

Primary Care Co-Commissioning - Committee in Common

Meeting held in Private
Wednesday 20th September 2017 15.00 – 16.30
Windsor Racecourse

Minutes

In Attendance:

Name	Abbreviation	Role	Attendance
Clive Bowman (Chair)	CB	Lay Member for Primary Care Co-Commissioning and Governance Representative for Slough CCG	✓
Sarah Bellars	SB	Director of Nursing & Quality, BE CCGs	✓
Sally Kemp	SK	Lay Member for Governance, B&A CCG	✓
Mike Connolly	MC	Lay Member for Patient Involvement, Slough CCG	✓
Debbie Fraser	DF	Deputy Director of Finance & Performance, BE CCGs	✓
Arthur Ferry	AF	Lay Member for Governance, WAM CCG	✓
Mark Sanders	MS	HealthWatch B&A, WAM & representing Slough	✓
Alex Tilley	AT	Ass. Director for Primary Care, BE CCGs	✓
John Lisle	JL	Accountable Officer, BE CCGs	✓
Jim O'Donnell	JO'D	Governing Body Clinical Chair, Slough CCG	✓
Judith Kinder	JK	Governing Body Clinical Member, WAM CCG	✓
Nick Spence	NS	Assistant Contract Manager, NHS England	✓
Jim Kennedy (Arrived at 15.40)	JK	Berkshire, Oxfordshire and Buckinghamshire Local Medical Committee Representative	✓
Cllr Sabia Hussain	SH	Health and Wellbeing Committee Chair, Slough Borough Council	✓

Apologies:

Name	Abbreviation	Role	Attendance
Cllr David Coppinger	DC	Royal Borough of Windsor and Maidenhead	✗
Fiona Slevin-Brown	FSB	Director of Strategy & Operations, BE CCGs	✗
Cllr Dale Birch	DB	Bracknell Forest Council	✗

Item No	Item	Action
1	Welcome and Apologies	
2	Conflicts of Interest / Declarations of Interest AT confirmed all members have made their declaration under the CCG policy for Conflict of Interest	

<p>3</p>	<p>Minutes of PCCC CiC - July 2017</p> <p><u>Amendments</u> Please check whole document thoroughly for spelling mistakes</p> <p><u>Page 1</u></p> <ul style="list-style-type: none"> ▪ Sally Kemp had sent apologies. ▪ Jim O'Donnell is sighted as the Clinical Representative – he is not a voting clinician. ▪ 3xLay <i>Chairs</i> should read 3xLay <i>Members</i>. <p><u>Page 2</u></p> <ul style="list-style-type: none"> ▪ Item 4 – ‘toe transition should read ‘to transition’. <p><u>Page 3</u></p> <ul style="list-style-type: none"> ▪ Item 5 – first paragraph, last sentence. The number of affected patients has increased....temporary solution – captures should read captured. <p><u>Page 5</u></p> <ul style="list-style-type: none"> ▪ 4th paragraph – ‘affected patient’ should read ‘affected patients’. ▪ 5th paragraph – ‘KM commented there was no learning reflected’ – are we sure this is correct? ▪ 9th paragraph - sentence starting J’OD queried whether...was this plan received. Does not make sense. Next sentence At should read AT. ▪ 10th paragraph – NS reflected....because of this approach. This sentence does not make sense. It should have been a comment around leaving things to the last moment – timeline to be inserted. ▪ Top of page 6 – going forward in a positive way. We a highly committed should read we are a highly committed team... <p>The minutes were approved subject to the corrections noted above.</p>	
<p>4</p>	<p>a) PCCC CiC Action Log</p> <p>b) Primary Care Risk Register</p> <ul style="list-style-type: none"> • Action 11 – action complete and closed. • Action 12 – action complete and closed. • Action 13 – action complete and closed. • Action 14 – template not received keep action open. <p>It was noted that the action log cannot be read after the first page on Boardpad. AT confirmed that the delegation plans had been added to the Primary Care Operational Group action log.</p> <p>Slough Walk in Centre: Single Waver Tender in place with new provider and contract awarded to East Berkshire Primary Care. A transition plan is in place with the current provider, Berkshire Healthcare Foundation Trust (BHFT)</p>	
<p>5</p>	<p>Impact assessment and recommendations: Closure of Princes Street</p> <p>This was an action from the last Committee held in July and a response to feedback from public meetings, to examine the impact of the closure of Princes Street.</p>	

	<p>Some of the risks identified are key to understanding the context for this decision. Currently at Princes Street Surgery there is a limitation to the services delivered and a scalable and sustainable plan is essential going forward for this population.</p> <p>To provide the Committee with further assurance, the issues that came out of the public meeting have been including in the decision making and a summary of the meeting are included in the paper. The links to the East Berkshire Primary Care Strategy has also been used for guidance on the decision making and the Impact Assessment Approach has been agreed with the Primary Care Operational Group (PCOG). The CCG's asked the landlord for an extension of six months and has fortunately been granted for three months. Transport issues have been mitigated with the use of community transport or private taxis to be promoted by the practice as necessary.</p> <p>The Committee were invited to consider the recommendations set out in the paper and also consider the impact of the decision to close Princes Street Surgery. The assessment concluded that impact on health outcomes is low as local providers have high quality services providing effective mitigation.</p> <p>The process of the Impact Assessment has not led us to review the rationale for refusing the interim premises particularly around the sustainability and scalability of that offer. There will be robust proposal that we do work within a fixed time frame and committed programme to get a permanent solution, available before the next committee meeting.</p> <p>SH raised concerns regarding the definitive solution and AT clarified that further detailed discussions needed to take place.</p>	
6	<p>General Practice Forward View: Delivery Assurance</p> <p>a) Primary Care Operational Group (PCOG) Report</p> <p>AT clarified the position on the B&A CCG Local Quality Outcome Scheme, a local scheme built over 2 years and shared that there have been some challenges regarding ratifying the scheme outcomes. It has taken significant man hours to unpick the scheme and it is important to identify that we have now reached the end of the process and payments have gone to B&A practices according to outcomes.</p> <p>The Committee noted the report.</p> <p>b) Slough Walk in Centre update</p> <p>AT confirmed the new provider continued to provide the service over the transition period from 1st September 2017, and we are continuing to support them.</p> <p>c) Sussex Place Closure update</p> <p>They have revised their date to the end of January 2018 and confirmed the boundary issue is now within the contract. They have submitted a robust transition plan and we are giving feedback. The current registered patients will not be impacted upon with the boundary change.</p> <p>d) PCOG Terms of Reference</p> <p>Comments on the ToR presented:</p> <ul style="list-style-type: none"> • Revision to point 16 – one committee too many • From page 4 onwards – old acronyms are used 	

	<p>The Terms of Reference were approved following the changes above with an action to replicate the decision making process with an update of acronyms</p> <p>e) Forward Planning for Primary Care Committee</p> <p>It was agree that discussions will continue on email regarding the PCC CiC forward plan.</p>	
<p>7</p>	<p>AOB</p> <p>Violent Patients – NS</p> <p>NHS England has agreed during the period of transition to full delegation to support the CCGs with the commissioning and co-ordination of the service with the aim of providing a service which is fit for purpose. This will include alignment with similar services across the country and to enable the service to meet National guidelines and processes.</p> <p>The Committee was requested to approve the two step process in terms of sending it out as an enhanced service to our practices and if not suitable to go to full procurement and support the identification of a lead CCG.</p> <p>Decision: The Committee approved the requirement to re-procure a VPS service and the delegated responsibility for it; and supported the foreseen 2 step procurement process and service specification.</p> <p><u>Review of meeting</u></p> <ul style="list-style-type: none"> ▪ Load the agenda onto BoardPad for ease of reference and ensure that excel reports are legible. ▪ The role of the rotating GP at this Committee is for clinical advice and insight into proposals being made. ▪ Very good, clear chairing. <p>The meeting closed at 16:30.</p>	

Dates of future meetings:

Wednesday 22nd November 17.00 – 18.30 (Private)

Ascot Suite

Copthorne Hotel,

Cippenham Lane, Slough, SL1 2YE.

January 2018 – Monday 22nd 13.00 – 14.30 (Private)

Venue : King Edward VII Hospital, Board Room.

Bracknell and Ascot Clinical Commissioning Group

Slough Clinical Commissioning Group

Windsor, Ascot and Maidenhead Clinical Commissioning Group

'Thinking locally, working together'