

## Primary Care Co-Commissioning Committee Minutes Part I

Tuesday, 26 July 2016, 3.30-5.30pm

Room 7, Burdett House, Mile End Hospital, Bancroft Road, London E1 4DG

### 1 General Business

#### 1.1 Welcome, introductions and apologies

##### 1.1.1 Voting Members

| Name               | Role  | Organisation |
|--------------------|---|--------------|
| Mariette Davis     | Lay Member (Governance)   | NHS TH CCG   |
| Dr Tan Vandal      | Secondary Care Specialist Doctor                                      | NHS TH CCG   |
| Julia Slay         | Governing Body Member – Lead for Patient and Public Involvement       | NHS TH CCG   |
| Simon Hall         | Director of Commissioning (on behalf of Jane Milligan, Chief Officer) | NHS TH CCG   |
| Dr Martin Marshall | Independent Clinical Advisor  | Independent  |

##### 1.1.2 Non-voting Members

| Name             | Role                       | Organisation |
|------------------|----------------------------|--------------|
| Virginia Patania | Urgent Care Representative | NHS TH CCG   |
| Karen Bollan     | Healthwatch Representative | Healthwatch  |
| Alison Goodlad   | NHSE Representative        | NHS E        |

##### 1.1.3 In attendance

| Name              | Role                                | Organisation |
|-------------------|-------------------------------------|--------------|
| Chima Olugh       | Primary Care Commissioning Manager  | TH CCG       |
| Jenny Cooke       | Deputy Director of Primary Care     | TH CCG       |
| Jo-Ann Sheldon    | Primary Care Commissioning Manager  | TH CCG       |
| Lynne Smith       | PA and Administrator (Minute Taker) | TH CCG       |
| Pacifique Kimonyo | Quality and Performance Manager     | TH CCG       |
| Andy Nuckcheddee  | Governance Manager                  | TH CCG       |

##### 1.1.4 Apologies

| Name            | Role   | Organisation |
|-----------------|--|--------------|
| Somen Banerjee  | Director of Public Health                            | LBTH         |
| Luke Addams     | Director of Adult Services                           | LBTH         |
| Jane Milligan   | Chief Executive Officer                              | TH CCG       |
| Denise Radley   | Director of Adult Services                           | LBTH         |
| Jackie Applebee | LMC Representative                                   | LMC          |
| Maggie Buckell  | Registered Nurse Member – Primary Care GB Board Lead | NHS TH CCG   |
| Henry Black     | Chief Finance Officer/Deputy Chief Officer           | NHS THCCG    |

|                |                   |                     |
|----------------|-------------------|---------------------|
| Nicola Hagdrup | GP Representative | Tower Hamlets<br>GP |
|----------------|-------------------|---------------------|

## 1.0 General Business

### 1.2 Welcome, Introductions and Apologies

The Chair welcomed everyone to the Committee meeting and everyone introduced themselves.

Apologies noted at 1.1.4.

### 1.3 Declarations of Interest

Karen Bollan declared that she is a member of the Royal College of Practitioners who often attend practices experiencing difficulties emerging from CQC visits.

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>

### 1.3 Minutes of the last meeting

The minutes were agreed as accurate apart from the attendance list which was subsequently amended to reflect the terms of reference to make sure attendees are noted in their correct roles.

Action log:-

The Tower of London Practice and QIPP will be discussed on the agenda.

## 2.0 Finance

At month three the CCG is reporting £557k overspent against the budget. The reason for this is that the allocation we have noted doesn't cover the expected spend. In terms of QIPP, £217K is not showing as this has not come through to the year to date figures. Queries were raised regarding the Direct Enhanced Service figure which was confirmed reflects what we spent last year. Questions were asked regarding the current GMS underspend which is potentially due to list cleaning. It was confirmed that for future reports the key risk of taking on co-commissioning will be removed.

## 3.0 Commissioning and Contracting

### 3.1 Tower of London Practice

Jo-Ann Sheldon reminded the Committee about the paper written by NHS England that she spoke about at last month's meeting regarding 60 or so patients at the Tower of London Practice who have in the past had a 'special arrangement' with City and Hackney that the Wapping Practice have now volunteered to take on. Henry Black requested information regarding the costs involved which he will now need to assess. There could be a delay with IT which we must be aware of and be prepared to chase up. Karen Bollan asked how patients

will be informed, and Alison Goodlad confirmed that this will be the responsibility of NHS England. Martin Marshall raised the issue again regarding the clinical competency of the GP at the Tower of London Practice and Alison Goodlad confirmed she will flag this with the Medical Director at NHS England.

**Action 1: Alison Goodlad discuss GP at Tower of London Practice with Medical Director at NHS England.**

### 3.2 Primary Care Strategy

The reference group has now finished along with four locality workshops which has given an overview of the work done over the last six months. A slide presentation was handed round which set out the next steps and feedback from the Committee was requested. The main features of the strategy were:

We accept that Primary Care is struggling and now have an outline from our workshops that our vision is a commitment to care which will be equitable. The idea of a health and wellbeing club for our patients will mean that they shouldn't have to re-register if they move in the borough and in this respect we need to think about how we organise the borough to see more alignment of back office functions, build on hubs and work much more closely with pharmacies as integrated providers. In this respect more clarification is needed about what sits at borough level, locality level and network level etc. Our main aim is to work towards a population based capitated budget. When these ideas were presented to the GP Care Group the response was very positive. The changes should be in place next year.

Martin Marshall identified concerns with a single point of access, as Martin feels that access is best kept personal, most patients wish to see their own GP. Virginia Patania explained that there is going to be a trial taking place for single point of access. The aim of this is that the single point of access via a telephony system will direct the activity to the right place/clinician. Karen Bollan commented that whilst the presentation is good, there is no patient voice included. We need to make the patient voice more explicit so that the public recognise themselves. Martin Marshall commented that although most GPs recognise that the world needs changing they may have questions around resourcing and the GP forward view. Virginia Patania has concerns regarding how we clearly articulate quality improvement in the document. An action was made to make the strategy plan more visible.

Virginia Patania provided an update on Workstream One and the work with the pilot practices over the last four weeks. Funding remains a concern and the CCG are working with NHS England to access national funding available through the GP Forward View. Virginia also updated on conversations she was having around creating a Primary Care QI 'academy'.

**Action 2: Primary Care Strategy Plan to be made more visible**

## 4.0 Quality

### 4.1 CQC – SOP

This Standard Operating Procedure (SOP) is going to be presented at all the Primary Care Committees across London and is to provide assistance with the governance process around CQC visits and where improvement may be needed and there are contractual implications. Jenny Cooke commented that with regard to Tower Hamlets we would probably only use breach notices in the case of non-engagement for improvement. It was agreed by the Committee that we would adopt this SOP. Karen Bollan explained that she may have a conflict

of interest here as she is a member of the Royal College of Practitioners who often attend practices experiencing difficulties emerging from CQC visits.

## 5.0 Governance

### 5.1 Risks

The Primary Care team risk register was presented at the meeting and it was explained that the CCG executive have gone through the wording so these are risks rather than statements and also reassessed the risk rating. It was agreed that the risk relating to the APMS contracts should be considered for escalation to the BAF. There were no further comments made although it was noted that the BAF primary care risks should be reviewed at this Committee on a regular basis.

**Action 3: Risk relating to the APMS Contract to be assessed for possible escalation to the BAF**

### 5.2 Governance Review

As part of a CCG Governance review, it was agreed that we should review governance for the Primary Care Committee including review of TOR and defining what Parts 1, 2 and 3 are for and who should attend the 3 distinct Parts. Looking at the Terms of Reference it was noted that whilst the overall role of the Committee hasn't changed, some changes are required to reflect:

- The Primary Care Programme Board now needs to be changed in alignment with the new structure to Primary Care Planning and Delivery Meeting.
- How the Committee reports to the Finance and Audit Committees.
- There is now a new chair of the committee, Julia Slay
- The new Conflicts of Interest Guidance shortly to be issued by NHSE
- Virginia Patania commented that her role is incorrectly described and it was decided that it will now be changed to CCG Governing Body Primary and Urgent Care Lead as a non-voting member. Cate Boyle and Dianne Barham need to be removed as they are no longer members
- Reference to the WEL Advisory Board may no longer be relevant.

It is not clear in the Terms of Reference what should be part I, II or III, so it was decided that part I will be public, part II will cover sensitive matters and part III for the conflicted members to leave. It was noted however that we will consider agenda items on a case by case basis. With regard to the New Conflict of Interest Guidance, Andy Nuckcheddee is leading on this and it will be discussed at the Audit Committee before the CCG's policy is updated.

### AOB

None Noted.

Next meeting 27<sup>th</sup> September 2016, 3.30-5.30pm, The Quayside Room, Museum of London Docklands, No.1 Warehouse, West India Dock Road, London E14 4AL

## Actions

| Action reference | Action  | Lead | Due Date | Update |
|------------------|---|------|----------|--------|
| #July 1          | Alison Goodlad to raise competency issues of GP at Tower of London Practice to Medical Director at NHS England. | AG   | Sep 2016 |        |
| #July 2          | Primary Care Strategy Plan to be made more visible.   | JC   | Sep 2016 |        |
| #July 3          | Risk relating to the APMS Contract to be assessed for possible escalation to the BAF.                           | CO   | Sep 2016 |        |

### Key

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