



PRIMARY CARE COMMISSIONING COMMITTEE IN PUBLIC

1.00pm on Tuesday 9 May 2017
held at

The Hub, Teesdale Resource Centre, Barnard Castle
CONFIRMED MINUTES

Present:

David Taylor-Gooby (Chair)	Lay Member, Patient and Public Involvement
Andrew Atkin (Vice Chair)	Lay Member
Sarah Burns	Director of Commissioning
Joseph Chandy	Director of Primary Care, Partnerships and Engagement
Gill Findley	Director of Nursing
Mark Pickering	Chief Finance Officer
Dilys Waller	Locality Lead – Durham Dales

In Attendance:

Margaret Coyle	Executive Assistant (minutes)
Amanda Healey	Durham County Council
Denise Jones	NHS England
Linda McCann	Intrahealth, DDES CCG
Charlie McGarrity	Intrahealth, DDES CCG
Gregory Moorhouse	Intrahealth, DDES CCG
Mags Wells	Governance Administrator

Apologies:

Nicola Bailey	Chief Operating Officer
James Carlton	Medical Adviser
Dr Stewart Findlay	Chief Clinical Officer
Christine Keen	NHS England
Marianne Patterson	Healthwatch County Durham

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PCC/17/001	APOLOGIES FOR ABSENCE Colleagues were welcomed to the meeting and apologies noted.	
PCC/17/002	DECLARATIONS OF CONFLICTS OF INTEREST All colleagues were reminded to check their entries on the Declarations of Conflicts of Interest Register and submit updates as necessary. There were no declarations made in relation to agenda items. Although some potential conflicts had been highlighted on the Primary Care Development and Primary Care Fair Funding Scheme reports, the committee agreed that as they were information sharing documents with no decisions to be made, there were no conflicts of interest for any member of the group.	

ITEM NO		ACTION
PCC/17/003	<p>MINUTES OF THE MEETING HELD ON 14 MARCH 2017</p> <p>The minutes were accepted as a true record.</p>	
PCC/17/004	<p>MATTERS ARISING FROM THE MEETING HELD ON 14 MARCH 2017</p> <p>There were no matters arising from the previous meeting.</p>	
PCC/17/005	<p>REVIEW OF ACTION LOG</p> <p>The action log was reviewed and updated.</p>	
ITEMS FOR DISCUSSION		
PCC/17/006	<p>PRIMARY CARE FINANCE UPDATE MONTH 12 2016/17</p> <p>The purpose of the report was to provide an update on the primary care financial position of the CCG at the end of March 2017 (end of the financial year). It was noted that the information contained within the report was still subject to external audit checks.</p> <p>It was reported that Primary Care expenditure from CCG mainstream funding was underspent by £755k. A large underspend on prescribing was partially offset by a small pressure on the home oxygen contract and GP IT services. The prescribing position was based on information received from the Prescription Pricing Division. The QlP plans had been delivered resulting in an underspend in that area.</p> <p>It was noted that Primary Care Co-commissioning expenditure was underspent by £1,910k, mainly due to lower than budgeted premises costs and the release of the 1% contingency as requested by NHS England. The position included savings derived from changes in rateable values and demographic growth was lower than the initial assumption.</p> <p>The Committee discussed the reported financial position and received further explanation in the following areas. Based on the 2016/17 end of year position, assumptions were made on the levels of QIPP efficiency savings, in-year there had been better than expected efficiency savings in prescribing due to, for example, changes in the nature of individual drugs or national prescribing decisions. The investment in pharmacists to drive further savings had delivered better than expected outcomes. The Committee received assurances that the efficiency savings had been delivered without reducing the level of services provided.</p> <p>RECEIVED/NOTED: the Primary Care Commissioning Committee received the report and noted the financial position.</p>	
PCC/17/007	<p>INTRAHEALTH UPDATE</p> <p>In response to a request from the Committee, representatives from the Intrahealth Federation provided a presentation setting out their response to the five year forward view. It was explained that the federation had been developed over two years to support individual practices to compete at scale by coming together to form the federation. The presentation provided</p>	

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	<p>information in the following areas along with an overview of the federation's achievements:</p> <ul style="list-style-type: none"> ▪ The structure and governance of the federation ▪ What had been achieved and the developments set against the national context ▪ How the federation works with and supports the work of DDES CCG ▪ Innovation and improvements made to patient services ▪ The structural benefits derived from the federation <p>The Committee discussed the update provided and was informed that whilst Intrahealth was one of the smaller federations it was very innovative, demonstrated significant investment in primary care and the day-to-day services provided. Intrahealth had demonstrated a successful approach to re-investing their efficiency savings into improving patient care. There was a focus on the need to invest in the capacity and quality of developing the provision of services closer to home to manage on-going requirements.</p> <p>In response to a question from the public, it was clarified that all GP practices are part of a federation and information on the services provided by the Durham Dales Health Federation is available on their website.</p> <p>RECEIVED/NOTED: the Committee noted the updated position reported.</p>	
ITEMS FOR INFORMATION		
PCC/17/008	<p>PRIMARY CARE COMMISSIONING UPDATE</p> <p>The verbal report provided by NHS England focussed on the GP Forward View initiative and the investment into general practices. The transformation team had been formed by NHSE to support the CCGs to deliver against the GP point of view. There was a continued focus on delivering extended access to GP services, from September 2016 DDES CCG had successfully implemented this in their GP practices. It was noted that the programme to support clinical pharmacists into clinical practices was already taking place in the Intrahealth Federation and that NHS England was working with DDES CCG on a new funding submission for this initiative. The 2017/18 resilience programme fund had reduced by 50% over the previous year to £450K, a number of bids from DDES CCG practices had been received, bids had been assessed and this was now in the consultation phase following which the CCGs would be informed of the outcome.</p> <p>RECEIVED/NOTED: the Committee received and noted the verbal report on progress against the GP Forward View initiative.</p>	
PCC/17/009	<p>PRIMARY CARE DEVELOPMENT REPORT</p> <p>The Committee agreed that as the report was an information sharing document with no decisions to be made, there were no conflicts of interest for any member of the group.</p> <p>The purpose of the report was to update the Primary Care Commissioning Committee on the Primary Care Strategy Implementation. Attention was drawn the following key areas:</p>	

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	<ul style="list-style-type: none"> ▪ Primary Care Fair Funding Scheme ▪ Primary Care Home Model ▪ International Recruitment ▪ CEPN and GP Resilience ▪ GP Access ▪ Locate <p>The Committee discussed the report and was informed that DDES CCG's strategic approach to GP recruitment involved a five point plan looking at safe initiatives to bring more GPs into the area. This included career start to persuade trainees to stay in the area and provide on-going support for their development, retention of GPs near retirement, supporting and increasing resilience of GPs in smaller practices. A funding bid had been submitted to NHSE to support the work and processes around EU and non-EU recruitment.</p> <p>The CCG was working closely with Health Education England on the recruitment issues of doctors and nurses, a bid was being prepared to develop a local framework to provide training placements in practices. This will include financial support for training of medical secretaries and practice managers. In addition, initiatives were being developed to support practice resilience including working with the Community Education Provider Network (CEPN).</p> <p>Practices had been very responsive to the work looking at initiatives to improve access to primary care and reduce inappropriate visits to secondary care, this will culminate in an event in June 2017 showcasing best practice. Linked to this was the recognition that improvements were needed in the ability of staff to navigate patients to the correct service provider. Work was underway with Durham County Council to explore the possibility of providing training to practice staff on the use of the Locate services.</p> <p>Under the Primary Care Home Scheme a new funding model will be introduced to calculate the level of enhanced services paid to practices in 2017/18. This will drive a population based service needs approach and improve utilisation of the resources available.</p> <p>The Committee noted the innovative approach of the new funding model and through its linkage with TAPS, that this will support an integrated approach to meeting the needs of vulnerable patients.</p> <p>RECEIVED/NOTED: the Committee received the report and noted the reported progress.</p>	
PCC/17/010	<p>SUMMARY OF 2017/18 GENERAL MEDICAL SERVICES CONTRACT NEGOTIATIONS</p> <p>The purpose of the report was to inform the Committee on the key changes to the General Medical Services (GMS) contract in England for 2017/18. The changes had been agreed between NHS Employers, on behalf of NHS England and the General Practitioners Committees (GPC) of the British Medical Association.</p> <p>The Committee noted the 1.4% pay and general expenses uplift, the changes in the value of QOF and noted the commitment to review that framework. A key change was under the direction of services to deliver i.e. unplanned</p>	

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	<p>admissions, this had been difficult to administer and had been discontinued, the funding had been re-directed to an alternative scheme to support services on frailty. There had been an uplift in the Learning Disabilities Health Check Scheme to enhance the hours.</p> <p>Supplementary to the information provided, further information had since been released and a link to that would be provided in the minutes of the meeting. This was around the technical guidance on the standard financial entitlement payment to GPs.</p> <p><i>Link to supplementary information: http://www.nhsemployers.org/your-workforce/primary-care-contacts/general-medical-services/gms-contract-changes/gms-contract-changes-201718, (links to pdf documents are on the right hand side of the page).</i></p> <p>RECEIVED/NOTED: the Committee received the report and noted the changes to the GMS contract.</p>	
PCC/17/011	<p>PRIMARY CARE FUNDING SCHEME</p> <p>The Committee agreed that as the report was an information sharing document with no decisions to be made, there were no conflicts of interest for any member of the group.</p> <p>The purpose of the report was to outline to the Committee DDES CCG's intention to replace the Quality Incentive Scheme (QIS) and Enhanced Services Scheme with the Primary Care Fair Funding Scheme. It detailed how the CCG will calculate the level of enhanced services paid to practices in 2017/18 and the benefits of the new scheme.</p> <p>DDES CCG continuously strive to work with GPs to meet the health needs of patients within its allocated NHS budget. This scheme will empower GPs to meet their patients' needs within the budget given to their practice. It will allow successfully managed practices to re-invest the following year to provide additional services.</p> <p>The scheme consisted of three sections, section A was a mandatory gateway requirement to access the other funding elements, section B set out the quality markers they will be measured against and section C set out the schemes practices could implement to manage the demand into secondary care. It was noted that all DDES practices had signed up to the three sections of the scheme.</p> <p>It was recognised that this was an opportunity scheme to encourage the delivery of more local enhanced services.</p> <p>RECEIVED/NOTED: the Committee received the report and noted the intention to move to the Primary Care Fair Funding Scheme.</p>	
PCC/17/012	<p>ANY OTHER BUSINESS</p> <p>There was no other business.</p>	

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	<p>NEXT MEETING</p> <p>The meeting concluded at 2.10pm.</p> <p>The next meeting will be held on Tuesday 11 July 2017 at Spennymoor Town Hall, Spennymoor.</p>	

David Taylor

Signed:

Name: David Taylor-Gooby

Title: Chair

Date: 11 July 2107.....