

**MINUTES OF THE JOINT CO-COMMISSIONING COMMITTEE  
HELD ON TUESDAY 20<sup>TH</sup> March 2018 3.30pm to 4.15PM  
AT CENTRE4, IN TRAINING ROOM 1**

**PART A**

**PRESENT:**

Mark Webb	NELCCG Chair
Geoff Day	NHS England
Erica Ellerington	NHS England
Dr Krishna Kasaraneni	Representative – Humberside Group of LMC's
Julie Wilson	Assistant Director Programme Delivery & Primary Care NELCCG
Laura Whitton	Chief Finance Officer NELCCG
Cllr Jane Hyldon-King	Portfolio Holder for Health, Wellbeing and Culture
Joanne Hewson	Deputy Chief Exec, NELC (representing Stephen Pintus)
Phillip Bond	Deputy Chair, PPI member of Governing body
Paul Glazebrook	Health Watch representative

**IN ATTENDANCE:**

Kaye Fox	PA to Executive Office, Note taker
Rachel Singyard	Service Manager NELCCG
Dr Rolan Schreiber	LMC Medical Secretary

**APOLOGIES:**

Dr Ekta Elston	Vice Chair of CoM, NELCCG
Dr Thomas Maliyil	Chair of CoM, NELCCG
Stephen Pintus	Director of Health & Wellbeing, NELC

<b><u>Ed</u></b>	<b><u>ITEM</u></b>	<b><u>Action</u></b>
1.	<b>APOLOGIES</b> Apologies were noted as detailed above.	
2.	<b>DECLARATIONS OF INTEREST</b> The Chair reminded members that if at any point during the meeting they note a conflict of interest this needs to be declared and members should ensure that this is listed on their declaration of interest form. The Chair reminded members that any declarations of interest that arise during discussions of the Agenda items should be noted.	
3.	<b>MINUTES OF THE PREVIOUS MEETING / VIRTUAL DECISION LOG RATIFICATION – 30th January 2018</b> The minutes of the meeting held on the 30th January 2018 were agreed as an accurate record.  The action list from the January 2018 meeting has been updated and circulated with the papers; members raised no further queries on the action sheet.  The Chair asked that due to the limited time available for the meeting agenda items 5, 6 and 10, would not be covered today during the meeting and any verbal updates would	

	be sent round via email as an update. The Chair asked members of the Committee to contact him via email if they had any queries in respect of these papers.	
4.	<p><b>MATTERS ARISING</b>  <b>Update on ETTF –</b>  Rachel Singyard provided a verbal update on the ETTF paper which was brought to the January 2018 Committee meeting. An offer had been circulated to the other 2 Federations for the opportunity to purchase a document management system, for different reasons neither of the Federations were needing to purchase this type of software. This means there is still a £28k underspend on ETTF monies. This has been discussed at the General Practice Provider Development Group.</p> <p>One idea that the Committee members were asked to consider was whether they would approve offering each practice a nominal fee to put towards purchasing a piece of equipment which would support patients to be maintained in General Practice and help prevent a referral, or ensure all appropriate tests can be undertaken prior to referral, to secondary care. Julie Wilson stated that a set of criteria / rules would need to be drawn up stating how the money should be spent, making it clear that this is a one-off payment, a copy of an invoice would also be requested for Practices to claim the money back.</p> <p>Discussion took place between members and the following was suggested.  Either:</p> <ul style="list-style-type: none"> <li>• Offer the £1k per Practice for equipment which will meet the criteria of supporting management of the patient within the practice and avoiding referral, or ensuring referrals are fully worked up. This would be the case if there is limited time to spend the funds and suggestions need to be put forward very quickly.</li> <li>Or</li> <li>• Invite expressions of interest from Federations ideally (or Practices) for innovative suggestions that also meet the criteria above. This would be the case if there is funding within 2018/19 which allows more time for the Federations / Practices to respond.</li> </ul> <p><b>ACTION: RS to discuss funding options with LW and issue offer to Practices accordingly</b></p>	RS
	<b>GOVERNANCE</b>	
5.	<p><b>STRATEGY</b>  GPFV update  Julie Wilson agreed to provide a written update on this item and circulate to members.</p> <p><b>ACTION: JW to provide a written update on this item and circulate to members</b></p>	JW
6.	<p><b>QUALITY</b>  <b>CQC Inspections – ‘Requires Improvement’</b>  Julie Wilson agreed to provide a written update on this item and circulate to members</p> <p><b>ACTION: JW to provide a written update on this item and circulate to members</b></p>	JW
7.	<p><b>OPERATIONAL</b>  <b>Updates on Local Schemes Review</b>  a) Post-op Care  b) Near Patient testing</p>	

	<p><b>c) GnRH Analogues</b> <b>d) Phlebotomy</b></p> <p>Rachel Singyard had provided a report on each of the schemes agreed for renewal at the January 2018 meeting, which provides background information regarding the rationale for proposing that these schemes are renewed.</p> <p>Each report includes information on the background to how the scheme originated, a description as to what the service is, the number of Practices providing that service and the implications if the service wasn't available.</p> <p>When benchmarking the costs of the first 3 services listed on the agenda against other local CCG's, the costs were broadly comparable. However, the Phlebotomy service is a higher payment than other CCG areas. Julie reminded the Committee of the in-depth discussion that took place at this Committee previously when agreeing the increased rate for phlebotomy, and the reasons this was agreed at that time. The Committee were therefore asked to confirm if they were still content to continue, or whether they would like to request that the fee be re-considered.</p> <p>Discussion took place between members and the following points were raised:</p> <ul style="list-style-type: none"> <li>• It was queried whether activity has shifted as a result of these schemes and the resultant reduction in funding in secondary care has taken place. JW confirmed that most schemes had been in existence for a number of years and the activity and funding shifted at the time they began.</li> <li>• The Chair raised a query regarding whether there are capacity issues in respect of qualified staff within primary care to deliver these services. It was confirmed that there are no such issues within these services.</li> </ul> <p>It was noted that in all of these local schemes, the contract allows the CCG to vary the services if circumstances change and also provides the option to terminate, in the worst case scenario, if this became necessary for any reason.</p> <p><b>The Committee had confirmed the approval of the recommendations at the January 2018 meeting, and confirmed that they would not be changing this agreement.</b></p>	
<b>8.</b>	<p><b>Contract Variations (standing item)</b></p> <p>There was nothing further to update the Committee on this item</p>	
<b>9.</b>	<p><b>Proposal for Relocation of Quayside Surgery</b></p> <p>The purpose of this report is to provide the Committee with the findings from the consultation regarding the proposed relocation of Quayside Practice to the Open Door premises.</p> <p>The Committee is asked to consider the attached report and confirm agreement to the relocation of the Quayside Practice to the Open Door premises</p> <p>Geoff Day informed Committee members that the 6 week public consultation had finished and the report submitted for the meeting highlights the findings.</p> <p>Two key issues/themes had been raised: the issue of keeping patients from both Practices separate and the lack of car parking in the area at Open Door. It was confirmed that Care Plus are seeking an agreement to secure additional alternative parking and offering reassurances to patients regarding arrangements in place for protecting the safety of patients..</p>	

	<p>It was queried whether the car parking should be a condition of the agreement to relocate, but Geoff Day responded that car parking is not a contractual requirement and it would therefore not be possible to do this.</p> <p><b>The Committee approved the relocation of Quayside Surgery to Open Door premises.</b></p>	
<b>10.</b>	<p><b>Local Arrangements for Out of Area Registration</b></p> <p>At the January 2018 meeting a query had been raised regarding the local arrangements for the out of area registration scheme. The paper submitted for the meeting has been prepared to provide further detail regarding the local arrangements for this scheme.</p> <p>The Committee is asked to note the local arrangements for out of area registrations.</p> <p>The Chair asked members to email Rachel Singyard if they had any further questions on the paper.</p>	
<b>11.</b>	<p><b>INFORMATION</b></p> <p>Primary Medical Services Budget summary (Standing item JH)</p> <p>The paper was noted by the Committee</p>	
<b>12.</b>	<p><b>Action Summary Sheet GP Development (Standing item)</b></p> <p>Paper not submitted for this meeting</p>	
<b>13.</b>	<p><b>Any other Business</b></p> <p>Dr Krishna Kasaraneni introduced Dr Rolan Schreiber, LMC Medical Secretary, to the members.</p> <p>No further issues were raised.</p>	
<b>14.</b>	<p><b>DATE AND TIME OF NEXT MEETING – Primary Care Commissioning Committee</b></p> <p><b>29<sup>th</sup> May 2018      11am to 1.30</b></p> <p><b>31<sup>st</sup> July 2018      2pm to 4.30pm</b></p> <p><b>25<sup>th</sup> Sept 2018      11am to 1.30pm</b></p> <p><b>27<sup>th</sup> Nov 2018      2pm to 4.30pm</b></p>	