



PRIMARY CARE COMMISSIONING COMMITTEE

11 JANUARY 2022
14:00 PM, VIRTUAL MEETING
Via Microsoft Team

AGENDA

Time	No.	Agenda Item	Lead Officer
14.00	1.	Welcome, Apologies and Declarations of interest <ul style="list-style-type: none"> • <i>To note any apologies</i> • <i>To record any Declarations of Interest relating to items on the agenda</i> 	R Hindley
14.05	2.	Minutes, action log and matters arising from the meeting held on 21 September 2021. To receive the minutes for approval and consider any outstanding actions.	R Hindley
General Practice Strategy			
14.25	3.	Healthcare First – Queen Street and Park View merger To receive an update for the proposed merger.	H Craig and Reps from the Practice
14.40	4.	Future Direction of PCNs/update to PC Strategy (presentation)	C Skelton
Governance			
14.55	5.	Reflections and Agenda Items for next meeting	R Hindley
15.00	6.	Matters to be referred to - <i>(i) Governing Body – Details of any exception reporting</i> <i>(ii) Other Committees - Items to be included on other committee agendas</i>	R Hindley

15.10	7.	Any other business <i>To consider any items not included within the agenda</i>	R Hindley
15.20	8.	The Committee is recommended to make the following resolution: “That representatives of the press and other members of the public be excluded from the remainder of this meeting having regard to the confidential nature of the business to be transacted, publicity on which would be prejudicial to the public interest” (Section 1 (2) Public Bodies (Admission to Meetings) Act 1970)”. 	R Hindley
15.30	9.	Date and time of next Public meeting Tuesday 15 March 2021 via Microsoft Teams	R Hindley

For any queries regarding this agenda please contact

Milletta Gibbons (Milletta.Gibbons4@nhs.net)

**Agenda item: 2i****Primary Care Commissioning Committee****PUBLIC****Minutes of the Meeting held on 21 September 2021****Present:**

Mel Brown	Director of Commissioning Integrated Health and Care
Dr Greg Connor	Executive Clinical Advisor
Diane Hampshire	Registered Nurse
Stephen Hardy	Lay Member (Deputy Chair)
Mr Hany Lotfallah	Secondary Care Specialist
Richard Hindley (Chair)	Lay Member
Richard Watkinson	Lay Member (Audit)
Jonathan Webb	Chief Finance Officer/Deputy Chief Officer

In Attendance

Hilary Craig	Practice Manager Consultant (Item 21/54, 21/55)
Sharon Daniel	Quality Support Manager (Item 21/56)
Laura Elliott	Head of Quality
Jane Hindle	Interim Governance Manager
Jyoti Mehan	CEO at Healthcare First Partnership (Item 21/54)
Angela Peatfield	Minute taker
Dr Colin Speers	GP Partner at Healthcare First Partnership (Item 21/54)
Ruth Unwin	Director of Corporate Affairs

21/52 Welcome, Apologies and Declarations of Interest

Richard Hindley welcomed those present noting apologies from:

Suzannah Cookson	Chief Nurse
Chris Skelton	Head of Primary Care Co-Commissioning

21/53 Minutes, action log and matters arising from the meeting held on 15 June 2021

The minutes were agreed as a correct record and the action sheet noted.

21/54 Healthcare First – Queen Street and Park View merger

Hilary Craig presented this paper advising that the Primary Care Commissioning Committee discussed the proposal to merge the contracts for Health Care First, Queen Street and Park View Surgeries at the meeting held on 15 June 2021. The Committee agreed that the three practices should commence engagement with patients and the local community. The paper provided a further update on progress including the Merger Engagement Communication Plan, Merger Engagement Plan, Quality and Equality Impact Assessment and an application to merge. The proposed date for the merger is 1 January 2022.

A discussion followed and Greg Connor queried how the contract merger would help improve the patient journey and what benefits there would be for the practices involved. Jyoti Mehan responded to confirm that the application to merge was aimed at reducing the administrative and financial burden of running three separate legal entities and three separate contracts. The patients will see no change to current levels of access or any reduction in service delivery. The time and costs saved in managing the three separate contracts would be reinvested in managing service provision and increased productivity.

Melanie Brown sought assurance that appropriate engagement had taken place including with patients, the Patient Participation Group and local elected council members to provide them with information on the proposal to merge the practices and provide an opportunity to feedback any comments.

Jyoti confirmed that the minutes of the Patient Participation Group meeting would be shared with Committee members to provide evidence of patient views and that these have been taken into account. All staff have been fully briefed and 22,000 newsletters have been circulated across the area including to wider stakeholders to provide information on the proposed merger.

Greg Connor reflected on the discussion and suggested follow up engagement with local councillors should take place to provide an update on the merger to ensure they are fully aware of the progress being made. Greg also sought assurance that the clinical staffing levels would be maintained. It was agreed to provide the Committee with the merger Implementation Plan in support of the decision to approve the merger. Jyoti Mehan committed to contacting local elected members about the merger following this discussion.

It was **RESOLVED** that:

The Primary Care Commissioning Committee:

- i) Considered the merger application submitted by Health Care First, Queen Street and Park View Surgeries;
- ii) Considered the Merger Engagement Communication Plan and Merger Engagement Plan;
- iii) Considered the Quality & Equality Impact Assessment; and
- iv) Approved the application to merge subject to the provision of the above evidence

21/55 System Delivery Funding & Recovery Fund

Hilary Craig gave a presentation on the System Delivery Funding (SDF) and Recovery Fund advising that Wakefield place has a number of transformation programmes that have developed over the last six months following the Covid-19 pandemic.

Following local GP Contract arrangements for 2021/22 and the final stage of PMS review, Wakefield developed a local recovery fund. Each PCN submitted a number of proposals in line with the recovery fund principles. The CCG played a co-ordinating role using the collective membership to ensure best outcomes, shared ideas, transparency and value for money. Engagement with general practice, PCNs, Clinical Directors has been critical in the development of the transformation and delivery plans.

The challenges of the Covid-19 pandemic have had a significant impact on the ability to deliver transformational and developments programmes. Therefore, Wakefield took the approach to work collaboratively with the GP Confederation to provide a package of support for general practice and PCNs.

Hilary referred to the scope for collaboration and ICS level programmes acknowledging that through engagement with other commissioners, Clinical Directors and PCNs there are a number of programmes which would be more sustainable and provide improved quality and outcomes if delivered across West Yorkshire.

The presentation included details of how to maximise the use of the Regional and National GP Retention programmes that are available and details of training to support practice resilience. The PCN Development proposals to support the delivery of the local Recovery Fund and Local Access Improvement Programmes were detailed in the presentation along with a summary of funding made available to support these transformation programmes at place.

Melanie Brown commented that the presentation was helpful and queried whether there were any risks the Committee need to be made aware of. Hilary Craig responded saying there are lots of different programmes underway to support practice and the SDF fits with

other work ensuring that we 'don't pay twice'. There is confidence that the workstreams developed can deliver the improvements.

Jonathan Webb queried whether there was any risk regarding workforce availability and whether there were people available in the system to provide the additional support. Hilary Craig responded to confirm that PCNs have been involved in the bid process and clinicians are aware of the workforce challenges and this has been considered when developing the bids.

Greg Connor commented that this was a complicated picture with a multiple of funding streams for GPs and Networks. Referring to resilience and retention of staff there was a need to be creative and make the best use of other staff roles to support the resilience and retention of staff including developing the relationships with other system partners, paramedics, community and mental health services to make the best of what is available.

It was agreed that an update on the recovery fund would be included as part of the Strategic Resilience update in December and March to identify what has been learned from the process.

It was **RESOLVED** that the Primary Care Commissioning Committee noted the presentation

21/56 National General Practice Patient Survey 2021 Report

Sharon Daniel presented this report detailing the local findings from the 2021 national General Practice Patient Survey (GPPS) to inform and provide assurance to the CCG and Governing Body of areas of concern for patient experience and areas of improvement. The survey contained a significant amount of data and information that required analysis and the report was based on a review by the CCG's Primary Care and Quality Teams.

The CCG will continue to work closely with practices to support them to progress with the actions they started last year at the beginning of the pandemic and to identify any other

areas for improvement. The CCG will meet with Practices who have made significant improvements to learn more about the actions they have undertaken to achieve these improvements so that any areas of good practice can be shared more widely across the district and discuss their next steps and actions to maintain their positive improvements over the next 12 months.

Greg Connor commented on the positive results for Wakefield and acknowledged the hard work of the Quality and Primary Care teams to support practices to improve, acknowledging that there is still more work to do including continuing to share good practice and supporting those practices that are struggling.

Members acknowledged the positive results and the improvements that have been achieved.

It was **RESOLVED** that the Primary Care Commissioning Committee noted the report

21/56 Committee Workplan for 2021/22

Jane Hindle presented the Committee Workplan for 2021/22 noting that as part of the Committee Effectiveness Survey it was suggested that the forward planner be discussed at each meeting to consider other business that may need to be included.

It was suggested that an update on the transitional arrangements may be helpful at the December meeting.

It was **RESOLVED** that the Primary Care Commissioning Committee noted the workplan for 2021/22

21/57 Reflections and Agenda items for next meeting

Post-merger Implementation Plan to be presented at the December meeting

21/58 Matters to be referred to Governing Body or other Committees

Nothing to highlight

21/59 Any other business

No other business to discuss.

21/60 The Committee is recommended to make the following resolution:

“That representatives of the press and other members of the public be excluded from the remainder of this meeting having regard to the confidential nature of the business to be transacted, publicity on which would be prejudicial to the public interest² (Section 1(2) Public Bodies (Admission to Meetings) Act 1960)”.

21/61 Date and time of next Public meeting

Tuesday, 21 December 2021.

NHS Wakefield Clinical Commissioning Group

**ACTION POINTS FROM PRIMARY CARE COMMISSIONING COMMITTEE
HELD ON 21 SEPTEMBER 2021**

Minute No	Topic	Action required	Who	Date for completion	Progress
21/54	Healthcare First – Queen Street and Park View Merger	<ul style="list-style-type: none"> • Provide the Committee with the merger Implementation Plan in support of the decision to approve the merger • Provide the Committee with minutes of the Patient Participation Group meeting • Provide evidence of discussions with Normanton Councillors to inform them of the plan 	H Craig/J Mehan	December 2021	Item is on the agenda
21/55	System Delivery and Recovery Fund	<ul style="list-style-type: none"> • Include information regarding delivery of the System Delivery and Recovery Fund within the Resilience update to the Committee 	H Craig	December 2021	Due to operational pressures item is deferred until March

Name of Meeting	Primary Care Commissioning Committee	Meeting Date	11 th January 2022
Title of Report	Health Care First (B87030), Queen Street Surgery (B87600) and Park View Surgery (B87041) Practice Merger Application	Agenda Item No.	3
Report Author	Hilary Craig, Senior Commissioning Manager and Chris Skelton, Head of Primary Care	Public / Private Item	Public
Clinical Lead	Dr Greg Connor, Executive Clinical Lead	Responsible Governing Body Executive Lead	Mel Brown, Director for Integrated Care

Executive Summary

The proposal to merge the contracts for Health Care First, Queen Street and Park View Surgeries was considered at the Primary Care Commissioning Committee on the 21st September 2021. The Merger Engagement Communication Plan, Merger Engagement Plan, Quality and Equality Impact Assessment and an application to merge were presented to the Committee. The Practices were given approval to merge subject to the submission of further assurances in regards to a merger mobilisation plan. The practice has also provided minutes from their PPG Meeting, alongside minutes from Normanton Town Council which the practice attended in November 2021.

Has the issue been considered at any other meetings?

Name of meeting	PCCC	Meeting Date	21 st September 2021
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Recommendations

It is recommended that Primary Care Commissioning Committee;

- Note the receipt of Health Care First requested merger documentation submissions.

Decision <input type="checkbox"/>	Assurance <input checked="" type="checkbox"/>	Discussion <input checked="" type="checkbox"/>	Other:
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Implications

Has a quality impact assessment been completed? Have any quality and safety implications been identified	Yes No
Are there any resources or financial implications (including Staffing/Workforce considerations)	Not applicable to this paper.
Does the issue have any implications for sustainability or climate change?	No

Has a Data Protection Impact Assessment (DPIA) been completed?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
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Strategic Objectives (which of the CCG objectives does this relate to?)	Organising ourselves to deliver for patients	Risk (include risk number and a brief description of the risk)	Not applicable
Legal / CCG Constitutional Implications	Not applicable	Conflicts of Interest (include detail of any identified / potential conflicts)	Not applicable

Mobilisation Plan for Practice Merger

Area	Action Required	Due Date	Who	Comments/issues	Key Contacts	Status
1. Patients						
1.1 Communication	Draft letter for patients	Done	Practice	Explain contractual merger and limited impact Email sent to patients via newsletter Survey also sent to a sample group PPG meeting held, letter sent, consent revived <i>See engagement plan for detail</i>	Matthew A	Completed
	Distribution of letter to patients	NA	Practice	NA	NA	NA

Area	Action Required	Due Date	Who	Comments/issues	Key Contacts	Status
	Telephone message to be put onto practice telephone.	NA	Practice	<p>No change to services therefore no message required on the phone system</p> <p>Note message for merger dates 11th and 12th prepared for the phone</p>	NA	NA – message for 11 th and 12 th
	Notice on doors & local pharmacy	NA	Practice	NA – no service change	NA	NA
	Consider welcome message / patient group work	NA	Practice	NA – no service change	NA	NA
1.2 Records	Medical records	NA	Practice	NA – no service change	NA	NA
1.3 Clinical Overview	Share Plan with Medical Director	Ongoing	Commissioner	SMT and Board aware	Jyoti M	Ongoing

Area	Action Required	Due Date	Who	Comments/issues	Key Contacts	Status
2.1 Communication	Inform staff of current situation and options.	Ongoing	Practice	Email sent to staff via newsletter and team meeting updates provided See engagement plan for detail	Matthew A	Ongoing
3.1 Lease	Ensure premises lease are in place	Ongoing	Practice	Lease holders informed See engagement plan for detail	Jyoti M	Ongoing
4.						
4.1 IT Plan	<ul style="list-style-type: none"> IT Plan 	Ongoing	Practice	See practice merger check list	Matthew A/ Celeste	Ongoing

Area	Action Required	Due Date	Who	Comments/issues	Key Contacts	Status
4.2 BSU Transfer of Patients	<ul style="list-style-type: none"> BSU/ LASCA – merger of registered patients 	Ongoing	Practice	See practice merger check list	Matthew A/ Celeste	Ongoing
5.						
5.1 Practices	Letter/email to neighbouring practices to inform of merger confirmation	Ongoing	Practice	PCN informed See engagement plan for detail	Jyoti M	Ongoing
5.2 Overview and Scrutiny	Liaise with overview and scrutiny to confirm merger date.	Ongoing	Practice/ Commissioner	Ongoing	Hilary C, Dasa, and Jyoti M	Ongoing
5.3 LMC	Communication with LMC to confirm merger date.	Post-merger	Practice	Confirmation post-merger to inform of change See engagement plan for detail	Jyoti M	Not started

Area	Action Required	Due Date	Who	Comments/issues	Key Contacts	Status
5.4 PCT comms team	Email to comms to inform them of potential media interest		Practice /Commissioner	CCG comms involved	Dasa	Ongoing
5.5 FT/ s Provider arm	District Nurses/Health Visitors to be notified to liaise with patients on caseload.	Post-merger	Practice	Confirmation post-merger to inform of change See engagement plan for detail	Matthew A	Not started
	Palliative care manager to be informed to liaise with nurses.	Post-merger	Practice	Confirmation post-merger to inform of change See engagement plan for detail	Matthew A	Not started
	Common Mental Illness – all mental health workers to be notified and liaise with patients.	Post-merger	Practice	Confirmation post-merger to inform of change See engagement plan for detail	Matthew A	Not started
	Severe and Enduring Mental Health	Post-merger	Practice	Confirmation post-merger to inform of change See engagement plan for detail	Matthew A	Not started
	Mental Health Trust	Post-merger	Practice	Confirmation post-merger to inform of change	Matthew A	Not started

Area	Action Required	Due Date	Who	Comments/issues	Key Contacts	Status
				<i>See engagement plan for detail</i>		
	Midwifery	Post-merger	Practice	Confirmation post-merger to inform of change <i>See engagement plan for detail</i>	Matthew A	Not started
	Business Managers at FT's to be informed	Post-merger	Practice /Commissioner	Confirmation post-merger to inform of change	Matthew A	Not started
5.6 PALS	Inform PALS and complaints of merger	Post-merger	Practice	<i>See engagement plan for detail</i>	Matthew A	Not started
5.7 BSU	Need to update lists/practice information	Post-merger	Commissioner	Confirmation post-merger to inform of change <i>See engagement plan for detail</i>	Matthew A	Not started
	Inform courier services	Post-merger	Practice	NA	Matthew A	Not started
5.8 CCG	All CCG staff notified		Commissioner	NA	Hilary Craig	Post-Merger
5.9 OOH	Need to notify OOH - NHS111	Post-merger	Practice	Confirmation post-merger to inform of change <i>See engagement plan for detail</i>	Matthew A	Not started

Area	Action Required	Due Date	Who	Comments/issues	Key Contacts	Status
5.10 Regional Team	Notify directors of regional NHS England team		Commissioner	NA	Chris Skelton	Completed
5.11 Notify other agencies	Local Pharmacies	Ongoing	Practice	<i>See engagement plan for detail</i>	Matthew A	Ongoing
	Local Hospitals					
	Business Services agency (BSA)					
	SHA					
	PCSE			<i>See practice merger check list</i>	Sarah Hiscoe	Forms will be submitted by 14/12/2021
6.						
6.1 Contract	Need to prepare contract schedule to reflect contract termination / merger contract value		Finance	CCG Contracting Team & Finance	Chris Skelton	January 2022

Area	Action Required	Due Date	Who	Comments/issues	Key Contacts	Status
6.2 Population Manager	Practice to print off copy of population manager	Day of merger	Data Quality (Celeste)	See practice merger check list	Celeste	In progress
6.3 Bank Accounts	Payments and recoveries	-	Practice	NA same accounts		NA
7.						
7.1 Contractual	Contract Variation to add all Partners to contract	CCG to confirm	Commissioner		Hilary C / Carol Bell	January 2022
	Confirm Practice agreement in place	CG to confirm	Practice / Commissioner	Partnership agreement in place	Jyoti M	Completed
	Termination notice	CG to confirm	Commissioner		Hilary C / Carol Bell	January 2022
	Confirmation of provider name	-	Practice	All to change to HCF	Hilary C / Carol Bell	January 2022

Area	Action Required	Due Date	Who	Comments/issues	Key Contacts	Status
7.2 PCSE	Check performers aligned to new practice and appropriate NPL3 forms submitted	CG to confirm	Commissioner	See practice merger check list	Celeste	In progress
8. ACTIONS FROM PATIENT ENGAGEMENT						
8.1 Appointments	Capacity of appointments	NA	Practice	<ul style="list-style-type: none"> No service change – QS and PV will fall under HCF brand only 	Matthew A and Sandra G	NA
	Continuity of GP	NA	Practice	<ul style="list-style-type: none"> No service change – QS and PV will fall under HCF brand only 	Matthew A and Sandra G	NA
8.2 Adequate facilities	Telephone System	NA	Practice	<ul style="list-style-type: none"> No service change – QS and PV will fall under HCF brand only 	Matthew A and Sandra G	NA
	Capacity of waiting room	NA	Practice	<ul style="list-style-type: none"> No service change – QS and PV will fall under HCF brand only 	Matthew A and Sandra G	NA
8.3 Staffing	Concerns for staff	NA	Practice	See engagement plan for detail	Matthew A	Completed

Notes from Health Care First PPG Meeting

Wednesday 21st July

Present:

Matthew Anderson [MA]	Head of Operations
Elaine Jones [EBJ]	Operations Manager
Sandra Greenwood [SG]	Head of Clinical Services
Jyoti Mehan [JM]	Chief Executive Officer
Lee Duker [LD]	IT & Facilities Manager
Claire Wright [CW]	Executive Assistant
Joanne Hand [JH]	Care Coordinator
Terence Waite [TW]	Patient Representative
Robin Leese [RL]	Patient Representative
Andrew Wright [AW]	Patient Representative
Debbie Jeffcote [DJ]	Patient Representative

Apologies: Shirley Wright, Hilary Speak, Brenda Anderson, Robert Seymour

1) Welcome

[MA] Welcomed everyone to the meeting, which was held over Microsoft TEAMS.

2) Open Day Planning

Discussions had around planning an open day for patients to attend, ideally to take place in the next 6 weeks. The General feel from the group was to have this on a Saturday rather than a week day and to hold this at Methley.

[EBJ] Asked what the PPG would like to see as an open day, talked through care navigation and the agencies that we can refer to and opened up the idea about bringing these people and services in for an open day.

[RL] Feels having an open day where patients can come and have a tour of the surgery would be an ideal opportunity to showcase what the surgery has to offer.

Suggestions were made to have a community approach, bring in the agencies that we can refer in to e.g. Mental health, air ambulance, community police, age uk, carers etc.

[RL] Feels patients would like to have more information regarding who the pharmacists are and how the contact centre works.

[EBJ] Asked the PPG if they could recommend any outdoor space that we could use for the open day.

Action

- PPG to think about any outdoor space that we could use for the open day

3) Community Focus

In terms of our community focus we wanted to capture your thoughts on how we reach back out into the communities.

[JH] Works with a team of health and wellbeing activators who work across the five towns and are aligned to the coalfield regeneration project. They offer a lot of community support, this can be sought by patients or any member of the community not just solely our patients. This is a community led role and they are wanting feedback from the PPG about what you think your community requires.

[DJ] – Feels that more things need to be in place to support the teenagers of the Airedale community.

[JH] Discussed some of the things that are going on in the community already:

- i) Young people's hub for 16-24 year olds starting in September at the Hut in Airedale, this will offer support and skills with employment, career management, health and wellbeing support. There are also talks of bringing this service to younger children.
- ii) Dementia Café held every Thursday at the Normanton Library.
- iii) 12 week weight management programme being held at Ferrybridge Community centre.
- iv) Veterans coffee morning every Sunday 12-2pm held at the Daily Fitness challenge gym on Poplar Avenue, Airedale.

We are also trying to reach out to the veterans in our community, in the past we have struggled to get them to engage with us. We are asking for suggestions from the PPG on how to get our veterans involved.

Action: Asking the PPG to discuss with people in the local community what would be of benefit /what people need / what is missing and feed back to JH via the PPG email address.

4) Recruitment

Discussions around how we can move forward with recruitment for our PPG. We want to recruit a diverse range of people from all of our geographical areas to represent our patient group.

[EBJ] Asked if the PPG would be prepared to have a stand at the open day to represent the PPG, champion the surgery and help with recruitment. All agreed.

[CW] We are holding a Macmillan Coffee Morning on Friday 24th September 10:00-12:30 at Ferrybridge & Pinfold, would the PPG like to get involved with this?

Discussed the patient newsletter, advised this has been printed off and put with the dispensary prescriptions, added to all our social media platforms and has been sent out via e-mail. The PPG offered to do a leaflet drop. Asked for feedback, [AW] advised the newsletter was possibly a bit long.

Action: Print copies of the Newsletter for the door drop

5) Castleford Development – Update

[JM] There has been a lot of work going on in the background where we have started to pull together design concepts, started to engage practices that will reside in that building and trying to figure out ultimately what it will look like. All the designs are done, we know how we will make it work on the ground all that we are waiting for now is to get NHS England approval. There will be ourselves, Henry Moor, Castleford Medical Practice, Mid Yorkshire Hospitals and the local authority in the building with parking. At this stage we just want to let you know that this is happening and hopefully we will get the final approval in the next 12 months. There will be a formal consultation on this, PPG encouraged getting involved with this and have their say.

6) Proposed Merger

[JM] Following on from the letter that was sent out regarding the final administrative stage of the Healthcare First Merger. The final thing that we need to do is to sign the contract to confirm we are a merged practice and will operate as one 'Health Care First'. The contractual merger will have no impact on patient experience, access, premises or staffing. All of which will remain unchanged.

[JM] Asked the PPG if they had any questions or concerns

[AW] Responded we will leave this up to you.

[JM] Advised If any of the PPG have any questions regarding this please don't hesitate to contact us.

7) A.O.B

[RL] – Asking if there is a direct way of the PPG communicating with us rather than going through the contact centre.

Please e-mail the PPG email group - wakccg.ppg.hcf@nhs.net

Next Meeting date: TBA