

MEETING: Governing Body

Item Number: 11.1

DATE: 16th December 2014

REPORT TITLE:	Chairperson's Report for Atherleigh Locality
CORPORATE OBJECTIVE ADDRESSED:	Function as an effective commissioning organisation that puts patients first
REPORT AUTHOR:	Dr Deepak Trivedi
PRESENTED BY:	Dr Deepak Trivedi
RECOMMENDATIONS/DECISION REQUIRED:	For information
<p>EXECUTIVE SUMMARY</p> <p>This report provides an overview of activity within the Atherleigh Locality. The report provides a summary of the Locality meetings that have taken place within Atherleigh for the period November 2014. The report also highlights any issues that have been raised by member practices during this period.</p>	
FURTHER ACTION REQUIRED:	N/A
<p>EQUALITY AND DIVERSITY: Confirmed that any changes to service or procedure introduced as a result of this report do not impact adversely on any of the protected groups covered by the Equality Act 2010.</p>	

CHAIRPERSON'S REPORT

Chairperson's Name	Dr Deepak Trivedi
Committee Name	Atherleigh Locality meetings
Date of Meetings	November
Name of Receiving Committee	Governing Body
Date of Receiving Committee Meeting	16 th December 2014
Officer Lead	Diane Nicholls

<i>The top 3 risks identified during the meeting & initials of lead with designated responsibility</i>		
1.		
2.		
3.		

Attendance at the meetings[#]:	Excellent
--	-----------

<i>Was the agenda fit for purpose and reflective of the committees Terms of Reference?</i>	Yes
---	-----

Narrative report outlining the key issues of the activities
<p><u>GP Forum</u></p> <p>Atherleigh member practices met on the 21st November 2014 through the GP Forum. The meeting was well attended and the following topics were covered on the agenda:</p> <p><u>CQC Inspections</u></p> <p>Members were advised that some practices within the Wigan Borough CCG had received their CQC Inspections. The inspections are to look into quality, targets, complaints, audits, significant events and other areas relating to patients.</p> <p><u>CQC Risk Bandings</u></p> <p>CQC have published risk bandings for practices and members were asked to look at their risk banding.</p> <p><u>Chris Knights, Project Director WWL</u></p> <p>Chris Knights, Project Director from WWL attended for the education element of the GP Forum.</p>

[#] **Excellent** (well attended) **Acceptable** (some apologies) **Unacceptable** (not quorate)

Chris Knights advised that he was attending the Forum to inform members on what is available within Leigh Infirmary. He explained that over the last 12 months his role has been to look at maximising access into Leigh.

Members of the Forum raised issues to do with Neurology, Rheumatology, discharge letters, the need for a One Stop Shop in Wigan as well as Leigh, training for high referrers and access to Consultants via email by the GPs.

Answers to the issues raised will be sent to the GPs via the Locality Executive Support.

Future Education Session will be to invite Dr G Wong who is the Educational Clinical Lead.

Feedback on Outpatient Referral Peer Review

Summary of the key issues found from the Outpatient Referral Peer Reviews was presented to members of the Forum.

The following issues were discussed:

- T&O specifically physiotherapy
- Whether referring to MSK first, if appropriate, would then reduce T&O referrals to WWL.

Finance Audit (Discharge letters and high activity patients)

A member of the Finance Team attended for this item.

Feedback was given on the discharge letters and high activity patients.

Members were asked to return their audits if not already done so, as the feedback is still being collaged and this will form an ongoing piece of work.

All agreed that there is a need for a One Stop Service in Primary Care.

Primary Care Foundation

Paper was presented with regards to the Primary Care Foundation. This is an organisation that has worked with over 1,300 practices across the UK to support them on a range of general practice areas including review of their access operating models. Members were asked to send in expressions of interest of being part of the programme no later than 30th November 2014.

Primary Care Co-Commissioning

Paper circulated for discussion. It was explained that the purpose of the paper was to brief members on primary care co-commissioning and to seek views on the CCGs proposed approach. Three options were presented.

Members felt:

- Performance management/appraisals should also be dealt with by the CCG
- Need to be able to commission within own Locality

- Option 3 was the majority's view but concern was expressed with regards to conflict of interest as GPs should have a say on what patients need

Information will be shared with members of the Forum once ideas start to develop.

Prescribing Update – the Prescribing Lead undertook to provide an update on shared care protocol, the use of Fostair for COPD, NOAC and new law on drugs which prevent you from driving.

Future meetings of the ALPF GP Forum – there was a discussion held around the proposal to separate the AL and PF meetings. There was a unanimous decision that all the members wanted the meetings to stay as they are.

Other areas discussed were 7 day access workshop reminder, new standard item of sharing significant events and information was given on a new Community Connector/Peer Support Pilot which is happening within 2 Clusters of Practices, one in Wigan and one in Leigh.

Due to the Quality Peer Reviews being held in December, the next meeting of the ALPF GP Forum will be held on the 23rd January 2015.

Practice Manager's Forum

The Practice Manager's Forum was held on the 13th November 2014 and the meeting was well attended. The key highlights were:

- Joanne Conniffe and Erika Setzu from the Medicines Management Team attended the meeting and gave members an update on their roles and the support available.
- Feedback was provided by member practices in respect of their recent CQC inspections and best practice was shared on a number of areas.
- An update was provided in respect of the First Outpatient Peer Reviews and member practices were advised of the key themes that emerged from the sessions. The Peer Review Master Templates were shared for information.
- The process for the up and coming Quality Peer Reviews was discussed.
- Feedback on Community Case Reviews in respect of Clostridium Difficile for the period 1st July to 30th September 2014 was provided.
- Member practices were advised of the support programme offered by the Primary Care Foundation (PCF) – 'Managing access & urgent care in your practice'. Member practices were advised that the intention of the programme is to support GP Practices to better manage urgent care demand and that the deadline for expressions of interest to participate was 30th November 2014.

Patient Participation Group

The Locality Patient Participation Group was held on the 27th November 2014 and was well attended. The key highlights were:

- John Knowles from the Leigh Arthritis Care Support Group attended to inform members of

the group. The group is affiliated to the Arthritis Care National Charity and have a current membership of 32. The group is primarily about supporting their members and providing information around health and wellbeing. Awareness activities are underway.

- An update was given on the Community Connector/Peer Support Pilot which is around providing 'non-clinical' support to patients through a mentoring/coaching approach.
- Information was given around two online computer training courses which are being delivered in January for patients. to provide them with a basic understanding of computers. This was in response to feedback from patients surveys in which patients had commented that they didn't know practices had websites and wouldn't know how to use them.
- An update was provided in respect of Healthier Together. Total number of validated questionnaires received across Greater Manchester is 22,451. Wigan returned 4,567 which made up 23% of the total responses. Including petition signatures and door to door pledges the total response are 30,512. There were 1,165 responses that were judged to be invalid and therefore will not be considered.
- Patient experience was shared in respect of the Ear Syringing Service and the fact that the waiting times are for several weeks and the number of DNAs are vast but there is no cancellation back up list.
- A practice PPG report was provided by Spielmann's Practice.

Other Meetings and Activities

- Two meetings were held with the cluster of Leigh practices involved in the Community Connector/Peer Support Pilot.
- Dates for practice visits have been put in the diary for early in the New Year.

Agreed actions from the Meeting	Name of lead with designated responsibility for the action/s
Chairperson's Additional Comments	

This page is intentionally left blank

MEETING: Governing Body

Item Number: 11.2

DATE: 16th December 2014

REPORT TITLE:	Chairperson's Report for Patient Focus Executive Locality
CORPORATE OBJECTIVE ADDRESSED:	Function as an effective commissioning organisation that puts patients first
REPORT AUTHOR:	Dr Mohan Kumar
PRESENTED BY:	Dr Mohan Kumar
RECOMMENDATIONS/DECISION REQUIRED:	For information
<p>EXECUTIVE SUMMARY</p> <p>This report provides an overview of activity within the Patient Focus Locality. The report provides a summary of all the Locality meetings that have taken place within Patient Focus for the period November 2014. The report also highlights any issues that have been raised by member practices during this period.</p>	
FURTHER ACTION REQUIRED:	N/A
<p>EQUALITY AND DIVERSITY: Confirmed that any changes to service or procedure introduced as a result of this report do not impact adversely on any of the protected groups covered by the Equality Act 2010.</p>	

CHAIRPERSON'S REPORT

Chairperson's Name	Dr Mohan Kumar
Committee Name	Patient Focus Executive
Date of Meeting	November 2014
Name of Receiving Committee	Governing Body
Date of Receiving Committee Meeting	16 th December 2014
Officer Lead	Laura Crank

<i>The top 3 risks identified during the meeting & initials of lead with designated responsibility</i>		
1.		
2.		
3.		

Attendance at the meetings[#]:	Excellent
--	-----------

<i>Was the agenda fit for purpose and reflective of the committees Terms of Reference?</i>	Yes
---	-----

Narrative report outlining the key issues of the activities
<p><u>GP Forum</u></p> <p>The GP Forum was held on the 21st November 2014 and was well attended. The key highlights were:</p> <p><u>CQC Inspections</u></p> <p>Feedback was provided by member practices in respect of their recent CQC inspections and best practice was shared on a number of areas.</p> <p><u>CQC Risk Bandings</u></p> <p>CQC have published risk bandings for practices and members were asked to look at their risk banding.</p> <p><u>Chris Knights, Project Director WWL</u></p> <p>Chris Knights, Project Director from WWL attended for the education element of the GP</p>

[#] **Excellent** (well attended) **Acceptable** (some apologies) **Unacceptable** (not quorate)

Forum. Chris Knights advised that he was attending the Forum to inform members on what is available within Leigh Infirmary. He explained that over the last 12 months his role has been to look at maximising access into Leigh.

Members of the Forum raised issues to do with Neurology, Rheumatology, discharge letters, the need for a One Stop Shop in Wigan as well as Leigh, training for high referrers and access to Consultants via email by the GPs.

Answers to the issues raised will be sent to the GPs via the Locality Executive Support.

Future Education Session will be to invite Dr G Wong who is the Educational Clinical Lead.

Feedback on Outpatient Referral Peer Review

Summary of the key issues found from the Outpatient Referral Peer Reviews was presented to members of the Forum.

The following issues were discussed:

- T&O specifically physiotherapy
- Whether referring to MSK first, if appropriate, would then reduce T&O referrals to WWL.

Finance Audit (Discharge letters and high activity patients)

A member of the Finance Team attended for this item.

Feedback was given on the discharge letters and high activity patients.

Members were asked to return their audits if not already done so, as the feedback is still being collaged and this will form an ongoing piece of work.

All agreed that there is a need for a One Stop Service in Primary Care.

Primary Care Foundation

Paper was presented with regards to the Primary Care Foundation. This is an organisation that has worked with over 1,300 practices across the UK to support them on a range of general practice areas including review of their access operating models. Members were asked to send in expressions of interest of being part of the programme no later than 30th November 2014.

Primary Care Co-Commissioning

Paper circulated for discussion. It was explained that the purpose of the paper was to brief members on primary care co-commissioning and to seek views on the CCGs proposed approach. Three options were presented.

Members felt:

- Performance management/appraisals should also be dealt with by the CCG
- Need to be able to commission within own Locality
- Option 3 was the majority's view but concern was expressed with regards to conflict of interest as GPs should have a say on what patients need

Information will be shared with members of the Forum once ideas start to develop.

Prescribing Update – the Prescribing Lead undertook to provide an update on shared care protocol, the use of Fostair for COPD, NOAC and new law on drugs which prevent you from driving.

Future meetings of the ALPF GP Forum – there was a discussion held around the proposal to separate the AL and PF meetings. There was a unanimous decision that all the members wanted the meetings to stay as they are.

Other areas discussed were 7 day access workshop reminder, new standard item of sharing significant events and information was given on a new Community Connector/Peer Support Pilot which is happening within 2 Clusters of Practices, one in Wigan and one in Leigh.

Due to the Quality Peer Reviews being held in December, the next meeting of the ALPF GP Forum will be held on the 23rd January 2015.

Practice Managers Forum

The Practice Managers Forum was held on the 13th November 2014 and was well attended. The key highlights were:

- Joanne Conniffe and Erika Setzu from the Medicines Management Team attended the meeting and gave members an update on their roles and the support available.
- Feedback was provided by member practices in respect of their recent CQC inspections and best practice was shared on a number of areas.
- An update was provided in respect of the First Outpatient Peer Reviews and member practices were advised of the key themes that emerged from the sessions. The Peer Review Master Templates were shared for information.
- The process for the up and coming Quality Peer Reviews was discussed.
- Feedback on Community Case Reviews in respect of Clostridium Difficile for the period 1st July to 30th September 2014 was provided.

- Member practices were advised of the support programme offered by the Primary Care Foundation (PCF) – ‘Managing access & urgent care in your practice’. Member practices were advised that the intention of the programme is to support GP Practices to better manage urgent care demand and that the deadline for expressions of interest to participate was 30th November 2014.

Patient Participation Group

The Locality Patient Participation Group was held on the 27th November 2014 and was well attended. The key highlights were:

- A presentation was given in respect of Leigh Arthritis Group. Leigh Arthritis Group are affiliated to the Arthritis Official Charity and are self-funded. They average around 20-25 members. Awareness raising activities are underway.
- An update was provided in respect of the Community Connector roles which have now been appointed to. The aim of the role is to talk to patients in respect of non-clinical issues and to link with voluntary and community organisations. The pilot will run to the end of March.
- An update was provided in respect of Healthier Together. The group were advised that approximately 22,500 responses were received across Greater Manchester of which around 4,500 (23%) came from Wigan. These are now with the Independent Scrutiny Company who will produce a report in due course.
- Patient Experience was shared in respect of the Ear Syringing Services and the waiting times, which were considered to be unacceptable by the group.
- A Practice PPG Report was provided by Foxleigh Family Practice.

Other Meetings and Activities

During November 2014, the Patient Focus Executive undertook a practice visit on 20th November 2014 to Dr Zaman and Partners.

Agreed actions	Name of lead with designated responsibility for the action/s
Chairperson’s Additional Comments	

This page is intentionally left blank

MEETING: Governing Body

Item Number: 11.3

DATE: 16th December 2014

REPORT TITLE:	TABA LOCALITY EXECUTIVE GROUP REPORT (November 2014)
CORPORATE OBJECTIVE ADDRESSED:	<ol style="list-style-type: none"> 1. Supporting our population stay healthy and live longer in all areas of the Borough. 2. Commissioning high quality services, which reflect the populations' needs, delivering good clinical outcomes and patient experience within the resources available. 3. Function as an effective commissioning organisation that puts patients first.
REPORT AUTHOR:	Dr Ashok Atrey
PRESENTED BY:	Dr Ashok Atrey
RECOMMENDATIONS/DECISION REQUIRED:	None
EXECUTIVE SUMMARY	
<p>The attached narrative report from the November 2014 TABA Locality Meeting is presented to the Governing Body to receive and note.</p>	
FURTHER ACTION REQUIRED:	None
EQUALITY AND DIVERSITY: Confirmed that any changes to service or procedure introduced as a result of this report do not impact adversely on any of the protected groups covered by the Equality Act 2010.	

CHAIRPERSON'S REPORT

Chairperson's Name	Dr Ashok Atrey
Committee Name	TABA Locality Executive Meeting
Date of Meeting	18 th November 2014
Name of Receiving Committee	Governing Body
Date of Receiving Committee Meeting	16 th December 2014
Officer Lead	Paul Lynch (Assistant Director) Stephen Green (Locality Executive Support Officer)

<i>The top 3 risks identified during the meeting & initials of lead with designated responsibility</i>		
1.	One new case of Clostridium Difficile reported	AA
2.		
3.		

Attendance at the meeting[#]:	100%
---	------

<i>Was the agenda fit for purpose and reflective of the committees Terms of Reference?</i>	Yes
---	-----

Narrative report outlining the key issues of the meeting
<p>1. <u>Finance & Commissioning Update</u> Jennie Collins from WBCCG Finance gave a presentation to the group and a group discussion took place. There was some discussion around GP Out of Hours (OOH) and what work has been done in relation to GP OOH over the past 2-3 years in terms of developments. There was also discussion on the increase in referrals seen – particularly in respect of Trauma & Orthopaedics – this included some of the reasons for this and actions that could be taken.</p> <p>2. <u>Clostridium Difficile</u> Elliott Street Surgery reported one new case; RCA will be given at the next locality meeting.</p> <p>3. <u>Primary Care Co-Commissioning</u> All three options were discussed. Statement from a member of the locality of decision already been taken was denied by Clinical lead. However it was confirmed that this had been discussed by Clinical Leads and some of the senior officers of CCG and option 3 was considered to be the most effective Option. The group asked for further detail and was asked to feedback views on this.</p>

[#] **Excellent** (well attended) **Acceptable** (some apologies) **Unacceptable** (not quorate)

4. Practice Managers Meeting Feedback

Feedback was given to the group from the Practice Managers Meeting that was held on: 13.11.2014. It was commented that some practices are not accepting patients on the same day when they apply. Woodlands have said that it takes 3 weeks for the decision to be made. AA commented that there are currently no guidelines on the length of time. GR suggested that a rota for accepting patients from nursing homes should be done on a locality rota basis.

5. CCG Update / Service Redesigns / Information

Information was given to the group on: NWS, Winter Resilience, 7 Day Access Design Workshop 26.11.2014, and the Prime Minister's Challenge Fund.

6. Primary Care Foundation

Support is available to practices to assist with managing appointment systems and urgent care. Practices were asked to submit Expressions of Interest.

7. Finance & Referrals Peer Reviews

Catherine O'Neil gave a summary and feedback from the finance team. Catherine asked for any details that may have been missed for recommendations to be forwarded to WBCCG. In respect of the Outpatient referrals review, PL informed everyone that WBCCG has compiled an action plan and will keep practices updated with progress.

Agreed actions from the Meeting	Name of lead with designated responsibility for the action/s
JC to liaise with SG in order for a summary re: OOH to go out with the meeting minutes.	JC / SG
Send out National Guidance on the three choices for Primary Care Co-Commissioning.	SG
Clarify if two different applications (joint commissioning and full delegation) can be submitted for Primary Care Co-Commissioning.	PL
All practices to let SG know if they would like to participate in the Primary Care Foundation programme.	ALL

Chairperson's Additional Comments
<p>Co-commissioning options discussed. Members wanted more time to think about it and feedback.</p> <p>One new case of C Diff reported. RCA will be provided at a later meeting.</p> <p>Members want to look into Prime Minister's challenge fund and explore 8 to 8, 7 day cover.</p>

This page is intentionally left blank

MEETING: Governing Body

Item Number: 11.4

DATE: 16th December 2014

REPORT TITLE:	Chairpersons Report for Wigan Central Locality
CORPORATE OBJECTIVE ADDRESSED:	1. Supporting our population to stay healthy and live longer in all areas of the Borough.
REPORT AUTHOR:	Kate Davenport
PRESENTED BY:	Dr Tony Ellis
RECOMMENDATIONS/DECISION REQUIRED:	For Information
<p>EXECUTIVE SUMMARY</p> <p>This report provides an overview of activity within Wigan Central locality in December 2014</p>	
FURTHER ACTION REQUIRED:	NONE
<p>EQUALITY AND DIVERSITY: Confirmed that any changes to service or procedure introduced as a result of this report do not impact adversely on any of the protected groups covered by the Equality Act 2010.</p>	

CHAIRPERSON'S REPORT

Chairperson's Name	Dr T Ellis (PM)
Committee Name	Wigan Central Locality Committee
Date of Meeting	18 th November 2014
Name of Receiving Committee	Governing Body
Date of Receiving Committee Meeting	23 rd December 2014
Officer Lead	Kate Davenport Executive Support Officer

Attendance at the meeting[#]:	Excellent
---	-----------

<i>Was the agenda fit for purpose and reflective of the committees Terms of Reference?</i>	Yes
---	-----

Narrative report outlining the key issues of the meeting

GP Locality Meeting

The meeting was held at the Wigan Investment Centre on 18th November 2014.

Medicines Management

Dr Jonathan Seabrook provided the group with an update on the following areas, full details of which can be found in the minutes of the meeting if required.

- Simvastatins
- Viagra
- Drug driving
- Medication requests from 5BP
- Lithium 'purple book'
- Community dietician
- Increased drug costs
- Fostair
- Fragmin
- Mepatel
- Prostrat

DNR Policy Briefing

Dr Liam Hosie briefed the group on the new DNR documentation and the Borough wide policy that has now been introduced. Once the policy is fully updated and complete it will be

[#] **Excellent** (well attended) **Acceptable** (some apologies) **Unacceptable** (not quorate)

disseminated through the localities.

Finance & Commissioned Services

Craig Hall (Deputy Chief Finance Officer) presented the group with an update on the Acute Contract position 2014/15. A key issue was noted as Trauma and Orthopaedic activity at the Trust, GP referrals have increased 25% year on year. A full list of issues raised by GPs in response to this can be found in the minutes of the meeting.

Primary Care Co-commissioning

There was generally support for the CCG to explore the option of delegated commissioning, the other options were seen to be even less favourable.

North & Central Wigan Referral / Financial Peer Reviews

Liz Dalglish (Senior Finance Manager) attended the GP Locality Meeting to update the members on the '5 High Activity Patients' exercise. Themes that came from the feedback were:

- Discharge letters do not contain useful information.
- Education of patients around their treatment options.
- Mental health patients
- Integrated care and continuity of care across different services in Borough.
- Inappropriate recording and data validation of activity.

North & Central Practice Managers Meeting

Matters Arising

Practice managers discussed the GP PIT Program, the CQC inspection team has slight or no knowledge of the program, they are giving different views & information than GP PIT. Feedback from CQC said PIT Program to harsh and all PM's should follow CQC outcomes. Practice managers are to provide comments to create a group feedback.

CQC Update from Visits

Feedback was given by Aspull & Shevington Surgery practice managers who have recently had CQC visits. The CQC will be seeing 12 practices in the Wigan borough this year. There is a possibility that secret shoppers are also being used by the CQC as practices with a visit booked received some strange registration questions.

Christmas Opening

Most practices will be using Bridgewater Out of Hours service to cover the half day closing on Christmas Eve.

Practice Nurse Forum

Training on the Over 75s Screening (Edmonton Frailty Scale) and the completion of Care Plans will take place at Leigh Sports Village (Directors Lounge) on 17th December 2014 at

1.30pm. A reminder was given for nurse attendance at the forum. The agenda will include Care Plan training & Mental Health updates.

Additional information

Further Extending Access to GP Services over 7 days in Wigan

The Primary Care System Design Workshop held on the 26th November was well attended and members provided facilitators with useful feedback. The project team will issue a '7 Day Extending Access Framework Model' for providers to bid against with local bids submitted by the 16th January 2015 for CCG approval.

GP Choices

Effective from 5th January 2015, all Primary Medical Service contracts will have a contractual term to register out of area patients without any obligation to provide a home visit or 'out of hours' services. Due to the contractual changes practices are not able to opt in or out of this.

Practices are able to sign up to the Enhanced Service of providing care to patients who are registered with an out of area GP, that require access to urgent care or follow up services.

Primary Care Foundation

Practices have been offered the opportunity to participate in the Primary Care Foundation workshop and obtain a report for their practice. This will be funded by the CCG and practices will also be paid for one GP session and 8 hours of Practice Manager time for participation. A total of five practices in the Wigan Central Locality have expressed an interest to participate.

Chairperson's Additional Comments

MEETING: Governing Body

Item Number: 11.5

DATE: 16th December 2014

REPORT TITLE:	Chairpersons Report for North Wigan Locality
CORPORATE OBJECTIVE ADDRESSED:	1. Supporting our population to stay healthy and live longer in all areas of the Borough.
REPORT AUTHOR:	Matthew Cooper
PRESENTED BY:	Dr Peter Marwick
RECOMMENDATIONS/DECISION REQUIRED:	For Information
<p>EXECUTIVE SUMMARY</p> <p>This report provides an overview of activity within North Wigan locality in November 2014</p>	
FURTHER ACTION REQUIRED:	NONE
<p>EQUALITY AND DIVERSITY: Confirmed that any changes to service or procedure introduced as a result of this report do not impact adversely on any of the protected groups covered by the Equality Act 2010.</p>	

CHAIRPERSON'S REPORT

Chairperson's Name	Dr P Marwick
Committee Name	North Wigan Locality Committee
Date of Meeting	18th November 2014
Name of Receiving Committee	Governing Body
Date of Receiving Committee Meeting	16th December 2014
Officer Lead	Matthew Cooper Executive Support Officer

Attendance at the meeting[#]:	Excellent
---	-----------

<i>Was the agenda fit for purpose and reflective of the committees Terms of Reference?</i>	Yes
---	-----

Narrative report outlining the key issues of the meeting
<p><u>GP Locality Meeting</u> Held on the 18th November at Pennygate Medical Centre.</p> <p>Medicines Management update Please review the lithium protocol & review patients purple books. MC to re-send protocols for GP's to review. Vitamin D protocol discussed LB to send to MC to share with GP's. Podiatry Dressings do not prescribe in Practice in Podiatry contract to prescribe. Potential change to COPD management using cheaper drug. NPT for Drugs by the road side now in place, make sure patients that are prescribed drugs that affect driving are aware of the effects. Atorvastatin script switch message updated recommended treatment.</p> <p>CCG Updates</p> <p>Winter resilience All reviewed Spread sheet, all NW practices signed up to winter pressures. PM tried to refer to acute access clinic told it was full. What is the referral criteria are other services e.g. A&E, H@H allowed to refer to the acute access clinics?</p> <p>NWAS Information All reviewed the information and told about pathfinder pilot in Leigh Walk-in centre</p> <p>Primary care Foundation Briefing Reviewed letter, CCG will fund audit & time, optional for practices, inform MC if interested.</p> <p>Prime Minister Challenge Fund Being discussed at federation level, any ideas for the fund send to DH.</p>

[#] **Excellent** (well attended) **Acceptable** (some apologies) **Unacceptable** (not quorate)

Co – Commissioning

NHS England Manchester LAT joining with Lancs.

CCG offered opportunity to commission primary care. NHS England will keep appraisals & contract performance management. 3 options. CCG has a recommended option. All unsure on the detail as national release 4 days ago, Governance & finance issues, 10% staff cost reduction alongside the need for more staff to help deliver co-commissioning. But if the CCG does do it, it will be done to us?

Peer review Feedback (Referral & Finance)

Liz Dalglish went through the Finance feedback & Marty the Referral feedback.

Referral feedback practices would like copies of the local T&O pathways, with flow chart and referral template. Want Joint injections in WWL bounced (mandated) back to Primary Care.

Finance – GP's asked how regular do WWL update their list of GP practices names and addresses, lots of letters received for Dr's that left practice year ago. Would like contact for queries on consultant letters.

No communication from MDT meetings given to GP practices, not informed quickly if patient is placed in care home from hospital.

Finance Update on Acute Contract position

Told of WWL forecast overspend, majority on T&O. Looking at sustainability of T&O going forward. Craig Hall asked for views from GP's on what could be causing this large increase? 38 new consultants with £28 million investment in new theatres & tech, increased capacity increased activity.

Referral management system for T&O discussed possible increase in MSK Cats capacity to Triage. MSK on Choose and Book, MSK Cats needs to offer choice.

Dr Marwick asked if North Wigan wants a mandate to send all T&O via MSK Cats?

Please ask your GP's and Feedback.

North & Central Practice Managers Meeting

Matters Arising:

Web link for Online Infection controls to be share between Managers.

GP Pit Program - Current feedback from PM's is GP Pit is too time consuming, not enough sharing of documentation, not had training for staff or infection control documents.

Feedback from CQC said Pit Program to harsh and all PM's should follow CQC outcomes.

CQC Update from Visits

Recent CQC visits too Shevington Surgery & Aspull surgery feedback given.

PM's ran through the areas the teams looked at & discussed with the practice such as Letters responding to complaints should be updated to mention CQC as well as the Ombudsman.

Flu Locally Commissioned Service

All Practices happy with the LCS.

Christmas Opening

All practice received the letter from NHS England.

Most practices closing a half day like usual with Bridgewater providing care via OOH.

Winter Pressures/Prescribing Letter

All signed up to the Winter pressures, if practices are using less than their max allowance, inform MK so the spare resource can be reassigned. February any spare funding will be made available.

Pharmacy Letter – Pharmacy Tech's are to send out the letters and discuss with practices. CC gave example of Pharmacy ordering on behalf of the patient without talking to the patient. Then saying patient had asked for the full order when the patient only wanted half the order. Pharmacy examples from Various PM's of Pharmacies losing scripts & over ordering.

AUA - Rob Wilson

AUA pre populated data templates out in December.

Read Code & Click plan to update date & time.

Working with A&E to provide A&E discharge data, requested but given a timeline or date for arrival of data. Discharges only not A&E attendance, 3rd Day of practice notification not hospital. Root cause spreadsheet submission sheet required.

Review new to cohort & 20% increase then refer INT or assigned to GP or NFA. PM's mentioned the difference in work between WWL & Bridgewater Community Matrons.

Practices are holding back INT patients due to 4 limit & long admin referral process.

Practices asked when will the tool be updated? RW – doesn't know

RW – Icons will disappear in December

PM's – how will we know who needs a review if they disappear? – need extra Column added for review. Can we also have multiple selections of patients to update icons? Rob has asked the lead practice managers for examples of care plans. District Nurses should produce care plans for their patients on their Care list & review them. Education Sessions have been setup at the practice nurse forum for care plans will also look into setting up for District nurses also.

No PID required on the summary spreadsheet at the end of the month.

Rob has a list of who was on a care plan each month.

Live care plans coming with MIG roll out on DN's toughbooks.

NWAS section on care plan not for GP's to fill in.

Practice Nurse Forum Care Plan Training 17/02/14

Update & Reminder for Managers to notify their practice Nurses.

AOB

Storage of Files offsite

All have problems with Record Storage, taking up to much space that could be used for admin or clinical space.

One practice mentioned records can be vacuum packed to reduce the record size, fitting more into the same space.

Off-Site storage of medical files was discussed.

Practice Managers to discuss with John Buttle CSU & CCG to see if a central solution can be found for storage of medical records.

Additional information

GP Choice

No practices in NW showed any interest in proving a service for Out of area patients.

Primary Care Foundation

No practices from NW have signed up.

7 day Extended Access Workshop

Some North & Central Wigan practices attended the workshop at DW stadium.

Chairperson's Additional Comments

This page is intentionally left blank

MEETING: Governing Body

Item Number: 11.6

DATE: 16th December 2014

REPORT TITLE:	ULC LOCALITY EXECUTIVE GROUP REPORT (November 2014)
CORPORATE OBJECTIVE ADDRESSED:	Function as an effective commissioning organisation that puts patients first.
REPORT AUTHOR:	Dr Sanjay Wahie
PRESENTED BY:	Dr Sanjay Wahie
RECOMMENDATIONS/DECISION REQUIRED:	None
EXECUTIVE SUMMARY	
<p>This report provides an overview of activity within ULC locality in November 2014</p> <p>The meeting was well attended. The main topics of discussion were:</p> <ol style="list-style-type: none"> 1. Finance & Commissioned services 2. Finance & Peer Reviews 3. Primary Care Foundation 4. Primary Care Co-Commissioning 	
FURTHER ACTION REQUIRED:	
EQUALITY AND DIVERSITY: Confirmed that any changes to service or procedure introduced as a result of this report do not impact adversely on any of the protected groups covered by the Equality Act 2010.	

CHAIRPERSON'S REPORT

Chairperson's Name	Dr Sanjay Wahie
Committee Name	ULC Locality Executive Meeting
Date of Meeting	
Name of Receiving Committee	Governing Body
Date of Receiving Committee Meeting	16 th December 2014
Officer Lead	Gillian Gittins (Locality Executive Support Officer)

<i>The top 3 risks identified during the meeting & initials of lead with designated responsibility</i>		
1.		
2.		
3.		

Attendance at the meeting[#]:	Excellent
---	-----------

<i>Was the agenda fit for purpose and reflective of the committees Terms of Reference?</i>	Yes
---	-----

Narrative report outlining the key issues of the meeting
<p><u>ULC GP Locality Meeting</u></p> <p><u>Finance & Commissioned Services Update</u> Kim Godsman presented at the meeting to discuss contract performance issues with WWL. KG reported that currently the CCG is facing significant financial pressures, especially with WWL activity and is seeking to establish what could have contributed to this.</p> <p><u>Finance & Referral Peer reviews</u> Catherine O' Neil from finance presented to update the group on the Finance Peer reviews and referred to the SCEOS 5 High Activity Patient Audit of discharge letters report. CN reported that 8 out of 11 practices have submitted the patient discharge letters and patient journey information. PL referred to the SCEOS 2014/15 Referral Peer Review Summary Report. The report splits each speciality into tables and summaries the key outcomes of the reviews and how and when they will be implemented.</p>

[#] **Excellent** (well attended) **Acceptable** (some apologies) **Unacceptable** (not quorate)

Primary Care Foundation

PL referred to the Primary Care foundation: 'Managing access and urgent care in your practice document', the aim is to support GP practices within Wigan to better manage urgent care demand. Practices are asked to express an interest by 30th November.

Winter Resilience

There was a discussion on the projects agreed for Winter Resilience. The plans will run up to March 2015.

Primary Care Co – Commissioning

PL referred to the Primary Care Co-Commissioning Locality briefing document. PL informed that the purpose of the paper is to brief member practices on primary care co-commissioning and to seek their views on the CCG's proposed approach.

There are 3 co commissioning options

1. Remain the same – no change
2. Joint Commissioning with CCG and Area team
3. Full Delegation

All 3 options were discussed at Masterclass and the clinical leads recommended that full delegation option should be chosen.

PL informed that there will be some conflicts of interest and staffing issues that will need to be resolved. The process of application will commence the beginning of January with the start date of April 2015. More detailed information on which elements of primary care will be fully delegated has been requested.

All contract holder GPs around the table recommended full delegation.

NWAS information

SW referred to the NWAS letter in regards to changes that will be occurring within the North West Ambulance service. NWAS informed that they will be changing the questions GPs are asked when dialling the ambulance service. Practices will be offered an ambulance within 4 hours without going through a list of clinical questions, if a patient does require a more emergent response then some questions will be asked. SW informed that it will be based on clinical needs now and not timings.

Prime Minister Challenge Fund

SW referred to second wave of the Prime Minister's Challenge Fund. GPs can now bid for a share of £100m in the second wave of The Prime Minister's Challenge Fund, improving access to GP services for patients.

From 29th October 2014, practices are eligible to bid against the fund by working with peers to develop proposals for improving and extending patient access to services.

Bids will need to serve a minimum population of 30,000.

New Enhanced Services

SW informed that the uptake for the Ring Pessaries, Inter Practice Anticoagulation and Inter Practices Joint Injections has not been as high as anticipated

GPs reported the following

- There are no guidelines
- They are unaware as to who is providing what service and what times they would be able to provide the service
- Would like a inter practice referral form.

GG to forward this information to the Project Manager and re-circulated the service specifications.

ULC Practice Managers Meeting

Active Living

Alison Griffin from Active Living presented to talk about setting up health walks from practices. Alison is happy to attend PPGs and talk about setting up a health walk from practices. The walks will be supported for up to 12 weeks. Hopefully by the end of the 12 weeks, walks will be taken over by PPG members, and there is expression of interest forms for those interested in leading the walks. Walk Leader Training will be provided.

Primary Care Co-commissioning

JC gave a brief update on Co-commissioning and reported the following:

- NHS England announced co commissioning of primary care in May
- Co Commissioning basically means powers returning from the Area Team to CCGs
- CCG's were asked to submit initial expressions of interest in June.
- Solely applies to general practice at this point – not all of primary care;
- National guidance to come out on Monday 10th November.
- CCGs will be asked to choose which level of co commissioning they want to apply for.
- There are major issues on conflict of interest to be resolved – national guidance to be published on this.
- Deadline for applications will be January

First Aid Training

JC read through email that she had received from Traci Smith in regards First Aiders and gave clarification on who can give First Aid Training,

Unplanned Admissions

Some PMs reported that when ambulance presented at a patient's home, the paramedic was not aware of the care plan that was in place. There was also confusion to who fills out the 'Action for NWS' section on the care plans. GG to report back to RW and gain feedback.

CQC

JC reported that practices need to maintain a training log for 3 years and all practice staff will need a DBS check.

NWAS Letter

Sharing information about patients for example if the patient has a dangerous dog etc. JC queried if there is a data sharing agreement in place with NWAS?

Referral Points

PM's asked if there could be a centralised point for referral numbers – for example number for Mental Health / Paediatrics.

Agreed actions from the Meeting	Name of lead with designated responsibility for the action/s
Finance & Referral Peer reviews – All practices to submit the reports	All
New Enhanced Services – List of what services practices are providing.	GG
Unplanned Admissions –Feedback discussions to RW	GG

Chairperson's Additional Comments

--

This page is intentionally left blank