

<b>Title of Meeting:</b>	<b>Primary Care Commissioning Committee</b>	<b>Agenda Item: 6.3</b>									
<b>Date of Meeting:</b>	<b>25 March 2021</b>										
<b>Paper Title:</b>	<b>Primary Care Update</b>	<table border="1"> <thead> <tr> <th colspan="2"><b>Session (Tick)</b></th> </tr> </thead> <tbody> <tr> <td><b>Public</b></td> <td>X</td> </tr> <tr> <td><b>Private</b></td> <td></td> </tr> <tr> <td><b>Development Session</b></td> <td></td> </tr> </tbody> </table>		<b>Session (Tick)</b>		<b>Public</b>	X	<b>Private</b>		<b>Development Session</b>	
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<b>Private</b>											
<b>Development Session</b>											
<b>Responsible PCCC Member Lead</b> Name - Wendy Balmain Title – Director of Strategy and Integration		<b>Report Author and Job Title</b> David Iley Primary Care Assistant Contracts Manager									
<b>Purpose (this paper if for)</b>	<table border="1"> <thead> <tr> <th><b>Decision</b></th> <th><b>Discussion</b></th> <th><b>Assurance</b></th> <th><b>Information</b></th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td> <td>X</td> </tr> </tbody> </table>			<b>Decision</b>	<b>Discussion</b>	<b>Assurance</b>	<b>Information</b>				X
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			X								
<b>Has the report (or variation of it) been presented to another Committee / Meeting?</b> If yes, state the Committee / Meeting: No											
<b>Executive Summary</b>  Summary from NHS England North of standard items (including contracts, planning, finance and transformation) that fall under the delegated commissioning agenda.											
<b>Recommendations</b> <b>The Primary Care Commissioning Committee is being asking to:</b>  Note the contents of the paper											
<b>Monitoring</b>  N/A											
<b>Any statutory / regulatory / legal / NHS Constitution implications</b>											
<b>Management of Conflicts of Interest</b>		No conflicts of interest have been identified prior to the meeting.									
<b>Communication / Public &amp; Patient Engagement</b>		N/A									
<b>Financial / resource implications</b>		N/A									
<b>Outcome of Impact Assessments completed</b>		N/A									

**Name – David Iley**  
**Title – Primary Care Assistant Contracts Manager**



North Yorkshire CCG  
Delegated Commissioning  
Primary Care Update  
March 2021

Prepared by David Iley  
Primary Care Assistant Contracts Manager  
NHS England and NHS Improvement – (NE and Yorkshire)  
12<sup>th</sup> March 2021

## 1.0 Covid-19

Links below to regular updates provided to primary care and general practice regarding COVID-19.

<https://www.england.nhs.uk/coronavirus/primary-care/>

<https://www.england.nhs.uk/coronavirus/primary-care/general-practice/>

[Coronavirus » Updates and guidance for general practice \(england.nhs.uk\)](#)

## 2.0 Income Protection

Letters were published on 21<sup>st</sup> January and 3<sup>rd</sup> February 2021 around supporting General Practice and protecting income.

[C1054-supporting-general-practice-in-21-22.pdf \(england.nhs.uk\)](#)

[Letter template \(england.nhs.uk\)](#)

In relation to local services, CCGs are being asked to suspend local enhanced services unless they support the COVID-19 vaccination programme, reduce hospital admissions or increase hospital discharges.

In relation to NHS England enhanced services and QOF:

- The Minor Surgery Direct Enhanced Service (DES) is income protected until March 2021
- The Quality Improvement Domain and 8 Prescribing Indicators are income protected until March 2021

Given the continued priority attached to flu immunisation, social prescribing referrals and health checks, the Investment and Improvement Fund (IIF) indicators are not suspended.

QOF is to be reinstated from 1/4/21 based upon the indicator set already agreed for 2020/21, with very limited changes.

## 3.0 General Practice Electronic Declaration (e-Dec)

The e-Dec is an annual contractual requirement in which practices provide responses to a series of questions with the purpose of providing assurances of contract compliance. In relation to the most recent collection, the deadline was extended to Friday 26<sup>th</sup> February 2021. We have been advised all North Yorkshire Practices submitted a return before the deadline. Once we have been provided with the details of the returns they will be shared with the Committee.

## 4.0 Primary Medical Care Policy and Guidance Manual

The Primary Medical Care Policy and Guidance Manual This is the manual that NHS England and GP practices use to support contract changes such as list closures etc. It is regularly updated, the most recent of which was February 2021. The link below is to the updated document and highlights the changes

[NHS England » Primary Medical Care Policy and Guidance Manual \(PGM\)](#)

## **5.0 Digital Primary Care**

Digital Primary Care is a revenue funding stream being made available by NHS England and NHS Improvement to support the development of Digital solutions across Primary Care. The programme runs from 2020/21 through to 2023/24 to support Practices, PCNs and the wider system. The main aims of the funding are to address core digital capabilities as well as looking to deliver wider transformation of primary care using digital tools to drive improvement, innovation and create better access.

In 2020/21 funding has been used to support the ongoing development of the Yorkshire and Humber Shared Care Record and to pilot several innovative projects including Artificial Intelligence in Online Consultations, understanding patient digital maturity and enabling video consultations in community settings. Funding is also going to be used for additional project resource to support the utilisation of digital tools in primary care, the mobilisation of the digitisation of Lloyd George records programme as well as understanding and developing schemes of work to support digital inclusion.

## **6.0 Community Pharmacy Consultation Service**

Since starting in October 2019, the NHS Community Pharmacy Consultation Service (CPCS) has supported thousands of patients referred from NHS111 with medicine needs and management of minor acuity conditions. The service has now been extended to include referrals from General Practice for minor illnesses and conditions such as constipation, cough, sore throat and joint pain. Further information can be found in appendix 1. All Practices have been contacted to make them aware of the programme and to ask for expressions of interest to take part.

## **7.0 Primary Care Flexible Staff Pools**

The General Practice COVID Capacity Expansion Fund provides £150m to systems via CCGs for expanding general practice capacity. The Fund is intended to support amongst other things an increase in overall GP numbers. Systems can receive up to an additional £120k for the realisation of pools at pace to engage and deploy local GPs flexibly in an ongoing way to support local primary care, including PCN extended access services.

The £120k funding can be used for creating and administering a virtual pool or enhancing an existing pool arrangement and can be utilised in a number of ways including for staff to administer the pool, digital supplier requirements, and the delivery of the peer support and networking activities.

Further information can be found in the following presentation [PowerPoint Presentation \(england.nhs.uk\)](#)

NHSE&I emailed Practices and PCNs on 5<sup>th</sup> March with a short survey to raise awareness of the initiative and to ask for feedback to ensure the funding is used most effectively.

***The Committee is asked to note the updates in the paper***

# GP Referral to the Community Pharmacy Consultation Service



Since starting in October 2019, the **NHS Community Pharmacy Consultation Service (CPCS)** has supported thousands of patients referred from NHS111 with medicine needs and management of minor acute conditions.

The service has now been extended to **include referrals from General Practice** for minor illnesses and conditions such as constipation, cough, sore throat and joint pain\*



## How does it work?



A patient contacts their GP Practice for an appointment



The practice assesses the patient for minor acute conditions



If appropriate, the patient is referred electronically to their preferred pharmacy



The pharmacist undertakes the consultation with the patient



## What are the benefits?

### Referring patients to CPCS this way:

- Gives the pharmacist all the information needed to provide the service safely and effectively
- Usually allows the patient to be seen the same day
- Frees up practice appointment time
- Allows information captured during the consultation to be shared with the practice

**91%** of GP Staff indicated they would recommend this service to other GP practices\*\*

**89%** of patients were 'definitely satisfied' with the consultation with the pharmacist†

Patients cited convenience, time-saving, & being able to fit appointments around work as reasons to use the service again†



## How do we get involved?

### Rollout of GP referral will be phased over a period of time

- Training will be provided for GP practice staff to support the referral process
- Communication will be shared with GP staff and local pharmacies to support implementation
- If you are interested in implementing GP referral to CPCS, email [f.pedingham@nhs.net](mailto:f.pedingham@nhs.net)

**Look out for further information for your practice or pharmacy soon!**

\* All listed appropriate conditions is provided in the GP Toolkit and CPCS service specification  
\*\* Data and feedback from clinicians

