

Minutes of the BSW CCG Primary Care Commissioning Committee Meeting held in Public

Thursday 14 October 2021, 13:30hrs

Virtual meeting held via Zoom

Present

Voting Members

Lay Member PCCC (Chair), Suzannah Power (SP)
Lay Member PPE (Vice Chair), Julian Kirby (JK)
Registered Nurse, Maggie Arnold (MA)
Chief Financial Officer, Caroline Gregory (CG)
Medical Director, Dr Ruth Grabham (RG)
Director of Strategy and Transformation, Richard Smale (RS)
Director of Primary Care, Jo Cullen (JC)

Attendees

Locality Clinical Lead Swindon, Dr Amanda Webb (AW)
Locality Clinical Lead (Wiltshire), Dr Edward Rendell (ER)
Locality Healthcare Professional (Swindon), Dr Francis Campbell (FC)
Locality Healthcare Professional (Wiltshire), Dr Sam Dominey (SD)
Locality Healthcare Professional (Wiltshire), Dr Nick Ware (NW)
Representative from HealthWatch Swindon, Steve Barnes (SB)
Deputy Director of Primary Care, Tracey Strachan (TS)
Deputy Director Nursing and Quality, Sharren Pells (SPe)
Associate Director of Finance – BaNES, John Ridler (JR)
Representative from Wessex LMC, Dr Gareth Bryant (GB)
Clinical Liaison & Engagement Specialist - Communications & Engagement, Helen Robertson (HE)
Patient Safety and Quality Lead, Claire Spiers (CS)
Board Secretary, Sharon Woolley (SW)

Apologies

Representative from HealthWatch Swindon, Harry Dale (HD)
Representative from HealthWatch Wiltshire, Joanna Wittels (JW)
Locality Clinical Lead (BaNES), Dr Bryn Bird (BB)
Chief Executive, Tracey Cox (TC)
Representative from HealthWatch Bath & North East Somerset, Joanna Parker (JP)
Locality Healthcare Professional (Wiltshire), Dr Catrinel Wright (CW)
Director of Nursing and Quality, Gill May (GM)

1 Welcome and Apologies

- 1.1 The Chair welcomed members and officers to the meeting. Apologies were noted.
- 1.2 The meeting was declared quorate.

1.3 To enable Primary Care Commissioning Committee (PCCC) meetings to continue as much as possible during these unprecedented times, Zoom and Microsoft Teams were being utilised where possible. The Standing Orders allow for this provision.

1.4 Only those questions raised through the normal submission process of three working days in advance of the meeting would be acknowledged during the meeting.

2 Declaration of Interests

2.1 The CCG holds a register of interests for all staff, Governing Body and Committee Members. None of the interests registered were deemed to be relevant for the meeting business. There were no other interests declared regarding items on the meeting agenda.

2.2 It was acknowledged that the primary care agenda would bring conflicts of interests for all Committee GPs working across BaNES, Swindon and Wiltshire (BSW). This would be managed by allowing them to be part of item discussions, but ensuring they did not influence any decision making. GPs on the Committee are non-voters.

3 Questions from the Public

3.1 The Committee had received two questions from the public. The Chair read out the questions and the CCG responses. All questions and responses would be published on the CCG website following the meeting.

4 Minutes from the meeting held on 9 September 2021

4.1 The minutes of the meeting held on 9 September 2021 were **approved** as an accurate record of the meeting.

5 Action Tracker and Themes to Watch

5.1 Eleven actions were noted on the tracker. Five were marked as CLOSED with updates provided for the Committee to note. There were no further updates to note against the ONGOING actions.

5.2 The Committee reviewed the Themes to Watch list. There were no further items to add. [ACTION: List and formatting to be revised to ensure updates were in line with the correct identified theme.](#)

6 Operational Items

6.1 The Committee received the following operational update from the Director of Primary Care and **noted** the following:

6a. Current Demands and Challenges

- A letter from the NHS England national team had been received earlier that morning to outline the Governments plans to improve access for patient to GPs. A webinar had been held with BSW primary care colleagues to discuss this, acknowledging the sustained pressures and demands being seen. The slides had been prepared in advance of the announcement. The letter data and indicators were to be worked through to relate to BSW and its 90 practices. The letter and supporting guidance referred to risk assessments of practices and sites, this was to be actioned quickly and would bring BSW specific actions.
- The appointment trend data indicated that 445,000 telephone and face to face appointments had been held in September. 58% were held face to face.
- Communications was fundamental at this critical time, with both colleagues and the public. *(this linked in with the action on the tracker with regards Healthwatch and CCG Communications Team to review public messaging)*. The CCG GP leads had recently

released an open letter to explain the pressures being seen and the current operational model.

- Practices were to complete a daily return based on their demand and workforce to feed into the SHREWD primary care OPEL status.
- National negotiations continued on contractual issues such as the Quality Outcome Framework and Additional Roles Reimbursement Scheme (ARRS).
- It was hoped all practices would be on-board with the GP Community Pharmacist Consultation Service (GP CPCS) by Christmas.
- There was a need to review the management of patients on waiting lists as this was impacting on practice staff time to respond to queries.
- The wellbeing offer to staff was to be reviewed, and would embrace all staff. There were currently high turnover numbers being recorded. The processes at practices and their receptions may need to be reviewed to reduce the negative patient response, this was being discussed with practice managers, along with a review of website information and telephone messages. HealthWatch offered their assistance with this.
- It was to be proposed to continue the BSW Primary Care Offer for H2 – national announcements were awaited in support of this.

6b. Blood Test Bottle Stocks and Plans

- Bottle supplies had stabilised, but had not yet reverted to normal levels. A national letter had been released on 8 October to update on the situation. Testing activity within acute trusts, community hospitals and mental health trusts could resume in line with best practice. GP teams were to continue to follow the best practice guidance.

6c. Update on COVID-19 Vaccination Programme

- BSW continued to perform well against the national league table, thanks to a continued tremendous effort from all those involved in the BSW vaccination programme.
- The booster dose programme had now commenced, along with school age delivery through Virgin Care. A further update on these would be provided in the December operational update.

6d. Respiratory Syncytial Virus Update

- An increase in paediatric activity was noted for September, wider than the anticipated Respiratory Syncytial Virus (RSV). Plans were in place to manage this demand. The figures related only to GP and ED visits, and did not include urgent care centre and minor clinic visits. The Medical Director was the chair of the paediatric demand system calls. The lack of immunity had been a concern when considering the impact of RSV. Although the cases and surge of RSV was not currently recorded, there had been an 30% increase in overall demand. If not managed, this could potentially lead to an increase in admissions and pressures on intensive care beds.

6e. GP Survey Results

- Analysis of the GP Patient Survey 2021 results continued at BSW level. Further data was expected.

[ACTION: A full overview of the GP Patient Survey results, an action plan and recommendations would be brought to the December PCCC meeting.](#)

7 Primary Care Operational Group Recommendation for Approval

7.1 The Deputy Director for Primary Care presented the item for approval, as recommended by the Wiltshire PCOG. The paper sought approval to formally commission a Complex Wound Care service from the Wiltshire Primary Care Networks (PCNs).

7.2 The service activity in BaNES and Swindon remained with the acutes, community teams and GPs, and levels of activity were notably lower.

7.3 Work had been undertaken over a number of years to clarify the Wiltshire service provision. There was currently no formal commissioned service in place. A service specification was

now finalised, with funding at £1 per head at a recurrent cost of £503,699 being requested. Funds were within budget. The proposal had the support of the CCG Finance Committee, Wiltshire Primary Care Operational Group and the Wiltshire locality meetings.

- 7.4 The original estimates of service levels three years ago expected 30,000 patient contacts, however coded activity for 2020-21 actually recorded 63,539 contacts. The primary care services cost would be significantly lower than secondary care delivery. The proposal for block agreement would be capped at £500,000.
- 7.5 The predecessor Wiltshire CCG had previously agreed £0.50 per head per annum non recurrently. A further £0.50 per head was included in the 2021/22 H1 budget in order to support the proposal for payments to move to £1 per head per the business case. The cost per head of population ensured coverage of the patch and capped the cost. The PCN would distribute the funds to those practices who were delivering the service.
- 7.6 The proposal had been shared with the BaNES and Swindon localities to seek equity across the system. This service was not seen as a current priority and the demand was not equivalent to that seen in Wiltshire. The Locality Clinical Lead for Swindon reported that Swindon was starting to see some activity increase, and would welcome the opportunity to discuss this further. A baseline of all services was to be undertaken.
- 7.7 The Committee **approved** the Complex Wound Care service proposal for Wiltshire PCNs at £1 per head at a recurrent cost of £503,699.

8 Quality Report

- 8.1 The Committee **received and noted** the Quality Report. The Deputy Director of Nursing and Quality highlighted the following items to the Committee:
- Significant work continued on the patient safety agenda. An improvement in primary care reporting on Learn from Patient Safety Events (LFPSE) incidents was needed. A new system had been embedded over the summer to aid reporting.
 - There were no Serious Incidents to report.
 - BSW was benchmarking well against the national healthcare associated infections reporting, reflecting the significant work done to reduce MRSA and Clostridium Difficile infections. The rate of Clostridium Difficile infections in the community per practice were to be looked at.
 - The flu programme was underway following scrutiny of the plan at the Quality and Performance Assurance Committee.
 - As part of the delivery of the Patient Safety Strategy, the Medical Examiner role was established within the BSW acutes. This would be rolled out further into the community, including primary care.
 - The Quality Team continues to work to improve the primary care quality metrics in place, with examples from Dorset CCG and BNSSG CCG being reviewed. Full assurance for minimum effort was required, recognising the demands on primary care.
 - The Quality Team was working with those individual practices rated by the CQC as 'requires improvement' and 'inadequate' to develop action plans and to provide that strong governance and specialist support. It was noted that the CQC rating reference had a discrepancy; the South West region and BSW STP figures did not show the practice rated as 'inadequate', which was known to the CCG. This would be looked into outside the meeting and corrected for the next report.

9 Finance Report

- 9.1 The Associate Director of Finance for BaNES presented the report, which provided the primary care financial position for BSW CCG to Month five of the 2021/22 financial year. PCOG's scrutinised the finances and detail, with this summary presented to the Committee for oversight and assurance. The Committee noted:

- Primary care was currently in a more comfortable position than forecast, although Members were to be mindful of upcoming changes.
- The H2 plans and allocated funding for primary care would be reported to the next meeting.
- Primary Care was indicating an underspend year to date by £676k, however was forecasting an overspend at year end by £569k.
- The pressures were largely due to the delegated funding position and its deficit. The allocated funding was not sufficient to meet the requirements of the GP contracts and expenditure. This financial risk would need to be mitigated to support the CCG and system position.
- An update on the Service Development Funding (SDF) and Transformational Monies had been included. The schemes were being reviewed to consider the impact they each had across BSW. The in-year SDF monies were expected to be fully committed.
- H2 funds were expected to bring additional PCN leadership and management funding (£654k).
- The CCG was to submit its plan by 27 October 2021 to bid against the national winter access funding that had been made available in support of the Government and NHS England improving access programme.

9.2 The Committee **received and noted** the report.

10 Primary Care Risk Register

10.1 The Risk Register for Primary Care was circulated for information, which details the primary care risks currently upon the CCG's corporate risk register. A reference to the national letter and primary care response plans would be added in the next update.

10.2 The Committee **noted** the report and the progress made to date on actions in place to mitigate risk.

11 Primary Care Commissioning Committee Forward Plan 2021-22

11.1 The Committee **noted** the Committee forward plan for 2021-22. Comments, additions or amendments to the Committee forward plan, particularly regarding Seminar discussion topics, should be sent through to the Chair.

12 Any Other Business

12.1 There being no other business, the Chair closed the meeting at 14:27hrs

Signed as a true record and as approved by the BSW CCG Primary Care Commissioning Committee at the meeting held on 9 December 2021:

Name: Suzannah Power

Role: Lay Member PCCC (Chair),

Signature:

Date: 25th February 2022