

**NORTH YORKSHIRE
CLINICAL COMMISSIONING GROUPS**

Primary Care Co-Commissioning (CiC)

5th September 2019 @ 14.00pm

Dower House, Knaresborough

Present	
HRW CCG	
Wendy Balmain	Director of Strategy and Integration, NY CCGs
Dr Mark Hodgson	GP, Governing Body, HRW CCG
Linda Lloyd	Lay Member, Governing Body, HRW CCG
Sue Peckitt	Chief Nurse, NY CCGs

Present	
HaRD CCG	
Wendy Balmain	Director of Strategy and Integration, NY CCGs
Kate Kennady (Chair)	Lay Member, Governing Body HaRD CCG
Lance Gilroy	Lay Member, Governing Body, HaRD CCG
Dr Sarah Hay	GP, Governing Body, HaRD CCG
Dr Alistair Ingram	Chair, Governing Body, HaRD CCG
Sue Peckitt	Chief Nurse, NY CCGs
Dr Bruce Willoughby	GP, Governing Body, HaRD CCG

Present	
S & R CCG	
Wendy Balmain	Director of Strategy and Integration, NY CCGs
Iain Dobinson	Chief Finance Officer, NY CCGs
Dr Phil Garnett	Chair Governing Body, SRCCG
Philip Hewitson	Lay Member, Governing Body, SRCCG
Andy Hudson	Lay Member, Governing Body, SRCCG
Carolyn Liddle	Primary Care Manager, Governing Body, SRCCG
Sue Peckitt	Chief Nurse, NY CCGs

Apologies	
HRW CCG	
Amanda Bloor	Accountable Officer, NY CCGs
Ken Readshaw	GB Lay Member, HRW CCG
Dr Charles Parker	Clinical Chair, HRW CCG

Apologies	
HaRD CCG	
Amanda Bloor	Accountable Officer, NY CCGs
Sheenagh Powell	GB Lay Member, HaRD CCG

Apologies	
S & R CCG	
Amanda Bloor	Accountable Officer, NY CCGs
Sally Brown	Associate Director of Primary Care, SRCCG

In Attendance	
Nigel Ayre	Healthwatch North Yorkshire
Andrew Dickie	Heartbeat, Director
Andrew Dangerfield	Head of Commissioning, HaRD CCG
Dawn Ginns	Senior Primary Care Manager, NHS England
Sam Haward	Head of Strategy, HRW CCG
David Iley	Primary Care Manager, NHS England
Jenny Loggie	Head of Primary Care, SRCCG
Rory O'Connor	Public Health Consultant, NYCC
Emma Reah	Practice Manager, HRW CCG
Julia Scoles (Minutes)	Executive Assistant, SRCCG
Sasha Sencier	Governance & Assurance Manager, HaRD CCG
Sally Tyrer	Chair, LMC
Jim Woods	Vice Chair, LMC

1. Apologies for absence

Apologies were noted above.

HRW CCG PCCC: Noted apologies and that the HRW CCG PCCC meeting was quorate.

HaRD CCG PCCC: Noted apologies and that the HaRD CCG PCCC meeting was quorate.

SR CCG PCCC: Noted apologies and that the SR CCG PCCC meeting was quorate.

2. Declarations of Members Interests in Relation to the Business of the Meeting

The Chair reminded Committee members of their obligation to declare any interest they may have on any issues arising at Committee meetings which might conflict with the business of the North Yorkshire Clinical Commissioning Groups.

Declarations made by members of the Primary Care Co-Commissioning Committees in Common are listed in the CCGs Register of Interests. The registers can be found on the websites for NHS Scarborough and Ryedale CCG (SRCCG), NHS Harrogate and Rural District CCG (HaRD CCG) and Hambleton, Richmondshire and Whitby CCG (HRW CCG).

No declarations were received at the commencement of the meeting.

The Chair confirmed the meeting is quorate and therefore business can be transacted under the terms and conditions of the Terms of Reference(s) for the three North Yorkshire CCGs.

HRW CCG PCCC: Noted that there were no declarations made in relation to the business of the meeting.

HaRD CCG PCCC: Noted that there were no declarations made in relation to the business of the meeting.

SR CCG PCCC: Noted that there were no declarations made in relation to the business of the meeting.

3. Questions from Members of the Public.

It was confirmed that no questions had been received from members of the public prior to the commencement of the meeting. No members of the public were in attendance at the meeting.

HRW CCG PCCC: Noted that no questions had been received from members of the public.

HaRD CCG PCCC: Noted that no questions had been received from members of the public.

SR CCG PCCC: Noted that no questions had been received from members of the public.

4. Minutes and matters arising from the meetings held on:

- HRW CCG PCCC – 16 July 2019 – agreed as a true and accurate record. The outstanding action within the minutes has been completed and is now closed.
- HaRD CCG PCCC – 30 May 2019 - agreed as a true and accurate record. The outstanding action within the minutes and detailed under agenda Item 6.5 has been completed and is now closed.
- SRCCG PCCC – 26 June 2019 – agreed as a true and accurate record. All actions have now been dealt with and can be recorded as closed.

HRW CCG PCCC: Noted the above minutes.

HaRD CCG PCCC: Noted the above minutes.

SR CCG PCCC: Noted the above minutes.

5. North Yorkshire CCGs Primary Care Co-Commissioning Committees in Common (PCCCsic) – Terms of Reference (ToRs)

Sam Haward joined the meeting and gave an explanation with regard to the requirements of the Terms of Reference for the new Committees in Common.

See Appendix A for the confirmed list of voting and non-voting members for each CCG.

There is a need to change the TOR for each CCG due to the new single structure of Senior Executives. It was confirmed that there will be single TOR but in three forms for each CCG during the interim period. The current representation by Public Health, Healthwatch, Health and Wellbeing Board and other agencies will continue as before. However, should the merger be successful then the new TORs will be confirmed at that time.

Wendy Balmain confirmed that the memberships will not change as the aim is for a clear and transparent way of working during this interim period. Discussions were held with regard to LMC attendance at the new PCCCs CiC. It was noted that the current LMC representative for SRCCG is Dr Lumb. Both representatives from LMC and Healthwatch confirmed that only one representative would attend future meetings and not three as before and would be deemed North Yorkshire representatives.

ACTION: Sam Haward to add the LMC representation into the CiC TORs.

Voting rights – it was agreed that NHSE would be non-voting members going forward.

AGREED – NHS Englands representatives to be non-voting members going forward.

ACTION – The Governing Bodies of the 3 CCGs to approve the change of voting rights for the NHSE England representation at the joint Governing Body Committee on 26th September 2019.

AGREED – each CCG agreed to maintain one single TOR but in three forms for each CCG during the interim period.

AGREED - Membership across the 3 CCGs has now been agreed.

ACTION: These new TORs will be ratified by all Governing Bodies at the joint meeting on 26th September 2019.

AGREED – future Meetings will be held quarterly and TORs to reflect this. Extraordinary meetings may be held as required and in the business needs.

ACTION: Forward Plans in the form of an agenda planner is to be devised.

It was noted the new committee structure must avoid duplication of topics and tasks but must deal with the business of the CCGs during the interim period and post-merger.

ACTION: Sam Haward to finalise the TORs and circulate as appropriate.

HRW CCG PCCC: Approved the Terms of Reference, including revised membership and quorum arrangements, subject to the insertion of the name of their CCG by each organisation where appropriate and branding being in line with individual CCG policy. It was noted that the current LMC representative for SRCCG is Dr Lumb. It was also noted that both representatives from LMC and Healthwatch confirmed that only one representative would attend future meetings.

HaRD CCG PCCC: Approved the Terms of Reference, including revised membership and quorum arrangements, subject to the insertion of the name of their CCG by each organisation where appropriate and branding being in line with individual CCG policy. It was noted that the current LMC representative for SRCCG is Dr Lumb. It was also noted that both representatives from LMC and Healthwatch confirmed that only one representative would attend future meetings.

SR CCG PCCC: Approved the Terms of Reference, including revised membership and quorum arrangements, subject to the insertion of the name of their CCG by each organisation where appropriate and branding being in line with individual CCG policy. It was noted that the current LMC representative for SRCCG is Dr Lumb. It was also noted that both representatives from LMC and Healthwatch confirmed that only one representative would attend future meetings.

6.0 Primary Care Report

Sam Haward gave an overview of the document. Key items to note are:

- Withdrawal of the minor injuries service which was part of the GP Out of Hospital Service.
- A mapping exercise of the pharmacy scheme and the work of clinical pharmacists and their links to the clinical network are being compiled at the present time.
- Extended access provision which feeds into county wide work. Good utilisation was noted. The contract expires at the end of March 2020 and work is ongoing to manage the period from April 2020 until March 2021. Again, this is being dealt with across North Yorkshire.
- Active Signposting – General Practice Resilience Programme has been successful with a bid submission. Further detail to follow.
- Primary Care Networks (PCNs) – the four PCNs in HRW CCG locality went live from 1 July 2019 and Clinical Directors have been appointed in each. Meetings have been arranged to establish ways of working.

- GMS and PMS contract equalisation – an issue remains in HRW in that two military practices (Catterick and Harewood) do not reflect the appropriacy for the age profile. This creates an issue and a GMS and PMS equalisation processes are being considered at the present time.
- Friends and Family tests – low uptake was reported across the practices.
- Primary Care strategy – each CCG is working in different ways and this is being considered. The £3 per head work is also ongoing.

Bruce Willoughby reported on the HaRD position with regard to primary care. The GP Federation in HaRD, Yorkshire Health Network (YHN), are in talks with the CCG and regular meetings are taking place alongside Harrogate & District Foundation Trust (HDFT) regarding social prescribing and out of hospital care. There is good progression with the plans.

Jenny Loggie reported on the Scarborough position to date with the progress of the PCNs and appointment of Clinical Directors to each. Work is progressing with the recruitment of international GPs. Protected Time for Learning events have been arranged for general practice staff and these are proving beneficial to participants.

Discussions were held regarding investment requirements – circa £50m. This is required for a review of the extended access model across the 3 CCGs in North Yorkshire. A suggestion was made for PCNs to deliver this model. It was noted that a rationalised discussion is to be held across the North Yorkshire patch to understand the NHS England requirements and in relation to the ICS. It was noted there are 3 different examples currently. The needs of each locality are different but a common set of principles is required.

HRW CCG PCCC: The content of the reports was noted.

HaRD CCG PCCC: The content of the reports was noted.

SR CCG PCCC: The content of the reports was noted.

9. Finance Update

Iain Dobinson gave an update on finance reporting at the present time and there are different models for each CCG.

A discussion took place about the shortfall in PCCC allocation in each of the three CCGs. At present HRW shortfall is £585k. It is a national issue with NHSE.

It was suggested that one report covering all three CCGs be given at each meeting. Committee members must be aware of the implications of finance spending. The PCCCSiC meeting is held quarterly and this would be the preferred frequency to receive the finance reports.

There was a discussion and need for level of details in the reports. It was agreed that there would be a finance report and the content of the report would be agreed at a meeting between the 3 PCCC Chairs – Andy Hudson, Linda Lloyd, Kate Kennady, Iain Dobinson, Wendy Balmain and Sheenagh Powell to determine the level of detail required in future reports. It was clarified that Wendy Balmain is Senior Responsible Officer for primary care and has delegated authority on the overall budget. Reports provided by other CCGs are to be investigated as a working model.

It is paramount that patients have access to services in their localities and these impacts on spending. An initial report is to be provided for comparison to previous reports received by each CCG.

ACTION: arrange a meeting with Wendy Balmain, Iain Dobinson and the 3 Chairs and Sheenagh Powell.

HRW CCG PCCC: Noted that no finance report was received at today's meeting and concerns were noted.

HaRD CCG PCCC: Noted that no finance report was received at today's meeting and concerns were noted.

SR CCG PCCC: Noted that no finance report was received at today's meeting and concerns were noted.

10. Risk Registers:

Work is ongoing to merge the Corporate Risk Registers across the 3 North Yorkshire CCGs. There are no current significant risks aligned to these Committees.

HRW CCG PCCC: Noted the above.

HaRD CCG PCCC: Noted the above.

SR CCG PCCC: Noted the above.

11. CCG Specific Items

SRCCG – Annual Report 2018-19 – Jenny Loggie gave a summary overview of the detail contained in the report. The aim of the report is to provide assurance to the Executive Directors and PCCC members. Once approved, this can then be submitted to NHS England.

ACTION: a query was raised that in the report the LMC representative is deemed a voting member and it was confirmed that this is inaccurate and will be amended.

APPROVED – The SRCCG Annual report for 2018-19 is approved.

HRW CCG PCCC: Noted the above.
HaRD CCG PCCC: Noted the above.
SR CCG PCCC: Noted the above.

12. Any Other Business

The representative from North Yorkshire Public Health raised a query with regard to representation at future meetings at the PCCCs Committees in Common meetings. Jenny Loggie confirmed that Public Health has always been represented at SR CCG meetings. Andrew Dangerfield reported that Rachel Richards of NYCC Public Health usually attended HaRD PCCC meetings.

ACTION: North Yorkshire Public Health attendance at future PCCCs. Wendy Balmain to liaise with Dr Lincoln Sergeant of NY Public Health.

HRW CCG PCCC: Noted the above.
HaRD CCG PCCC: Noted the above.
SR CCG PCCC: Noted the above.

13. Date of next meeting

The Committee agreed the Primary Care Co-Commissioning Committees in Common would meet quarterly with the next meeting to take place in December 2019.

AGREED: Each Chair to lead 2 meetings sequentially.

HRW CCG PCCC: Noted the above.
HaRD CCG PCCC: Noted the above.
SR CCG PCCC: Noted the above.

Follow up actions

The actions required as detailed in these minutes are attached at Appendix A.

Appendix A

North Yorkshire Clinical Commissioning Groups Actions Log

Meeting Date	Item	Action	Responsibility	Action Completed / Due to be Completed (as applicable)
05.09.2019	North Yorkshire CCGs Primary Care Co-Commissioning Committees in Common Terms of Reference (ToRs)	Add the LMC representation into the CiC TORs.	Sam Haward	See SH's action below.
05.09.2019	North Yorkshire CCGs Primary Care Co-Commissioning Committees in Common Terms of Reference (ToRs)	It was agreed that NHSE would be non-voting members going forward.	GB Chairs	See SH's action below.
05.09.2019	North Yorkshire CCGs Primary Care Co-Commissioning Committees in Common Terms of Reference (ToRs)	These new TORs will be ratified by all Governing Bodies at the joint meeting on 26 th September 2019.	GB Chairs	See SH's action below.
05.09.2019	North Yorkshire CCGs Primary Care Co-Commissioning Committees in Common Terms of Reference (ToRs)	Forward Plans in the form of an agenda planner is to be devised	Cathy Tobin	Will be presented to the next meeting.

Meeting Date	Item	Action	Responsibility	Action Completed / Due to be Completed (as applicable)
05.09.2019	North Yorkshire CCGs Primary Care Co-Commissioning Committees in Common – Terms of Reference (ToRs)	Sam Haward to finalise the TORs and circulate.	Sam Haward	14/10/19 – SS confirmed that the ToRs for the three N.Yorkshire CCGs had been approved at the Joint Governing Body on 26 September.
05.09.2019	Finance	Arrange a meeting with Wendy Balmain, Iain Dobinson and the 3 Chairs and Sheenagh Powell.	Julia Scoles	
05.09.2019	CCG Specific Items	SRCCG – Annual Report 2018-19 In the report the LMC representative is deemed a voting member and it was confirmed that this is inaccurate and will be amended.	Jenny Loggie	
05.09.2019	Any other business	North Yorkshire Public Health attendance at future PCCCs iC. Wendy Balmain to liaise with Dr Lincoln Sergeant of NY Public Health.	Wendy Balmain	