

SUMMARY OF ACTION NOTES

North Yorkshire Clinical Commissioning Group
 Annual General Meeting

Tuesday 25 August 20 17.00 – 18.00
 Video Conference: Zoom

Chair: Dr Charles Parker Clinical Chair

In Attendance

Dr Charles Parker – Clinical Lead NYCCG (CP)
Amanda Bloor – Accountable Officer NYCCG (AB)
Jane Hawkard – Chief Finance Officer NYCCG (JH)

32 members of the public registered to attend the event via Eventbrite – a total of 18 members attended virtually. (In total 34 people were on the meeting including, NYCCG Governing Body members, staff supporting the event from the communications and engagement team and registered members.)

Item	Lead
<p>1</p> <p>Welcome and Introductions</p> <p>Dr Charles Parker (CP) welcomed members of the public and members of the NHS North Yorkshire Clinical Commissioning Group (CCG) Governing Body to the Annual General Meeting (AGM) via video conference. This is the first AGM since the three CCGs – Harrogate and Rural District, Hambleton Richmondshire and Whitby and Scarborough and Ryedale – became NHS North Yorkshire CCG on 1 April 2020.</p> <p>The presenters were Amanda Bloor (AB), Accountable Officer, Jane Hawkard (JH), Chief Finance Officer and Dr Charles Parker (CP), Clinical Lead.</p>	
<p>2</p> <p>Achievements Over the Last 12 Months</p> <p>Amanda Bloor (AB) thanked everyone for joining virtually. AB reported that from 1 April 2020 the three CCGs became NHS North Yorkshire CCG. Dr Charles Parker is the Clinical Chair, AB is the Accountable Officer and they have a very strong team of colleagues who all want to make a difference to local services that are provided to its population.</p> <p>There has been a great opportunity to do things across North Yorkshire; some areas we are particularly proud of are:</p> <ul style="list-style-type: none"> • the reduction in the use of antibiotics and reducing the spend on over the counter medicines which the Patient Partner groups have been engaged in; • opportunities to promote healthier lifestyles through smoking cessation services and our approach to heart disease which is one of our biggest areas of high mortality • Setting up Kooth – a mental health website for children who are experiencing challenges with mental health issues and able to access services through the internet. 	

The community health and social care models we have put in place to integrate health and care over the last year are also vitally important for continuity of care. These models bringing together GPs, district nurses, social care staff, mental health staff and primary health care to provide an integrated person-centred service, keeping people well, managing their long term conditions, and supporting people to avoid going into hospital. If they are admitted we now think about a health management approach in order to support safe early discharge and rehabilitation.

The last year has also seen a significant investment in community mental health services, particularly in Harrogate and Rural District where we relocated inpatient facilities and released funds to enable us to manage care closer to peoples homes. We have provided enhanced mental health support for young people and adults and in particular established two new websites, The Go-To website and Kooth for young people. We also introduced talking therapies appointments that can be booked online and we have developed more services to provide access to autism assessments for young people, particularly in Scarborough.

GP practices are now starting to work together in Primary Care Networks and so far 11 have been established, helping people to access patient focussed services including social prescribers, clinical pharmacists and physiotherapists. This has helped to keep people in the community and at home instead of being admitted to hospital.

Digital technology is a huge programme nationally and has transformed the way NHS North Yorkshire CCG works. More than 670 laptops were distributed to GP practice colleagues to allow them to continue to serve the population of the CCG as we responded to the Covid-19 pandemic. Video consultation software was made available for all GP practices and 200 tablet devices were delivered to care homes across North Yorkshire to support remote video consultations.

In partnership with NHS England and the Ministry of Defence, the work on a business case for Catterick Integrated Care Campus has continued and will provide a sustainable and long term solution for the military population within the Garrison and the local civilian population in the area. A number of Patient Partners will have seen the latest press release regarding this and these services will support the wider community in Richmondshire.

A £13 million renovation is under way at Whitby Hospital. Building has already started and once completed this will be a vibrant place where integrated community services will be offered to the local population.

A consultation and significant period of engagement was carried out at the Friarage Hospital resulting in a 24/7 Urgent Treatment centre being established which is now running and working well.

3

Finance – How Our Budget is Spent and How it is Benefiting Local People

CP introduced Chief Finance Officer, Jane Hawcard (JH), to explain how each of the three CCGs' budgets were spent over the last year.

All three CCGs achieved their financial targets. All had an unqualified audit and unqualified value for money audit.

NHS Hambleton, Richmondshire and Whitby CCG

JH stated that Hambleton, Richmondshire and Whitby CCG received a funding allocation of £228.2 million for 2019-20 which included a £6.6 million allocation called the Commissioners Sustainability Funding. :

The spend in 2019-20 was:-

- Acute Care Services i.e.: Hospital Services 44%
- Primary Care Services i.e.: GP Practices 12%
- Prescribing i.e. Drugs - 11%
- Community Care Services - 10%
- Mental Health Services - 9%
- Continuing Care for Adults i.e. adults in need of care homes - 8%
- Ambulances Services - 3%
- Social Care Funding - 1%
- CCG running costs - 1% each

This saw:

- 21,534 A&E Attendances
- 1,599 Discharged from A&E without having treatment
- 15,422 Emergency/Unplanned Admission to Hospital
- 22,469 Elective Operations
- 1,119 Emergency Admissions to Hospital treatable in the community

The cost to the CCG of GPs prescribing “Over the Counter Items” to patients “Over the Counter Items” was £1,352,694.

NHS Harrogate and Rural District CCG

NHS Harrogate and Rural District CCG received funding of £236.9 million in 2019-20. It also received a further non recurrent £8 million called the Commissioner Sustainability Funding and a further non recurrent support allocation of £7.4 million from NHS England.

The spend in 2019-20 was:-

- Acute Care Services – i.e. Hospital Services – 50%
- Primary Care Services i.e. GP Practices – 11%
- Prescribing Services i.e. Drugs – 10%
- Continuing Care for Adults i.e. adults in residential care - 9%
- Mental health Services - 9%
- Community Care Services - 4%
- Ambulance Services - 3%
- Social Care Funding - 2%
- Other Programmes & CCG Running Costs - 1% each

This saw:

- 50,138 Outpatient 1st Attendances
- 98,678 Outpatient Follow-up Appointment
- 1,199 Babies were Delivered
- 284 Hip Replacements

The cost to the CCG of GPs prescribing “Over the Counter Items” to patients was £1,629.906

NHS Scarborough and Ryedale CCG

NHS Scarborough and Ryedale CCG received a smaller budget as it has a smaller population of £195.4 million and an extra £9.3 million in support allocation.

The spend in 2019-20 was:-

- Acute Care Services i.e. Hospital Services - 47%
- Prescribing Services i.e. Drugs - 11%
- Primary Care Services i.e. GP Practices -10%
- Mental health Services - 9%
- Community Care Services - 8%
- Continuing Care for Adults & Children - 8%
- Ambulance Services - 3%
- Other Programme - 2%
- Social Care Funding & CCG Running Costs - 1% each

This saw:

- 2,222 people referred for psychological therapies
- 323 people referred for psychological therapies that entered treatment
- 261 referrals for autism that have been accepted
- 100 autism assessments taken place

The cost to the CCG of GPs prescribing “Over the Counter Items” to patients was £1,196,212. JH made the point that across the new NY CCG £4 million were spent on medicines which can be purchased over the counter from pharmacists. If the public agreed to support us and purchase these medicines themselves then this funding could be redirected in other priority services.

A full set of accounts is available for 2019-20 within the CCGs’ Annual Reports available online at www.northyorkshireccg.nhs.uk.

If you cannot access these please contact Bridget Read (bridgetread@nhs.net) for a copy.

4

COVID-19 Recovery

AB stated that the response from colleagues in the CCG, working with colleagues in general practice, social care, residential care and hospital care has been amazing. AB stated that she is very proud of everybody who has worked in NHS North Yorkshire CCG.

	<p>As yet services are not back to normal but GPs, dentists, hospitals and residential homes are working in line with guidance to re-open services as quickly as is safely possible. We have to continue to work together over the next few months. There has been a rapid transformation regarding GP appointments at practices - through the Covid period nearly 100 per cent of them are done by telephone or as video consultations between patient and doctor. Nothing will replace face to face but currently it is safer and more efficient for some.</p> <p>AB stated that the CCG has received a letter from Simon Stevens, Chief Executive of NHS England, detailing the response to recovery to get back to “normal ways of working”.</p> <p>Three key things:</p> <ul style="list-style-type: none"> - Accelerating the return to near-normal levels of non-Covid - Preparation for winter, alongside continuing vigilance in the light of further probable Covid spikes - Take account of lessons learned; to lock in beneficial changes including support for our staff and action on inequalities and prevention <p>Across the NHS preparations are being made for the onset of winter. A flu vaccination programme will commence during September and will include vaccinations for people with long term conditions, vulnerable adults, pregnant women, people over 65 and young children. This will also be extended to people aged between 50 to 64 years because there is the potential for another peak or further spikes of COVID during this winter period. We, as a system with our colleagues in the hospital, social care, primary care, are continuing to work together to get us safely through winter.</p> <p>AB concluded that we all need to keep remembering that handwashing, social distancing and wearing a mask is vital to keeping safe within our communities.</p>	
<p>5</p>	<p>Questions and Answers</p> <p>CP stated that questions had been submitted by members of the public either prior to the meeting or via the “chat box” at today’s meeting.</p> <p>Question 1 – What debt does the new CCG currently carry? Answer: JH - The three former CCGs which merged to form NHS North Yorkshire CCG had a cumulative deficit brought forward at the time of merger of £45 million. The most recent operational Planning and Contracting Guidance 2020-21 includes the guidance set out below with regard to historic debt. It is the intention of NHS North Yorkshire CCG to discuss this matter further with NHS England once normal business is resumed following the pandemic and recovery. Under the current financial rules, where a CCG spends more than its allocation for a given financial year, the overspend is carried forward to future years in a similar way to provider loans and must be repaid. However, in some cases the level of historic debt is such that the amount cannot be repaid in a reasonable timeframe, and this is becoming a barrier to system transformation.</p>	

Guidance states:

Therefore, from 2020-21 we will write-off historic CCG debt subject to the following:

- the level of the total overspend is such that repayment over four years is not feasible, i.e. the total cumulative debt is more than 4 per cent of the CCG allocation.
- the CCG will agree a repayment profile with NHS England and NHS Improvement showing the element of the cumulative debt that will be repaid, which will take account of historic funding levels - typically this will be 50 per cent of the cumulative debt but will be assessed case by case.
- the CCG must address the underlying issues that caused the overspends such that it delivers in-year financial balance, and the agreed repayment profile achieved.
- the CCG must address the underlying issues that caused the overspends such that it delivers in-year financial balance, and the agreed repayment profile achieved.

Question 2 - When was the last unqualified audit report for the new CCG or failing that for the previous three CCGs?

Answer: JH - All three CCGs that merged to form NHS North Yorkshire CCG had unqualified audit and unqualified value for money audit reports for the year ending 31 March 2020.

Question 3 - How much of this debt can be related to COVID?

Answer: JH - The CCG carries no debt for the costs relating to COVID expenditure as these are fully reimbursed by the Government.

Question 4 - What additional funds have been provided by the Government to offset COVID expenditure?

Answer: JH - The government has fully funded all COVID related expenditure to date and the CCG is reimbursed on a monthly basis for costs incurred. For the first three months of the year this equated to £6.5 million across North Yorkshire.

Question 5 - When the Health Minister cancelled the NHS debt – did it include the CCG debt?

Answer: JH answered no. All the acute trust debt in the provider sector at all of the hospitals was written off but not for CCGs. See the answer to Question 1 above for full information.

Question 6 - Before the pandemic it was obvious to me even as a newcomer to the area that Bridlington Hospital was very much underused. What I am most concerned about is what cuts to local services including closures of wards and even whole hospitals are in the pipeline for North Yorkshire. Would you please tell me what cuts are planned or are in the process and what consultation and engagement with the public has taken place regarding these measures.

Answer: AB answered that there have been two significant pieces of consultation over the last few years around Mental Health – one in the Harrogate area and one in Hambleton Richmondshire and Whitby area. These both resulted in a change in the inpatient bed base and investment in the community. There was also a consultation around the Urgent Care Treatment Centre at Friarage Hospital which has now concluded. All of those changes were undertaken in close partnership with colleagues in the Scrutiny of Health Committee under the former chair Councillor Jim Clark and the current chair Councillor John Ennis.

There has been significant work undertaken on the sustainability of services in Scarborough Hospital around workforce and as treatment becomes more specialised. This has not yet been concluded. Bridlington Hospital is not in the North Yorkshire geography but is owned by York NHS Foundation Trust. There is a big piece of work ongoing looking at acute services across the East Coast community. Included in this is potential options to use Bridlington. Any significant service change will include engagement with key stakeholders and the public.

Question 7 - Do you know of any plans for the CCG to take over adult social care?

Answer: AB answered no, I am not aware of any formal discussions taking place regarding this.

Question 8 - Are all medical centres within North Yorkshire CCG vaccinating all patients who have been shielding and vulnerable patients first?

Answer: AB - Individual GP practices will be prioritising patients most at risk first. CP added the issue around shielding and vulnerable patients may mean they get individual treatment but not immediately vaccinated. This group of patients can develop an immune response too soon if vaccinate too early, which may mean that their immunity fades over time leaving them more vulnerable to flu.

Question 9 - Why are GPs still prescribing so many “Over the Counter Medicines”; are GP’s giving way to patient pressure?

Answer: CP - GPs are trying to make a difference in this area. However it is true that GPs do give way to patient pressure there are also some instances where there are legitimate reasons to prescribe these medications particularly if the doses needed are larger or access is otherwise difficult.

If we reduced the spend by 50 per cent in North Yorkshire it would equate to £1.5 million which could be used in other areas. This is a great opportunity for our Patient Partners and The Loop members to get behind this campaign and promote it.

Question 10 - NHS North Yorkshire CCG has provided technology for video conferencing and online consultation in GP practices; I can see the benefits but how much has the take up been within your area?

Answer: Wendy Balmain (WB), Director of Strategy and Integration - Due to COVID 19 there was a significant uptake of this technology. Two thirds of contacts were through video consultation and the other third via telephone conferencing. WB stated that she didn't have the exact figures with her, on the uptake. Councillor Nick Brown asked if he could see more figures. WB will provide the figures for NB.

Question 11 - Going back to financial results, the first former CCG delivered 96 per cent of financial savings; Harrogate and District achieved 80 per cent but Scarborough and Ryedale only achieved 45 per cent but still had apparently achieved their financial plan. Could you explain?

Answer: JH explained that NHS Scarborough Ryedale CCG worked very closely with NHS Vale of York CCG and the York NHS Hospital Trust; together they had an £11 million saving plan. Not all of that came to fruition so each of the CCGs had half of that, around £3 million they didn't save. With a contingency of ½ per cent in all of the CCGs and support from NHS England with more funding in Scarborough, those two

things together offset the overspend. We are seeking to get to at least 70 per cent achievement in our savings programme, if not there is a potential to cause a deficit and we cannot afford our plans for the year so it is very important we do achieve the savings.

Comment from Sue Peckitt, Chief Nurse - Currently we are undertaking a care home survey of the usage of tablet devices but can confirm that level of activity is consistent. (200 devices put into care homes so GPs were able to consult with residents via video).

Question 12 - Is there a backlog of essential outpatients' appointments for patients with serious symptoms?

Answer: AB explained that anybody on a referral pathway and waiting list with **either** suspicion of cancer or urgent referral should have been assessed and received treatment. Patients with serious conditions are also being triaged between GPs and consultants. A number of outpatients' referrals were put on hold and are being reviewed by general practice.

6

Closing Remarks

CP thanked everyone for joining the meeting online and participating, it allows us to have a conversation with people across the whole of North Yorkshire.

There will be change ahead, we have to introduce technology, we want to bring care back closer to home and it will mean bringing services out of hospital, but we will keep engaging in conversation with you all and keep you updated and make sure nothing happens without a conversation first and be clear why changes are needed.

NHS North Yorkshire CCG will continue to make the best use of public funding available. If you are happy to be involved in the CCG's virtual engagement network then please do join the Loop by registering online or get involved with the Patient Partner Network and help shape and influence the health care services in North Yorkshire.

On a final note sadly this year Dr Phil Garnett, Clinical Chair for NHS Scarborough and Ryedale CCG died and he should have been here today as Vice Chair. The CCG would like to express its enduring gratitude to Dr Garnett for all he did to make us a better, compassionate, outcome driven organisation and this is the first public meeting without him.

CP thanked attendees for participating in this first virtual AGM and expressed the hope that we will be able to meet again in better times.

Meeting Closed