

NORTH YORKSHIRE CLINICAL COMMISSIONING GROUP

Primary Care Commissioning Committee (PCCC)

26 November 2020

14:00 – 16:00

Via Microsoft Teams

Present (Voting Members)	
Sheenagh Powell	Governing Body Lay Member, Chair
Wendy Balmain	Director of Strategy and Integration, North Yorkshire CCG
Dr Peter Billingsley	North Yorkshire CCG Governing Body GP
Alec Cowell	Deputy Director of Financial Services and Reporting, North Yorkshire CCG (part)
Dr Mark Hodgson	Clinical Lead for Community & Integration, and Governing Body GP, North Yorkshire CCG & Aldbrough St John Surgery
Kate Kennady	Governing Body Lay Member, North Yorkshire CCG
Sue Peckitt	Chief Nurse, North Yorkshire CCG
Dr Bruce Willoughby	North Yorkshire CCG Governing Body GP

In Attendance (Non-Voting Members)	
Chris Clarke	Senior Commissioning Manager, NHSE
Andrew Dangerfield	Head of Primary Care Transformation, North Yorkshire CCG
Angela Hall	Health Improvement Manager, NYCC (part)
Dr Omnia Hefni	North Yorkshire CCG GP
Victoria Ononeze	Public Health Consultant, NYCC
Tim Readman	Senior Communications Officer, North Yorkshire CCG
Sasha Sencier	Corporate Governance & Assurance Manager, North Yorkshire CCG
Dr Sally Tyrer	GP and LMC representative
Sharon Gent	Secretariat (Minutes)
Cathy Tobin	Secretariat (Attendance)

Apologies	
Clare Beard	Public Health Consultant, NYCC
Ashley Green	Healthwatch
Jane Hawkard	Chief Finance Officer, North Yorkshire CCG
David Iley	Primary Care Assistant Contracts Manager, NHSE

1.0 Apologies for Absence and Quorum

The Chair welcomed the Committee members and apologies were noted as above.

The Chair confirmed that the meeting was quorate taking into account any apologies for absence and those joining the call later.

The Chair noted that these committee meetings were now open to the public and Tim Readman from Communications had joined the meeting. No members of the public had registered to join today's meeting.

The Primary Care Commissioning Committee:

Noted attendance and apologies and confirmed the meeting was quorate under the requirements set out within the Terms of Reference.

2.0 Declarations of Members' Interests in relation to the Business of the Meeting

The Chair reminded Committee members of their obligation to declare any interest they may have on any issues arising at Committee meetings which might conflict with the business of North Yorkshire Clinical Commissioning Group (CCG).

With reference to the business to be discussed at the meeting, no declarations of interest were declared.

Declarations declared by members of the Primary Care Commissioning Committee are listed in the CCG's Register of Interests.

The Primary Care Commissioning Committee:

Noted there were no declarations of interest declared.

3.0 Questions from Members of the Public

No questions from members of the public had been received.

The Primary Care Commissioning Committee:

Noted no questions from members of the public had been received.

4.0 Minutes and Matters Arising

4.1 Minutes from the Meeting held on Thursday 24 September 2020

Minutes of the meeting held on Thursday 24 September 2020 were reviewed by the Primary Care Commissioning Committee for accuracy and were approved as an accurate and true record of the meeting.

The Primary Care Commissioning Committee:

Approved the minutes as an accurate and true record of the meeting.

4.2 Matters Arising from the Minutes

The action log was reviewed by the Primary Care Commissioning Committee and all actions were declared to be complete.

The Primary Care Commissioning Committee:

Reviewed the action log and noted all actions were complete.

5.0 Governance

5.1 Significant Risk Review

Sasha Sencier presented the paper noting the Governing Body met on 22 October 2020 and agreed the risk appetite should be raised from 12 – 15. The Committee were assured all risks were being managed effectively through the Corporate Risk Review Group. The Governing Body Assurance Framework (GBAF) had been presented to the Audit Committee and two risks had been scored at 20 and 16.

Wendy Balmain observed that while there are risks in primary care the mitigations reflected the level of work underway to ensure those risks are managed effectively. The Chair noted she felt assured as the mitigations were shown well on the GBAF and thanked all for their input.

The Primary Care Commissioning Committee:

Noted the above update on the Significant Risk Review.

5.2 PCCC Forward Plan

The Chair asked for comments on the forward plan. Wendy Balmain noted the need to think about the date of the January meeting due to operational pressures related to the current Covid situation and it was agreed that the committee would take stock after Christmas.

The Primary Care Commissioning Committee:

Noted the updated PCCC Forward Plan and that a decision regarding the January PCCC would be made in the New Year.

6.0 Strategy and Planning

6.1 Primary Care Strategic Overview

Wendy Balmain gave a presentation on the primary care strategy within the context of system strategic planning.

Four areas of focus were noted as well as the importance of good relationships with partners and primary care having an equal voice.

Enhanced Health in Care Homes had been implemented, AccuRx had been deployed to all GP practices and the Primary Care OPEL escalation framework is being implemented.

Wendy noted the Covid Expansion Fund of £150m to support delivery of 7 key priorities and of significance to achieve 67% of annual health checks by end of March 2021.

The Chair gave thanks for a very helpful report. Bruce Willoughby noted the importance of primary care and there were some real opportunities ahead. The Chair asked when the strategic overview would be updated and Wendy advised around the end of March 2021 but that this would be subject to ongoing operational pressures. Sue Peckitt noted the significant pressure on primary care and all work was greatly appreciated.

The Primary Care Commissioning Committee:

Noted the update on the Primary Care Strategic Overview.

6.2 NYCCG Primary Care Report

Bruce Willoughby presented the paper noting some areas had already progressed at pace. Primary Care Networks (PCNs) had been invited to designate sites for delivery of a primary care led Covid vaccination programme. Outline plans had been submitted to NHS England (NHSE) and the outcome would be received later that day. Oximetry at home had developed at pace and the CCG had been working with the PCNs and the Local Medical Committee (LMC) to develop and agree service protocols. The Harrogate hot site was now fully functional and while Covid activity remains high practices had effective infection prevention control measures in place.

The Population Health Management (PHM) programme is well underway. Two North Yorkshire PCNs are involved in the ICS programme and are working with Vale of York on the methodology for PCNs.

Peter Billingsley noted the great work taking place across primary care

The Primary Care Commissioning Committee:

Noted the update on the NYCCG Primary Care Report.

6.3 Report from NHSE/NHS Improvement

Chris Clarke presented the paper and noted the following:

- The link to the changes in the GMS contract
- Clarifications around patients removed and the responsibility for practices
- The clause with regard to termination if a practice lost registration.

There were no questions.

The Primary Care Commissioning Committee:

Noted the update on the Report from NHSE/NHS Improvement

6.4 Public Health Update

Angela Hall presented the public health update noting the majority of resource was covering Covid prevention and outbreak. Public Health are currently managing 396 incidents across North Yorkshire working with a number of partner organisations. Testing provision is continuing to be developed. Flu vaccinations are continuing to be promoted along with outcome supply chain issues.

Victoria Ononeze gave an update on the Healthy Child Consultation noting the consultation started on 26 October 2020 and will run until January 2021 with the focus being on 0-5 years and then 5-19 years. Peter Billingsley felt that as a committee, a formal response to the consultation should be given. Sue Peckitt noted that the CCG would be developing a collective CCG response that would reflect views from this Committee. This approach was agreed. Kate Kennedy asked if this matter should be raised at the Clinical Quality and Governance Committee (CQGC) and it was agreed it would be added to the agenda for the next meeting.

Victoria noted that Public Health would continue to prioritise safeguarding and would obtain as much feedback as possible from the consultation. It was expected that the LMC would respond separately.

It was noted that a copy of the joint response will be brought to this committee for information.

The Primary Commissioning Committee:

Received and noted the public health update.

6.5 Practice Changes

There were no practice changes to discuss.

The Primary Commissioning Committee:

Noted there were no practice changes.

7.0 Finance and Performance

7.1 Finance Report

Alec Cowell attended the meeting on behalf of Jane Hawkard and summarised the finance report. Primary care co-commissioning had a £1.3m overspend for the first 6 months of the year, mainly from PCN costs. Under the national Covid19 financial funding regime the CCG had received an additional retrospective top-up allocation of £1.3m to allow the CCG to actually breakeven.

The funding regime for the remaining 6 months of this financial year are different and the CCG has now received its total funding allocation which it is expected to operate within.

Since the start of the pandemic the CCG has been reimbursing practices for additional covid19 related costs. To the end of September this was £1.5m. This reimbursement method has now stopped and under the new funding regime the CCG has allocated a budget of £300k to cover any further costs.

Deloitte have been commissioned by NHSE/I to undertake audits of Covid19 spend within Trusts and CCG. Their audit report from the first round of audits had been published and Alec would circulate to anyone who would like a copy.

The Chair thanked Alec for a comprehensive report and requested a copy of the audit report.

The Primary Care Commissioning Committee:

Noted the contents of the Finance Report.

7.2 Integrated Quality Performance Report

Andrew Dangerfield presented the report. With regard to the Care Quality Commission (CQC) ratings, one practice had been rated as inadequate and a further visit from the CQC was expected to raise the rating. There was a significant lag in the data for the Learning Disability Health Check Scheme. This was being prioritised and should significantly improve the data for the January meeting. Flu vaccination performance was ahead of normal. Primary appointments and digital interactions had seen a dip in face to face appointments which continued to increase.

There were no questions.

The Primary Care Commissioning Committee:

Noted the update on the Integrated Quality Performance Report.

8.0 Investment Decisions

There were no investment decisions to approve.

The Primary Care Commissioning Committee:

Noted there were no investment decisions to approve.

9.0 Minutes and Key Messages to the Governing Body

The Chair noted the highlights of the minutes and key messages to the Governing Body which will be included within her report to the Governing Body.

- Update and comprehensive overview in primary care
- Public Health update
- Regular finance and performance updates

The Primary Care Commissioning Committee:

Noted the highlights of the minutes and key messages and that they will be presented at the next Governing Body meeting.

10. Any Other Business

Omnia Hefni advised she had attended the Humber Coast and Vale (HCV) International GP Recruitment Programme Board. The pilot started in 2017 and is coming to an end in December 2020 and the Board is proposing that there will be an alternate route for placing the International GPs who are in the pipeline currently via individual CCGs and PCNs. There are currently 26 GPs in place with investment to support them and recruitment will continue. 10 practices across the HCV have expressed an interest and the Intelligent General Practice Reporting (IGPR) Programme Board is proposing a letter to the PCNs regarding support preparation and placement.

Sally Tyrer asked why CDs were being approached and not individual practices and Omnia advised that the host practices must be training practices and the thought was that training practices could host on behalf of others. There were no questions.

Wendy Balmain noted that Dr Lincoln Sargeant Director of Public Health for North Yorkshire was leaving to take up a new post on the 11 December 20. Wendy asked the Committee to extend their appreciation to Lincoln for his contribution to improving health outcomes for the North Yorkshire population.

The Primary Care Commissioning Committee:

Noted the above.

11. Meeting Reflection

The Chair thanked everyone for their contributions.

The Primary Care Commissioning Committee:

Noted the above.

12. Next Meeting

The Chair advised that the next PCCC meeting was scheduled to take place on:

Thursday 28 January 2020, 2:00 – 4:00pm.

Via Microsoft Teams

It was agreed and noted that this would be reviewed in the New Year.

The Primary Care Commissioning Committee:

Noted the date and time of the next meeting and that it would be reviewed in the New Year.

Follow up actions

The actions required as detailed in these minutes are attached at Appendix A.

Primary Care Commissioning Committee

Key Messages to the Governing Body

- The Committee received the Significant Risk Review assigned to the committee and were assured all risks had been mitigated with detailed actions that reduced their score to 12 or below. This was to be kept until review by Risk owners.
- The Committee received a presentation providing a Strategic Overview of Primary Care. This detailed the current developments and actions within the national and ICS context as well as the initiatives ongoing in PCN and practices. The presentation was very informative and well received.
- In addition the PCCC received a PC report providing assurance on preparation for COVID vaccination programme, home pulse oximetry and assistance to practices where COVID had compromised delivery of services. In addition it included an update on the national initiative to expand PC acknowledging the PC response to the pandemic.
- Public health provided an update on their work across North Yorkshire which links with and supports work in PC and the community. They also included an update on the operation of their current services at this time and the consultation that is currently underway on the Healthy Child Programme. It was agreed the committee would receive the joint response from the CCG on the consultation.
- The Committee received and noted the regular reports on Finance and Integrated Quality Performance. No particular issues need to be brought to the GB attention.
- The Committee was given an update on the Humber Coast and Vale International GP programme. This was started in 2017 and would soon be open to all practices in the CCG to apply to be part of this programme.

Appendix A

North Yorkshire Clinical Commissioning Group Actions from the Primary Care Commissioning Committee on 26 November 2020

Meeting Date	Item	Action	Responsibility	Action Completed / Due to be Completed (as applicable)
26 November 2020	6.4 Public Health Update	Sue Peckitt and the CCG to pull together a collaborated response to the Healthy Child Consultation. CCG response to consultation submitted December 2020.	SPe/CCG	Complete
26 November 2020	7.1 Finance Report	Alec Cowell to send Sheenagh Powell a copy of the audit report from Deloittes.	Alec Cowell	Complete

**North Yorkshire Clinical Commissioning Group
Primary Care Commissioning Committee**

CLOSED ITEMS

Meeting Date	Item	Action	Responsibility	Action Completed / Due to be Completed (as applicable)
24 September 20	6.4 PCCC Forward Plan	<p>Primary Care Strategies – Wendy agreed to bring an overview of how the system is operating and what this means for primary care to the next meeting.</p> <p>Public Health Overview Report - It was agreed that Public Health should present an overview report detailing their key areas – Clare Beard to follow up.</p>	<p>Wendy Balmain</p> <p>Clare Beard</p>	<p>Complete</p> <p>Complete</p>
24 September 20	6.5 Public Health Update - Healthy Child Programme	<p>ACTION: A Healthy Child Programme presentation on the proposal for a new service model will be circulated post meeting.</p> <p>Post meeting note: Health Child Programme presentation issued 25/09/20.</p>	Victoria Ononeze	Complete