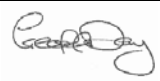


|                        |   |
|------------------------|---|
| <b>Date:</b>           | 11 <sup>th</sup> October 2018   |
| <b>Meeting:</b>        | Governing Body  |
| <b>Item Number:</b>    | Item 12.4   |
| <b>Public/Private:</b> | Public <input checked="" type="checkbox"/> Private <input type="checkbox"/> |

|   |
|---|
| <b>Report Title:</b>                                |
| Primary Care Commissioning Committee Summary Report |
| <b>Decisions to be made:</b>                        |
| To note   |

|   |   |
|---|---|
| <b>Author:</b><br><i>(Name, Title)</i>  | Erica Ellerington<br>Primary Care Contract Manager                                |
| <b>GB Lead:</b><br><i>(Name, Title)</i> | Geoff Day<br>Interim Director of Primary Care                                     |
| <b>Director approval</b>                | Geoff Day   |
| <b>Director Signature</b>               |  |

|                                       |                          |  |
|---------------------------------------|--------------------------|--|
| <b>Link to a Strategic Objective?</b> | <input type="checkbox"/> |  |
| <b>Link to a Strategic Risk</b>       | <input type="checkbox"/> |  |

|  |                                      |  |  |                                      |                                       |
|--|--------------------------------------|--|--|--------------------------------------|---------------------------------------|
| <b>Continue to improve the quality of services</b> | <input checked="" type="checkbox"/>  | <b>Improve patient experience</b>                        | <input type="checkbox"/>                       |                                      |                                       |
| <b>Reduced unwarranted variations in services</b>  | <input type="checkbox"/>             | <b>Reduce the inequalities gap in North Lincolnshire</b> | <input type="checkbox"/>                       |                                      |                                       |
| <b>Deliver the best outcomes for every patient</b> | <input type="checkbox"/>             | <b>Statutory/Regulatory</b>                              | <input checked="" type="checkbox"/>            |                                      |                                       |
| <b>Purpose (tick one only)</b>                     | Approval<br><input type="checkbox"/> | Information<br><input type="checkbox"/>                  | To note<br><input checked="" type="checkbox"/> | Decision<br><input type="checkbox"/> | Assurance<br><input type="checkbox"/> |

|  |  |
|--|--|
| <b>Executive Summary (Question, Options, Recommendations):</b>   |  |
| The enclosed paper provides a summary of the Primary Care Commissioning Committee meeting held on 23 <sup>rd</sup> August 2018 |  |
| <b>Recommendations</b>   | 1 Please note the contents of the update<br>2<br>3       |
| <b>Report history</b>  |  |
| <b>Equality Impact</b>   | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| <b>Sustainability</b>  | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| <b>Risk</b>  | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| <b>Legal</b>   | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| <b>Finance</b>   | Yes <input type="checkbox"/> No <input type="checkbox"/> |

| <b><i>Patient, Public, Clinical and Stakeholder Engagement to date</i></b> |                                     |                          |                          |                    |                  |                                     |                          |                          |                    |
|--|-------------------------------------|--------------------------|--------------------------|--------------------|------------------|-------------------------------------|--------------------------|--------------------------|--------------------|
|  | <b><i>N/A</i></b>                   | <b><i>Y</i></b>          | <b><i>N</i></b>          | <b><i>Date</i></b> |                  | <b><i>N/A</i></b>                   | <b><i>Y</i></b>          | <b><i>N</i></b>          | <b><i>Date</i></b> |
| <b>Patient:</b>  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |                    | <b>Clinical:</b> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |                    |
| <b>Public:</b>   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |                    | <b>Other:</b>    | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |                    |

**JOINT PRIMARY CARE COMMISSIONING  
(PUBLIC) COMMITTEE MEETING HELD ON  
23<sup>rd</sup> AUGUST 2018  
CHAIR'S UPDATE REPORT – PART 1**

**INTRODUCTION**

This is the Chair's report to the Clinical Commissioning Group Board following the August 2018 Joint Primary Care Commissioning Committee.

**AGENDA ITEM 7. TERMS OF REFERENCE**

At the request of the Director of Primary Care, the Committee reviewed the previously agreed Terms of Reference. Two amendments were made to ensure that the Committee we're operating within NHS England's Best Practice Guidelines;

- It is not necessary for a GP to be in attendance for the Committee to be quorate. If the GP was conflicted, the meeting would not be quorate and therefore would not be able to vote or make a decision.
- It was clarified that GPs were not able to have a vote on the Committee. This was because most decisions made at the Committee meetings were contractual and therefore any working GP could not be included in a vote due to a Conflict of Interest.

**AGENDA 9. WORKFORCE DEVELOPMENT**

The Committee had a discussion about the Apex work tool that will be available to General Practice in the near future. Unfortunately, it is impossible to identify or predict where workforce shortages occur and the use of this tool would provide such information to aid system planning to ensure sustainability. The Committee were advised that the Local Medical Council (LMC) are supporting the system and that some time limited support was being identified in order to try and coordinate how the practices might use the tool, as there were a number of different choices the practices could make. The dedicated support would allow reports to be extracted and interpreted.

**AGENDA ITEM 10. TRANSFORMATIONAL FUND**

The Committee were informed that the contract for the First Point of Contact Physiotherapy has now been signed by the CCG and Provider. A mobilisation plan is currently being drawn up and a further update will be provided to the next meeting of the Committee.

**AGENDA ITEM 11. ESTATES REVIEW**

The Committee discussed the strategic estates review that is underway in North Lincolnshire. Following receipt of the draft report, a review would be undertaken with individual practices to allow comment on the plan, followed by the full report being presented to the Committee.

## **AGENDA ITEM 12. NHS ENGLAND UPDATE**

The Committee reviewed the following items of business which were reported by NHS England;

- Resilience Fund - North Lincolnshire had received the highest amount of approved bids across the patch (20). Of this, 12 bids had been approved totaling £47,096. A further meeting of the panel would take place in September/October 2018 in order to agree any further bids. Some bids that were not approved have been directed to other more suitable funding streams
- 3 practices (Bridge Street, Riverside and Barnetby) are now live with the online consulting system and there are a further 4 practices confirmed to go live by the end of September (70,000 patient coverage). Other practices are currently engaging with the project manager with a view to agreeing a mobilisation date in the future.
- Under pharmacy regulations (Chapter 15 of the Pharmacy Manual), a review of dispensing lists should take place annually. This had not occurred due to capacity issues and conflicting priorities for the NHSE team. The review would now commence in October 2018. If a significant number of patients still dispensing and living within 1.6km of a pharmacy were identified, NHS England would be visiting practices to discuss this with them and dispensing rights would be removed over a period of time. This would give practices the opportunity to review staffing levels and any financial implications. At the request of the LMC, NHS England would not be looking at this retrospectively.

## **AGENDA ITEM 13. LOCAL SERVICE SPECIFICATIONS**

The Committee noted agreed actions which needed to be undertaken in readiness for service commencement on 1<sup>st</sup> April 2019 in relation to Share Care Monitoring and Post- Operative Dressings and approved the local services specifications for:

- Shared Care Monitoring
- Post-Operative Dressings and Suture Removal
- Minor Surgery
- Minor Injury
- Anticoagulation
- Care for Patients with Diabetes

**Janice Keilthy**  
**Joint Primary Care Commissioning Committee**  
**Chair**  
**August 2018**