

TERMS OF REFERENCE

Committee:	Primary Care Development Committee
Frequency Of Meetings:	One per month (Last Tuesday of every month)
Committee Chair:	Lay Member
Membership:	<p>GP Board Members (x3) Accountable Officer Practice Manager Board Member Lay Member(x2) Chief Finance Officer Director of Primary Care Head of Primary Care Director of Commissioning Healthwatch Thurrock Director of Adults, Social Care Commissioning (LA) Director of Public Health Representatives from Essex Area Team of NHS England</p>
Attendance:	<p>Representatives from the following Teams may also attend meetings to present items of business as follows:</p> <ul style="list-style-type: none"> ▪ Quality Team ▪ Medicines Management ▪ Commissioning (Primary Care, Children's, Mental Health, Planned Care, Unplanned Care) ▪ Communications Team <p>Other representatives may be invited by the Committee Chair to represent partner organisations, such as :</p> <ul style="list-style-type: none"> ▪ Thurrock Council ▪ North East London NHS Foundation Trust ▪ South Essex Partnership University NHS Foundation Trust ▪ Basildon & Thurrock University Hospitals NHS Foundation Trust ▪ NHS Basildon and Brentwood CCG. ▪ Healthwatch (Thurrock)
Lead Officer:	Director of Primary Care
Secretary:	Business Manager
Quorum:	Quorum shall be 5 members, 2 of which must be GPs and 1 CCG representative, 1 lay person. Either the Chair or nominated Deputy Chair must be present for the meeting to be quorate.
Approval:	CCG Board

Date Approved:	25 th April 2018
Version:	1.0
Review Date:	April 2019

DELEGATED AUTHORITY

The Board has established a Committee of the Board to be known as the Primary Care Development Committee(PCDC) (the Committee), in accordance with the CCG Standing Orders and Standing Financial Instructions. The committee is a committee of the Board and has no executive powers, other than those specifically delegated in these terms of reference. The Committee is accountable to the CCG Board.

The Committee is established in accordance with the NHS Thurrock CCG's constitution. These terms of reference set out the membership, remit, responsibilities and reporting arrangements of the committee and shall have effect as if incorporated into the constitution. The membership ensures that there is clinical leadership through GP Board Members attending and leading the committee.

The Committee terms of reference are available upon request and shall be contained on the website of the CCG.

It is acknowledged that the Board is ultimately accountable for the actions of the PCDC and therefore the Committee will:

- I. Report on its work by presenting the minutes of its meetings to the Board.
- II. Report to the Board on an annual basis, the work undertaken in the previous year and the intended programme of work for the forthcoming year.
- III. Review the Terms of Reference annually and submit for Board approval.

PURPOSE OF COMMITTEE

As the NHS moves into the delivery phase of the FYFV and GPFV, strengthening and transforming general practice is playing an ever increasingly crucial role in the delivery of STP and CCG plans. The number of STP and CCG work streams focused on and involving Primary Care, that are being planned and implemented is continuing to increase to a level where a dedicated and focused committee is required to oversee and provide direction, guidance and governance to the relevant work streams.

The committee will provide oversight of all projects and activity being planned and delivered by all organisations and departments that involve Primary care services

Ensuring resilience, stability and development of our Primary care services is core to implementing the CCG's Transformation plans and in delivering strategic and operational plans therefore the purpose of the PCDC is to:-

- Lead and implement the development and delivery of strategic and operational direction to primary care development in Thurrock
- Monitor and ensure the appropriateness and delivery of Primary Care work streams, and supporting projects as outlined within the STP Primary Care Strategy and CCG Primary Care Delivery Plan, to enable delivery of CCG statutory duties
- Oversee the CCG transformation plan and provide assurance or make recommendations to the Board in relation to that plan.
- Monitor and ensure the appropriateness and delivery of the CCG work plans and supporting projects as outlined within the CCG Operational Plan, to enable delivery of CCG strategic objectives
- Ensure that the CCG is fully represented, sighted and included in decisions made about Primary care, transformation and commissioning within STP or Essex wide work streams
- Whilst not currently co-commissioning, working in partnership with NHS England in the development of primary care in Thurrock.
- Advise and work with the Council where new health facilities are built as part of regeneration and development with NHS England;

In addition, the Board will provide a mechanism to ensure delivery and monitor the activity, finance and performance impact of projects and transformation plans as they are implemented and also provide a forum within which issues and disputes can be resolved.

The committee will identify and develop new opportunities of innovation with patients within Thurrock and work closely with other CCG's and other agencies (such as the Local Authority and Provider Trusts) and promote good practice.

The Committee is authorised by the Board to investigate any activity within its terms of reference. It is authorised to seek any information it requires from any employee and all employees are directed to co-operate with any request made by the Committee. The Committee is authorised by the Board to obtain outside legal or other independent professional advice and to secure the attendance of outsiders with relevant experience and expertise if it considers this necessary.

DEVOLVED FUNCTIONS

Section 7 of the CCG Constitution describes the CCG functions and duties delegated to the Board. The Board delegates to the committee those functions relating to areas outlined in the remit and responsibilities of the committee stated below.

REMIT & RESPONSIBILITIES

The Committee will ensure that the Transformation Plan, CCG Primary Care plan and supporting projects support and deliver the CCG Operational Plans and Primary Care strategy.

Each of the Primary Care work streams and the transformation objectives of the Operational Plan will be underpinned with a detailed work plan and in some cases more detailed work

strands due to the size and complexity of the work stream, across neighbouring CCG's and the health economy. The Committee will be responsible for ensuring that there is adequate engagement with the public and wider stakeholders around the work undertaken within the Primary Care Team. The Committee will be responsible for monitoring those detailed work plans and calling CCG officers to account where schemes/plans are failing to deliver and are not substituted with alternative schemes to compensate accordingly.

The group will achieve this through:

Primary Care Work streams, including Public Health related projects

- Oversee the CCG Primary Care delivery plan and provide assurance or make recommendations to the Board in relation to that plan. Being assured that the Primary Care plans in place will deliver the required and stated outcomes
- Approving and monitoring Primary Care projects against the defined milestones included within each individual project plan as part of the work stream (on a cyclical basis)
- Reviewing evaluation reports that demonstrate delivery both of service improvement / improved patient outcomes (and satisfaction) associated with the Primary Care Projects.
- Monitoring the financial, quality impact, activity and performance impact of the projects on the whole system which includes commissioners, providers and other key partners (e.g. local authorities)
- Monitoring and managing risks in relation to Primary care services in accordance with the CCG's risk management strategy
- Resolving areas of dispute on schemes or scheme implementation and where there are areas of contention.
- Ensure that the CCG is fully represented, sighted and included in decisions made about sustainability, transformation and commissioning within STP or Essex wide work streams

Primary Care Estates and Technology

- Oversee and approve Primary Care Estates and Technology project proposals and delivery plans and provide assurance or make recommendations to the Board in relation to those plans. Being assured that the plan will deliver the required and stated outcomes
- Monitoring Primary Care estates and technology projects against the defined milestones included within each individual project plan as part of the work stream (on a cyclical basis)
- Reviewing evaluation reports that demonstrate delivery both of Service change/service improvement / improved patient outcomes (and satisfaction) associated with the Primary Care Projects.
- Monitoring the financial, quality impact, activity and performance impact of the projects on the whole system which includes commissioners, providers and other key partners (e.g. local authorities)
- Monitoring and managing risks in relation to Estate and Technology projects and services in accordance with the CCG's risk management strategy
- Ensure that the CCG is fully represented, sighted and included in decisions made about Estates and technology within STP or Essex wide work streams

Extended Access / Thurrock Health Hubs

- Oversee the Extended access delivery plan and provide assurance or make recommendations to the Board in relation to that plan. Being assured that the extended access plans in place will deliver the required and stated outcomes
- Reviewing evaluation reports that demonstrate delivery both of service improvement / improved patient outcomes (and satisfaction) associated with the extended Access Service.
- Monitoring the financial, quality impact, activity and performance impact of the service on the whole system which includes commissioners, providers and other key partners (e.g. local authorities)
- Monitoring and managing risks in relation to extended Access services in accordance with the CCG's risk management strategy
- Resolving areas of dispute on schemes or scheme implementation and where there are areas of contention.

Primary Care related commissioned services

- Being assured that planned and newly commissioned services involving and/or impacting Primary Care align with primary care plans, outcome and timelines
- Using Benchmarking and best practice to inform commissioning decisions
- Receiving and monitoring progress on achievement of newly commissioned services plans
- Reviewing benefits realisation analysis that demonstrates delivery both of service improvement / improved patient outcomes (and satisfaction) and financial savings of the transformation schemes.
- Monitoring and managing risks in relation to transformation in accordance with the CCG's risk management strategy

Primary Care Transformation

- Being assured that the Primary Care Transformation plans in place will deliver the CCG Operational Plan, strategic vision (in accordance with the 5YFV / STP requirements) and facilitate the delivery of the Health and Wellbeing Strategy and alignment to the Joint Strategic Needs Assessment (JSNA) projects.
- Using Benchmarking and best practice to inform commissioning decisions
- Receiving and monitoring progress on achievement of transformation plans
- Reviewing benefits realisation analysis that demonstrates delivery both of service improvement / improved patient outcomes (and satisfaction) and financial savings of the transformation schemes.
- Monitoring and managing risks in relation to transformation in accordance with the CCG's risk management strategy

Primary Care Commissioning

- It is recognised that NHS Thurrock CCG has not signed up to formal co-commissioning of primary care. In the event that this position changes in the future, the PCDC will oversee, implement and manage this process

STP led programmes – CCG Working groups

- To be consulted and sighted upon decisions made on an STP footprint in order to assure the Board and the CCG Chair that decisions made at an STP level have had adequate input from relevant departments, including commissioners and clinicians.

Workforce Plan

- Being assured that the STP workforce plan is fully representative of and aligns with primary care plans, outcome and timelines
- Receiving and monitoring progress on achievement and implementation of STP & CCG Workforce Plans
- Reviewing benefits realisation analysis that demonstrates delivery both of service improvement / improved patient outcomes (and satisfaction) and financial viability of the workforce plans.
- Monitoring and managing risks in relation to workforce in accordance with the CCG's risk management strategy

The Committee will work closely with the Quality & Patient Safety Committee to be assured that the potential impact on the quality of services from Primary Care programmes and transformation plans is acceptable and appropriately managed.

The Committee will work closely with the Finance & Performance Committee to be assured that Primary Care Programmes and transformation plans are delivering within budgets and if appropriate the intended financial savings and that providers are performing in accordance with contractual obligations set following agreement of schemes and plans.

MANAGING THE COMMITTEE

Membership

- The Committee shall be appointed by the CCG Board as set out in the constitution and may include individuals who are not on the governing body.
- The membership of the Committee will be as set out page 1.

Committee Chair

In the event of the chair of the committee being unable to attend all or part of the meeting, he or she will nominate the deputy chair as a replacement to deputise for that meeting.

Frequency and notice of meetings

Items of business to be transacted for inclusion on the agenda of a meeting need to be notified to the chair or secretary at least 5 working days (i.e. excluding weekends and bank holidays) before the meeting takes place. Supporting papers for said items need to be submitted at least 10 working days before the meeting takes place to the Secretary.

The date, time and venue of all meetings will be notified to members at least 5 working days prior to the meeting.

Minutes and Committee Papers

The minutes of meetings shall be formally recorded within 3 days of the meeting by the designated secretary and checked by the Chair of the meeting 1 week following receipt and submitted to the Board. The Chair of the Committee shall draw to the attention of the board any issues that require disclosure to the full Board, or require executive action.

Decision Making

The committee is not a decision making committee and as such will make recommendations to related committees for final ratification at the Board.

Related Committees

The Primary Care Development Committee is accountable to the Board and consequently will provide update reports to the Board, present the minutes of their meetings and papers that require consideration and decision.

Other working groups / committees that provide assurance to the committee are:

- Quality and Patient Safety Committee
- Finance and Performance Committee
- Transformation & Sustainability Committee
- Medicines Management Committee (where appropriate)
- Conflicts of Interest Committee

REPORTING & REVIEW

Monitoring and Reporting

Reports on the progress of the implementation of each project will be brought to each monthly meeting by the respective Lead, in accordance with the agreed work plan.

Reporting to the CCG Board

Performance report to include a summary dashboard of indicators summarising

- Milestone tracker covering the delivery of Primary Care programmes.

The Committee will report to the Board annually on its work and ensure that during the year any issues, potential or real risks identified are reported to the Board at its next formal meeting.

Annual Review of Effectiveness

The committee will conduct an annual self-assessment of its effectiveness and report the findings of the assessment to the Board.

CONFLICTS OF INTEREST

The CCG's rules on conflicts of interest as set out in the CCG Constitution, Standing Orders and Standing Financial Instructions apply to the work of this Committee.

Members or those in attendance must, at the outset of the meeting, declare any interest that they may have in a matter and withdraw from the discussion on that item.