

Agenda

South Tyneside Primary Care Commissioning Committee (PUBLIC)

Thursday 26 July 2018
12:30 pm – 13:30 pm

Hebburn Central

Item	Time	Title	Lead	
2018/07	12:30	Welcome and Introductions	Stephen Clark	Verbal
2018/08	12:30	Apologies for absence	Stephen Clark	Verbal
2018/09	12:30	<p>Declaration of Interest <i>"A conflict of interest occurs where an individual's ability to exercise judgement, or act in a role is, could be, or is seen to be impaired or otherwise influenced by his or her involvement in another role or relationship. In some circumstances, it could reasonably be considered that a conflict exists even when there is no actual conflict. In these cases it is important to still manage these perceived conflicts in order to maintain public trust."</i></p>	Stephen Clark	Verbal
2018/10	12:30	Draft Minutes: 24 May 2018	Stephen Clark	Enclosure 1
2018/11	12.30	Matters Arising	Stephen Clark	Verbal
2018/12	12.35	End of Year Review of the CCG's Primary Care Incentive Scheme (BOS 4)	Jo Farey/Gayle Guthrie	Presentation
2018/13	13.00	Transformation Fund 6 Month Update	Jo Farey/Donna Watson	Enclosure 2
2018/14	13.20	Any Other Business	All	Verbal
		<p>Close – 13.30</p> <p>Date and time of next meeting: Thursday 27 September 2018, 12:30 pm – 13.30 pm Living Waters Church, South</p>		

Primary Care Commissioning Committee (PUBLIC)

24 May 2018

12:30pm – 13:00pm

Hebburn Central

Present:

Stephen Clark	Lay Member (Deputy Chair), STCCG (Chair)	SC
Matt Brown	Director of Operations	MB
Dr Tarquin Cross	Secondary Care Consultant, STCCG	TC
Bill Hall	Experienced GP	BH
Dr David Hambleton	Chief Executive, STCCG	DH
Kate Hudson	Chief Finance Officer, STCCG	KHu
Jeanette Scott	Director of Nursing, Quality & Safety, STCCG	JS

In Attendance:

Jo Farey	Head of Commissioning, STCCG	JF
Keith Haynes	Governance Lead, STCCG	KHa
Jenny Long	Assistant Contract Manager, NHSE	JL
Andy Sutton	Governance Officer, STCCG	AS

Apologies:

Paul Cuskin	Lay Member (Public and Patient Involvement), STCCG	JG
Tracy Johnstone	Head of Primary Care, NHSE	TJ
John Pearce	Corporate Director Children, Adults and	JP
Dr Vis-Nathan	GP Governing Body Member, STCCG	VN
Dr Matthew Walmsley	Chair, STCCG	MW

- 2018/01** **Welcome and Introductions**
Members were welcomed to the meeting and introductions made.
- 2018/02** **Apologies for Absence**
Apologies as noted above.
- 2018/03** **Declarations of Interest**
No declarations were made.
- 2018/04** **Draft Minutes from the 22 March 2018 meeting** (Enclosure 1)
Resolved: that the minutes of the 22 March 2018 meeting be approved.
- 2018/05** **Matters Arising**
- **Minute 2017/53: PCCC Terms of Reference and Minute 2017/54: PCCC Cycle of Business**
The current terms of reference of both the Primary Care Commissioning Committee (PCCC) and the Primary Care Quality Review and Business meeting (PCQR&B) were clarified. It was acknowledged that the strategic role of PCCC could sometimes be

compromised as a result of a requirement to consider day-to-day commissioning and contractual issues referred for consideration by PCQR&B. It was suggested that for PCCC to be in a position to concentrate its efforts on primary care strategy, further consideration of delegated authority to PCQR&B should be considered. As part of the agreement PCQR&B would submit a regular highlight report to PCCC on all contractual and related business conducted at recent meetings. PCCC could then concentrate its efforts on primary care strategic issues, a programme for which would be established by the Primary Care Strategy Group and subsequently fed into the PCCC cycle of business.

ACTION

i) Delegation Agreement

KHa is to consider whether further delegation from PCC to PCQR&B to conduct a range of commissioning and contractual issues on behalf of PCCC would be appropriate.

ii) PCQR&B Contractual Business Report

JF is to ensure that a regular highlight report is submitted to PCCC that summarises recent contractual and commissioning business conducted by PCQR&B.

iii) PCCC Business

JF is to invite the Primary Care Strategy Group to establish a programme of strategic issues that would form the basis of agenda business for future meetings of PCCC (and be incorporated into the PCCC cycle of business).

2018/06

Any Other Business

No other business was conducted.

CLOSE


Andy Sutton
Governance Officer
South Tyneside CCG
25.05.2018

REPORT CLASSIFICATION – please refer to Report

Classification Guidance and check appropriate box below

- Official
 Sensitive: Commercial
 Official Sensitive: Personal

MEETING TITLE:	PRIMARY CARE COMMITTEE	DATE: 26 th July 2018
REPORT TITLE:	Transformation Funds Projects 6 Month Update	AGENDA ITEM: 2018/13 ENCLOSURE: 2
LEAD DIRECTOR / REPORT SPONSOR:	Matt Brown, Director of Operations, Matt.Brown2@nhs.net	
REPORT AUTHOR:	Donna Watson, Commissioning Manager, Donna.Watson5@nhs.net	
REPORT SUMMARY / RECOMMENDATIONS:	<p>The GP Forward View (GPFV), published on 21 April 2016, sets out investment and commitments to strengthen general practice in the short term and support sustainable transformation of primary care for the future. It includes specific, practical and funded investment in five areas – investment, workforce, workload, practice infrastructure and care redesign.</p> <p>CCGs were asked via the GPFV to spend a total of £3 per head as a one off non-recurrent investment commencing in 2017/18, for practice transformational support. Nationally this equates to a £171million non- recurrent investment. This investment commences in 2017/18 and can take place over one or two years as determined by the CCG (ie £3 in 17/18 or £1.50 in both 17/18 and 18/19). The investment is designed to be used to stimulate development of at scale providers for improved access, stimulate implementation of the 10 high impact actions to free up GP time, and secure sustainability of general practice.</p> <p>This paper is to provide an update on the 5 transformation projects as part of the agreed Transformation Fund spend. The committee are asked to review and discuss the project progress, financial spend to date and forecasted spend. Consideration to any risks relating to non-delivery of projected projects or risk of financial slippage is to be given.</p>	
FINANCIAL IMPLICATIONS / RISKS	Total investment across the 2 years for South Tyneside will be in the region of £462k	
EQUALITY IMPACT ASSESSMENT (EIA) COMPLETED	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<p>Following the launch of the revised EIA documents on 1 March 2016 EIAs must be completed as follows:</p> <p>An EIA should be undertaken at the start of the development for a new proposed service, policy or process to assess likely impacts and provide further insight as to what will be required to implement it effectively. The EIA form and associated documents can be found on the CCG’s intranet or through NECS Equality and Diversity Team</p> <p>Has an Equality Impact Assessment been completed using the equality impact documents ensuring that no persons are adversely affected as required by the Equality Act 2010</p> <p><i>(Please check the relevant box by double clicking on the box and selecting “checked” under the default value heading – only one box should be checked.)</i></p>	<p>If no please specify the reason why:</p> <p>The GP Collaborative will be asked to complete EIAs as part of project delivery</p>	<p>If yes please attach a copy of the completed assessment to the back of your report</p>

<p>If you are unsure if the report requires an EIA or for any further guidance please contact: NECSU.Equality@nhs.net</p>			
<p>QUALITY IMPACT ASSESSMENT COMPLETED Following the implementation of the STCCG Quality Strategy (September 2015) it has been agreed that a QIA should be undertaken for a new proposed service, policy or process or any changes to current services which may have an impact on quality or experience</p> <p>Has a Quality Impact Assessment been completed using the quality impact assessment tool ensuring that they have demonstrated the potential quality and safety impact?</p>	<p>NO <input checked="" type="checkbox"/></p> <p>If no please specify the reason why: The GP Collaborative will be asked to complete QIAs as part of project delivery</p>	<p>YES <input type="checkbox"/></p> <p>If yes please complete the below Quality Impact Assessment and submit with your report</p> <p> STCCG Quality Impact Assessment 2</p>	
<p>PURPOSE OF REPORT:</p>	<p>For Information <input type="checkbox"/></p>	<p>For Approval To Note <input checked="" type="checkbox"/></p>	<p>For Decision <input checked="" type="checkbox"/></p>
<p>RISK REGISTER Is the report subject matter included on the CCG Risk Register</p>	<p>NO <input checked="" type="checkbox"/> YES <input type="checkbox"/></p> <p>If yes please confirm the risk register has been updated in accordance with the content of this report: Updated <input type="checkbox"/> Not Update <input type="checkbox"/></p>	<p>If not updated please specify the reason: If the CCG feels there is a risk to project delivery or projected spend, a risk will be added to the risk register in due course</p>	
<p>SPONSORING LEAD DIRECTOR APPROVAL: Has the Lead Director approved the paper (proof of approval must be retained for audit purposes)</p>	<p>YES <input type="checkbox"/> NO <input type="checkbox"/></p>		<p>Papers without Lead Director approval will be withdrawn from the agenda</p>

Transformation Funds

July 2018 (6 month) Highlight Update

1. Introduction:

This paper is to provide an update on the 5 transformation projects as part of the GP Forward View (£3/head transformation fund). The committee are asked to review and discuss the project progress, financial spend to date and forecasted spend. Consideration to any risks relating to non-delivery of projected projects or risk of financial slippage is to be given.

2. Background:

In 2017 a paper was submitted to the Primary Care Committee which detailed the investment and proposals as part of the £3 per head non recurrent investment. The total investment across South Tyneside equates to £462,000 which was allocated across 2 years (i.e. £1.50 in both 17/18 and 18/19). All practices collaborated and a single proposal was submitted from South Tyneside Health Care (on behalf of all practices, regardless of whether they are a member of the collaboration or not).

3. Project Approach:

The CCG has a key duty to ensure probity of funds, and in this respect due diligence need to be applied to funding being used for the purpose intended. Therefore the following was agreed:

- Funds are released on a draw down basis based on actual use of funds;
- Invoices must be submitted on a regular basis with the amount required set out against very specific element of the projects delivered with that tranche of funding;
- Any variation of more than 5% against apportionment of spend will need to be authorised by the CCG;
- Project plans with key deliverables and financial forecasting developed
- Monthly project highlight reports;
- 6 monthly project highlight report out to the Primary Care Quality Review and Business Group.

4. Projects Agreed:

1. To explore and extend the use of different roles e.g. Allied Health Professionals/Physician Associates
2. Compassion in Dying
3. Supporting pharmacy interventions in primary care
4. Improvement to seeing and treating children under 5
5. Improving access for patients unable to attend practice

5. Project Activity Updates:

The below table is an overview of current project status with further key deliverables/project status updates detailed below:

Project Overview						
	Delivery Overview			Financial Overview		
	Status	Planned Launch	Actual Launch	Status	Planned Spend	Spend to Date
1	Re-Scoping	Oct 18		Re-Scoping	£155,000	£400
2	Live	April 18	April 18	Live	£64,000	£12,428
3	Re-Scoping	Sept 18		Re-Scoping	£145,000	£2,850
4	Live	April 18	April 18	Live	£20,000	£6,920
5	Re-Scoping	Sept 18		Re-Scoping	£56,000	£200
Project Management				Live	In above	£25,330
Total					£440,000	£48,128

1. Workforce Planning/Exploring of Roles

- Re-scoping wider workforce planning
- Scoping of roles (i.e. mental health) underway
- Case finding for COPD completed

2. Compassion in dying

- Practices and staff identified to take part in the training
- Training negotiated with final delivery date to be confirmed

3. Supporting pharmacy interventions

- Liaising with local pharmacy committee to develop model for programme
- Identifying practices and staff involvement

4. Improving and treating children under 5

- Practices identified to take part in the workshops
- Child health workshops currently being rolled out

5. Improving access for patients to attend practice

- To be re-scoped and planned

6. Practice participation:

The projects are on behalf of all practices within South Tyneside, below is an overview of practice participation:

1. Workforce planning is being re-scoped however it is expected to include all practices;
2. Pharmacy will run a pilot in the first instance with 9 practices participating (7 collaboration and 2 non-collaboration practices; costs are currently being explored to assess how this can be rolled out;
3. Compassion in dying – interest in 10 practices includes multiple staff requests. This can be ratified once the dates are confirmed and check availability/promote further to other practices. It's expected that involvement will increase but the costs will remain the same;
4. Childhood education workshops have 14 practices involved (e.g. 8 collaboration and 6 non-collaboration practices). This is expected to increase as discussions are ongoing with other practices;
5. Improving access is currently being re-scoped with further updates to be provided.

7. Project Budget Change Request:

As advised above, any budget changes above a 5% tolerance must be approved via the Primary Care Quality Review and Business Group. The following spend profile amendment has been sought:

Project		Planned Spend	Change Request	New Planned Spend
3	Seeing & Treating Children Under 5	£20,000	+£13,500	£33,500
Notes:		Initial data is advising on a decrease in attendance to A&E therefore it's requested to widen scope of project to include attendances at GP as well as A&E.		

8. Recommendation:

The Primary Care Quality Review and Business Group discussed the progress of the transformation fund at their meeting on 11th July 2018 and are asking PCC members to:

- I. Note the key deliverables to date and practice involvement to date;
- II. Note the 3 projects which are being re-scoped
- III. Note the financial spend to date and that a financial forecast is expected in August following the re-scoping of the 3 projects;
- IV. Note and approve the change request for project 3 as detailed in item 7.
- V. Note that the Primary Care Quality Review and Business Group also considered in depth any risks to delivery of primary care transformation

projects that this this fund is intended to support and will seek to put any appropriate measures in place to maintain continued focus on delivery.

DRAFT