



**GOVERNING BODY MEETING ON
TUESDAY 20 MARCH 2018**

MINUTES TO BE RECEIVED

Title of Meeting	Primary Care Commissioning Committee
Date of Meeting	20 November 2017 and 12 December 2017
Status (ratified/draft)	Ratified
CCG Representatives	As noted in the minutes

Summary of key issues discussed:

20 November 2017

Kirkham Health Centre, Ash Tree House Surgery and Kirkham Clinic – Premises Relocation Application: The Primary Care Commissioning Committee approved the relocation application and revenue consequences subject to receiving more detail of the specification for the actual services that will be located in this facility

12 December 2017

Co-commissioning Memorandum of Understanding: the Committee approved the primary care co-commissioning memorandum of understanding for 2017/18.

Extended Access Utilisation: an update on utilisation was provided

GP Quality Contract 2017/18: a summary of performance against the requirements of the GP quality contract for quarter 2 was noted by the Committee.

The **NHS England Primary Care Maturity Matrix** self-assessment was received.

Applications for temporary closure of GP practices were noted.

Issues requiring action:

Details:	By whom:	Timescale:
None		

Recommendation

The Governing Body is asked to review and note the contents of the minutes.

Mary Dowling
Chair – Primary Care Commissioning Committee

Minutes of the meeting of the Primary Care Commissioning Committee
Held on Monday 20 November 2017 at 3.30pm
In the CCG Boardroom, CCG Offices, Derby Road, Wesham, PR4 3AL
(Meeting held in public)
Minutes ratified 12th December 2017

Present: Ms M Dowling, Chair
 Dr I Stewart, Secondary Care Doctor
 Mr P Olive, Lay Member (Governance)
 Mr P Tinson, Chief Operating Officer
 Mr A Harrison, Chief Finance Officer
 Ms C Lewis, Acting Executive for Governance, Patient Safety and Risk

In Attendance:
 Mrs S Bloy, Senior Primary Care Manager, NHS England (North)
 Mr M Ashe, Patient and Public Engagement representative
 Ms K Galloway, Healthwatch representative
 Mr P Hargreaves, Head of Estates
 Ms B McKeowen, Transformation and Planning Manager
 Mrs P Bowling, Governing Body Secretary (minutes)

The Chair opened the meeting and thanked Ian Gibson, PPG and member of the public, for his attendance. The Chair advised that this was a meeting held in public and not a public meeting. The Chair also welcomed Claire Lewis who was attending the meeting on behalf of Jennifer Aldridge.

No.	Item
1.	Apologies for absence Dr A Janjua, Mrs J Aldridge and Mr K Toole.
2.	Any other matters of urgent business There were no other matters of urgent business.
3.	Declarations of Interest P Hargreaves declared an interest as a patient registered with one of the Kirkham GP Practices. B McKeowen also declared an interest as a patient registered at one of the Kirkham GP Practices. The Chair deemed that both individuals could participate in the meeting as their role was to provide information and address questions about the proposed relocation and they were would not be involved in Committee decision making.
4.	Minutes of the last meeting held on Tuesday 24 October 2017 The minutes of the last meeting held on Tuesday 24 October 2017 were agreed as a correct record.
5.	Matters arising and action points 1) <u>Urgent Care contract</u> The winter communications plan has now been submitted to NHS England and will be shared with members before the end of the week. 2) <u>Summary of guidance on managing conflicts of interest relating to commissioning of new care models</u> Good progress is being made with this piece of work and it is anticipated that a draft internal audit

<p>6.</p>	<p>report will be available by the next meeting.</p> <p>Kirkham Health Centre, Ash Tree House Surgery and Kirkham Clinic – Premises Relocation Application</p> <p>The Chair advised that the application for premises relocation was part of a bigger case for the development of primary care health services in Kirkham and Wesham. The Chair introduced P Hargreaves and B McKeowen who had been involved in the development of the proposal for relocation.</p> <p>By way of background, P Hargreaves explained that in 2015, following a request from NHS England, the CCG developed an Estates Strategy which was approved by the Finance and Performance Committee in January 2016. The limitations with the existing sites for Kirkham Health Centre, Kirkham Clinic and Ash Tree Surgery were identified. Utilisation surveys and feasibility studies were then undertaken across all primary care centres and the CCG’s Wesham offices. This determined that whilst there was a need to make better use of void space generally, no existing building was available at the size needed for relocation of the practices. An options appraisal (which included use of the former Wesham Rehabilitation Unit) was undertaken. This identified relocation of the practices as the ‘preferred option’.</p> <p>P Hargreaves spoke to a slide presentation highlighting the following:</p> <ul style="list-style-type: none"> • Investment in primary care health centres in Fylde in Lytham, Ansdell, St Annes and Freckleton; • The case for change which identified the requirement for major investment to make improvements to bring the existing buildings up to modern standards • Future land use/housing developments in Kirkham and Wesham • The options and why they were discounted • The engagement exercise <p>S Bloy presented the proposal to relocate the two existing GP surgeries, Kirkham Health Centre and Ash Tree House, from their existing premises into a new location and highlighted the following key points from the report. NHS England has received applications on behalf of both practices which is permissible in terms of the practices being allowed to relocate and there is evidence of engagement and the practices have identified a case for change. Major factors for the proposed relocation include the increase in list size due to planned housing development and population growth; its fit with the vision of the Vanguard programme and New Models of Care (NMoC) and the integration of community and primary care services.</p> <p>S Bloy added that the proposal is to relocate both surgeries and the clinic into a newly constructed Primary Care Centre on the former Wesham Park Hospital site following demolition of the current building. Ash Tree House is approximately 0.9 miles from the Wesham location whilst Kirkham Clinic and Health Centre are 0.6 miles away and public transport has been identified as being close by.</p> <p>S Bloy referred to the public engagement exercise and commented that engagement on this scale had not been seen before for a relocation application and described it as phenomenal. 89% of feedback received was positive. In terms of the financial impact the projected costs for the new build scheme showed a net savings of approximately £478,619 per annum.</p> <p>S Bloy recommend that members of the Committee approve the application and revenue consequences, in the best interests of the patients, to provide purpose built, high quality health care facilities, supporting the CCG vision, new models of care and primary care at scale.</p> <p>The Chair advised members that in making a decision they had to be assured, and needed to assure the Governing Body, that this was the right decision to take in the circumstances, that it was in line with the CCG’s Estates Strategy and that it would result in suitable premises now and</p>
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in the future. Questions and comments were invited and a debate ensued.

In response to a question about the financial impact on the practices, A Harrison confirmed that the practices would be reimbursed for any increase in rent. It was also noted some of the savings described in the report were potentially deliverable whether or not the move takes place. FWCCG has made a statement to NHS Property Services that it does not wish to occupy all of the Wesham building. It was also confirmed that the costs presented did not include the cost of the relocation of the CCG Offices.

With regard to the next steps and lead time for development, P Hargreaves advised that the Governing Body will consider the decision taken by this Committee at their meeting on 21 November 2017. Following this, work will begin on the preparation of Project Initiation Document (PID) which will be formally submitted to NHS England property appraisal with a request for finance through NHS customer capital, alongside development of a Business Case. The anticipated timeframe for the development is 2 years including planning preparations and demolition of the existing building (12 months) and a construction period of at least 12 months. NHS Property Services are responsible for the construction costs and there will be significant capital receipt generated to the health economy from the sale of the Wesham site, sale of Kirkham Health Centre and on future maintenance costs.

A Harrison made reference to the positive response to the engagement exercise which had been independently analysed. Six per cent of the combined registered practice population had responded. However, there were some members of the public who disagreed with the proposals and believed that the decision to relocate would mean that people in the south of the patch were worse off and that their needs were not being taken into account. A Harrison explained that through the engagement exercise attempts had been made to respond to all comments received, both negative as well as positive.

A question was asked about how this development contributed to the CCG's clinical strategy and 2030 Vision? In response it was stated that a key benefit of this building would be the additional capacity that it will bring for the provision of clinical services now and in the future. It will also have new facilities such as a health docking port which will enable the use of technology, such as scanners. Following a decision on the proposal, a full Service Specification will be developed detailing the services that will be provided from the site, over and above the current provision by the practices.

The Chair informed members that a letter had been received from Liz Oades, Lancashire County Councillor Fylde East, which raised a number of questions in relation to the future health services for Kirkham and Wesham. The CCG will be responding in full to the letter. One issue raised in this correspondence was a request for consideration to be given to the continuation of a full medical service in Kirkham. A Harrison advised that this issue had been raised during the engagement exercise and would be given due consideration during the preparation of the service specification in conjunction with the GP practices.

The Chair asked the Committee if any members had any major reservations or concerns about the proposals put before the Committee. No objections were raised.

It was proposed that the Primary Care Commissioning Committee approve the application and revenue consequences to relocate the Kirkham Clinic, Kirkham Health Centre and Ash Tree House Surgery to a development on the site at Derby Road, Wesham on the basis that it meets the health and care needs of CCG's population now and in the future and resonates with the national and local priorities and delivers an element of the CCG's estates strategy developed some time ago.

RESOLVED:

- 1) That the Primary Care Commissioning Committee approve the relocation application**

	<p>and revenue consequences subject to receiving more detail of the specification for the actual services that will be located in this facility so that the Committee can be assured that the services are suitable and the building that will end up being provided on this site is fit for purpose with a measure of additional capacity that will be fully utilised in the future.</p> <p>2) That the Primary Care Commissioning Committee put this recommendation to the Governing Body for endorsement.</p> <p>3) That the Primary Care Commissioning Committee note the next steps in terms of the preparation of a Project Initiative Document to be submitted to NHS England and NHS Property Services, and assuming approval, note that it will be at least two years before this building is in place and operational.</p>
<p>7.</p>	<p>Date and time of next meeting</p> <ul style="list-style-type: none"> • Tuesday 12 December 2017 • 4:00pm • Boardroom, FWCCG

Minutes of the meeting of the Primary Care Commissioning Committee
Held on Tuesday 12th December 2017 at 4.00pm
In the CCG Boardroom, CCG Offices, Derby Road, Wesham, PR4 3AL
(Meeting held in public) – Ratified 20th February 2018

Present: Ms M Dowling, Chair
 Dr I Stewart, Secondary Care Doctor
 Mr P Olive, Lay Member (Governance)
 Mr P Tinson, Chief Operating Officer
 Mr A Harrison, Chief Finance Officer
 Ms C Lewis, Acting Executive for Governance, Patient Safety and Risk
 Mr K Toole, Lay Member (Patient and Public Engagement)

In Attendance:
 Mrs S Bloy, Senior Primary Care Manager, NHS England (North)
 Mr M Ashe, Patient and Public Engagement representative
 Ms K Galloway, Healthwatch representative
 Dr A Janjua, Elected Clinical Lead
 Miss J Moores, Personal Assistant (minutes)

The Chair opened the meeting and thanked the member of the public present for his attendance. The Chair advised that this was a meeting held in public and not a public meeting. The Chair also welcomed Claire Lewis who was attending the meeting on behalf of Jennifer Aldridge.

No.	Item
1.	Apologies for absence Mrs J Aldridge
2.	Any other matters of urgent business There were no other matters of urgent business.
3.	Declarations of Interest Dr A Janjua declared an interest in agenda item 8 as a GP partner at Fleetwood Surgery. The Chair deemed that Dr Janjua did not need to leave the meeting for the discussion on this item as it was intended as an update on the progress of the GP Quality Contract.
4.	Minutes of the last meeting held on 20 November 2017 The minutes of the last meeting held on 20 November 2017 were agreed as a correct record.
5.	<p>Matters arising and action points</p> <p><u>Summary of guidance on managing conflicts of interest relating to commissioning of new care models</u> The Lay Member for Governance updated the Committee that the draft report from MIAA should be received by 15.12.2017, MIAA have advised they are satisfied with the committee structure and that existing systems are working well and will cope adequately in the future.</p> <p><u>Primary Care Finance</u> The Chief Finance Officer apologised that the report was unavailable today due to staff absences and updated that the report will be submitted to the February 2018 meeting. The Chair requested that a timetable of future reporting is included with the next report.</p> <p><u>GP Quality Contract Review Process 2018/19</u> The Lay Member for Patient and Public Engagement advised he had met with Barbara McKeowen to discuss patient engagement in relation to the GP Quality Contract review process and that he</p>

<p>5.1</p>	<p>will have involvement in the future development of the contract. <u>Applications for temporary closure of GP practices</u> The Chief Operating Officer advised that the cumulative total of closure applications by practice was not included in the report submitted to the Committee; however, this information would be circulated by 15.12.17.</p> <p><u>GP Quality contract timeline</u> The Chief Operating Officer presented the timetable for the GP quality contract review process for 2018/19. The Committee were advised that engagement was underway with STP leads, Fylde Coast leads and the Lancashire Local Medical Committee as well as conversations at CCG neighbourhood events.</p> <p>Contract sub themes were presented at a recent neighbourhood event and a discussion is taking place with Blackpool CCG regarding prior approval of referrals and alignment with the GP+ contract. Further engagement is planned at the CCG Council of Members meeting and the outcomes of this will be shared at a future committee meeting.</p> <p>Committee agreement to sign off the GP quality contract for 2018/19 will be sought at the February 2018 meeting.</p>
<p>5.2</p>	<p><u>Relocation of Kirkham Clinic and Health Centre and Ash Tree House Surgery</u> The recommendations of the Committee regarding the relocation of services were approved by the Governing Body on 21.11.2017. The recommendations will now be taken forward and certain elements of them will be brought back to a future Committee meeting for discussion around the range of services to be available from the new facility.</p> <p>The Chair advised that a detailed response had been provided to the letter from Councillor Liz Oades discussed at the Committee meeting on 20/11/17.</p> <p>A further update will be provided at the February 2018 meeting.</p>
<p>6.</p>	<p>Co-commissioning Memorandum of Understanding Mrs S Bloy presented the memorandum of understanding which outlines the working arrangements for the delivery of primary medical care services between NHS England and NHS Fylde and Wyre CCG.</p> <p>The Committee were advised that amendments have been made to the main documents, which were mainly more detailed descriptions and clarification. The task and functions list had been added and this area of the report had generated lots of discussion and clarification. The Committee received assurance that the task and function list was robust and any CCG concerns regarding the list had previously been flagged and addressed.</p> <p>Sarah Bloy confirmed that the Chief Operating Officer had previously commented that primary care procurement activities would be best undertaken at scale considering the relative infrequency of activities and expertise required and confirmed that NHS England colleagues were progressing discussions with a potential procurement partner.</p> <p>The Committee were advised that Mrs S Bloy and the team at NHS England had produced a Lancashire wide set of primary care standards and a small task and finish group will meet in January 2018 to develop these standards further.</p> <p>The Chief Operating Officer advised that engagement was about to commence on the draft primary care strategy and this would be signed off via the Joint Committee of CCGs.</p> <p>The Committee requested the appendices to the report be forwarded as these were unavailable in the version of the paper circulated.</p>

	<p>Resolved: That the Committee approved the primary care co-commissioning memorandum of understanding for 2017/18.</p>
<p>7.</p>	<p>Extended Access Utilisation The Chief Operating Officer presented the report to provide the Committee with an update regarding the utilisation of the extended access service.</p> <p>The update confirmed the core requirements for extended access provision and confirmed that across the Fylde there are three locations and the opening times at these locations. There was a request from the Fylde Coast Medical Services to amend the original opening times due to staffing and demand for the service, this request is currently being discussed.</p> <p>The Committee noted that utilisation levels at the Freckleton locale were higher than at Fleetwood and that there was a correlation between the patient's proximity to GP practices and utilisation. This information will be shared at the next Council of Members meeting as a reminder and as encouragement for the practices to utilise the service.</p> <p>It was noted that some practices have unused appointments within normal opening hours and this may be a contributing factor to not utilising the extended access capacity across certain practices. The Chief Finance Officer advised the CCG is jointly procuring a service with high level of utilisation when compared with the Blackpool footprint.</p> <p>A next step is for the CCG to work with Blackpool CCG and NWS to enable patients to book appointments at any of the three sites via the 111 service and for the NEXUS system to be able to track and monitor utilisation.</p> <p>Mrs S Bloy advised that the service is very new and behaviours may need to change to ensure the patient receives full benefit of the service on offer. It was also noted that there is a perception that CCGs must provide 45 minutes of extended access per 1000 population however if the CCG can prove that demand is met outside of extended access provision it may not be necessary to commission the service at this level. Mrs S Bloy agreed to share a document which sets out these requirements</p> <p>Mrs K Galloway provided feedback following a Healthwatch project on GP services in Blackpool which revealed of 530 patients surveyed over 95% reported that they were happy with the opening hours provided by the practice. At the Walk-In-Centre on Whitegate Drive, all patients surveyed reported that they were registered with a GP practice and were using the Walk-In-Centre as they could not get an appointment with their GP. The Lay Member for Patient and Public Engagement noted similar findings in the Fleetwood area and advised that some patients who work may not be able to get a GP appointment during surgery opening hours.</p> <p>Mrs K Galloway reported that the survey is being followed up by going into workplaces and a report on the findings will be available in early 2018.</p> <p>Resolved:</p> <ol style="list-style-type: none"> 1) The Committee approve the next steps that in order to enhance the existing provision discussions should take place with the provider to ensure that: <ol style="list-style-type: none"> i) Any patient on the Fylde Coast will be able to access an extended access appointment at any of the three sites located in Fleetwood, Freckleton and Blackpool. ii) Patients will be able to book appointments at these sites via the 111 service. iii) Providers such as Walk-In-Centre's and Urgent Treatment Centre's should have the ability to view available slots and book appointments for extended access to support the management of patient flows and primary urgent care capacity across the Fylde Coast.

	<p>2) That the Committee note the information will be shared with the Council of Member to encourage utilisation of the service</p> <p>3) The Committee approves the continuation of the extended access arrangements until further analytical information is available.</p>
<p>8.</p>	<p>GP Quality Contract – Q2 2017/18</p> <p>The Chief Operating Officer presented the report which provided the committee with a summary of performance at practice level against the requirements of the GP quality contract for quarter 2 (July – September 2017).</p> <p>The Committee were advised that a number of key performance indicators had not been met such as the late submission of returns and not attending a required meeting.</p> <p>The Committee received assurance that all performance exceptions and issues are followed up directly with the practices and feedback will be provided to the practices at the PQIP visits to reinforce the submission dates for required information.</p> <p>The Chief Finance Officer requested practice level quality assurance regarding The Old Links Surgery as this practice does not participate in the 2017/18 GP quality contract. The Chief Operating Officer advised the he was not aware of any concerns from a quality perspective and the Senior Integrated Governance Manager will be asked to provide a response to this request.</p> <p>Resolved:</p> <p>The Committee note the performance against the GP quality contract at quarter 2. The Committee note the performance exceptions against the contract.</p>
<p>9.</p>	<p>NHS England Primary Care Maturity Matrix</p> <p>The Chief Operating Officer presented the Primary Care Maturity Matrix which forms part of the engagement process on the primary care work stream and to set ambitions for the delivery of primary care.</p> <p>The matrix looks at NHS England rationale for the development of primary care and includes the development of neighbourhoods and integrated teams.</p> <p>The Committee noted that a self-assessment of CCG progress against the matrix is to be submitted to NHS England on 13th December 2017 and this will be shared for discussion at the February 2018 committee meeting. Following self-assessment an action plan for the following year will be formed which will consist of actions on a STP, LDP, neighbourhood and multi neighbourhood level.</p> <p>The Committee were advised that the CCG performs well, especially concerning new models of care, when compared to other areas.</p> <p>Resolved:</p> <p>The Committee received the primary care maturity matrix for information and noted the work to date. The Committee noted the self-assessment will be received at the February 2018 meeting.</p>
<p>10.</p>	<p>Primary Urgent Care update</p> <p>The Chief Operating Officer presented the report to provide the Committee with a performance update against the key performance indicators (KPI's) of the primary urgent care contract which have a financial implication.</p> <p>The Committee were advised that the contract was signed in September 2017 and the KPI's are monitored via formal contract meetings. There are eight KPI's which have a financial incentive attached and are monitored on a monthly basis, the remaining KPI's are monitored on a quarterly</p>

	<p>or half yearly basis, reporting information for quarter 1 of the contract was not available at the meeting.</p> <p>The Committee acknowledged that more time is needed to gather the relevant data to provide a more comprehensive view of contract performance and this will be received at the February 2018 meeting.</p> <p>Resolved: That the Committee note the content of the report and the contract performance against the key performance indicators.</p> <p>That the Committee will receive a further update at the next meeting.</p>
11.	<p>Applications for temporary closure of GP practices The Chief Operating Officer presented the report which provided an overview of applications received from practices requesting to close within core hours. The applications received have been approved by the CCG Executive Management Team.</p> <p>A summary of cumulative applications by practice is to be provided and circulated to the Committee for information by 15th December 2017.</p> <p>Resolved: That the Committee note the applications received and the outcomes of these applications have been determined by the CCG Executive Management Team.</p>
12.	<p>Practice contract changes report The Chief Operating Officer presented the report which detailed the contractual changes actioned by NHS England.</p> <p>The Committee noted the retirement of Dr Carpenter from Broadway Medical Centre and expressed their appreciation to Dr Carpenter for his long service as a local GP.</p> <p>The Chair agreed to write a letter of appreciation to Dr Carpenter wishing him well on his retirement.</p> <p>Resolved: The Committee note the content of the report.</p>
13.	<p>Date and time of next meeting</p> <ul style="list-style-type: none"> • Tuesday 20 February 2017 • 4:00pm • Boardroom, FWCCG