

Primary Care Commissioning Committee
In Public
Meeting held on 17th January 2019
2:00pm, Conference Room A

Present:

Smith, Pam (PS)	Lay Member, NHS West Cheshire Clinical Commissioning Group
James, Gareth (GJ)	Chief Finance Officer/Deputy Chief Officer, NHS West Cheshire Clinical Commissioning Group
Ritchieson Chris (CR)	Chair, NHS West Cheshire Clinical Commissioning Group
McAlavey Andy (AMcA)	Medical Director, NHS West Cheshire Clinical Commissioning Group
Marsh, Laura (LM)	Director of Commissioning, NHS West Cheshire Clinical Commissioning Group
Murray, Sarah (SM)	Head of Primary Care, NHS West Cheshire Clinical Commissioning Group
Hillhouse, Sheila (SH)	Nurse Member Representative, NHS West Cheshire Clinical Commissioning Group
Perkins, Jeremy (JP)	GP Network Chair, Ellesmere Port and Neston
Jones, Annabel (AJ)	GP Network Chair, Chester City
Sutton, Carla (CS)	Senior Contracts Manager, NHS England North (Cheshire & Merseyside)
Powell, Simon (SPow)	Local Medical Committee Representative
Barry Louise (LB)	Chief Executive, Healthwatch

In Attendance:

Anderson, Mike (MA)	Commissioning Manager, NHS West Cheshire Clinical Commissioning Group
Baker Jill (JB)	Estates Project Manager, NHS West Cheshire Clinical Commissioning Group
Maughan, Loraine	Executive Assistant, NHS West Cheshire Clinical Commissioning Group

Agenda No	Agenda Item	Action
2019-01	Welcome Introduction and Apologies PS welcomed everyone to the meeting and apologies were received from Steve Pomfret and Paula Wedd. There was 1 member of the public in attendance.	
2019-02	Declarations of Interest As a director of Great Sutton Limited AMcA declared an interest in agenda item 2019-04 and he left the meeting for this item.	
2019-03	Minutes of last meeting 15th November 2018 The minutes of the meeting held on 15 th November 2018 were agreed as an accurate record of the meeting.	

	<p>Matters Arising</p> <p>There were no matters arising to be discussed.</p> <p>Actions</p> <p>2018 - 35 – Primary Care Commissioning Report – Western Avenue – This action has been completed and can be removed from the tracker.</p> <p>2018-43 – Primary Care Commissioning Report – Contract Meeting – A meeting has been arranged and an update will be provided at the meeting on the 21st March 2019.</p> <p>In relation to the metrics around clinical pharmacists these will be taken to the primary care operations group for further scrutiny. It was noted that these are the official metrics used by NHS England. Update to be provided at the March meeting.</p> <p>2018-55 - CQUIN – Update to be provided at the March meeting.</p> <p>2018 – 67 - Primary Care Estates Report – Terms of reference have been agreed and Gareth James would now be involved. The committee felt that Kieran Timmins should in fact be invited to attend. It was agreed that the Terms of Reference and Minutes of the meeting would be brought to Primary Care Commissioning Committee.</p>	<p>SM</p> <p>SM</p> <p>SM</p>
<p>2019-04</p>	<p>Primary Care Estates Report</p> <p>JB asked the committee to consider the use of St Martins Clinic which has been vacant since 2015 and to receive an appeal from Garden Lane Medical Centre following the decision not to support the relocation to the Fountains Medical Centre, taken at the September 2018 committee meeting.</p> <p>It was noted that St Martins Clinic currently costs the CCG £82,000 per year and this could be disposed of via NHS Property Services and the funds utilised towards pressures within the primary care budget. It was noted that NHS property services are also under pressure to dispose of vacant buildings. JB asked that the committee approve discussions to take place with NHS property services regarding disposal of the building.</p> <p>CR responded that he would support the proposal to dispose of St Martins Clinic and asked whether we have a mechanism to identify other vacant properties that we are paying for.</p> <p>JB responded that in the past there was no mechanism to hand back properties but that a system is now in place. At the beginning of each financial year we will review the list of empty buildings we are paying for and report these to the Estates Group.</p>	

	<p>Assurance was sought that a thorough assessment of properties is taking place against what may be needed in the future.</p> <p>The committee were then asked to consider the appeal received from Garden Lane to move into the Fountains building. It was noted that they currently have 12 years on their lease but that they have now secured another organisation to take over the lease. JB noted that there is a time pressure to sign the lease. The existing premises are due a rent review in March 2019 and it is anticipated that the uplift in rent is likely to be in the region of £30,000 – £40,000. Work has been undertaken to identify potential savings and funding sources in order to mitigate the costs to move Garden Lane into the Fountains. It was anticipated the costs to fund Garden Lane relocation would be in the region of £140,000.</p> <p>The committee discussed a number of related opportunities including the Wrexham Community Infrastructure Levy that could provide capital towards new premises in Lache and Handbridge.</p> <p>PS asked why the CCG have to pay towards the rent for GP practices. SM responded that it is part of the GMS contract and is calculated based on district valuer recommendations.</p> <p>It was noted that across Cheshire organisations have made different decisions regarding premises developments.</p> <p>JP queried why the rent reimbursement for Garden Lane in The Fountains has reduced. JB responded that they have relooked over the specification and reduced the area required by Garden Lane they have taken off “soft space” by sharing waiting areas and meeting rooms to drive efficiencies.</p> <p>JP asked whether the non-recurrent funds used for integration by the clusters could be used towards the legal fees Garden Lane are requesting. SM responded that she would find out.</p> <p>GJ asked the committee to look at the 2 issues separately. A compelling case has been put forward that fits in with our strategy and he would support that. However he asked the committee to consider the prioritisation schedule and whether the committee had assurance regarding the prioritisation process</p> <p>CR asked for clarity on the costings in the spreadsheet as it appeared to show double counting in terms of savings and cost. He asked whether we have a sense of whether the proposed increase in rent on the current premises Garden Lane lease is real</p> <p>JB responded that comparable rent increase over last 5 years and the high value of city centre land, it is very likely there is going to an increase.</p> <p>SPow asked for clarification on the returning of funds for Pinetum.</p>	<p style="text-align: center;">SM</p>
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	<p>SM responded that Garden Lane provide discharge to assess for a higher acuity level of patients which is an additional payment over and above the nursing home LES. They will renegotiate the value of the service which will be a recurrent saving. By bringing Garden Lane into the Fountains they believe they can deliver a different service</p> <p>SPOw expressed concern that the committee doesn't fully understand prioritisation.</p> <p>It was noted that from a strategic perspective Garden Lane feel they are influential in their care community and to drive that forward they need to be in the same location as the other practices where they can work collaboratively to deliver both service delivery and back office functions.</p> <p>JP asked whether asking for a contribution towards legal fees was a normal request. GJ responded that yes it was and that practices could apply for associated costs but it was up to the CCG to award this. Historically NHS England have awarded the costs when they have needed to support and encourage practices to move.</p> <p>LB asked about the impact for patients as there isn't a strong argument in the appeal and wasn't convinced of the patient impact. SM responded that the matrix focused on the situation currently and what the new provision would offer to patients including disabled access.</p> <p>GJ asked the committee to make a decision on the prioritisation process so that when bids come in they could be looked at and be approved if money was available. Due to the timescales we could be challenged by one of the other practices. We are being asked to make a decision today on the matrix without a ratified process in place.</p> <p>LM asked that the Estates process produced by the group be brought to the next meeting for ratification. But to be reminded that it is not unusual for us to make a decision if we feel we have enough evidence.</p> <p>SH raised concerns at the risk to the organisation in terms of challenge of the process.</p> <p>PS asked the committee to make a decision on Garden Lane as due to timescales we are not in a position to wait for a ratified process.</p> <p>CR reminded those on the committee who are able to vote to be mindful of the risks to the organisation.</p> <p>GJ suggested that subject to agreeing virtually the signing off of the matrix a decision could then be made.</p> <p>PS suggested a caveat that there will be more changes to the matrix that won't affect the prioritisation and that it is circulated before the next meeting.</p>	<p>SM</p> <p>SM</p>
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	<p>It was noted that a primary care estates group has been set up but that terms of reference have not been formally signed off. The preferred option would be that responsibility for decision lies with the committee. It was acknowledged that there is an ongoing risk every year.</p> <p>JB confirmed that the matrix sits in line with the process used by the Health & Care Partnership and is aligned to the national estates programme.</p> <p>It was agreed that a vote would be taken based on the matrix being approved outside of the committee by committee members and committee members were asked to make a decision on the information we have today with final ratification at a later day.</p> <p>The following voting members were present PS, SH GJ and LM.</p> <p>The committee approved the disposal of St Martins Clinic.</p> <p>The committee approved the decision to relocate Garden Lane subject to the process above and that mitigation of pressures is looked at further.</p> <p>The committee did not agree to fund the legal costs of Garden Lane.</p> <p>GJ updated he had received a written request from Great Sutton Limited for revenue cost and other associated financial costs. It was agreed that further discussions would take place outside of the meeting between GJ,LM, SM and JB before taking the proposal to the estates group for decision. The Proposal would then be brought back to Primary Care Commissioning Committee for final decision when a full response will be provided to Great Sutton</p> <p>The Primary Care Commissioning Committee:</p> <ul style="list-style-type: none"> a) Approved the disposal of the vacant St Martins Clinic. b) Reviewed and approved the decision regarding the relocation of Garden Lane Medical Centre to new premises in the Fountains Building. c) Declined the request to fund the legal fees incurred for the new lease for Garden Lane Medical Centre relocating to the Fountains Building. 	
<p>2019-05</p>	<p>Primary Care Quality and Performance Report</p> <p>MA updated that part 1 of the report is for information and that a further meeting had been arranged with the Business Intelligence team around the screening and indicators being out of date or out of scope. Concern had been raised that there were elements of the dashboard that couldn't be influenced by practices.</p>	

	<p>LM noted that the Committee only needed to receive a summary of the impact of the work with practices, by theme, on the Support and Escalation process. Over time, there is a risk that the impact will reduce and then practice engagement will decline. I. It was suggested that the Primary Care Operations group look at what comes to Primary Care Committee to ensure it more meaningful.</p> <p>The committee acknowledged that the Care Quality Commission had re-inspected the Whitby group practices and all 3 practices received a “good” rating both overall and in every individual domain.</p> <p>It was requested that further discussions on quality are held outside of the meeting to ensure as a committee we are picking up the right thing as quality falls across a number of areas.</p> <p>The Primary Care Commissioning Committee noted the content of the report.</p>	
<p>2019-06</p>	<p>Primary Care Commissioning Report</p> <p>SM reported that there was some really good work happening within the primary care networks particularly in Ellesmere Port. The Health & care Partnership Funding has acted as a significant catalyst to the networks It was noted that the Long Term Plan proposes further investment in primary care to support primary care network development.</p> <p>SM updated that Helsby have been given the go ahead for clinical pharmacists and that all practices have been notified that there are only 2 further opportunities available for clinical practice pharmacy funding.</p> <p>SM has asked those practices who have a clinical pharmacist to share their experience with others. It was noted that Adam Jackson who has been leading on this will be leaving at the beginning of March and that a push in February would hopefully lead to a significant number of practices getting involved</p> <p>CR responded that we should take the remaining opportunities to maximise our interest whilst benefiting locally. He asked that we ensure that the message is taken to the right forums.</p> <p>The Primary Care Commissioning Committee noted the content of the report.</p>	
<p>2019-07</p>	<p>Primary Care Finance Report</p> <p>GJ thanked the shared finance and contracting team for primary care who had prepared the report. We have a significant pressure in quarter 1 and quarter 2 in excess of £600,000. This is due partly to a substantial increase to the GMS contract that was not included in the allocations. Neil Cook has had negotiations with NHS England and we believe we will receive £450,000 non-recurrently which has been factored into the financial forecast. GJ informed the committee that he</p>	

