

Title of Meeting:	NY CCG Primary Care Commissioning Committee			Agenda Item: 5.2								
Date of Meeting:	25 March 2021			<table border="1"> <tr> <th colspan="2">Session (Tick)</th> </tr> <tr> <td>Public</td> <td>X</td> </tr> <tr> <td>Private</td> <td></td> </tr> <tr> <td>Development Session</td> <td></td> </tr> </table>	Session (Tick)		Public	X	Private		Development Session	
Session (Tick)												
Public	X											
Private												
Development Session												
Paper Title:	PCCC Annual Report and Effectiveness Review											
Responsible Executive Lead and Job Title Julie Warren, Director of Corporate Services, Governance and Performance Wendy Balmain, Director of Strategy & Integration		Report Author and Job Title Sasha Sencier, Board Secretary and Senior Governance Manager										
Purpose – this paper is for:	<table border="1"> <tr> <th>Decision</th> <th>Discussion</th> <th>Assurance</th> <th>Information</th> </tr> <tr> <td>X</td> <td></td> <td></td> <td></td> </tr> </table>				Decision	Discussion	Assurance	Information	X			
Decision	Discussion	Assurance	Information									
X												
<p>Has the report (or variation of it) been presented to another Committee / Meeting? If yes, state the Committee / Meeting: Yes. The draft Annual Report has been reviewed by Executive Directors and the Effectiveness Review has been reviewed by the Governing Body.</p>												
<p>Executive Summary This report covers the work of the Primary Care Commissioning Committee of NHS North Yorkshire CCG for matters relating to the year 2020/21 (Appendix A). This report also details the PCCC annual effectiveness review which is a requirement of its terms of reference (Appendix B). The attached self-assessment has been completed by the Board Secretary and agreed by the agreed by the Chair, Executive Lead and Director of Corporate Services, Governance and Performance and utilises HFMA guidance that determines if the committee has carried out its duties in accordance with the terms of reference. The outcome of the review was received by the Governing Body at the meeting on 25 February 2021. The Governing Body noted their assurance that the Committee has carried out its duties in accordance with the terms of reference for 2020/21. The effectiveness reviews for the Committee will inform part of an internal audit on governance and will also form part of the Annual Governance Statement 2020/21.</p>												
<p>Recommendations The Primary Care Commissioning Committee is being asked to:</p> <ul style="list-style-type: none"> Review and approve the draft PCCC Annual Report 2020/21. Approve for the Executive Lead, Director of Corporate Services, Governance and Performance and the Chair to approve any additional changes outside of the Committee due to the timeliness of publishing the combined Governing Body Committee's Annual Report 2020/21. Note that the Committee Annual Report will be combined to produce the Governing Body Committees Annual Report 2020/21 and will form part of the Annual Governance Statement 2020/21. Review the self-assessment and note that the Governing Body has received assurance that the report provides a level of assurance that the Committee is operating effectively. Agree any further actions required to address any gaps in assurance identified by the review. 												
<p>Monitoring Each Committee of the Governing Body approves their own annual report. A combined report is then presented to the Audit Committee and Governing Body for assurance and forms part of the Annual Governance Statement.</p>												

CCGs Strategic Objectives supported by this paper		
	CCG Strategic Objective	X
1	Strategic Commissioning: <ul style="list-style-type: none"> To take the lead in planning and commissioning care for the population of North Yorkshire by providing a whole system approach and to support the development of general practice. To make the best use of resources by bringing together other NHS organisations, local authorities and the third sector to work in partnership on improving health and care. To develop alliances of NHS providers that work together to deliver care through collaboration rather than competition. 	
2	Acute Commissioning: We will ensure access to high quality hospital-based care when needed.	
3	Engagement with Patients and Stakeholders: We will build strong and effective relationships with all our communities and partners.	
4	Financial Sustainability: We will work with partners to transform models of care to deliver affordable, quality and sustainable services.	
5	Integrated / Community Care: With our partners and people living in North Yorkshire we will enable healthy communities through integrated models of care.	
6	Vulnerable People: We will support everyone to thrive [in the community].	
7	Well-Governed and Adaptable Organisation: In supporting our objectives we will be a well-governed and transparent organisation that promotes a supportive learning environment.	X

CCG Values underpinned in this paper		
	CCG Values	X
1	Collaboration	X
2	Compassion	X
3	Empowerment	X
4	Inclusivity	X
5	Quality	X
6	Respect	X

Does this paper provide evidence of assurance against the Governing Body Assurance Framework?

YES
 NO
 X

If yes, please indicate which principle risk and outline

Any statutory / regulatory / legal / NHS Constitution implications	The Annual Governance Statement requires for each Committee to prepare an annual report for matters relating to the financial year. An annual review of the Committee's effectiveness is a requirement of its terms of reference.
Management of Conflicts of Interest	No conflicts of Interest have been identified prior to the meeting.
Communication / Public & Patient Engagement	The final report will be published on the CCG website and a link will be provided in the CCG's Annual Report 2020/21.
Financial / resource implications	None identified.
Outcome of Impact Assessments completed	Not applicable.

Sasha Sencier, Board Secretary and Senior Governance Manager

Primary Care Commissioning Committee

Annual Report 2020/21

This report covers the work of the NHS North Yorkshire CCG Primary Care Commissioning Committee (PCCC) meeting for matters relating to the year 2020/21. The PCCC is a statutory committee. This report provides the North Yorkshire Governing Body with a summary of the work done and, in particular, how the PCCC has discharged its responsibilities in supporting the Annual Governance Statement (AGS) and Assurance Framework. Further details are contained in the minutes of each PCCC meeting which are published on the CCG's website and are routinely provided to the Governing Body.

Committee Membership	<p>Chair: Sheenagh Powell, Governing Body Lay Member Executive Lead: Wendy Balmain</p> <p>Members as per Terms of Reference are as follows:</p> <p><i>Voting Members:</i></p> <ul style="list-style-type: none"> • Lay Member for Finance (Chair) • Lay Member for Patient and Public Engagement (Vice Chair) • Chief Finance Officer* • Director of Strategy and Integration* • Chief Nurse* • 2 Governing Body GP representatives <p>* nominated deputies are permitted but only with the prior agreement of the Chair</p> <p><i>In attendance (without voting rights):</i></p> <ul style="list-style-type: none"> • NHS England/Improvement Representative – North East and Yorkshire • Healthwatch representative • Health and Wellbeing Board/Public Health Representative • North Yorkshire Local Medical Committee Representative • Commissioning Support Representatives • Other Officers of the CCG <p>See Appendix A for dates of meetings held and members in attendance.</p>
Numbers required for quoracy and any instances where the Committee was not quorate	<p>The quorum for meetings shall be five members including a minimum of one lay member present. GP members should not exceed that of Executive Directors and Lay Members combined.</p> <p>Quorum was achieved for all meetings held in 2020/21.</p>
Conflicts of Interest	<p>The following conflicts of interest were identified for 2020/21:</p> <p>23 July 2020</p> <p>Item 8.2 Central Healthcare Estates: Dr Omnia Hefni declared her conflict of interest due to being a GP Partner at the practice. The Chair declared that Dr Hefni would not be included in any discussions on agenda item at 8.2. Quorum was not affected.</p>

	<p>24 September 2020</p> <p>Item 6.3a, Practice Changes, Central Healthcare Scarborough: Dr Peter Billingsley declared a financial conflict of interest due to being a GP locum and Dr Omnia Hefni declared a conflict of interest due to being a GP Partner of Central Healthcare.</p> <p>Item 6.3b Practice Changes, Church Avenue Medical Group, Harrogate: Sheenagh Powell declared a conflict of interest due to being a patient at the neighbouring Nidderdale Practice as well as being Chair of the PCCC Committee.</p> <p>The Committee agreed that Dr Billingsley and Dr Hefni would not be included in any discussions or decisions in relation to agenda item 6.3a and that Sheenagh Powell would not be included in any discussions or decisions in relation to agenda item 6.3b and that the Vice-Chair would Chair the meeting for this agenda item. Quorum was not affected.</p> <p>No other declarations of interest in relation to the business of the meeting were received or noted.</p>
<p>Date of approval of terms of reference</p>	<p>Committee Terms of Reference were approved in March 2020 by the Council of Members and NHS England as part of the Constitution and establishment of the NY CCG. The terms of reference were reviewed by Internal Audit as part of the Governance audit which received an opinion of 'high assurance'.</p>
<p>Key duties of the Committee</p>	<p>The role of the Committee shall be to carry out the functions relating to the commissioning of primary medical services under section 83 of the NHS Act. This includes the following:</p> <ul style="list-style-type: none"> • GMS, PMS and APMS contracts (including the design of PMS and APMS contracts, monitoring of contracts, taking contractual action such as issuing breach/remedial notices, and removing a contract); • Newly designed enhanced services ("Local Enhanced Services" and "Directed Enhanced Services"); • Design of local incentive schemes as an alternative to the Quality Outcomes Framework (QOF); • Decision making on whether to establish new GP practices in an area; • Approving practice mergers; • Making decisions on 'discretionary' payment; these decisions will be in line with The General Medical Services Statement of Financial Entitlements (Amendment) Directions 2019 • Currently commissioned extended primary care medical services; • Newly designed services to be commissioned from primary care; • Approving and supporting the development of Primary Care Networks in line with NHS England Guidance; • The Network DES including Network Agreement, DES specifications, Network funding including Network Engagement Funding, Network Administration Payment, Workforce Reimbursement and Clinical Lead funding.

<p>Strategic risks delegated to the Committee for scrutiny as per the Assurance Framework.</p>	<p>The Board Secretary is responsible for the management and maintenance of the Governing Body Assurance Framework, Corporate Risk Register and Directorate Risk Register.</p> <p>All CCG risks are discussed at the monthly Corporate Risk Review Group. The group is led at Executive Director level and Chaired by the Director of Corporate Services, Governance and Performance. The Board Secretary acts as Deputy Chair. The group provides a level of scrutiny and challenge to the process of identifying and measuring risk, culminating in a cycle of continuous monitoring and review. Risk leads join the meeting to update the group on risks as and when required.</p> <p>All risks on the Corporate Risk Register and Directorate Risk Register, regardless of their score, have been aligned to Committees. Significant risks (those scored 15 or above) are reported to the Committee on a quarterly basis. This provides Members of the Committees with an opportunity to scrutinize risks and ensure appropriate mitigations are in place to manage risks appropriately.</p> <p>In 2020/21, the NY CCG Governing Body developed its Governing Body Assurance Framework to map any significant risks that may affect the delivery of the strategic objectives. All risks were aligned to Committees to be reviewed quarterly at Committee meetings.</p> <p>During the first wave of the COVID-19 pandemic the Quality and Clinical Governance Committee took on the role of monitoring COVID-19 risks and met to do so every two weeks. All Covid-19 risks then became part of business as usual in terms of monitoring within the DRR and CRR.</p> <p>The Audit Committee reviews all risks twice per year.</p>
<p>Summary of the key assurances provided to the Governing Body.</p>	<p>During 2020/21 the PCCCs have provided oversight of:</p> <ul style="list-style-type: none"> • The Primary Care Strategy and updates from the CCGs • NHS England updates on Primary Care <p>The Chair or Vice-Chair of the PCCC has provided key messages and verbal updates to the Governing Body during 2020-2021. All of these updates have been published as part of the Governing Body papers on the CCG website.</p>

Primary Care Commissioning Committee NHS North Yorkshire CCG: Attendance 2020/21

Members	28/5/20	23/07/20	24/09/20	26/11/20	25/3/21	Number of meetings attended
Sheenagh Powell, Lay Member for Finance (Chair)	✓	✓	✓	✓	TBC	
Kate Kennady, Lay Member for Public and Patient Engagement (Vice-Chair)	✓	✓	✓	✓	TBC	
Wendy Balmain, Director of Strategy and Integration	✓	✓	✓	✓	TBC	
Sue Peckitt, Chief Nurse	A	✓	✓	✓	TBC	
Jane Hawcard, Chief Finance Officer	✓	✓	A	A	TBC	
Peter Billingsley, GP Governing Body Member – Hospital Based Care and Vulnerable People	✓	✓	✓	✓	TBC	
Mark Hodgson, GP Governing Body Member – Integrated/Community Care	✓	A	A	✓	TBC	
Bruce Willoughby, GP Governing Body Member – Integrated/ Community Care	✓	✓	✓	✓	TBC	
Total Number of Members Present	7	7	6	7		
In Attendance (Non-voting)						
Julie Warren, Director of Corporate Services, Governance & Performance	✓	N/A	N/A	N/A	TBC	
Alec Cowell, Deputy Director of Financial Services and Reporting	N/A	N/A	✓	✓	TBC	
Dr Omnia Hefni, GP Clinical Lead – Workforce Development	✓	✓	✓	✓	TBC	
Andrew Dangerfield, Head of Primary Care Transformation	✓	✓	✓	✓	TBC	
Sasha Sencier, Senior Governance Manager and Board Secretary	✓	N/A	N/A	✓	TBC	
Tim Readman, Senior Communications Officer	N/A	N/A	N/A	✓	TBC	
Dr Sally Tyrer, GP and North Yorkshire Local Medical Council (LMC)	✓	✓	✓	✓	TBC	
Angela Hall, Health Improvement Manager, North Yorkshire County Council	✓	N/A	✓	✓	TBC	
Chris Clarke, Senior Commissioning Manager, NHS England/Improvement	✓	N/A	✓	✓	TBC	
Clare Beard, Public Health Consultant North Yorkshire County Council	A	✓	A	A	TBC	
Victoria Ononeze, Public Health Consultant, NYCC deputised for CB	N/A	N/A	✓	✓	TBC	
David Iley, Primary Care Assistant Contracts Manager, NHSE/I	A	✓	N/A	N/A	TBC	
Ashley Green, Healthwatch	N/A	N/A	✓	A	TBC	

A Apologies received N/A Do not normally attend/no longer employed/Not employed yet

Issue	Yes	No	Comments / Action
Composition, Establishment and Duties			
Does the Committee have written terms of reference that adequately define the Committee's role?	X		Yes. Committee Terms of Reference were approved in March 2020 by the Council of Members and NHS England as part of the establishment of the new constitution for NY CCG. The tor were reviewed by Internal Audit as part of the Governance audit which received an opinion of 'high assurance'.
Have terms of reference been ratified by the Governing Body / Council of Members?	X		As above.
Does the Committee report to the Governing Body in accordance with its ToR?	X		Confirmed Minutes are presented to the Governing Body. For timeliness of reporting any key messages the Chair also provides an update report to the Governing Body.
Does the Committee receive the appropriate level of input from its Executive Members?	X		The Director of Strategy and Integration is the executive lead and other executive directors are members.
Does the Committee prepare an Annual Report on its work for the Governing Body?	X		Yes. Annual reports are presented to committees in February/March and form part of the Annual Governance Statement.
Has the committee been quorate for each meeting this year?	X		Yes. (TBD).
Administrative Arrangements			
Are agendas and reports circulated in good time for Committee Members to give them due consideration?	X		Papers are distributed one week before the committee meeting. The Board Secretary and Chairs have worked to ensure a consistent approach to this in all Committees.
Are the minutes and actions circulated in good time for Committee Members to give them due consideration?	X		Yes. The Board Secretary and Chairs have worked to ensure a consistent approach to this in all Committees.
Has the Committee met the appropriate number of times this year?	X		In line with the revised terms of reference the Committee should meet no less than 4 times per year. The Committee will have met 5 times in 2020-21. 2020-21 has been an exceptional year due to the Covid pandemic and Committees have had to work differently through use of email and virtual meetings.
Have all Committee Members attended meetings on a regular basis; is the level of attendance satisfactory and in line with the ToR's?	X		Yes. Attendance is detailed in the committee annual report.
Governance, Scrutiny and Assurance			
Can the Committee demonstrate that it has provided the Governing Body with assurance in respect of the Statutory Duties as per the ToRs?	X		Yes. The committee produces an annual report which provides this detail and assurance.

Can the Committee demonstrate that it has provided Governing Body with assurance in respect of the GBAF and Corporate Risks?	X	<p>The committee produces an annual report which provides this detail and assurance.</p> <p>Risk reporting did not start until later in the year due to the infancy of the organisation and the Governing Body approving the Risk Management Strategy in late June 2020. The Committee did continue to have an update on the agenda around risk and progress in this area. The front sheets of each report also include a section to highlight any significant reports to Committee Members.</p> <p>The Committee also produces key messages which include detail of risk management reporting taken to committee meetings.</p>
Has the Committee sufficient time to give appropriate consideration and scrutiny to its business and agenda?	X	There is a very full agenda but we have reviewed the frequency of some reports within the forward plan to try and ensure we have sufficient time for each item.
Does the Committee receive sufficient Reports to enable it to fulfil the ToRs?	X	Yes, a wide range of areas covered through the course of the year.
Do the reports presented to the Committee provide the quality and detail required to enable the Committee to provide assurance and carry out the ToR?	X	Yes. A high standard of reports provided. The Board Secretary and Chairs have worked to ensure a consistent approach to this in all Committees.
Does the Committee understand the risks / issues, make decisions and provide assurance	X	Yes. Significant risks aligned to the Committee are reviewed quarterly.
Has the Committee approved the ToR's and Work Plans to any subordinate groups?	-	Not applicable
Has the Committee received regular progress reports from subordinate groups and been advised of any significant issues/risks?	-	Not applicable
Has the Committee effectively managed Conflicts of Interest in line with the CCG's Conflict of Interest Policy and the Committee's ToR?	X	Yes. Declarations of Interest in relation to the business of the meeting are considered at the start of every meeting.
Work Plan		
Has the Committee established a workplan for the year and has been adhered to?	X	A work plan has been prepared by the Chair, Executive Lead and the Board Secretary and approved by the Committee.
Does the Committee review its Work Plan at least quarterly?	X	Yes. This is on the forward plan to review at every meeting.
Has the Committee achieved its agreed Work Plan?	X	Yes. Detail of this is within the Committee Annual Report.
Does the Work Plan reflect all of the duties and responsibilities set out in the ToR?	X	Yes.

Are there any areas of the ToR which require additional focus or a change in approach? Have any necessary changes been made to the Work Plan to achieve this?	X		Not currently.
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Any Other Comments, Areas for Improvement, or Gaps Identified