber, green.

6.0 AOB

Karen Bollan requested that the committee papers be sent to her private email address and not her corporate email address.

As this is Cate Boyle's last committee meeting, Jane Milligan thanked Cate for all her hard work that she has done for the Primary Care Committee and for the CCG.

Next meeting 23rd February 2016, Room 4, Education Centre, Burdett House, Mile End Hospital

Actions

Action reference	Action	Lead	Due Date	Update
MAY #6	Myers Briggs: All Primary Care Committee members to provide their Myers Briggs scores to Collette prior to the next meeting.	ALL	June 2015	Jackie Applebee to complete the MBTI.
OCT #1:	Operating Model: Jenny Cooke to send Mariette Davis a copy of the Operating Model to complete a final read.	JC/MD	February 2016	
JAN #1	BAF Risks: Risk training to be scheduled during a future committee meeting	JC	February 2016	
JAN #2	Programme Board Summary: Summary of attends of the Programme Board attendees.	LS	February 2016	
JAN #3	Finance: QIPP 16/17 to be presented at the next meeting. Richard Jeffrey to be contacted for further figures to complete the finance report	HB	February 2016	

Key

	Action required
	Action near completion
	Action completed
	Item formally approved/agreed