

REPORT TO THE MERTON CLINICAL COMMISSIONING GROUP GOVERNING BODY

Date of Meeting: 20th May 2016

Agenda No: 9.1

Attachment: 12

Title of Document: Approved Minutes of the South West London Primary Care Joint Committee	Purpose of Report: For Note/Discussion
Date, author details: As per details on each attachment.	
Executive Summary: The minutes of the following meetings are attached: 04.02.16; 10.03.16 This item will also include a verbal summary from the CCG's representative on this Committee Chair regarding key issues, risks and mitigations.	
Key sections for particular note (paragraph/page), areas of concern etc: Whole document	
Recommendation(s): For Note & Discussion	
Committees which have previously discussed/agreed the report: N/A	
Financial Implications: N/A	
Implications for CCG Governing Body: N/A	
How has the Patient voice been considered in development of this paper: N/A	
Other Implications: N/A	
Equality Assessment: N/A	
Information Privacy Issues: N/A	
Communication Plan: All formal committee minutes are posted on the CCG's website as part of the Governing Body papers	

**South West London Primary Care Joint
Committee Meeting in public**

Thursday 4th February 2016 18:00pm – 19:00pm,
Room 6.2/6.3, 120 The Broadway, Wimbledon, London, SW19 1RH

MINUTES

Members in attendance

Name	Organisation	Designation
Carol Varlaam	Wandsworth CCG	Lay Member (Committee Chair)
Graham Mackenzie	Wandsworth CCG	Chief Officer
Dr Nicola Jones	Wandsworth CCG	Chair
Adam Doyle	Merton CCG	Chief Officer
Dr Andrew Murray	Merton CCG	Chair
Peter Derrick	Merton CCG	Lay Member
Paula Swann	Croydon CCG	Chief Officer
Dr Tony Brzezicki	Croydon CCG	Chair
Tonia Michaelides	Kingston CCG	Chief Officer
Dr Naz Jivani	Kingston CCG	Chair
Dr Chris Elliott	Sutton CCG	Chief Officer
Dr Brendan Hudson	Sutton CCG	Chair
Kathryn Magson	Richmond CCG	Chief Officer
Dr Graham Lewis	Richmond CCG	Chair
Liz Wise	NHS England	Programme Director, Transforming Primary Care

Attendees

Name	Organisation	Designation
William Cunningham Davis	NHS England	Head of Primary Care South London
Nora Simon	NHS England	Assistant Head Primary Care Commissioning
Omid Gilanshah	NHS England	Assistant Head Primary Care Commissioning
Toyin Akinyemi	NHS England	Head of Finance, Primary Care Commissioning
Mike Sexton	Croydon CCG	Chief Finance Officer
Cllr Caroline Cooper-Marbiah	Merton CCG	Health and Wellbeing Board Representative
Jamie Gillespie	Wandsworth CCG	Healthwatch Representative
Adrian Attard (representing Pete Flavell)	Sutton CCG	Healthwatch Representative

John Anderson (representing Paul Pegden-Smith)	Richmond CCG	Healthwatch Representative
Dr Julius Parker	Surrey and Sussex LMCs	Representative
Steve Uttley	RSM	Associate Director
Jessica Kohler	Capsticks	Partner

SWL Collaborative Programme Team

Name	Organisation	Designation
Joanne Devlin	SWL Collaborative	Interim AD Out of Hospital and Primary Care
Gurvinder Chana	SWL Collaborative	Governance Lead
Claire Wilson	SWL Collaborative	Senior Strategy Manager
Timothy Bennett	SWL Collaborative	Senior Strategy Manager

Members of the public

Name	Organisation	Designation
Kalsoom Bibi Qureshi		
Eileen Fairclough		

Apologies

Name	Organisation	Designation
Sally Brearley	Sutton CCG	Lay Member
Helen Pernelet	Croydon CCG	Lay Member
David Knowles	Kingston CCG	Lay Member
Bob Armitage	Richmond CCG	Lay Member
Pete Flavell	Sutton CCG	Healthwatch Representative
Steve Hardisty	Kingston CCG	Healthwatch Representative
Paul Pegden-Smith	Richmond CCG	Healthwatch Representative
Dave Curtis	Merton CCG	Healthwatch Representative
Cllr Ruth Dombey	Sutton CCG	Health and Wellbeing Board Representative
Cllr Christine Percival	Richmond CCG	Health & Wellbeing Board Representative
Cllr Julie Pickering	Kingston CCG	Health and Wellbeing Board Representative
Cllr Maggie Mansell	Croydon CCG	Health & Wellbeing Board Representative
Cllr Jim Maddan	Wandsworth CCG	Health & Wellbeing Board Representative
Charlie Ladyman	Croydon CCG	Healthwatch Representative
Richard Jeffery	NHS England	Director of Financial Management, London Region
Matthew Trainer	NHS England	Area Director South London
Dr Jane Fryer	NHS England	Medical Director South London
Hardev Virdee	Wandsworth CCG	Chief Finance Officer
Julie Freeman	London Wide LMC	Representative
Dr Amer Salim	Merton, Sutton & Wandsworth LMC	Representative
Dr Marek Jarzembowski	London wide LMCs	Representative

Item	Title	Action
1	Declarations of Interest – Carol Varlaam	
	No new declarations of interest were declared.	
2	Welcome, Introductions and Apologies – Carol Varlaam	
	The chair welcomed the attendees and noted the apologies.	
3	Minutes of the Joint Committee meeting held on 12.11.2015 – Carol Varlaam	
	The minutes of the last meeting were APPROVED as an accurate record of the meeting.	
4	Action log from meeting held on 12.11.2015 – Carol Varlaam	
	The action log was reviewed and all the actions from the minutes of 12 th November 2015 are now complete.	
5	Matters arising not on the agenda – Carol Varlaam	
	None	
6	SWL Collaborative, Transforming Primary Care Delivery Plan Review – Graham Mackenzie	
	<p>Graham Mackenzie introduced the paper and explained that the focus of the paper is around the strategic work around transforming primary care across South West London. He explained that following the Joint Committee meeting in November, the SWL Primary SPG met with Simon Weldon and colleagues from NHS England following a stocktake exercise to review SWL's progress in strategic planning and development for transforming primary care. In the course of this stocktake, there was strong recognition of the range of work underway in each of SWL's CCGs against the London specifications for General Practice. However at that stage, it was felt that SWL were not able to demonstrate or describe in sufficient detail an overall collaborative strategic approach for on-going progress for this programme of work across SWL.</p> <p>SWL SPG therefore agreed to undertake some further work, which has been done at local CCG level in the last 2-3 months with some support from colleagues in the Healthy London Partnership team.</p> <p>Graham explained that the paper represents the detail of the work and illustrates the quality around the work that is already in progress or is planned in SWL in the next 2-3 years; all of which is aimed to get SWL CCGs to a point in 2018/19 where we are fundamentally and consistently meeting the London Specifications in common across SWL.</p> <p>Nicola Jones provided some examples of some of the key areas of focus across SWL:</p> <ul style="list-style-type: none"> • Access – choice of access options, including rapid access and patient online • Coordinate Care – development of MDT and MCP models • Proactive Care – co designing services and expert patient programmes <p>Nicola highlighted that this piece of work has enabled shared learning and there is still some reflecting to do on the on going progress and monitoring of this plan. There are opportunities for CCGs to share best practice. It is important to</p>	

	<p>understand what the baseline is to enable monitoring progress of this going forward.</p> <p>She summarised that the next steps following the development of this plan is to look at the SWL Collaborative shared ambition for transformation and work together in finalising the CCG plans and agreeing a SWL Collaborative approach to track progress going forward.</p> <p>The Joint Committee NOTED the plan and AGREED the next steps.</p>	
7	<p>Delegated Commissioning – Graham Mackenzie / Mike Sexton</p>	
	<ul style="list-style-type: none"> • Feedback on delegated commissioning <p>It was noted that 5/6 CCGs have formally submitted their applications to take on delegation from 1st April 2016. Graham Mackenzie explained that there has been a significant amount of progress made since the submission of the applications. Each application has been through a process of moderation at regional level by the London team and also nationally by NHS England. Each of the of the five CCGs has received individual feedback on that moderation process, that has identified some areas of work to do to strengthen the arrangements prior to taking on the additional responsibilities. This feedback is summarised in paper 05. Some of the actions apply to all of the CCGs and some of them are more specific to individual CCGs based on the details in the applications submitted.</p> <p>Graham summarised that this paper is here for information to assure the Joint Committee that we are tracking the progress against the work required in the action plans across SWL ahead of 1st April 2016.</p> <p>The Joint Committee NOTED the paper.</p> <ul style="list-style-type: none"> • Financial and legal due diligence <p>Mike introduced the legal and financial due diligence reports. He explained that this piece of work was commissioned in September 2015 and RSM and Capsticks were appointed to carry out the due diligence. Both RSM and Capsticks have worked very closely with NHS England and a comprehensive report has been produced of their findings and recommendations. He informed the Joint Committee that a draft action plan is being put together following the recommendations to follow up any actions and this will be brought to the next Joint Committee meeting in March 2016.</p> <p>Action: Draft action plan to be finalised and brought to next Joint Committee meeting</p> <p>Steve Uttley from RSM provided an brief overview of the Financial due diligence report:</p> <ul style="list-style-type: none"> • Carried out this piece of work at a CCG level • Look at key financial risks around budgets, QIPP and accruals • Budgets – majority of the budgets were overspending, budgets had not been shared with GP practices and have been managed centrally • QIPP – large shortfall in delivering the 2015/16 target • Carried out GP surveys around contract monitoring • Put together some mitigations which will feed into the overall action plan • A number of recommendations have been proposed following this piece of work; financial reporting, accruals, contract management 	<p>Mike Sexton / Graham Mackenzie</p>

Naz Jivani expressed concerns and apprehension around the outcome of this work and the lack of clarity around the outstanding financial issues still not resolved with the practices. He said that it feels like there is still a lot of work that needs to be done and questioned whether the next steps are actually carried out by RSM or individual CCGs have to work to a granular level to assess each of the financial risks highlighted in the reports.

Mike Sexton said that some of these risks will be picked up as part of the draft action plan which is being put together by CCGs and NHS England. There will be some issues that will need to be progressed collectively across the six CCGs but there will also be some actions that are CCG specific which will need to be incorporated as part of the action plan.

Naz Jivani acknowledged Mike's comments, however explained that this needs to be signed off before the end of March by CCG Governing Bodies to be able to take on delegated commissioning on 1st April 2016.

Mike Sexton provided some assurance around one of the biggest risks identified across all six CCG's – budget setting. He explained that this piece of work is already underway by NHS England and the five SPG leads. He assured the Joint Committee that in terms of any significant legal challenges hidden or liabilities that SWL CCG's wouldn't be aware of; there is nothing that has come out of the due diligence piece of work that suggests there is a massive contractual issue. The types of issues that have been surfaced contractually are around DES's which in themselves carry a fine line risk.

Liz Wise explained that NHS England is working through the approach to the budget setting for next year. She explained that the allocation she has seen is a capitation allocation to each CCG for primary care.

Brendan Hudson, on behalf of Sutton CCG also expressed his concerns around the outcome of the financial due diligence work. He said that Sutton CCG has identified premises costs as one of the biggest risk and in particular the fact that the district valuer has not valued Sutton practices for five years. Sutton CCG is writing to NHS England asking to be indemnified against the risk of that amount being significant.

Jessica Kohler from Capsticks provided a brief summary of the work that was carried out supporting the legal due diligence piece of work:

- Capsticks did not review all contracts; in specifics Capsticks did not review any GMS contracts
- Looked mainly at generic PMS and APMS contracts for each area
- Looked at a legacy list provided by NHS England
- Looked at breach and CQC notices
- Provided a list of recommendations for CCGs and NHS England to consider individually or to work jointly around
- This joint committee will cease to exist once the delegation agreement has been signed
- Managing of conflicts of interests – delegated CCGs will need to have a robust process for managing conflicts

The Joint Committee NOTED and ACCEPTED the financial and legal due diligence executive summaries from RSM and Capsticks and NOTED NHS England's

response regarding these reports.

- **Delegation agreement**

It was noted that all CCGs have received the delegation agreement and the submission date for this agreement is 26th February 2016.

- **Proposed operating model**

Graham Mackenzie presented a future working arrangements paper and highlighted three key areas of proposed operational arrangements under delegation:

- Governance
- Commissioning Support
- Strategy and Transformation

He explained that there is still some potential to continue to work together across SWL. The platform for governance for delegated commissioning is the local committee within each CCG. In this context, this joint committee will cease effect from 31st March 2016 on the assumption that all the CCGs except Croydon will proceed with delegation. Croydon CCG will continue in shadow form at level 2 delegation. There is still some scope for shared governance continuing across SWL – a proposal to set up an advisory panel. This panel will be a panel that meets adhoc to discuss common issues / themes across SWL, such as managing conflicts of interest. There is some potential for bringing together local experts; clinically and managerially to provide some local support to one another.

Brendan Hudson supported the creation of an adhoc advisory panel and highlighted that this is a time of transition, so it will be a great vehicle for CCGs to come together and discuss common problems and particularly legacy issues.

Naz Jivani and Adam Doyle also highly supported the created of an advisory panel and asked how this panel would be made up.

Graham Mackenzie agreed for a draft Terms of Reference to be brought to the next Joint Committee to proceed this work forward.

Action: Draft ToR for Advisory Panel to be brought to the next Joint Committee meeting.

In terms of commissioning support, as part of taking on the full responsibilities for level 3 delegated commissioning, each CCG will need to ensure that they have sufficient capacity and capability in their workforce to manage the range of contract, financial and performance management issues related to the commissioning of primary medical services.

Tonia Michaelides supported the approach to develop a shared commissioning support service and highlighted that it is important to keep the legacy continuing.

Graham summarised that overall delegation is an important enabler of strategy and transformation, therefore when ceasing the joint committee, it is important to ensure that some of the working groups supporting the joint committee currently (Capital and Estates Forum and Quality, Prevention and Innovation Working Group) are

Graham
Mackenzie

	<p>continued under different workstreams enabling and supporting the wider transformation strategy over time.</p> <p>The Joint Committee CONSIDERED and CONFIRMED that subject to the formal commencement of level 3 delegated commissioning by CCGs in SWL in 2016/17 (and for iii and iv subject to local CCG Governing Body discussions/decisions):</p> <ul style="list-style-type: none"> i) the SWL Joint Committee for Primary Care will cease with effect from 31st March 2016; ii) an Advisory Panel will be established to support local delegated commissioning; iii) a primary care commissioning support team will be identified/established for SWL under the direction of the SWL CCGs. This is subject to further work on the location and operation of this team and the outcomes of the current workforce review across London; iv) the Primary Care Delivery Group will continue to lead collaborative work for the strategic transformation of primary care across SWL. 	
8	Personal Medical Services – Liz Wise / William Cunningham Davis	
	<p>Liz Wise updated the Joint Committee on the current progress to date on the PMS Review:</p> <ul style="list-style-type: none"> - Slide deck sets out the background to the PMS review and agreements - It is a national requirement to do this, but it is also an enabler in transforming primary care, particularly delivering elements of the strategic commissioning framework - Significant piece of work - NHS England noted the challenging timescales and offered a three month extension - Have until the end of June 2016 to agree with practices the new PMS contracts - CCGs have been briefed on the London offer - The information in this slide deck is slightly out of date – progress has now been made on the agreement of the key performance indicators and the premium specification and the core - There is still some work to do on some of the detail and how individual contracts will work - Agreement has been sought from London wide and Surrey and Sussex LMCs - Next steps – NHS England to start working with CCGs to start drawing out CCGs commissioning intentions for PMS <p>The Joint Committee NOTED and ACCEPTED the progress on the PMS Review and NOTED the requirement to review PMS contracts by March 2016 and to offer and to consult by June 2016.</p>	
9	Finance Report Month 9 – Toyin Akinyemi	
	<p>Toyin Akinyemi presented the month 9 financial position for SWL:</p> <ul style="list-style-type: none"> - The financial position for SWL Primary Medical Services showing an overspend of £1,286k against issued budgets - The overspend is largely due to under achieved planned QIPP - Medical services are showing an overspend of £1,286k (0.8%) of which £1,988k is attributable to QIPP under-delivery offset by a non-recurrent release of 2014/15 accruals (£968k) across South West London. - Annual budgets are allocated net of £2.7m QIPP savings across South West London, but including the contingency allowance (£899k) which has 	

	<p>been allocated to budgets.</p> <ul style="list-style-type: none"> - There has been a year on year growth of 0.5% in South West London's weighted population from April 2014 to April 2015. The capitation report shows a growth of 0.8% year to 1st October 2015 - The total planned QIPP for Primary Care across London Region is £12.7m of which £2.7m relates to SW London. There is likely to be significant under-delivery on the savings required on Medical services as a considerable proportion of the savings remains unsupported by schemes. - The total planned QIPP for Primary Care across London Region is £12.7m of which £2.7m relates to SW London. There is likely to be significant under-delivery on the savings required on Medical services as a considerable proportion of the savings remains unsupported by schemes. - Based on month 9 results the Medical services budget is forecast to be £1.5m (0.8%) overspent due to the QIPP position. <p>The Joint Committee NOTED the contents of the finance month 9 report and NOTED the current position of QIPP.</p>	
ITEMS FOR NOTING / INFORMATION		
10	Report back from Joint Committee Working Groups	
	<ul style="list-style-type: none"> • Finance and Contracting Working Group (Mike Sexton) NOTED • Capital and Estates Forum (Hardev Virdee) NOTED • Quality, Prevention and Innovation Working Group (Dr Nicola Jones) NOTED 	
11	Contractual Changes – action log (to NOTE) – NHS England	
	NOTED	
12	Open Space / Questions from the public – Members of the public	
	None	
13	Any Other Business - All	
	None	
	The meeting closed at 19:00pm	

Date and Venue of next meetings

10th March 2016

17:00pm – 19:00pm Room 6.2/6.3, 120 The Broadway, Wimbledon, SW19 1RH



Croydon, Kingston, Merton, Richmond, Sutton, Wandsworth CCGs and NHS England

**South West London Primary Care Joint Committee
Meeting in public**

Thursday 10th March 2016 17:00pm – 18:30pm,
Room 6.2/6.3, 120 The Broadway, Wimbledon, London, SW19 1RH

MINUTES

Members in attendance

Name	Organisation	Designation
Carol Varlaam	Wandsworth CCG	Lay Member (Committee Chair)
Graham Mackenzie	Wandsworth CCG	Chief Officer
Adam Doyle	Merton CCG	Chief Officer
Dr Andrew Murray	Merton CCG	Chair
Paula Swann	Croydon CCG	Chief Officer
Dr Tony Brzezicki	Croydon CCG	Chair
Tonia Michaelides	Kingston CCG	Chief Officer
Dr Naz Jivani	Kingston CCG	Chair
Dr Chris Elliott	Sutton CCG	Chief Officer
Dr Brendan Hudson	Sutton CCG	Chair
Kathryn Magson	Richmond CCG	Chief Officer
Dr Graham Lewis	Richmond CCG	Chair
Bob Armitage	Richmond CCG	Lay Member
Liz Wise	NHS England	Programme Director, Transforming Primary Care

Attendees

Name	Organisation	Designation
Pete Flavell	Sutton CCG	Healthwatch Representative
Cllr Maggie Mansell	Croydon CCG	Health & Wellbeing Board Representative
William Cunningham Davis	NHS England	Head of Primary Care South London
Nora Simon	NHS England	Assistant Head Primary Care Commissioning
Jonathan Weaver	NHS England	Managing Director of Primary Care
Richard Jeffery	NHS England	Director of Financial Management
Mike Sexton	Croydon CCG	Chief Finance Officer
Dr Amer Salim	Vice Chair	Merton, Sutton & Wandsworth LMC

SWL Collaborative Programme Team

Name	Organisation	Designation
Joanne Devlin	SWL Collaborative	Interim AD Out of Hospital and Primary Care
Gurvinder Chana	SWL Collaborative	Governance Lead

Claire Wilson	SWL Collaborative	Senior Strategy Manager
Kasia Gaj	SWL Collaborative	Primary Care Strategy Manager

Members of the public

Name	Organisation	Designation
Bibi Qureshi		

Apologies

Name	Organisation	Designation
Dr Nicola Jones	Wandsworth CCG	Chair
Peter Derrick	Merton CCG	Lay Member
Sally Brearley	Sutton CCG	Lay Member
Helen Pernelet	Croydon CCG	Lay Member
David Knowles	Kingston CCG	Lay Member
Cllr Christine Percival	Richmond CCG	Health & Wellbeing Board Representative
Cllr Ruth Dombey	Sutton CCG	Health and Wellbeing Board Representative
Cllr Julie Pickering	Kingston CCG	Health and Wellbeing Board Representative
Cllr Jim Maddan	Wandsworth CCG	Health & Wellbeing Board Representative
Cllr Caroline Cooper-Marbiah	Merton CCG	Health and Wellbeing Board Representative
Jamie Gillespie	Wandsworth CCG	Healthwatch Representative
Charlie Ladyman	Croydon CCG	Healthwatch Representative
Paul Pegden-Smith	Richmond CCG	Healthwatch Representative
John Anderson	Richmond CCG	Healthwatch Representative
Matthew Trainer	NHS England	Area Director South London
Dr Jane Fryer	NHS England	Medical Director South London
Omid Gilanshah	NHS England	Assistant Head Primary Care Commissioning
Toyin Akinyemi	NHS England	Head of Finance, Primary Care Commissioning
Hardev Virdee	Wandsworth CCG	Chief Finance Officer
Dr Marek Jarzembowski	London wide LMCs	Representative
Julie Freeman	London wide LMCs	Representative

Item	Title	Action
1	Declarations of Interest – Carol Varlaam	
	No new declarations of interest were declared.	
2	Welcome, Introductions and Apologies – Carol Varlaam	
	The chair welcomed the attendees and noted the apologies.	
3	Minutes of the Joint Committee meeting held on 04.02.2016 – Carol Varlaam	
	<p>The minutes of the last meeting were APPROVED as an accurate record of the meeting with the following amendments:</p> <ul style="list-style-type: none"> • Page 5 – change word value to valuer to read: district valuer has not valued Sutton practices for five years • LMC comments have been received from Julie Freeman: <ul style="list-style-type: none"> - Page 7, Item 8, penultimate point made by Liz wise - for consistency with the point made later in PMS Attachment 6, page 6, last point, is that the wording be exactly the same to read “This refers to Londonwide LMCs being ‘specifically consulted’ with re: the London offer”. 	
4	Action log from meeting held on 04.02.2016 – Carol Varlaam	
	<p>The action log was reviewed and all the actions from the minutes of 4th February 2016 are now complete.</p> <p>Graham Mackenzie provided a verbal update following discussions on the due diligence work at the last meeting. He explained that the draft action plan supported by the comprehensive tracker has now been superseded by the submission of the delegation agreement with the support of the side letter (agenda item 6).</p>	
5	Matters arising not on the agenda – Carol Varlaam	
	<p><u>Transforming Primary Care Delivery Plan</u></p> <p>Graham Mackenzie informed the joint committee that he, Dr Nicola Jones and Primary Care colleagues from the SWL Collaborative took a revised version of the transforming primary care delivery plan back to Simon Stevens following a second stock take and the discussions and feedback were very positive. The progress made across SWL was absolutely recognised and will be incorporated into the strategic planning process.</p>	
6	Delegated Commissioning – various	
	<ul style="list-style-type: none"> • Letter from Liz Wise (benefits of delegated primary care) <p>Liz presented a letter which she sent out to all Clinical Chairs of the SWL CCGs highlighting the benefits of delegation and supporting the CCGs in their decision to delegation. Dr Naz Jivani thanked Liz for the letter and said it was received just in time for submission.</p> <ul style="list-style-type: none"> • Feedback on delegation submission status <p>Graham Mackenzie reported that the five SWL CCGs have submitted and signed off their delegation agreements. He explained that this has been done on the basis of additional pieces of work, including the sign off the statement of assurance by NHS England colleagues and the completion and agreement of a side letter.</p> <p>A position statement following submission of the agreements was provided by each</p>	

CCG:

Wandsworth CCG – Graham Mackenzie

- WCCG have a Primary Care Committee in place
- The membership has been agreed
- Going to meet in seminar mode for the first two meetings in the financial year

Sutton CCG – Dr Brendan Hudson

- Primary Care Commissioning Committee and Programme board are in place
- A joint workshop was held on 3rd March 2016
- Anticipate Commissioning Committee will meet monthly
- SCCG feel well placed
- Slightly anxious about capacity and expectation of practices

Kingston CCG – Dr Naz Jivani

- Acknowledged that the letter from Liz Wise was very useful
- KCCG has constituted out the Primary Care Committee – which will coincide with the KCCG Governing Body meetings
- Key element is going to be focusing on the operating model

Richmond CCG – Bob Armitage

- A shadow Primary Care Committee has been taking place for some time now and will continue to do so post 1st April 2016 in the CCGs fully delegated form

Croydon CCG – Paula Swann

- Continue to shadow for the next year
- Have a Primary Care Working Group
- CCCG need to make arrangements with NHS England to meet quarterly to continue business as usual
- Would like to continue to be involved in collaborative working

Merton CCG – Adam Doyle

- Keen to working
- Looking at resource plan
- Operating plan is key

- Delegation workforce review

NHS England is working with CCG and SPG colleagues on a review of how primary care commissioning is currently commissioned. External organisations have come in to do some work with the CCGs and staff at Southside looking at what is working and what is not working.

Liz Wise informed the committee that a draft report has just been completed (phase 1) presenting some options and she hope to share this with CCG colleagues in 2-3 weeks' time. She will be presenting the options to NHS England staff in the next week or so and will be working with Graham Mackenzie and colleagues as to how to take this forward.

Graham Mackenzie referred the committee back to the operating model paper, which was presented at the last Joint Committee and highlighted the need for re-examining the operating model in how NHS England will supports SWL CCGs, recognising that NHS England has an assurance role which will need to peer away.

- Operating model – Terms of Reference for Advisory Panel

	<p>Graham presented the draft ToR for the Advisory Panel as agreed in the last Joint Committee meeting. He explained that the role of the Advisory Panel will be to support colleagues in individual CCGs (delegated or in shadow delegation) who may be dealing with challenging or contentious local primary care commissioning issues. He presented the proposed membership and explained the need for having a balance of clinical and managerial skills represented.</p> <p>Dr Graham Lewis asked for clarification for having 2 representatives from each CCG (clinical, managerial and or lay members) and proposed having a clinician from each CCG.</p> <p>Dr Naz Jivani supported the draft ToR and the set up of the panel; however expressed his concerns around having future meeting dates in the diary causing a delay in process and suggested possibly a virtual meeting.</p> <p>William Cunningham Davis supported the idea of virtual meetings and suggested some face to face meetings and some virtual meetings.</p> <p>Graham Mackenzie agreed for the panel to work as a network virtually.</p> <p>Carol Varlaam asked whether lay members who are currently Chairs of the Primary Care Committees in CCGs should be excluded from the membership for the Advisory Panel. The committee felt that these lay members should be included.</p> <p>Action: Graham Mackenzie to revise the ToR and circulate virtually for any comments before approval.</p>	<p>Graham Mackenzie</p>
<p>7</p>	<p>Primary Care SWL Sustainability and Transformational Plan (STP) progress / update – Joanne Devlin</p>	
	<p>Joanne Devlin informed the committee that as part of the SWL STP submission, there is a chapter on primary care which needs to be covered. Colleagues from Healthy London Partnership (HLP) have produced a template of what good looks like in terms of the STP primary care element. She explained that HLP have also provided some interim support to help develop this plan. The current position is that all the information that is available easily to hand is being gathered. A lot of what was submitted in terms of the transforming primary care delivery plan stock take to Simon Stevens is being used. She confirmed that there are two submissions; 11th April and 30th June. Internally, the SWL Collaborative team are pulling together a timeline to work towards these deadlines.</p> <p>Joanne explained that she will be working closely with Graham and Nicola as the Primary Care Leads with the progress of this plan; who can then share the update with Chief Officers and Clinical Chairs.</p> <p>The primary care chapter will sit as part of the wider SWL STP and update and progress be shared with the Primary Care Delivery Group.</p> <p>The Joint Committee NOTED the progress and update.</p>	
<p>8</p>	<p>Personal Medical Services Update and Commissioning Intentions – Liz Wise / William Cunningham Davis</p>	
	<p>PMS Update</p> <p>Liz Wise updated the Joint Committee on the current progress to date on the PMS Review:</p> <ul style="list-style-type: none"> - Overall process – CCGs have developed their commissioning intentions (CIs) and NHS England have had a look at them at the end of February - NHS England and CCGs need to understand the financial implications of these CIs now 	

	<ul style="list-style-type: none"> - NHS England need to start pulling together contract proposals before the end of March - NHS England acknowledges that a huge amount of work has taken place already; however there is still a lot to do and the PMS team are working very hard; the LMC have been very helpful and supportive in terms of going through the London offer - PMS paper page 7 illustrates the London offer - Each of the CCGs have taken the London only mandatory offer - Page 9 shows the high level costings which set out the money that would be taken out of the PMC premium - Jonathan Weaver informed the committee that his team have been working closely with the CCGs - A financial model has been developed (which allows each CCG to test its various plans) - The biggest area which is being focused on now is service specifications and price - A number of CCGs are looking at refining some of what was being commissioned previous - There is currently a mixed picture across the patch - Some CCGs are looking at week day access, directed enhanced services, deprivation models, refining medicines management etc. - NHSE are hopeful that a lot of these discussions have progressed well and they are soon to be in a position to be able to produce the offer letter <p>William highlighted that it is important for CCGs to be mindful that the offer letter has not landed as yet and in order for the governance processes to run; with this being the last primary care joint committee, is there an agreement from all CCGs to allow for a Chairs action to take place to agree to the</p> <p>Carol referred to Julie Freeman’s note and comments:</p> <p>Item 8 – Attachment 6</p> <ul style="list-style-type: none"> o Page 2 – The committee is asked to note that it is Londonwide LMCs view that NHSEL will be unable to get local PMS contract offers out to practices in MSW by 31st March <p>Negotiating groups have not been convened in some areas yet, and so the provision of detailed work up for the local PMS offer and their KPIs for practices to consider, are unlikely to be available by this date. (As detailed later in the paper, pages 10/11)</p> <ul style="list-style-type: none"> o Page 4 – last paragraph line 4 – reference to ‘GP services’ we would ask that in line with guidance and for accuracy and clarity, this should read ‘general practice’. The difference is subtle but substantial. <p>Liz Wise acknowledged the comments and said that NHSE will do all they can to support and take on board the LMC comments.</p> <p>Commissioning Intentions</p> <p>This paper was NOTED - for information only.</p>	
9	<p>Finance Report Month 10 – Toyin Akinyemi</p>	
	<p>Richard Jeffery presented the month 10 financial position for SWL:</p> <ul style="list-style-type: none"> - Overall financial position for South West London Primary Medical services is showing an overspend of £1,093k; this includes the release of £1,042k non-recurrent 2014/15 accruals. - Overspend is largely due to under-achieved planned QIPP savings. - Other factors include cost pressures emanating from QOF (£775k) and 	

	<p>unplanned non recurrent non-contractual costs such as patient transport costs offset by underspends</p> <ul style="list-style-type: none"> - Annual budgets are allocated net of £2.7m QIPP savings across South West London - The total planned QIPP for Primary Care across London Region is £12.7m of which £2.7m relates to SW London. - There will be significant under-delivery on the recurrent savings required on Medical services in 2015/16. - A review of the schemes that other NHS England regions have developed across Primary Care has been carried out and this identified very limited opportunities. - Forecast year end position: Based on month 10 results the Medical services budget is forecast to be £1.3m (0.7%) overspent due to the QIPP position. - Overall based on month 10 results, the forecast outturn has slightly improved over month 9 reported figure due to a slight savings on demographic growth cost, mitigation actions put in place by management such as the release of 2014/15 accruals and reservation of the uncommitted balance of the 1% non-recurrent headroom. <p>The Joint Committee NOTED the contents of the finance month 10 report and NOTED the current position of QIPP.</p>	
ITEMS FOR NOTING / INFORMATION		
10	Report back from Joint Committee Working Groups	
	<ul style="list-style-type: none"> • Finance and Contracting Working Group (Mike Sexton) Mike presented the minutes from the January meeting of this working group and also provided an update following the February meeting. He said that the proposal is to continue with this group to support CCGs following delegation. He also suggested using this group to pick up operational issues. The update from January's meeting was NOTED. • Capital and Estates Forum (Hardev Virdee) William provided an updated from the Capital and Estates Forum. He informed the committee that Cynthia Cardozo from Merton CCG will be taking up the Co-Chairing of this forum. He highlighted the importance of continuing with this forum, especially with the fast moving estates agenda at present. He summarised that the group has been focusing on PCTF funding and local estate strategies and now is working with the STP lead on writing the estates chapter for the STP. There were discussions around the importance of this group expanding its agenda and remit beyond just primary care and William said that this forum will be reviewing its Terms of Reference in April to cover all areas of estates – primary care and secondary care. The update from January's meeting was NOTED. • Quality, Prevention and Innovation Working Group (Dr Nicola Jones) In Dr Nicola Jones absence, Graham Mackenzie updated the committee that thus far this working group has been primarily dominated by PMS and the quality aspects of the offer. He said that the proposal is to keep this group going, but as a sub group of the Transforming Primary Care Delivery Group. The update from February's meeting was NOTED. 	
11	Contractual Changes – action log (to NOTE) – NHS England	

	NOTED	
12	Open Space / Questions from the public – Members of the public	
	None.	
13	Any Other Business - All	
	All members of the Joint Committee presented their heartfelt gratitude and thanks to Carol Varlaam for chairing the SWL Primary Care Joint Committee meetings.	
	The meeting closed at 18:00pm	