

NHS DORSET CLINICAL COMMISSIONING GROUP

PRIMARY CARE COMMISSIONING COMMITTEE

3 April 2019

PART ONE PUBLIC - MINUTES

Part 1 of the Primary Care Commissioning Committee of NHS Dorset Clinical Commissioning Group was held at 2pm on 3 April 2019 at Vespasian House, Barrack Road, Dorchester, Dorset, DT1 1TG.

Present: Tim Goodson, Chief Officer (TG) (Chair)
Sam Crowe, Acting Director of Public Health (SC)
Anu Dhir, Primary Care Lead (AD)
Stuart Hunter, Chief Finance Officer (SH)
Claire Lehman, Primary Care Lead (CL)
Vanessa Read, Director of Nursing and Quality (VR)
Sally Sandcraft, Director of Primary and Community Care (SSa)

In attendance: Andy Purbrick, LMC Representative (AP)
Emma Shipton, Workforce Delivery Director (ES)
Louise Trent, Personal Assistant (LT)
1 x member of the public

1. Apologies

Jacqueline Swift, Chair of the Primary Care Commissioning Committee
Mufeed Ni'man, Governing Body GP Representative (MN)
Kay Taylor, Vice Chair, Primary Care Commissioning Committee

2. Quorum

2.1 It was agreed that the meeting could proceed as there was a quorum of Committee members present.

The Committee agreed in the absence of a Lay Chair, the meeting would be chaired by the Chief Officer in accordance with the below:

- The Chair had previously indicated that she was content that the Chief Officer take the Chair for the meeting.
- The Chair had received a full briefing on the agenda items and had supplied her approval of the items.

Action

- If any non-conflicted Committee member was not content to approve the recommendations as set out in the reports, the matter would be referred to the Chair for further direction.
- The Lay Member for Governance had been fully briefed and was content with the action to be taken, subject to any approvals being ratified at the next meeting of the Committee.

All members present voted to appoint the Chief Officer as Chair for the meeting.

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3. **Declarations of Interest**

3.1 There were no declarations of interest made.

3.2 Members were reminded of the need to ensure Declarations of Interest were up to date and to notify the Corporate Office of any new declarations.

4. **Minutes**

4.1 The draft minutes of Part 1 of the meeting held on 6 February 2019 were **approved** as a true record.

4.2 The draft minutes of the Primary Care Reference Group held on 23 January 2019 were **noted**.

5. **Matters Arising**

5.1 The Committee **noted** the Report of the Chair on matters arising from the Part 1 minutes of the previous meeting.

6. **Chair's Update**

6.1 The Chair had no matters to update.

7. **Reports**

7.1 **Medicines Optimisation Report**

7.1.1 The Director of Primary and Community Care introduced the Medicines Optimisation Report.

7.1.2 The Primary Care prescribing forecast was in line with the agreed budget. Work had been ongoing regarding the impact of drugs that may be difficult to obtain due to Brexit. This had been factored into the forecast and the risks had been mitigated however this issue had now been recognised nationally and resource would be allocated to all CCGs to address.

7.1.3 The report to the Controlled Drugs Accountable Officer (CDAO) at NHS England had been included within the report with information on outlying areas. The Team had ensured that outliers had been reduced through visits linked to the Quality Prescribing Scheme.

7.1.4 The areas of focus for the 2019/20 audits and payment schedule had been identified and brought for approval. This had been developed by a sub-group of GP Prescribing Leads and agreed with the Medicines Optimisation Group (MOG). The rationale behind each proposed area had been set out in the report.

7.1.5 The LMC Representative noted the proposed audit for opiate use reduction however had concern regarding whether capacity would be built in to pain clinics to manage patients. The Director of Primary and Community Care said that the pain pathways had been considered at the MOG meetings and service leads regarding activity. However the matter would be raised again.

SSa

7.1.6 The Committee noted the antibiotic prescribing targets and queried the trajectory and feasibility of achievement. The Director of Primary and Community Care said that this had been set nationally. Practices were trialling different treatment paths. The prescribing of appropriate antibiotics would not be lost in the desire to meet targets.

7.1.7 The LMC Representative noted that the Falsified Medicines Directive (FMD) funding for hardware and software to meet the requirement of authenticating products with verification through barcode scanning was not the responsibility of the practices. The Director of Primary and Community Care would take this back to the team to determine the position.

SSa

7.1.8 The Committee **approved** the recommendations set out in the Medicines Optimisation Report.

7.2 Primary and Community Care Commissioning Update

Items 7.2 and 7.3 were taken together due to interdependency.

7.2.1 The Director of Primary and Community Care introduced the Primary and Community Care Update.

7.2.2 The GP Contract Reform had now been published. This focussed on a Primary Care Network (PCN) development in line with the NHS Long Term Plan (LTP) and supported work already being carried out locally.

- 7.2.3 A contract had been undertaken with Health and Care to implement Social Prescribers and Health Coaches. There would be additional resource available to support the Social Prescribing roles.
- 7.2.4 The emerging footprints of the PCNs were beginning to establish and were broadly similar to the current locality structures.
- 7.2.5 The GP Online Consultation programme roll-out was proceeding well with a number of practices engaged.
- 7.2.6 The Committee **noted** the Primary and Community Care Update.

7.3 GP Contract Reform

- 7.3.1 The Director of Primary and Community Care introduced the GP Contract Reform Report.
- 7.3.2 This report was taken with item 7.2 above.
- 7.3.3 The Committee **noted** the GP Contract Reform report.

8. Public Health Update – Update on Sustainability and Transformation Plan (STP) with a Focus on Prevention at Scale (PAS).

- 8.1 The Acting Director of Public Health introduced the Public Health Update.
- 8.2 The report provided a full Health and Wellbeing Board (HWB) update with an overview of the current position with all Public Health Dorset workstreams. This provided the Committee with the opportunity to determine future reporting updates from Public Health with regard to focus on a particular area rather than a general report.
- 8.3 The Director of Primary and Community Care said the Committee briefing meeting with the Chair had mirrored the discussion. Areas suggested for review included primary care profiling, quality and variation, place based and themed areas including immunisations, cancer screening and health checks.
- 8.4 The Acting Director of Public Health would develop the report and would consult with the Director of Primary and Community Care outside the meeting before bringing back to a future meeting.
- 8.5 The Committee **noted** the Public Health Update.

SC/SSa

9. Any Other Business

9.1 There was no further business discussed.

10. Date and Time of the Next Meeting

10.1 The next meeting of the Primary Care Commissioning Committee would be held at 2pm on Wednesday 5 June 2019 at Vespasian House.

11. Exclusion of the Public

11.1 Resolved : 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 transacted, publicity of which would be prejudicial to the public interest.

DRAFT