

**Minutes of the NHS Rotherham Clinical Commissioning Group**

**Primary Care Committee Meeting – Session held in public**

**Wednesday 12 May 2021 @ 1pm to 2.45pm**

**Via Video Conference**

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**Quorum**

**Primary Care Committee has 6 voting members**

**Quorum is 2 x Lay Members, 2 x Senior Officers,**

**Present Members:**

Mr	I	Atkinson (IA)	Executive Place Director - RCCG
Mrs	S	Cassin (SC)	Chief Nurse - RCCG
Mr	C	Edwards (CE)	Accountable Officer - RCCG
Mrs	D	Twell (DT)	Lay Member
Mrs	J	Wheatley (JW)	Lay Member (Chair)

**Present In Attendance:**

Dr	G	Avery (GA)	GP Members Committee Representative
Mr	P	Barringer (PBa)	NHS England
Ms	R	Garrison (RG)	Senior Contracting & Service Improvement Manager – RCCG
Dr	A	Gunasekera (AG)	SCE GP Lead for Primary Care
Mrs	S	Hartley (SH)	Contract & Service Improvement Manager - RCCG
Mrs	L	Jones (LJ)	Deputy Head of Financial Management – RCCG
Mr	S	Lakin (SL)	Head of Medicines Management - RCCG
Dr	N	Leigh-Hunt (NLH)	RMBC representative
Mrs	J	Murphy (JMu)	Primary Care Committee Administrator & Minute Taker – RCCG
Dr	C	Myers (CM)	GP LMC Representative
Mrs	J	Tuffnell (JT)	Head of Commissioning RCCG

**Participating Observers:**

None – virtual meeting

**Members of the Public:**

None – virtual meeting

**Apologies:**

Mr	J	Barber (JB)	Lay Member
Mrs	L	Cooper (LC)	Healthwatch Representative
Mrs	A	Shaw (AS)	Connect Healthcare Rotherham

<b>2021/80</b>	<b>Apologies &amp; Introductions</b>
	<p>JW introduced the meeting by identifying that due to the current pandemic and requirement for social distancing; that this was the Fourteenth time the Primary Care Committee had been undertaken by video conferencing facility.</p> <p>JW advised that the decision had been taken that this meeting will no longer be broadcast live on CCG You Tube, and the public are able to access the meeting using the zoom link included on the agenda. JW reiterated meeting etiquette required.</p>
<b>2021/81</b>	<b>Declarations of Interest</b>
	<p>The Chair reminded members of their obligations to declare any interest they may have on any issues arising at meetings which might conflict with the business of the NHS Rotherham Clinical Commissioning Group.</p> <p>Declarations declared by members are listed in the CCG’s register of interests. The register is available on the CCG website at the following link:</p> <p><a href="http://www.rotherhamccg.nhs.uk/about-us/declaration-of-business-interests2.htm">http://www.rotherhamccg.nhs.uk/about-us/declaration-of-business-interests2.htm</a></p>
	<b>Declarations of Interest from today’s meeting</b>
	<p>GA declared a conflict of interest in the following item</p> <ul style="list-style-type: none"><li>• Discretionary reimbursement of GP performer payments for maternity Leave (Blyth Road)</li></ul>
	<b>Declarations of Conflicts of Interest and Pecuniary or Non-Pecuniary Interest</b>
	<p>The GP members of the committee are partners in different practices across Rotherham. They have a direct interest in items that influence finances, resources or quality requirements for general practice in Rotherham. This applies to all items discussed in items on the agenda. Any additional specific Conflicts of Interest and how the Committee addressed the conflict of interest will be noted under individual items.</p>

	<p><b>GPs will be bound by the details of this update; as such they will remain on the video conference for the discussion, should a decision be required GPs will be asked to leave before a decision is made.</b></p> <p>Items requiring a decision for approval</p> <ul style="list-style-type: none"> <li>• Primary Care Committee Annual Report</li> <li>• Local Enhanced Services (LES) 2021-22 revision to service specification</li> <li>• Local Enhanced Services (LES) Proposed Uplifts 2021/22</li> <li>• Deep Vein Thrombosis (DVT)</li> </ul>
<b>2021/82</b>	<p><b>Patient &amp; Public Questions</b></p> <p>Chair noted that none had been received.</p>
<b>2021/83</b>	<p><b>Quorum</b></p> <p>Chair confirmed the meeting was quorate.</p>
<b>2021/84</b>	<p><b>Draft minutes of the Primary Care Committee</b></p> <p>Dated 14 April 2021</p> <p><b>Committee agreed the minutes as a true and accurate record.</b></p>
<b>2021/85</b>	<p><b>Matters arising</b></p> <p>2021/65e – Discretionary reimbursement of GP performer payments for maternity Leave (Blyth Road)</p> <p>GA noted a conflict of interest in this item.</p> <p>JW advised that an extraordinary meeting was held on the 21 April 2021, and members, with the advice from NHS England made the following decision which had been communicated to the practice:-</p> <p><i>The committee took the decision to decline the request as it did not demonstrate exceptionality and meet the terms of the regulations, in line with SFE requirements.</i></p> <p><i>As the CCG operates under delegation from NHS England, the committee has a duty to operate within the guidance and on this basis the request could not be supported.</i></p> <p><u>Members discussed key areas:-</u></p> <ul style="list-style-type: none"> <li>• CMY advised that the LMC appreciated the committee had adhered to the regulations currently in place, and would be raising this issue with the GPC representative with a request for the regulations be reviewed to reflect the changing primary care landscape and current practice.</li> </ul>

	<ul style="list-style-type: none"> <li>GA appreciated that the committee had followed the regulations and accepted the decision, however would be raising his concerns with the LMC and BMA, as in his view Rotherham should be able to make local decisions under delegated authority.</li> </ul>
<b>2021/86</b>	<b>Action Log</b>
2021/86a	<p><b>Committee agreed the amendments to the action log as per enclosure 1b:</b></p> <p><b>Committee agreed the following item remain amber on the action log:-</b></p> <ul style="list-style-type: none"> <li>2021/62a Dementia LES</li> </ul> <p><b>Committee agreed the following item be made green on the action log:-</b></p> <p><b>Committee agreed the removal of the following items from the action log:-</b></p> <ul style="list-style-type: none"> <li>2021/62a Medicines Management Team Quarterly Report.</li> <li>2021/63a Wound Care LES.</li> <li>2021/63c Principles for General Practice local funding arrangements 2021/22.</li> </ul>
	<b>Action – JMu to amend the Action Log as directed above.</b>
2021/86b	<p><b>Update on Dementia</b></p> <p>JT advised a discussion had taken place with Kate Tufnell, however there was no timeline for update at committee.</p> <p>GA advised that Blyth Road would no longer be delivering the current LES.</p> <p>CE recommended an update to the timeline to be provided for the next meeting. Members agreed.</p> <p><b>Action – KT to provide an updated timeline for the dementia LES</b></p>
<b>2021/87</b>	<b>Strategic Direction</b>
2021/87a	<ul style="list-style-type: none"> <li><b>Primary Care Committee (PCC) Annual Report</b></li> </ul> <p>AG gave an overview of the Primary Care Committee Annual Report papers, and asked the committee to:-</p> <ul style="list-style-type: none"> <li>Approve the content of the Annual Report.</li> </ul> <p><u>Key areas of the report:</u></p>

	<ul style="list-style-type: none"> <li>• Report was an update on the work undertaken in the last financial year by the Primary Care Committee.</li> </ul> <p><u>Members discussed key areas:</u></p> <p>Chair commended the work undertaken and achievements made, particularly during the pandemic.</p> <p>GPs were not present for the decision.</p> <p><b>Committee agreed the recommendation and approved the papers.</b></p> <p><b>Action – RG to forward the report to Audit Quality &amp; Assurance Committee (AQuA), Governing Body and NHS England.</b></p>
2021/87b	<ul style="list-style-type: none"> <li>• <b>Local Enhanced Services (LES) 2021-22 – revisions to service specifications</b></li> </ul>
	<p>SH gave an overview of the Introduction of the Local Enhanced Services (LES) 2021-22 - revisions to service specifications papers, and asked the committee to:-</p> <ul style="list-style-type: none"> <li>• Approve the proposed changes and continued commissioning of the services into 2021/22.</li> </ul> <p><u>Key areas of the report:</u></p> <ul style="list-style-type: none"> <li>• Anticoagulation and Enhanced Health in Care Homes (EHCH) specifications had been received by Local Medical Committee (LMC), and feedback provided to CCG Officers which had been incorporated into the specifications.</li> </ul> <p><u>Members discussed key areas:-</u></p> <ul style="list-style-type: none"> <li>• Maltby / Wickersley PCN – GA advised that the care homes in their PCN were now aligned to one practice. GA to provide the care home and GP alignment information to SH for inclusion in the specification.</li> </ul> <p>GPs were not present for the decision.</p> <p><b>Committee agreed the recommendation and approved the papers.</b></p> <p><b>Action - GA to provide the care home and GP alignment information to SH for inclusion in the specification.</b></p> <p><b>Action – SH to revise the EHCH specification.</b></p>
2021/87c	<ul style="list-style-type: none"> <li>• <b>Local Enhanced Services (LES) Proposed Uplifts 2021/22</b></li> </ul>
	<p>SH gave an overview of the Local Enhanced Services (LES) Proposed Uplifts 2021/22 paper, and asked the committee to:</p>

	<ul style="list-style-type: none"> <li>• Approve the uplift of payments, with the understanding that there may be financial pressures identified in months 7-12 once those allocations have been released.</li> </ul> <p><u>Key areas of the report:</u></p> <ul style="list-style-type: none"> <li>• Planning guidance was received at the end of March 2021, and in conjunction with finance, the CCG had reviewed the uplift of 0.2%.</li> <li>• Paper had been received by the LMC.</li> </ul> <p><u>Members discussed key areas:-</u></p> <p>None at this time</p> <p>GPs were not present for the decision.</p> <p><b>Committee agreed the recommendation and approved the paper.</b></p>
2021/87d	<ul style="list-style-type: none"> <li>• <b>Deep Vein Thrombosis (DVT)</b></li> </ul>
	<p>JT gave an overview of the Deep Vein Thrombosis (DVT) paper, and asked the committee to:</p> <ul style="list-style-type: none"> <li>• Approve the Deep Vein Thrombosis Pathway Local Enhanced Service.</li> </ul> <p><u>Key areas of the report:</u></p> <ul style="list-style-type: none"> <li>• Pathway had been simplified to encourage practice uptake, and maintain care closer to home within the community as 75% of patients in the current service, receiving a D-Dimer test were negative for DVT.</li> </ul> <p><u>Members discussed key areas:-</u></p> <ul style="list-style-type: none"> <li>• LMC had received the pathway and requested one amendment which had been agreed. LMC welcomed the simplified pathway to be applied in practice and the benefits for patient care being closer to home.</li> </ul> <p>GPs were not present for the decision.</p> <p><b>Committee agreed the recommendation and approved the paper.</b></p>
2021/87e	<ul style="list-style-type: none"> <li>• <b>Primary Care Team Work Programme: a quarterly update</b></li> </ul>
	<p>RG gave an overview of the Primary Care Team Work Programme: a quarterly update papers, and asked the committee to:-</p> <ul style="list-style-type: none"> <li>• Note the progress, and support where actions are off track.</li> </ul> <p><u>Key areas of the report:</u></p> <ul style="list-style-type: none"> <li>• ICS tab added and will be reviewed and updated regularly.</li> </ul>

	<p><u>Members discussed key areas:-</u></p> <ul style="list-style-type: none"> <li>• Chair commended the work undertaken and achieved, particularly in the current pandemic, noting that the majority of items were green and that the ambers were out of the CCGs control.</li> </ul> <p><b>Committee noted the papers.</b></p>
2021/87f	<ul style="list-style-type: none"> <li>• <b>GP Payment Principles (including Innovation fund)</b></li> </ul>
	<p>JT gave a verbal update on the GP Payment Principles (including Innovation fund), and asked the committee to:-</p> <ul style="list-style-type: none"> <li>• Note the verbal update.</li> </ul> <p><u>Key areas of the report:</u></p> <ul style="list-style-type: none"> <li>• Related to the principles paper presented two months ago incorporating Innovation fund, Local Incentive Scheme (LIS) and Quality Contract. Financial planning guidance had been received and positive discussions had taken place with LMC Officers.</li> <li>• Quality Contract will be reviewed in line with the Operating guidance and discussions to take place with LMC Officers in May and then it is hoped to have a final paper for approval by PCC at the next meeting.</li> </ul> <p><u>Members discussed key areas:-</u></p> <ul style="list-style-type: none"> <li>• LMC agreed positive discussions had taken place and they were working with CCG Officers.</li> </ul> <p><b>Committee noted the verbal update.</b></p> <p><b>Action – RG to prepare information for LMC Officers discussion and then present to PCC for approval.</b></p>
2021/87g	<ul style="list-style-type: none"> <li>• <b>360 Assurance Primary Medical Care Services (PMCS) Contract Oversight and Management Functions</b></li> </ul>
	<p>RG gave an overview of the 360 Assurance Primary Medical Care Services (PMCS) Contract Oversight and Management Functions paper, and asked the committee to:-</p> <ul style="list-style-type: none"> <li>• Note the content of the report.</li> </ul> <p><u>Key areas of the report:</u></p> <ul style="list-style-type: none"> <li>• Report had been received by Governing Body, Audit &amp; Quality Assurance Committee (AQuA) and received by PCC for information.</li> </ul>

	<ul style="list-style-type: none"> <li>• 360 Assurance had undertaken a thorough review with few recommendations, and provided assurance of primary care management and governance arrangements in place.</li> </ul> <p><u>Members discussed key areas:-</u></p> <p>None at this time.</p> <p><b>Committee noted the paper.</b></p>
<b>2021/88</b>	<b>Standing Items</b>
2021/88a	<ul style="list-style-type: none"> <li>• <b>Quality Contract (verbal update)</b></li> </ul>
	<p>AG gave a verbal update of the Quality Contract and asked the committee to:-</p> <ul style="list-style-type: none"> <li>• Note the verbal update.</li> </ul> <p><u>Key areas of the verbal update:</u></p> <ul style="list-style-type: none"> <li>• Quality Contract will be reviewed in line with the Operating guidance and discussions to take place with LMC Officers.</li> </ul> <p><u>Members comments:-</u></p> <p>None at this time.</p> <p><b>Committee noted the verbal update.</b></p>
2021/88b	<ul style="list-style-type: none"> <li>• <b>Primary Care Network (PCN) Update</b></li> </ul>
	<p>GA gave a verbal update on the Primary Care Network (PCN) Update and asked the committee to:-</p> <ul style="list-style-type: none"> <li>• Note the verbal update.</li> </ul> <p><u>Key areas of the verbal update:</u></p> <ul style="list-style-type: none"> <li>• Update on DES Delivery due next month.</li> <li>• PCNs reviewing dashboard which will provide an overview of where the PCNs are at present.</li> </ul> <p><u>Members comments:-</u></p> <p>None at this time.</p> <p><b>Committee noted the verbal update.</b></p>
2021/88c	<ul style="list-style-type: none"> <li>• <b>Improving Access – Extended Access monthly update</b></li> </ul>
	<p>AG gave a verbal update on Improving Access - Extended Access, and asked the committee to:-</p> <ul style="list-style-type: none"> <li>• Note the verbal update.</li> </ul>



	<p><u>Key areas of the report:</u></p> <ul style="list-style-type: none"> <li>• Home Visiting utilisation rates between 40% and 70% with Mondays achieving 82% utilisation.</li> <li>• Extended access hubs telephone appointments, with utilisation rates Saturday between 95% &amp; 100% and Sunday being lower. DNAs were very low.</li> <li>• Extended Access face to face appointments have restarted e.g. phlebotomy, smears, wound care</li> </ul> <p><u>Members discussed key areas:-</u></p> <p>None at this time.</p> <p><b>Committee noted the verbal update.</b></p>
2021/88d	<ul style="list-style-type: none"> <li>• <b>Covid-19</b></li> </ul>
	<p>IA gave a verbal update on Covid-19, and asked the committee to:</p> <ul style="list-style-type: none"> <li>• Note the verbal update.</li> </ul> <p><u>Key areas of the report:</u></p> <ul style="list-style-type: none"> <li>• Rotherham prevalence transmission rate was currently at 40 per 100k population.</li> <li>• Percentage of 1<sup>st</sup> doses received was very positive</li> <li>• Percentage of 2<sup>nd</sup> doses received :- <ul style="list-style-type: none"> <li>○ 90% of 65 years and over</li> <li>○ 95% of 70 years and over</li> </ul> </li> </ul> <p><u>Members discussed key areas:-</u></p> <ul style="list-style-type: none"> <li>• Regionally Rotherham was performing well and IA confirmed information was in the public domain.</li> </ul> <p>Chair and members commended the continued success of the programme.</p> <p><b>Committee noted the verbal update.</b></p>
2021/89e	<ul style="list-style-type: none"> <li>• <b>Delegated Duties – iii – Decisions in relation to the establishment of new GP practices (including branch surgeries) and closures of GP practices.</b></li> </ul>
	<ul style="list-style-type: none"> <li>• <b>Waverley Medical Centre Update</b></li> </ul> <p>JT gave an overview of the Waverley Medical Centre update and asked the committee to:-</p> <ul style="list-style-type: none"> <li>• Note the current status of the Waverley project and the build plans for the centre.</li> </ul> <p><u>Key areas of the report:</u></p>

	<ul style="list-style-type: none"> <li>○ Project had received ICS Capital Scheme support</li> <li>○ Planning permission had been submitted to RMBC, as the current plans were different to the original developer plans.</li> <li>○ Feedback on waiting room size had been presented for review.</li> <li>○ Olive Lane presentation shows the community feel of the development.</li> </ul> <p><u>Members discussed key areas:-</u></p> <ul style="list-style-type: none"> <li>● Waiting room and reception areas appear small for the size of development. JT confirmed comments had been presented for review to the team to ensure they were in accordance with building requirements.</li> </ul> <p><b>Committee noted the papers.</b></p>
<b>2021/90</b>	<b>Finance</b>
2021/90a	<ul style="list-style-type: none"> <li>● <b>Finance report month 12</b></li> </ul>
	<p><b>The report sets out CCG funding that is spent on General practice. The GP members have a direct financial interest in this item. As the item is primarily about understanding the CCG's current financial performance against plan for primary care the chair proposed that all members could participate fully in the discussion</b></p> <p>LJ gave an overview of the Finance Report paper for month 12 ending 31 March 2021, and asked the committee to:-</p> <ul style="list-style-type: none"> <li>● Note the reported financial position and supporting information provided in the report.</li> </ul> <p><u>Key areas of the report:</u></p> <ul style="list-style-type: none"> <li>● Delegated Primary Care Medical Services was £5k over plan in line with forecast for the year.</li> <li>● Locally commissioned Services underspend by £81k</li> </ul> <p><u>Members discussed key areas:-</u></p> <p>None at this time.</p> <p><b>Committee noted the paper.</b></p>
2021/90b	<ul style="list-style-type: none"> <li>● <b>H1 Draft Financial Plan for Primary Care Services 2021/22</b></li> </ul>
	<p>LJ gave an overview of the H1 Draft Financial Plan for Primary Care Services 2021/22, and asked the committee to:</p> <ul style="list-style-type: none"> <li>● Note the H1 2021/22 primary care financial plan commentary.</li> <li>● Note the underlying planning assumptions and note the risks advised.</li> </ul> <p><u>Key areas of the report:</u></p>

	<ul style="list-style-type: none"> <li>Financial envelope provided for the first half of the year (H1)</li> </ul> <p><b>Delegated budget:</b></p> <ul style="list-style-type: none"> <li>Growth of £1.3million to meet all national and local requirements leaving a shortfall of £171k funded from legacy central reserve.</li> <li>Contingency provided at 0.5% of allocation. Previous year's reserve now utilised. All expected costs covered, but any unplanned cost pressures arising in year to be funded from existing funds.</li> </ul> <p><b>Locally commissioned Primary Care Services:</b></p> <ul style="list-style-type: none"> <li>Local Enhanced Services to receive 0.2% uplift</li> <li>Improving access and PCN admin re-provided.</li> <li>Proposed efficiencies i.e. Local Incentive Scheme funds to be repurposed back to local enhanced services to cover cost pressures</li> </ul> <p><b>Risks</b></p> <ul style="list-style-type: none"> <li>Allocation only provided for the first six months of the year with expected greater efficiency challenge in second half of the year, therefore savings in Primary Care may be required.</li> </ul> <p><u>Members discussed key areas:-</u></p> <p>None at this time.</p> <p><b>Committee noted the papers.</b></p>
2021/91	<b>For Information</b>
2021/91a	<ul style="list-style-type: none"> <li><b>2021/22 Prescribing Incentive Schemes (PIS)</b></li> </ul>
	<p>SL gave an overview of the 2021/22 Prescribing Incentive Scheme papers, and asked the committee to:</p> <ul style="list-style-type: none"> <li>Note that the CCG continues to fund the prescribing FIS &amp; QIS for 2021/22</li> </ul> <p><u>Key areas of the report:</u></p> <ul style="list-style-type: none"> <li>Report had been refreshed for 2021/22 using the same methodology as previous years, and incorporates PCN Pharmacists views.</li> <li>Paper had been received by Strategic Clinical Executive (SCE), Audit and Quality Assurance Committee (AQuA) and received by Governing Body for ratification/sign off.</li> </ul> <p><u>Members discussed key areas:-</u></p> <p>None at this time.</p>

	<b>Committee noted the papers.</b>
<b>2021/92</b>	<b>Any other business</b>
	None at this time.
<b>2021/93</b>	<b>Primary Care Committee Forward Programme</b>
	All elements of the programme remain on track and CCG officers would continue to review each month. <b>Committee agreed the Forward Programme</b>
<b>2021/94</b>	<b>Items for escalation / reporting to the Governing Body</b>
	<ul style="list-style-type: none"> <li>• Primary Care Committee Annual Report.</li> </ul>
<b>2021/95</b>	<b>Exclusion of the Public</b>
	<p>The CCG Governing Body should consider the following resolution:</p> <p>“That representatives of the press and other members of the public be excluded from the remainder of this meeting due to the confidential nature of the business to be transacted – publicity on which would be prejudicial to the public interest”.</p> <p>Section 1(2) Public Bodies (Admission to Meetings) Act 1960 refers.</p> <p><b>Chair closed the meeting held in public.</b></p>
<b>2021/96</b>	<b>Date and time of Next Meeting</b>
	Wednesday 9 June 2021 commencing at 1pm via video conference.