

**SWL Primary Care Quality, Prevention and
Innovation Working Group**

11th February 2016, 11:30am – 1:00pm Room 2.4 120 The Broadway,
Wimbledon, London, SW19 1RH

MINUTES

Members in attendance

Name	Organisation	Designation
Dr Nicola Jones (Co-Chair)	Wandsworth CCG	Chair, Primary Care Lead for SWL
William Cunningham - Davis	NHS England	Head of Primary Care, South London
Omid Gilanshah	NHS England	Assistant Head of Primary Care Commissioning
Dr John Linney	Croydon CCG	Clinical Lead
Nora Simon	NHS England	Assistant Head of Primary Care Commissioning
Mike Decoverly	NHS England	
Gareth King	NHS England	

Attendees

Name	Organisation	Designation
Julie Freeman (arrived at 12:10pm)	London Wide LMC's	Director of Primary Care Strategy
Dr Julius Parker (arrived at 12:00pm)	Surrey and Sussex LMC's	Chief Executive

SWL Collaborative Programme Team

Name	Organisation	Designation
Gurvinder Chana	South West London Collaborative Commissioning	Governance Lead
Stephen Ifegwu	South West London Collaborative Commissioning	Project Management Support
Joanne Devlin	South West London Collaborative Commissioning	Interim AD Primary Care and Out of Hospital

Apologies

Name	Organisation	Designation
Dr Jane Fryer (Co-Chair)	NHS England	Medical Director, South London
Dr Andrew Murray	Merton CCG	Chair
Dr Caroline Chill (on behalf of Dr Andrew Murray)	Merton CCG	GP
Dr Kate Moore	Richmond CCG	Clinical Lead
Dr Pete Smith	Kingston CCG	GP, Clinical Lead
Sally Brearley	Sutton CCG	Lay Member
Dr Brendan Hudson	Sutton CCG	Chair
Marilyn Plant	Community Education Provider Networks / SWL CC	Community Education Provider Networks (CEPN) Lead / Workforce Lead
Ariadne Siotis	Health Education South London	Health Education South London and KSS (HESL) Lead

Dave Curtis	Merton CCG	Healthwatch Representative
Charlie Ladyman	Croydon CCG	Healthwatch Representative

Item	Title	Action
1	Declaration of Interest – Dr Nicola Jones	
	No new declarations of interest were made.	
2	Welcome, Introductions and Apologies – Dr Nicola Jones	
	The Chair welcomed the attendees and noted the apologies. It was noted that the membership was not quorate as there was no clinical representative from NHS England and no HESL or CEPN representative.	
ITEMS for DISCUSSION		
3	Minutes of the last meeting 03.12.2015 – All	
	The minutes of the last meeting dated 03.12.2015 were AGREED as an accurate record of the meeting.	
4	Matters Arising / Action Log – All	
	The action log was reviewed: All outstanding actions are on the agenda.	
5	PMS Review – William Cunningham Davis / All	
	<p>William updated the group on the premium specification London offer (tabled paper) with NHSE focusing on three key areas in their strategic commissioning framework:</p> <ul style="list-style-type: none"> • Online access • Saturday morning • Additional access. <p>NHSE carried out a financial modelling and costing exercise on the initial premium specification requirements and they realised the items on the specification were too many and unaffordable. Opinions and comments were then taken from the LMC, CCG's, doctors etc. to refine the contract and help in reducing some of the KPI's, mandatory and optional requirements in the contract to an affordable level.</p> <p>This has actually resulted in Saturday morning going up to £4 taking into account additional capacity, so instead of just paying for receptionist's and staff, the doctors time is also paid for depending on what individual SWL practices want. In online technology SWL are already implementing it as a strategy but discussions will take place whether it should be included in the contract. In additional access, NHSE will carry out a further affordability exercise.</p> <p>William circulated a paper of the potential new premium specification with KPI's in the contract and the core obligations that has to be agreed in the contract by the practices and CCG's and if anything is not wanted in the contract, clarification on what the mitigating circumstance of not wanting it will be requested.</p> <p>Mike presented a SWL PMS review progress matrix. Two key areas that they've been working on:</p> <p>Financial modelling: - Figures have been updated to January 2016 reflecting current financial positions, which will help with in depth review on what is currently being paid</p>	

	<p>to each SWL PMS practice for services provided within each CCG.</p> <p>Mike and Gareth will be going around to each CCG to obtain information on commissioning funding challenges they are facing, so any information accumulated can be included in their financial modelling, helping to provide fairly accurate costing's and giving the CCG's an understanding of what money they have in their budgets and how they can spend it on services.</p> <p>Existing PMS contract Modelling: - A review of existing PMS contracts with PMS practices is also being undertaken to look at their current service areas and compare it against the new NHSE PMS London contract, providing an accurate picture of what the practices are currently doing and seeing which targets they are meeting and what needs to be incorporated into their existing contracts from the new PMS London contract offer.</p> <p>A deprivation criteria will be included in the modelling for the 6 CCG's and this will help them in differentiating what level of funding needed for deprivation areas, which will also take into account the IMD score for individual practices.</p> <p>PMS contract papers with local specification will be taken to the Joint Committee in March for review and agreement on SWL CCG commissioning intentions on which areas they want to concentrate on and looking at affordability.</p> <p>Nicola requested clarification on behalf of the SWL CCG's on the PMS premium payments to GMS practices, whether discussions had taken place on potential MPIG payments being removed if GMS practices opt into the PMS premium. William confirmed that conversations will be commenced with practices on MPIG and PMS premiums and how funding will be distributed to ensure equality and fairness in payments.</p> <p>The group will look to implement a PMS contract review by the end of June to get clarification on the PMS premium offer to GMS practices and how this affects MPIG payments.</p> <p>Nicola will request legal advice from NHSE, along with discussions with the LMC on the ramifications of premium payments to GMS practices and potential removal or reductions of their MPIG.</p> <p>ACTION: Invite Mike and Gareth to March meeting for progress and follow up presentation on financial modelling and commissioning intentions work with each CCG.</p>	<p>Gurvinder Chana</p>
<p>6</p>	<p>Transforming Primary Care Delivery Plan – Practice Baseline – Nicola Jones</p>	
	<p>Nicola confirmed help has been received from HLP NHSE on the aggregate plan and it is still being updated and refined against the strategic commissioning framework.</p> <p>Nicola confirmed that SWL CCG's need to look at the outcome of the due diligence work being carried out and recommendations from this will be used to turn around how things are being managed from an NHSE budget point of view to what is being spent by CCG's at a local level looking at practice's and their activities. The CCG's need to look at a way they can do this efficiently.</p> <p>Joanne confirmed discussions have taken place at the delivery group looking at the plan to deliver the specifications quickly but needing to know if CCG's are clear on the starting points across the practices on their patch on things like access, digital and I.T. usage. Merton CCG for example has carried out a survey and review on what</p>	

	<p>practices in their area are doing.</p> <p>Joanne clarified that the due diligence work will be used to analyse for example practice properties and legacy contract issues. Recommendations will be made to do a SWL practice review and to generate a range of key themes that will be looked at and used to pose questions to the practices, helping to get a clear picture of key issues or common problems practices might be having and this group can contribute through discussions to come up with possible recommendations from findings.</p>	
7	<p>Quality Reports – Quality in SWL (an example) – Nicola Jones</p> <p>Nicola stated that SWL CCG’s want to improve the quality of primary care through managing their contracts and budgets better with improved data collection at a local level but discussions have to take place on how to collect the information and what type of quality indicators to be used and the role of the group, whether just being involved in a data collection exercise or helping to analyse any data obtained to make sense of it.</p> <p>Joanne confirmed a quality paper was distributed and the clinical board would like to get a picture of what quality looks like in SWL and what quality standards are being used to analyse services in e.g. primary care and what quality indicators are being used.</p> <p>Nicola reiterated it would be helpful if there was some supporting mechanism where data is collected and not done by CCG’s on an individual basis. In other to measure quality it is important to understand what aim is to be achieved and to get relevant indicators that provide answers to questions being asked at a SWL level.</p> <p>William confirmed the importance of getting clarification on whether it will just be a way to look at and analyse a few quality indicators or performance tool or both. It would be sensible to do this in an integrated way with a central repository for all the information collected to analyse and find similarities or differences in SWL level.</p> <p>Julie expressed the need to prioritise which measures of quality will be useful to focus on, helping to make information gathered manageable and easy to understand to achieve quality goals.</p> <p>Nicola expressed the need to do this work in an integrated governance way looking at finance, performance and quality together. Creation of a quality dashboard and bringing in a data analyst to help the CCG’s to gather information and analyse any data obtained.</p> <p>There were discussions around having a dedicated Data analyst resource that could look at this piece of work.</p> <p>ACTION: set up a SWL Quality event / workshop looking at what good quality looks like in primary care; use this as a scoping exercise for sharing some good ideas – to be organised in the next 2-3 months – invite LMC too.</p>	Gurvinder Chana
8	<p>Future Meetings - All</p> <p>The joint committee meets in March 2016 for the last time. Nicola Jones suggested continuing with this group post March; at least until the PMS review is over and to get monthly dates in the diary going forward.</p>	Gurvinder Chana

ITEMS for NOTING and INFORMATION		
9	Any Other Business - All	
	None.	
	The meeting closed at 1:00pm	

Date and Venue of next meeting

SWL Primary Care Quality, Prevention and Innovation Working Group:
 Date: Thursday 03rd March 2016
 Time: 14:30pm – 16:00pm
 Venue: Meeting Room 2.1, 120 The Broadway, Wimbledon, SW19 1RH

APPROVED 03.03.2016