


<b>MEETING DATE:</b>	13 August 2015	 <b>North Lincolnshire Clinical Commissioning Group</b>  <b>REPORT TO THE CLINICAL COMMISSIONING GROUP GOVERNING BODY</b>
<b>AGENDA ITEM NUMBER:</b>	Item 7.11	
<b>AUTHOR:</b>	Allison Cooke	
<b>JOB TITLE:</b>	Chief Officer	
<b>DEPARTMENT:</b>	CCG	

**JOINT COMMISSIONING COMMITTEE MINUTES  
9 APRIL 2015**

<b>PURPOSE/ACTION REQUIRED:</b>	To Receive & Note
<b>CONSULTATION AND/OR INVOLVEMENT PROCESS:</b>	The Joint Commissioning Committee approved the minutes on 11 June 2015.
<b>FREEDOM OF INFORMATION:</b>	<i>Is this document releasable under FOI at this time? If not why not? (decision making guide being developed)</i>  <b>Public</b>

<b>1. PURPOSE OF THE REPORT:</b>					
The Joint Commissioning Committee minutes dated 9 April 2015 are attached for the CCG Governing Body to receive and note, for information only.					
<b>2. STRATEGIC OBJECTIVES SUPPORTED BY THIS REPORT:</b>					
Continue to improve the quality of services	<b>X</b>				
Reduce unwarranted variations in services	<b>X</b>				
Deliver the best outcomes for every patient	<b>X</b>				
Improve patient experience	<b>X</b>				
Reduce the inequalities gap in North Lincolnshire	<b>X</b>				
<b>3. ASSURANCES TO THE CLINICAL COMMISSIONING GROUP</b>					
The Joint Commissioning Committee minutes provide assurance to the CCG Governing Body that the committee is carrying out its function.					
<b>4. IMPACT ON RISK ASSURANCE FRAMEWORK:</b>					
<table border="1"> <tr> <td>Yes</td> <td></td> <td>No</td> <td><b>X</b></td> </tr> </table>		Yes		No	<b>X</b>
Yes		No	<b>X</b>		

**5. IMPACT ON THE ENVIRONMENT – SUSTAINABILITY:**

Yes		No	X
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**6. LEGAL IMPLICATIONS:**

Yes		No	X
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**7. RESOURCE IMPLICATIONS:**

Yes		No	X
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**8. EQUALITY IMPACT ASSESSMENT:**

Yes		No	X
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**9. PROPOSED PUBLIC & PATIENT INVOLVEMENT AND COMMUNICATIONS:**

Yes		No	X
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**10. RECOMMENDATIONS:**

The CCG Governing Body is asked to: -

- Receive and note

## JOINT COMMISSIONING COMMITTEE

<b>MEETING:</b>	First Meeting in Public of the Joint Commissioning Committee
<b>MEETING DATE:</b>	Thursday 9 April 2015
<b>VENUE:</b>	Board Room, Health Place, Brigg
<b>TIME:</b>	13:30

<b>PRESENT:</b>		
<b>NAME</b>	<b>TITLE</b>	<b>SERVICE/AGENCY</b>
Ian Reekie ( <i>IR</i> )	Chair/CCG Lay Member, Patient & Public Involvement	NHS North Lincolnshire CCG
Dr Margaret Sanderson ( <i>MS</i> )	CCG Chair/General Practitioner <i>Not in attendance for Item 6.0</i>	NHS North Lincolnshire CCG
Allison Cooke ( <i>AC</i> )	Chief Officer	NHS North Lincolnshire CCG
Therese Paskell ( <i>TP</i> )	Chief Finance Officer & Business Support	NHS North Lincolnshire CCG
Caroline Briggs ( <i>CB</i> )	Director of Commissioning	NHS North Lincolnshire CCG
Catherine Wylie ( <i>CW</i> )	Director of Risk & Quality Assurance/ Nurse Member	NHS North Lincolnshire CCG
Paul Evans ( <i>PE</i> )	CCG Lay Member, Governance	NHS North Lincolnshire CCG
Professor John Mayberry ( <i>JM</i> )	Secondary Care Doctor	NHS North Lincolnshire CCG
Frances Cunning ( <i>FC</i> )	Director of Public Health	North Lincolnshire Council
Mark Janvier ( <i>MJ</i> )	Head of Operations and Delivery	NHS England – North (Yorkshire and the Humber)
Zena Robertson ( <i>ZR</i> )	Deputy Director of Nursing	NHS England – North (Yorkshire and the Humber)
Wendy Coffey ( <i>WC</i> )	Director	Healthwatch North Lincolnshire
<b>IN ATTENDANCE:</b>		
Clare Smith ( <i>CS</i> )	PA ( <i>Note Taker</i> )	NHS North Lincolnshire CCG
John Pougher ( <i>JP</i> )	Assistant Senior Officer, Quality & Assurance <i>In attendance for all items</i>	NHS North Lincolnshire CCG

<b>APOLOGIES:</b>		
<b>NAME</b>	<b>TITLE</b>	<b>SERVICE/AGENCY</b>
Dr Andrew Lee ( <i>AL</i> )	CCG Member/General Practitioner	NHS North Lincolnshire CCG

<b>SUMMARY OF DISCUSSION</b>	<b>DECISION/ACTION</b> (including timescale for completion or update)	<b>LEAD</b>
<b>1.0 WELCOME, ANNOUNCEMENTS AND APOLOGIES</b>		
IR welcomed all attendees to the first meeting 'in public' of the Joint Commissioning Committee. It was noted that the meeting was a meeting in public, and not a public meeting, therefore there was no public question time as part of the agenda.  Committee members introduced themselves and apologies were	<b>Decision:</b> Noted	Chair

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
noted, as detailed above. It was noted that the meeting was quorate to proceed.		
<b>2.0 TERMS OF REFERENCE</b> <i>For Ratification</i>		
<p>JP presented Item 2.0 and the report was taken as 'read'. The Terms of Reference (ToR) were approved at the CCG Governing Body meeting on 12 February 2015, and formed a key part of the CCG's successful submission to engage in joint commissioning for primary care.</p> <p>The ToR are based (as required) on the model template as set out in Annex D of 'Next Steps towards Primary Care Commissioning' (November 2014), and have been developed with the support of NHS England. They were further amended to reflect revised guidance as set out in 'Policy Note on Joint Committees for Primary Care Co-commissioning' (5 March 2015). The ToR were confirmed to be in line with policy guidance by the Head of Planning and Assurance, NHS England (North) on 17 March 2015.</p> <p>Specific areas highlighted/discussed:</p> <ul style="list-style-type: none"> <li>• Membership (<i>Item 8</i>) <ul style="list-style-type: none"> <li>○ Representation from NHS North Lincolnshire CCG</li> <li>○ Representation from NHS England – North (Yorkshire and the Humber) <ul style="list-style-type: none"> <li>▪ Two representatives have been identified (Mark Janvier and Zena Robertson)</li> </ul> </li> <li>○ Lay Member Chair and Vice Chair (<i>Item 10 and 11</i>) <ul style="list-style-type: none"> <li>▪ The Chair is the CCG Lay Member for Patient &amp; Public Involvement</li> <li>▪ The Vice Chair is the CCG Lay Member for Governance <ul style="list-style-type: none"> <li>• Discussion took place regarding the potential adverse impact upon the independence of the Audit Chair when he is required to chair the Joint Commissioning Committee in his capacity as vice chair</li> </ul> </li> </ul> </li> <li>○ Non-voting attendees (<i>Item 12</i>) <ul style="list-style-type: none"> <li>▪ A representative from Healthwatch North Lincolnshire <ul style="list-style-type: none"> <li>• Either Julia Pollock, Chair or Wendy Coffey, Director would attend</li> </ul> </li> <li>▪ Director of Public Health as a member of North Lincolnshire Health and Wellbeing Board <ul style="list-style-type: none"> <li>• Frances Cuning would attend</li> </ul> </li> </ul> </li> </ul> </li> <li>• Voting Arrangements (<i>Item 14</i>) <ul style="list-style-type: none"> <li>○ NHS England and North Lincolnshire CCG (NLCCG) will have equal voting rights. Where a casting vote is required NLCCG will have the casting vote on any decision pertaining to be one of the CCG's statutory functions. NHS England will have the</li> </ul> </li> </ul>	<p><b>Decision:</b> The Joint Commissioning Committee:</p> <ul style="list-style-type: none"> <li>• Ratified the Terms of Reference</li> </ul>	ASOQ&A

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD										
<p>casting vote on any decision pertaining to one of NHS England's statutory functions, as detailed under Item 5 (Role of the Joint Committee)</p> <ul style="list-style-type: none"> <li>• Key Responsibilities</li> </ul>												
<b>3.0 CONFLICTS OF INTEREST POLICY</b>												
<p>JP presented Item 3.0 and the report was taken as 'read'. The Conflicts of Interest (COI) Policy had been approved by the CCG Governing Body on 12 February 2015, and was a key part of the CCG's successful submission to participate in joint commissioning for primary care.</p> <p>The COI Policy has been updated to help ensure that the CCG is compliant with the latest national statutory guidance as set out in '<i>Managing Conflicts of Interest: Statutory Guidance for CCGs</i>' (December 2014). The guidance requires CCGs to strengthen their governance arrangements in the management of COI, particularly in respect to taking on increased responsibility for the commissioning of primary care.</p> <p>With joint commissioning responsibilities, the CCG will be exposed to a greater number of conflicts of interest both real and perceived; thus strict adherence to the policy is of key importance. Increased scrutiny of corporate governance arrangements will include the ongoing management of COI, forming part of the CCG assurance process. The Accountable Officer and Audit Chair will also be required to provide direct formal attestation to NHS England that the CCG complies with statutory guidance.</p> <p>Specific areas highlighted/discussed:</p> <ul style="list-style-type: none"> <li>• Freedom of Information requests and information available to members of the public</li> <li>• Appendix A: Commissioning Cycle and Potential Conflicts of Interest</li> <li>• Joint Commissioning Committee members to complete a Declaration of Interests form</li> <li>• Need to ensure that the Declaration of Interests information for Joint Commissioning Committee members is made available to members of the public, on the CCG website</li> </ul>	<p><b>Decision:</b> The Joint Commissioning Committee:</p> <ul style="list-style-type: none"> <li>• Noted the Conflicts of Interest Policy being cognisant of the increased scrutiny of the CCG's management of COI in the light of taking on joint responsibility for commissioning primary medical services</li> </ul> <p><b>Action:</b> JP to contact Joint Commissioning Committee members to complete Declaration of Interests forms. Information to be made available to members of the public on the North Lincolnshire CCG website</p>	ASOQ&A										
<b>4.0 DECLARATION OF INTERESTS</b>												
<p>Further to the discussion under Item 3.0, IR invited members with any Declarations of Interest, to make them known to the meeting.</p> <table border="1" data-bbox="193 1686 935 2031"> <thead> <tr> <th data-bbox="193 1686 459 1742">Joint Commissioning Committee Member</th> <th data-bbox="459 1686 935 1742">Declaration of Interests</th> </tr> </thead> <tbody> <tr> <td data-bbox="193 1742 459 1794">Ian Reekie</td> <td data-bbox="459 1742 935 1794"> <ul style="list-style-type: none"> <li>• Member of the Board of Trustees of Voluntary Action North Lincolnshire (VANL)</li> </ul> </td> </tr> <tr> <td data-bbox="193 1794 459 1928">Paul Evans</td> <td data-bbox="459 1794 935 1928"> <ul style="list-style-type: none"> <li>• Most recent employment before retirement was as Finance Director of the Association of the British Pharmaceutical Industry (ABPI)</li> <li>• Is in receipt of pensions funded by pharmaceutical companies</li> </ul> </td> </tr> <tr> <td data-bbox="193 1928 459 1957">Allison Cooke</td> <td data-bbox="459 1928 935 1957"> <ul style="list-style-type: none"> <li>• No Declaration</li> </ul> </td> </tr> <tr> <td data-bbox="193 1957 459 2031">Dr Margaret Sanderson</td> <td data-bbox="459 1957 935 2031"> <ul style="list-style-type: none"> <li>• Partner at Trent View Medical Practice (Practice has a contract with NHS England)</li> <li>• Part of the GP Federation</li> </ul> </td> </tr> </tbody> </table>	Joint Commissioning Committee Member	Declaration of Interests	Ian Reekie	<ul style="list-style-type: none"> <li>• Member of the Board of Trustees of Voluntary Action North Lincolnshire (VANL)</li> </ul>	Paul Evans	<ul style="list-style-type: none"> <li>• Most recent employment before retirement was as Finance Director of the Association of the British Pharmaceutical Industry (ABPI)</li> <li>• Is in receipt of pensions funded by pharmaceutical companies</li> </ul>	Allison Cooke	<ul style="list-style-type: none"> <li>• No Declaration</li> </ul>	Dr Margaret Sanderson	<ul style="list-style-type: none"> <li>• Partner at Trent View Medical Practice (Practice has a contract with NHS England)</li> <li>• Part of the GP Federation</li> </ul>	<p><b>Decision:</b> Noted</p>	Chair
Joint Commissioning Committee Member	Declaration of Interests											
Ian Reekie	<ul style="list-style-type: none"> <li>• Member of the Board of Trustees of Voluntary Action North Lincolnshire (VANL)</li> </ul>											
Paul Evans	<ul style="list-style-type: none"> <li>• Most recent employment before retirement was as Finance Director of the Association of the British Pharmaceutical Industry (ABPI)</li> <li>• Is in receipt of pensions funded by pharmaceutical companies</li> </ul>											
Allison Cooke	<ul style="list-style-type: none"> <li>• No Declaration</li> </ul>											
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SUMMARY OF DISCUSSION		DECISION/ACTION (including timescale for completion or update)	LEAD
	<ul style="list-style-type: none"> <li>Husband is a Consultant employed by Northern Lincolnshire and Goole NHS Foundation Trust</li> </ul>		
Caroline Briggs	<ul style="list-style-type: none"> <li>No Declaration</li> </ul>		
Catherine Wylie	<ul style="list-style-type: none"> <li>No Declaration</li> </ul>		
Therese Paskell	<ul style="list-style-type: none"> <li>Husband is Deputy Director of Finance for Doncaster and Bassetlaw Hospitals NHS Foundation Trust</li> </ul>		
Professor John Mayberry	<ul style="list-style-type: none"> <li>Medico-Legal Adviser to the General Medical Council (GMC), Health Ombudsman and a number of legal practices and the Medical Protection Society</li> </ul>		
Zena Robertson	<ul style="list-style-type: none"> <li>No Declaration</li> </ul>		
Mark Janvier	<ul style="list-style-type: none"> <li>No Declaration</li> </ul>		
Frances Cunning	<ul style="list-style-type: none"> <li>Director in North Lincolnshire Council</li> <li>Partner works for GEMCSU and North Derbyshire CCG</li> </ul>		
Wendy Coffey	<ul style="list-style-type: none"> <li>Befriender for Age UK</li> <li>Member of a local Patient Participation Group (PPG) within a North Lincolnshire GP Practice</li> </ul>		
John Pougher	<ul style="list-style-type: none"> <li>No Declaration</li> </ul>		
MS declared an interest specifically in relation to Item 6.0 (Elderly Care Fund), as a GP provider of care of the elderly.			
<b>5.0 COMMISSIONING BUDGETS FOR GP SERVICES 2015/2016</b>			
<p>TP presented Item 5.0 and the report was taken as 'read'. The document briefed members on the CCG's overall financial envelopes for commissioning primary medical services in 2015/2016.</p> <p>It was noted that the primary care budgets, which are set following reference to the Finance Plan funding envelopes, will form part of the monthly CCG Finance Report which is presented to public CCG Governing Body meetings.</p> <p>It was agreed that NHS England would share with the Joint Commissioning Committee the budgets they manage for the commissioning of primary medical services in North Lincolnshire, once disaggregated.</p>		<p><b>Decision:</b> The Joint Commissioning Committee:</p> <ul style="list-style-type: none"> <li>Noted the CCG's 2015/16 Commissioning Budgets for primary medical services</li> </ul> <p><b>Action:</b> NHS England to share with the Joint Commissioning Committee the budgets they manage for the commissioning of primary medical services in North Lincolnshire once disaggregated</p>	CFO&BS
<b>6.0 ELDERLY CARE FUND ALLOCATION 2015/2016</b>			
<p>MS declared an interest specifically in relation to Item 6.0 (Elderly Care Fund), as a GP provider of care of the elderly. It was agreed that MS would leave the room for the discussion. MS left the room.</p> <p>CB presented Item 6.0 and the report was taken as 'read'. The document provided an overview of progress made to date on the implementation of the Elderly Care Fund (ECF) during 2014/2015. The Joint Commissioning Committee was asked to approve finalisation of an enhanced service specification to be discussed with the Local Medical Committee (LMC). In addition, the Committee was asked to approve further work to establish the feasibility of the suggestions contained within the report for commissioning services at scale, to support practices in care of the elderly.</p>		<p><b>Decision:</b> The Joint Commissioning Committee:</p> <ul style="list-style-type: none"> <li>Received and noted the update on the progress of the Elderly Care Fund during 2014/2015</li> <li>Agreed that the ECF enhanced service specification for 2015/2016 (to be funded through the committed £3 per head of population to practices) be finalised and discussed with the Local Medical Committee</li> </ul>	DoC

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
<p>Specific areas highlighted/discussed:</p> <ul style="list-style-type: none"> <li>• The GP contract for 2014/2015 secured specific arrangements for all patients aged 75 and over to have a 'named accountable GP', and for those patients who need it, to have a comprehensive and coordinated package of care developed</li> <li>• Local Context (<i>page 2</i>) <ul style="list-style-type: none"> <li>○ North Lincolnshire CCG made the decision to commit the total £5 per head of population ECF budget to GP Practices for 2014/2015</li> <li>○ Practices were informed during the course of 2014/2015 that a minimum of £3 per head of population of the ECF budget would be committed to GP Practices for 2015/2016. This was to allow forward planning/recruitment to support the delivery of practice plans during 2015/2016</li> </ul> </li> <li>• Overview/Summary of outcomes to date (<i>page 3</i>)</li> <li>• Summary of progress to date (<i>pages 3 &amp; 4</i>) <ul style="list-style-type: none"> <li>○ At the Council of Members meeting in January 2015, a request was made for volunteers to meet and discuss the development of an outcomes based service specification for the ECF 2015/2016</li> <li>○ The meeting took place in February 2015. As a result of this meeting, an outcomes based service specification is currently being finalised, ready for discussion with the Local Medical Committee</li> <li>○ Suggestions have been put forward for consideration by the Council of Members (COM) and the CCG, as possible system wide primary care support services. If approved, they will inform the commissioning intentions for the utilisation of the unallocated fund (£2 per head of population) <ul style="list-style-type: none"> <li>▪ North Lincolnshire Falls Prevention Service</li> <li>▪ Community Based Geriatric Clinics</li> <li>▪ Dementia/Cognitive Impairment Community Support</li> <li>▪ Community Nursing</li> </ul> </li> </ul> </li> <li>• Discussion took place as to whether the work to date during 2014/2015 had been effective, and how it was being measured, to ensure investment has benefit and is reducing admissions</li> <li>• Community Nursing (<i>page 4</i>) <ul style="list-style-type: none"> <li>○ It was noted that a review of the current service, with GP input, was taking place, to ensure that community nursing is responsive to the changing needs of primary care</li> </ul> </li> <li>• Better Care Fund (BCF) <ul style="list-style-type: none"> <li>○ Building on integrated locality teams</li> </ul> </li> </ul>	<p>(LMC)</p> <ul style="list-style-type: none"> <li>• Approved further work to establish the feasibility of the suggestions for commissioning services at scale to support practices in care of the elderly (based on the remaining £2 per head of population)</li> </ul> <p><b>Action:</b> ECF enhanced service specification for 2015/2016 to be presented to a future meeting of the Joint Commissioning Committee for ratification</p>	
<b>7.0 QUALITY OF GP SERVICES: SOURCES OF ASSURANCE</b>		
<p>CW presented Item 7.0 and the report was taken as 'read'. The document provided details of the current methods of assurance monitoring in relation to the quality of services provided by Primary Care in North Lincolnshire. The report described the sources of assurance that are currently collated, and their reporting framework within the CCG governance structure.</p>	<p><b>Decision:</b> The Joint Commissioning Committee:</p> <ul style="list-style-type: none"> <li>• Received and noted the Quality of GP Services: Sources of Assurance report</li> </ul>	DoR&QA

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD															
Specific areas highlighted/discussed: <ul style="list-style-type: none"> <li>• Quality Group</li> <li>• Primary Care Development Group</li> <li>• Primary Care Strategy</li> <li>• Link with Healthy Lives, Healthy Futures programme</li> <li>• Workforce Planning</li> </ul>	<b>Action:</b> MJ, ZR and CW to meet to take forward the development of a quarterly performance report (Primary GP services)																
<b>8.0 ANY OTHER BUSINESS</b> <i>Urgent Items by Prior Notice</i>																	
Nothing discussed.	<b>Decision:</b> Noted	Chair															
<b>9.0 DATE AND TIME OF NEXT PUBLIC MEETING/FREQUENCY OF FUTURE MEETINGS</b> <i>To be agreed</i>																	
After discussion it was agreed that future meetings would take place bi-monthly, between 13:00 and 14:00. <table border="1" data-bbox="193 779 935 916"> <thead> <tr> <th>Date</th> <th>Time</th> <th>Venue</th> </tr> </thead> <tbody> <tr> <td>Thursday 11 June 2015</td> <td>13:00</td> <td>Board Room, Health Place, Brigg</td> </tr> <tr> <td>Thursday 13 August 2015</td> <td>13:00</td> <td>Board Room, Health Place, Brigg</td> </tr> <tr> <td>Thursday 8 October 2015</td> <td>13:00</td> <td>Board Room, Health Place, Brigg</td> </tr> <tr> <td>Thursday 10 December 2015</td> <td>13:00</td> <td>Board Room, Health Place, Brigg</td> </tr> </tbody> </table>	Date	Time	Venue	Thursday 11 June 2015	13:00	Board Room, Health Place, Brigg	Thursday 13 August 2015	13:00	Board Room, Health Place, Brigg	Thursday 8 October 2015	13:00	Board Room, Health Place, Brigg	Thursday 10 December 2015	13:00	Board Room, Health Place, Brigg	<b>Decision:</b> Noted	Chair
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