

Minutes of the Meeting (Part A) of the **Somerset Primary Care Commissioning Committee** held on **Wednesday, 9 June 2021** Via **Microsoft Teams**

Present:	David Heath	Chair, Non-Executive Director, Patient and Public Engagement, Somerset CCG
	Basil Fozard	Non-Executive Director, Secondary Care Specialist Doctor, Somerset CCG
	Alison Henly	Director of Finance, Performance and Contracting, Somerset CCG
	Michael Bainbridge	Associate Director of Primary Care and Community Care, Somerset CCG
	Dr Karen Sylvester	Chairman, Somerset LMC
	Kathy French	Deputy Director of Quality and Nursing, Somerset CCG attending on behalf of the Director of Quality and Nursing, Somerset CCG
	Louise Woolway	Deputy Director of Public Health, Somerset County Council
	Tanya Whittle	Deputy Director of Contracting, Somerset CCG
	Judith Goodchild	Chair of Healthwatch Somerset, Healthwatch
	Sandra Wilson	PPG Chairs Network Representative
	Dr Jeremy Imms	Associate Clinical Director – Covid Vaccinations & Primary Care and GP Clinical Lead – Rapid Diagnostic Service, Somerset CCG
	Neil Hales	Director of Commissioning, Somerset CCG
	In Attendance	Kerry White
Dr Andrea Trill		Medical Director – Neighbourhood Integration – Somerset Foundation Trust
Dr Harvey Samson		Strategic Development Director, Symphony Healthcare Services Ltd
Sam Checkovage		Commissioning Manager, Primary Care, Somerset CCG
Jacqui Damant		Associate Director of Finance, Somerset CCG
Secretariat	Sarah Matthews-Attree	Primary Care Contracts Officer, Somerset CCG
Apologies:	Val Janson	Director of Quality and Nursing, Somerset CCG
	Dr Chris Campbell	External GP Member

PCCC 026/2021 WELCOME AND INTRODUCTIONS

David Heath welcomed everyone to the Somerset Primary Care Commissioning Committee meeting.

The main function of the Somerset Primary Care Commissioning Committee is to provide a forum for commissioning of primary medical services.

David Heath highlighted that meetings and decisions of the Somerset Primary Care Commissioning Committee are held in public to ensure accountability and transparency. Due to the current guidelines on public meetings, this meeting was taking place over Microsoft Teams with members of the public welcome. It was confirmed there were no questions received in advance of the meeting.

David Heath welcomed observers to the meeting.

PCCC 027/2021 APOLOGIES FOR ABSENCE

Apologies for absence were received as shown above.

PCCC 028/2021 REGISTER OF MEMBERS' INTERESTS

The Somerset Primary Care Commissioning Committee was asked to review the register of interests, check for accuracy and declare any changes.

David Heath declared he was now Chair of the Costs Lawyer Standards Board and Chair of the Independent Funeral Standards Organisation. David also shared he was no longer a Solicitors Regulation Authority Board member or Chair of Western Region and National Board, Consumer Council for Water.

Action: Update the register to reflect the above change.

PCCC 029/2021 DECLARATIONS OF INTEREST RELATING TO ITEMS ON THE AGENDA

No Interests were declared.

PCCC 030/2021 MINUTES OF THE PART A SOMERSET PRIMARY CARE COMMISSIONING COMMITTEE MEETING HELD ON 4 MARCH 2021

The Minutes of the Part A meeting held on 4 March 2021 were reviewed by the Somerset Primary Care Commissioning Committee. The Somerset Primary Care Commissioning Committee approved the minutes as an accurate record of the meeting, and these were subsequently signed by the Chair.

PCCC 031/2021 MATTERS ARISING

The Committee reviewed the action log and had no further comments.

PCCC 032/2021 SHS & SFT COLLABORATIVE APPROACH TO PRIMARY CARE

Michael Bainbridge introduced the item, welcoming Kerry White, Dr Andrea Trill and Dr Harvey Sampson to the meeting. Michael shared the three strategic priorities of the CCG, noting these were; to provide a comprehensive range of GP services, ensuring and strengthening primary care workforce and finally, ensure the quality of care in Somerset is better than the national average. Michael noted that this item related to the success of the first strategic priority as Somerset are able to offer an alternative to the traditional GP partnership mode, which has seen a reduction in uptake, although noted that the CCG are also supportive of the partnership model.

Kerry White reiterated that Symphony Healthcare Services Ltd (SHS) is a subsidiary of Yeovil District Hospital (YDH) which was set up in 2016 with the aim to support the sustainability of Primary Care; initially in South Somerset though there has been an expansion across Somerset. Due to similar models, a relationship formed with Somerset Foundation Trust (SFT), with potential opportunities to be an at scale primary care support organisation as part of implementing an integrated care system. Kerry outlined that they are currently in phase one and SHS have been providing management support to the SFT practices since autumn, with an SFT Executive Director now also sitting on the SHS board; formalising relationships further. Kerry outlined that this is ready to progress to phase two to create a single organisation for primary care. It is hoped that phase two will commence at the start of September 2021. Kerry noted before this can take place there is further work to be done such as consultation, communications, approval of registration status etc., but believe that ultimately this change will benefit both staff and patients.

Dr Andrea Trill and Dr Harvey Sampson echoed Kerry, noting that staff are eager for the collaboration and that the staff atmosphere had been positive with staff providing positive feedback from their experience of working together.

Further areas of clarity were sought around the financial risk and proposal to manage this as well as the use of the term 'branding' within the slides. Kerry White confirmed that for the financial risk, this was a YDH concern as some of the SFT practices that will be inherited are not in positive financial positions, however, an agreement has been reached with SFT agreeing to financially support these practices. Kerry also shared that the terminology 'branding' refers to the work that SHS have been doing recognising the need for the organisation to represent the whole of Somerset. Dr Andrea Trill expanded, noting that with 20% of practices falling under the organisation, that SHS need to adapt and help share learning across Somerset and that it was more about the functions they can offer. Dr Harvey Sampson highlighted that SHS are also keen to ensure that each practice maintains its local identity and this is key within SHS. Michael Bainbridge confirmed the CCG take the same approach and monitoring with all practices regardless of their model of operation and all practices are expected to provide high quality comprehensive local services.

Discussions were held around the use of locum GPs and the effect of this on the wider locum system, with increased use resulting in increased cost and questioned cost. Kerry White confirmed that locum cost was a concern

and rates had increase though the desire is to employ GPs. Michael Bainbridge provided reassurance that the CCG are working with GP partners, the LMC and SHS/SFT to attempt to increase the workforce and positively influence the workforce market so that costs are manageable within the system.

The Somerset Primary Care Committee did not raise any specific concerns with the progression and thanked Kerry White, Dr Andrea Trill and Dr Harvey Sampson for their contribution.

PCCC 033/2021 PRIMARY CARE STRATEGY AND VISION

Michael Bainbridge outlined that the CCG had been developing a Primary Care strategy for Somerset prior to Covid-19, recognising the need to set out the strategic objectives clearly. Due to Covid-19, official approval was not given and Michael outlined two options for consideration. The first being to utilise the previously developed strategy; making the relevant required updates, or, secondly, given the substantial learning from Covid-19 and with a view to move towards and Integrated Care System (ICS), create a new strategy. Michael recommended the second option noting the developments that had taken place throughout Covid-19 in various work areas and the implications that moving to an ICS could bring. Michael noted that creating a new strategy will allow for clear definition and expectations for primary care services, as well as any potential future services delegated such as pharmacy, optometry and dentistry.

The Committee agreed that the second option of developing a new strategy was the preferred option, with Alison Henly also noting that Primary Care are currently facing significant pressure and that parallel to the strategy development, consideration needs to be given in what support can be offered to primary care.

Discussion took place around the importance of prevention for a healthy population, with it recognising that GPs cannot undertake all the preventative work alone and that the ICS organisation collaboration is vital for outlining how to govern this work; with Louise Woolway confirming this is an area that Public Health are already reviewing.

There was also agreement that due to the ICS, there needed to be clear detail on the role and expectations of primary care to ensure primary care continue to receive appropriate funding and a voice in the system. It is vital that the input is properly planned but also resourced appropriately. It was agreed that an update would be brought to the September Committee.

Action: An update on the strategy to be added to the September Committee meeting agenda.

The Somerset Primary Care Commissioning Committee approved developing a revised strategy.

PCCC 034/2021 ANNUAL REVIEW OF THE TERMS OF REFERENCE

Tanya Whittle noted that the Terms of Reference required the annual review for both the Committee and the Primary Care Operational Group. Tanya outlined the changes, noting that the usual changes to job titles and

membership had been made. Tanya also noted the desire to capture potential responsibilities to reflect the move to an ICS and the potential work areas that may transfer into the Committee's remit to allow the Committee to facilitate required discussions. The additions in this area related to due diligence, potential subgroups, the potential inclusion of dental, optometric and pharmacy services and ICS governance arrangement interlink.

The Somerset Primary Care Commissioning Committee approved both the Somerset Primary Care Commissioning Committee and the Somerset Primary Care Operational Group Terms of Reference for another year.

PCCC 035/2021 COMMUNITY PHARMACY

Sam Checkovage provided an overview of the strategic direction for pharmacy whilst providing some background highlighting that the term primary care encompasses pharmacy, dentistry, optometry as well as general practice. Sam detailed that, likewise to GPs, pharmacies are usually independent businesses contracted to provide NHS services and provide a range of services as part of the Community Pharmacy Contractual Framework (CPCF), which includes services like dispensing of medication and flu vaccinations.

Sam Checkovage detailed the opportunities within the strategic direction for pharmacy which included; supporting and optimising the core offer from community pharmacy, support integration with general practice, which is helped by the CPCF now aligning with the GP contract, integration with urgent care, long term condition management and supporting healthy living by being an agent of public health and prevention. Sam outlined a new service, the Community Pharmacy Consultation Service (CPCS), which promotes integration with urgent care as it started with 111, allowing the service to directly refer to pharmacies. A similar service is being developed and will shortly be offered to general practice.

The move to an ICS allows for greater collaboration within the system, however there are some risks. The ICS is planned from April 2022, however exact timings of transition of services are unknown. Should commissioning of pharmacy, dental and optometric transfer over, there is limited time for the team to adapt. That said, Michael Bainbridge was confident the transition would be successful due to previous experience with the delegation of GP services. The other area of concern is the required finance and governance of the services, which would need to be better understood.

David Heath noted the enormity of scope for further integration with Community Pharmacy and noted the possibilities that the other services could offer and the ways in which further efficiency within the system could be reached with the appropriate use and arrangements. The Committee recognised the opportunity the transfer of services could provide, with Michael Bainbridge noting that 50% of the Somerset population is rural and emphasising the importance that provision reaches these areas and expressed a desire to protect the local networks. Louise Woolway also noted the Pharmaceutical Needs Assessment is a statutory function of the Health and Wellbeing Board and will be started again later this year.

The Somerset Primary Care Commissioning Committee noted the report.

PCCC 036/2021 PRIMARY CARE FINANCE

Jacqui Damant provided an overview of the finance report, noting that this was a full financial year report for 2020/21. The delegated Primary Care budgets totalled £82.289m which included around £1.4m of additional funding from the GP Covid capacity expansion fund. Jacqui noted the CCG achieved a breakeven financial position for the year.

Jacqui Damant explained the other Primary Care services funding, sharing that an in year funding of £1m had been received for the GP Forward View and those funds were fully committed. For the other services, there was underspend of around £1m, with the Primary Care Improvement Scheme underspend being around £0.395k and other Local Enhanced Services totalling an underspend of £0.597m. This underspend had been driven by a reduced level of activity due to Covid-19. Tanya Whittle further noted that the budget for the year had also included increased funding to account for growth which would have further impacted on underspend seen. Jacqui confirmed that any underspend would contribute to the CCG's bottom line. Jacqui noted that they were working to new arrangements for 2021/22 and were working towards the first 6 months only. It was hoped that details of the final 6 months would be known in September, but that they are anticipating breakeven though it is too early to confirm. Alison confirmed that some of the Covid support funding will continue for the start of 2021/22 and that the first 6 month's budgets will be brought to the next Committee meeting.

The Somerset Primary Care Commissioning Committee noted the report.

PCCC 037/2021 PRIMARY CARE UPDATE REPORT

Tanya Whittle provided an overview of the report, firstly highlighting the Language and Translation service and confirmed that the launch of Word 360 will commence in September, with the view to undertake a future procurement. It is hoped that utilising a system also used by SFT will ensure a joined up consistent approach for patients.

Tanya also noted a historical issue regarding Brent Area Medical Centre's boundary however confirmed that the practice are now reviewing their boundary and will submit a formal request for the change. All formal processes and governance will be followed.

Tanya Whittle identified that the Minehead Medical Centre branch surgery closure, that was previously approved by the Committee on the understanding 4 conditions would be met, has now progressed. These conditions have now been met and asked the Committee to approve the application fully and remove the conditions. The Somerset Primary Care Commissioning Committee approved the removal of these conditions.

Tanya highlighted the positive work undertaken for ensuring the Learning Disabilities Health Check targets had been met. Tanya noted this was a significant piece of work for both the CCG and practices and Somerset had achieved a rate of 78%. Primary Care data was noted, reflecting that activity has increased intensely. The CCG are assisting where possible in ensuring

patients have the right information to access the right service and are undertaking media campaigns and discussing concerns with practices.

The Committee discussed in detail around the need to ensure that primary care remains sustainable, noting should levels continue to increase, it will not be. It was recognised that whilst skill sets in practices can be utilised more efficiently, it was important that patients are educated in how to contact the right service for their needs and involvement of media messaging was vital. It was confirmed that the CCG will be continuously reviewing the demand to ensure appropriate management. Michael Bainbridge identified that access and access redesign was a challenge for some practices. Pre-pandemic it was advised to allow for 6 months to allow for a change in access however due to the pandemic, change has had to be implemented at a rapid speed and due to this some practices are seeing difficulties in managing these arrangements. It was confirmed the discussions around an Access Improvement Programme are progressing and this will hopefully provide practices with an efficient method to review data.

Tanya also mentioned the Covid Vaccination work, reminding the Committee that primary care was still providing a substantial volume with the programme now open to 25+ year olds with some PCNs continuing delivery to these cohorts. It was also noted that second doses are still taking place so most PCNs remain delivering the service. There have been some issues with logistics and workforce however this is being continuously reviewed. The final area highlighted was the Quality Outcomes Framework (QOF), with Tanya detailing the national adjustments made due to Covid and the problems within the system which calculates and is used to sign off the payments. Tanya stressed that the CCG are aware of the issues and are taking appropriate measures to ensure practices are not negatively impacted by the national adjustments made.

The Somerset Primary Care Commissioning Committee noted the report and approved the conditions be removed from the Minehead Branch Surgery closure application.

PCCC 038/2021 IMPROVING QUALITY IN PRIMARY CARE

Kathy French presented an overview of the slides circulated and expressed how throughout the meeting quality of services had been stressed which demonstrated how important quality continuously is. It was noted that this report is looking at Quarter 4 (January – March 2021) and highlighted the PALS contacts had increased, with majority of contacts relating to vaccinations. There had been some concerns about access but these had been discussed with the relevant practices. Kathy noted there had been 5 complaints which were managed by NHS England's complaints team and from this, practices were receiving the appropriate support to resolve the complaints. Kathy noted that a key area of work the team had been taking forward with practices was around infection, prevention and control and ensuring that primary care is fit for purpose.

Kathy also provided an overview of the wider Quality Team activities which included; continuation of delivery of the Quality Improvement training, RESTORE 2 training and PCN Leadership roles and PCN Lead Nurse

development with work underway to develop a universal Somerset offer to support primary care organisations.

It was confirmed there had been no CQC visits or reports published in this quarter for Somerset and an overview of the current ratings was noted; with majority of Somerset practices being rated as 'Good'. Kathy outlined the concern with the vasectomy service governance process but noted that the CCG are reviewing this process and consideration is being given to a adopting a new assurance model but work continues.

The Somerset Primary Care Commissioning Committee noted the report.

PCCC 039/2021 ANY OTHER BUSINESS

There was no other business.

PCCC 040/2021 DATE OF NEXT MEETING

David Heath thanked members of the Somerset Primary Care Commissioning Committee for their attendance and confirmed the date of the next Primary Care Commissioning Committee was 29 September 2021.

PCCC 041/2021 DATES OF FUTURE PRIMARY CARE COMMISSIONING COMMITTEE MEETINGS

Future meetings of the Primary Care Commissioning Committee are as follows:

- 8 December 2021

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CHAIRMAN

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DATE