

NHS DORSET CLINICAL COMMISSIONING GROUP

PRIMARY CARE COMMISSIONING COMMITTEE

1 APRIL 2020

PART ONE PUBLIC - MINUTES

Part 1 of the Primary Care Commissioning Committee of NHS Dorset Clinical Commissioning Group was held virtually at 2pm on 1 April 2020.

Present: Jacqueline Swift, Governing Body Lay Member and Chair of the Primary Care Commissioning Committee (JS)
Tim Goodson, Chief Officer (TG)
Blair Millar, Governing Body GP Representative (BM)
Ravin Ramtohal, Governing Body GP Representative (RR)
Nikki Rowland, Chief Finance Officer (NR)
Sally Sandcraft, Director of Primary and Community Care (SSa)
Kay Taylor, Governing Body Lay Member and Vice Chair, Primary Care Commissioning Committee (KT)

In attendance: Vanessa Avlonitis, Registered Nurse Member (VA) (observing)
Margaret Guy, Healthwatch Dorset Representative (MG)
Steph Lower, Executive Assistant (SL) (part)
Andy Purbrick, Wessex LMC Representative (AP)
Louise Trent, Personal Assistant (LT)

1. Apologies

1.1 Sam Crowe, Director of Public Health Dorset
Vanessa Read, Director of Nursing and Quality

2. Quorum

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

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.

Action

4. Minutes

- 4.1 The draft minutes of Part 1 of the meeting held on 5 February 2020 were **approved** as a true record.
- 4.2 The draft minutes of the Primary Care Reference Group held on 15 January 2020 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 Following the clinical leadership review which resulted in a reduction to the number of Governing Body GP members, a review of their portfolios was also undertaken. Following use of the Governing Body Urgent Decision process, Dr Blair Millar and Dr Ravin Ramtohal had been appointed as the two Governing Body GP members on the Primary Care Commissioning Committee for a period of one year from 1 April 2020.
- 6.2 In relation to Primary Care, the continued work undertaken by the Primary Care Team to respond to the Covid-19 pandemic was recognised.
- 6.3 The Committee noted the update of the Chair.

7. Reports

7.1 Primary and Community Care Commissioning Update

- 7.1.1 The Director of Primary and Community Care introduced the Primary and Community Care Commissioning Update.
- 7.1.2 Covid-19 had escalated to 'National Emergency' status since submission of the report. Twice-weekly calls were being undertaken with Primary Care Network (PCN) Clinical Directors which included LMC representation. All areas were operating 'hot' and 'cold' sites. Covid-19 had accelerated joint working and collaboration with practices.
- 7.1.3 Workstreams had been developed to deliver the home visiting service. Planning was being undertaken to prepare for an increased requirement for support at home, particularly with end of life care.

11.2.2

- 7.1.4 The Personal Protective Equipment (PPE) 'business as usual' supply for Primary Care had become unavailable. A delivery had been obtained nationally through a bulk order and assistance had been received to disseminate to practices. There was concern from staff and patients regarding the guidance for PPE as this was documented to be worn only when practitioners were attending someone who was known to have Covid-19 symptoms. The LMC Representative said that this conflicted with information from other areas and escalated the risk of both getting and transmitting Covid-19.
- 7.1.5 NHS England (NHSE) had issued a Standard Operating Procedure (SOP) for Primary Care during the Covid-19 outbreak. This outlined routine procedures that could be suspended during the outbreak to free up capacity and for which GPs would not be penalised through not undertaking.
- 7.1.6 Patient experience in General Practice had changed with a move to telephone or video triage. Strong processes to support had been put in place with work undertaken on eConsult and Attend Anywhere. The current climate had accelerated the digital transformation work programmes and digital consultations had risen from 5,000 in February to 14,000 in March. The Healthwatch Representative said that Healthwatch had been contacted by patients who were not clear on how to currently contact their GP. The Director of Primary and Community Care said that any issues reported to Healthwatch could be raised with Primary Care through either the Primary Care or CCG Comms inboxes. This would allow for themes to be picked up and communicated to practices.
- 7.1.7 National work had been undertaken to identify 'shielded' patients who would be at higher risk of severe illness if Covid-19 was contracted. Work had been undertaken with the Business Intelligence Team to support practices in identifying patients locally, however this work had been paused whilst further national guidance was awaited.
- 7.1.8 The consultation on PCN Directed Enhanced Service (DES) specifications reflected a number of changes put in place as a result of Covid-19.
- 7.1.9 Development work was being undertaken in Primary Care to support Care Homes as part of the PCN focus for Enhanced Health in Care Homes Service.
- 7.1.10 It was anticipated that the infrastructure work would decrease in the interim due to the current climate.

- 7.1.11 The Committee **approved** the recommendations set out in the Primary and Community Care Commissioning Update.
- 7.2 Medicines Optimisation Report**
- 7.2.1 The Director of Primary and Community Care introduced the Medicines Optimisation Report.
- 7.2.2 Structured medicine reviews remained part of the DES for practices however this would be delayed to September 2020. Work was underway to escalate electronic repeat dispensing within practices to support the flow of medication to individuals.
- 7.2.3 There had been national press coverage regarding concern with community pharmacy in the current climate. The Medicines Team was working with General Practice to discourage stockpiling as an increase had been seen in prescribing activity. The national coverage highlighted the detrimental impact with increased prescribing resulting in queues at pharmacies and difficulties with supplies. A cohesive message was required across the system to address this. The Director of Primary and Community Care said that NHSE commissioned community pharmacy and the Head of Medicines was in regular contact with the regional link.
- 7.2.4 Such difficulties had been experienced in Bridport pharmacies with one pharmacy closed due to sickness and reported queues at remaining pharmacies for up to six hours. A local resilience network had been set up by the local dispensers at the practices to enable pharmacies to remain open. Volunteers had been engaged to deliver drugs for those who were housebound and were able to bypass the queue. The Director of Primary and Community Care said that the SOP was for a business continuity plan to exist with pharmacies for collaboration and NHSE had been working on implementation of the procedure.
- 7.2.5 A call with the South West Finance Directors had highlighted an increase in movement of patient prescriptions from Novel Oral Anticoagulants (NOAC) to Direct Oral Anticoagulants (DOAC), bulk prescribing and over-prescribing. This had led to challenges to record any cost implications incurred as a direct result of Covid-19. The Governing Body GP Member (RR) said that there was a national directive to move from NOAC to DOAC which had been undertaken by the anticoagulation clinic.
- 7.2.6 There had been a recent change to the CCG Prescribing Leads which would be communicated to practices.
- 7.2.7 The Committee **noted** the Medicines Optimisation Report.

8. Public Health Update.

- 8.1 This paper was withdrawn and would be added to the agenda for the June meeting.

LT

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 on Wednesday 3 June 2020 at Vespasian House at 2pm.

11. Exclusion of the Public

- 11.1 Under normal circumstances this would have 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 to be transacted, publicity of which would be prejudicial to the public interest. However, as Government social isolation requirements constitute 'special reasons' to avoid face to face gatherings as permitted by legislation, this meeting was held virtually.

DRAFT