

NHS CUMBRIA CLINICAL COMMISSIONING GROUP
MINUTES OF THE ALLERDALE LOCALITY EXECUTIVE
 Thursday 9 June 2016, 09:00
 Ann Burrow Thomas Health Centre, Workington, CA14 2EW

Present:	Anita Barker	Network Deputy Director (Chair) (AB)
	Mel Bradley	Primary Care Development Lead (MB)
	Simon Desert	Lead GP Cockermouth (SD)
	Ann-Marie Grady	Senior Commissioning Manager (AMG)
	Brian Money	Lead GP Maryport (BM)
	Julie Saxton	Lead GP Solway (AT)
In Attendance:	Lyn Hardie	Locality Administrator (minute taker) (LCH)
	Vanessa Connor	ICC Manager (Cockermouth/Maryport) (VC)

AL 50/16 **AGENDA ITEM 1: Chairs Welcome & Apologies** *Action*

Apologies were received from; Niall McGreevy, Allerdale lead GP & Lead GP Workington; Sue Gallagher, Lay Rep.

AL 51/16 **AGENDA ITEM 2: Declarations of Interest**

The GPs declared an interest in Item 4 as all the practices who sign up for GainShare have a financial interest.

AL 52/16 **AGENDA ITEM 3: Minutes of 12th May 2016 meeting & Action Log**

Resolved: The minutes of the above meeting were agreed as an accurate record

Action Log:

AL22/2014 Ophthalmology GPwSI service at Cockermouth – It was reported that the delay is result of lack of maintenance agreement between practice and GPwSI services. The CCG provided a draft SLA to Castlegate but this requires provider to provider agreement on content to resolve.

Action: AMG will discuss the situation with Cockermouth Practice Manager. **AMG**

AL 53/16 **AGENDA ITEM 4: Productive Primary Care Lead Update – Gain Share**

MB went through the pathology, radiology and prescribing indicative budgets for Allerdale along with the test ordering data for each practice.

The members discussed the figures and a number of questions arose.

ACTION: MB to find out whether a practice can request just a single pathology test or do all the associated tests have to be done.

MB

MB went on to talk about how GainShare would work within ICCs. It had been intended that each ICC group would work on GainShare, but agreement has not been reached between Cockermouth and Maryport with Maryport suggesting joining with Eden Primary Care Home practices instead. Final arrangements to be agreed between practices and CCG.

JS confirmed that she had spoken with Kirkbride, who had not signed up for GainShare because they felt any potential savings should be linked to individual practice rather than across an ICC.

It was recognised that these issue cannot be resolved within Locality but will require CCG wide decision.

AL 54/16 **AGENDA ITEM 5: Feedback from North Clinical Management Group**

The group met last week with Caroline Rea (Interim North Network Director) and the three Locality GP Leads. There had been discussions around the potential for different way of working across North and South Cumbria to reflect Success Regime and Vanguard footprints which could have implications for staffing and clinical lead organisation.

Other items discussed:

- CCG has been without an accountable officer since Nigel McGuire left the post towards the end of last year. Peter Rooney and Hugh Reeve had been acting up, but the vacancy has now been advertised, with interviews on 22nd June.
- David Stout has now finished his Success Regime role with CCG and Caroline Rea has taken over on an interim basis, along with her own work as Director of Primary Care and there is a meeting today to discuss how this will work until an accountable officer is put in place.
- Niall McGreevy and AB to meet with Stephen Eames (Chief Executive, Acute Trust) at the end of June to discuss ICCs. There is a provider led Delivery Board led by NCUH and CPFT and it is thought that this board will have overall responsibility on the delivery of ICCs. Niall has been invited to join as ICC lead.

AL 55/16 **AGENDA ITEM 6: Success regime Update**

The Pre-Consultation Business case (PCBC) went to the Governing Bodies of all partner organisations at the end of May but consensus was not reached

on all the proposals so further work is being done to attempt to agree a consensus document.

Once Governing Bodies sign off the PCBC it will go to NHSE who will need to approve it before public consultation can start.

The members were unclear on who sits on our Governing Body and AB will provide a list.

ACTION: AB to provide list of Governing Body members for the group.

AB

AL 56/16 **AGENDA ITEM 7: Review of Executive meeting role in relation to ICCs/ Allerdale priorities for ICCs.**

The members discussed the most useful forum for GPs. There appears to be no requirement for localities to have an exec meeting in the CCG constitution, but it was agreed there is some merit in Allerdale ICCs coming together on a monthly basis.

The meeting discussed the clinical engagement budget and suggested that given priority of ICCs and need to ensure practice involvement in their development each ICC should be allocated a proportion of the budget to use for practice engagement. This would also cover the cost of ICC lead GP time. After discussion a recommendation was agreed to be taken forward to the Finance Director by NMCG and AB.

RECOMMENDATION: share of clinical engagement budget to be allocated to each ICC. This would be monitored by the ICC Managers and reported to the Governing Body as required.

Workington ICC Update: Looking to bring together DN, Rehab & FEAT teams into one Workington ICC team with a single referral point. The members discussed this and in particular raised concerns about state of IT systems to facilitate this. It was also noted that there would need to be honorary contracts between the organisations to allow clinical access to relevant patient records.

AL 57/16 **AGENDA ITEM 8: Update from £5 per head locality schemes.**

The members discussed the latest activities document on the locality schemes. The evaluation doesn't show the effect of the schemes on non-elective admission figures as the performance figures aren't out until later this month.

It was noted that activity data is not being received from Keswick schemes.

Cockermouth Frail Elderly Admission Prevention Scheme: The scheme is losing its two nurses, but there are interviews next week for replacements.

Solway: In Solway there were two schemes in 1516 (case manager (£59k

and enhanced rehab team £158k). Funding for enhanced rehab team was withdrawn by CCG in December but Case Manager scheme funding was continued. However following staff changes case manager left and agreement has been reached to use this funding to partially fund the enhanced rehab service.

AL 58/16 **AGENDA ITEM 9: AOB**

Ophthalmology/Cardiology referrals: BM brought up the issue of patients being referred to a specialist and being told there are no cardiology or ophthalmology appointments.

AB suggested this is put on SIRMS so it can be escalated.

ACTION: BM to put the issue on SIRMS

BM

ACTION: AB will ask the issue to be raised at the Contracts discussion meetings.

AB

AL 59/16 **AGENDA ITEM 10: Date and time of next meeting approved:**

09:00 – 11:30 Thursday, 14 July 2016, Ann Burrow Thomas Health Centre, Workington CA14 2EW
