

North Yorkshire Clinical Commissioning Group **Annual General Meeting**

Wednesday 7 July 2021 17.00 - 18.30 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)

51 members of the public registered to attend the event via Eventbrite – a total of 35 members attended virtually. (In total 51 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 |
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| 1 | Welcome and Introductions | |
| | 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. | |
| | The presenters were Amanda Bloor (AB), Accountable Officer, Jane Hawkard (JH), Chief Finance Officer and Dr Charles Parker (CP), Clinical Lead. | |
| 2 | Achievements Over the Last 12 Months | |
| | This past year saw us coming together as a new organisation - NHS North Yorkshire Clinical Commissioning Group (NYCCG) on 1 April 2020 just as the nation was entering the first national lockdown and the NHS was stepping up to address the considerable challenges of the COVID-19 pandemic. | |
| | While COVID has been a priority, NYCCG has continued to remain very focussed on the 'day job' and has worked to improve health and care outcomes for local people across North Yorkshire embracing technology and a greater sharing of information. | |
| | Colleagues at the CCG have achieved extraordinary things over the last year responding quickly and flexibly to the demands of the pandemic. It has presented an opportunity to leave some of the traditional barriers behind us and build on innovations which have enabled the delivery of more integrated care. All this has been done whilst colleagues have been working remotely and trying to balance home and work life. | |
| | Our work has been enhanced this year by support from the voluntary sector and members of the public. Volunteers were instrumental in delivering vaccination services, working at all levels from stewards to vaccinators. They also provided essential support | |

to people in our communities who were isolating by delivering medicines and other supplies.

Digital technology was improved to enable GP practices to continue functioning including the distribution of more than 400 laptops to GP practices to support remote working and facilitate non-face-to-face appointments. This was crucial to enable GP practices to continue functioning and serving the population of North Yorkshire.

The CCG also procured tablet devices for every care home in North Yorkshire to enable care homes to liaise remotely with their GP practices regarding patient care and receive training on the correct use of Personal Protective Equipment (PPE).

In December 2020 the COVID-19 Vaccination programme began administering the first doses of the Pfizer/BioNTech COVID vaccine to patients over the age of 80 in GP Practices and this was then extended to larger sites across our area.

The COVID-19 vaccination programme is the largest vaccination programme in the NHS' 72-year history and the NHS remains on target to offer first doses to all adults by the 19 July 2021. Delivery of the vaccine has been in a range of locations including hospital hubs, Yorkshire Events Centre, Ripon racecourse, Scarborough Rugby club, Whitby Spa, the Forum in Northallerton and a range of high street pharmacy sites across North Yorkshire. There has been an exceptionally high take up of the vaccine in North Yorkshire and to date 93.4% of over fifties have received both vaccinations and the under thirties 59.4% have already received a first vaccination.

We have had a strong focus on communicating and engaging with all communities to help them have confidence in the vaccine programme and step forward to get a vaccine when their time arrived. This has included identifying trusted partners, sharing messages of reassurance, and encouraging GP registration particularly among the homeless population in collaboration with Local Authority and eastern European communities in order to enable them to access a vaccination.

A public meeting with NYCC and Police was held which was a great opportunity where all statutory organisations came together to address concerns regarding the pandemic.

Across North Yorkshire partner organisations have collaborated across health, social care, local authorities, and community groups, together with the public, to respond to the pandemic. It has truly been a joint response with a shared aim – to keep people safe and well and to save lives.

Continuity of services has resulted in new ways of working such as a total triage approach to all appointments. Primary Care Networks (PCNs) have been key to supporting GP practices to respond to the rapidly changing environment and new ways of working.

Other developments in Primary Care have been the promotion of the NHS APP to help patients and clinicians manage their time and care more effectively. Development of a targeted programme to use digital technology, to improve access to care for our population.



New roles for pharmacists, social prescribers, therapists and paramedics have been established in GP Practices.

Access to virtual Diabetes prevention programme and Diabetes structured education has been increased and we also introduced a pilot health navigator scheme in Harrogate and Scarborough to help reduce hospital admissions.

NYCCG have continued to invest in mental health services throughout 2020/2021 and continued to deliver services throughout the pandemic. NHS staff are working in local schools with colleagues to provide mental health and emotional wellbeing advice and support to staff and students especially during the pandemic.

"Champions" have been recruited to play an active part in developing a successful "The mental health website (the Go-To) to help children and young people.

A Sleep Service delivered by the Sleep Charity was commissioned across North Yorkshire to help children and young people overcome sleeping difficulties and a new online autism assessment has been set up to assess children and young people so that families do not have to attend face to face meetings during the COVID-19 pandemic.

A free online mental health and emotional wellbeing support service has been launched to help men aged 18+ called Qwell. This provides an anonymous online counselling and emotional wellbeing service which can be accessed anywhere using a computer, smartphone or tablet device. Qwell for Men, delivered by Kooth, the UK's largest provider of online mental health services, has been commissioned for use across the Humber, Coast and Vale Health and Care Partnership. This marks the first time a digital mental health service has been commissioned specifically in response to male suicide.

NYCCG has launched an electronic system to improve patients' end of life care. A new Be Aware online knowledge hub to tackle child exploitation in North Yorkshire and the launching of the new NHS North Yorkshire CCG Website to help patients and healthcare professionals.

Also, a wellbeing and resilience hub has been established to support health and care staff who are struggling with the impact of COVID-19.

Facilities for the future

This year has seen a continuation of important NHS facility developments in North Yorkshire, and we have been engaging with local people on how these opportunities can be used to best improve services for local people.

Whitby Hospital - We advised you last year of the significant upgrade work at Whitby Hospital, which is now well under-way, and they are working towards a key milestone later this summer as work is completed on the tower block. (£13m renovation)

The redevelopment will result in a new and fit for purpose hospital in Whitby. The hospital will have inpatient beds, outpatient facilities, diagnostic services such as X-ray, physiotherapist and occupational therapy services and other services to support

patients. The facility will also act as a base for community services staff and is planned to open to patients in early 2022.

The local community has been heavily involved in this project throughout the year on aspects of the finished space - garden project, ward/area naming and artwork projects.

Catterick Integrated Care Campus - During 2020/21, the CCG continued to work in partnership with colleagues from NHS England and the Ministry of Defence (MOD) to develop a sustainable, long term solution for health and care services on the Catterick Garrison site.

Funding for the project was approved in February 2021 and conversations continue with local stakeholders and the public about the future health and wellbeing hub.

This significant joint venture of the Ministry of Defence and NHS partners will transform health and care in Richmondshire.

Scarborough Hospital transformation - This year £47million investment, will deliver a new upgraded emergency and urgent care facility at Scarborough Hospital, which will double the clinical space as well as provide a new integrated critical care floor for intensive care and coronary care

There will be further engagement in the year ahead, to ensure the new facilities best meet the needs of patients

Friarage Hospital - Friarage Hospital in Northallerton is to benefit from a £1million investment to kick-start the development of a new diagnostic hub which will provide state-of-the-art facilities for patients undergoing urology and endoscopy procedures, this is the first phase of a £5 million scheme.

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

CP introduced Chief Finance Officer, Jane Hawkard (JH), to explain how the budget is spent across NYCCG. JH reported that due to COVID-19 the usual financial business rules for 2020/21 were suspended and replaced with a special COVID-19 financial regime designed to support the NHS dealing with the pandemic. NYCCG's original funding allocation was to be £673m with a savings target of £20m. However, COVID-19 costs, CCG and local NHS Provider support funding, amongst others increased the CCCG's funding allocation up to £790.5m.

NYCCG received a funding allocation of £790.5m, this included £28.9m of funding to tackle the impact of COVID-19 and overall, the CCG spent £790.5m and achieved a £0.1m surplus and over achieving on its financial plan to break even.

NYCCG spent £790m commissioning healthcare services across North Yorkshire. Almost half of this expenditure (£391m) is with NHS Acute hospitals for planned and emergency care. During 2020/21 the CCG incurred £28.9m supporting local health system to both cope with COVID-19 activity and to help healthcare providers adapt their working practices.



In line with national expectations NYCCG continued to invest in mental health services during 2020/21 at a higher rate than its funding allocation increase. For 2020/21 this was a minimum growth of 5.3%. This requirement is mandated to CCGs through the "Five Year Forward View for Mental Health" report.

Adults:

Autism and ADHD assessments - £340,000

Mental Health Crisis Services - £340,000

Dementia Coordinators - £48,000

Early Intervention in Psychosis - £224,000

Eating Disorders - £125,000

Independent Placement Support Services - £200,000

Perinatal Services - £135,000

Psychological Therapies (IAPT) - £455,000

Scarborough Survivors Support - £51,000

Children and Young People:

ADHD Services - £150.000

Autism and ADHD Assessments - £596,000

Children and Young People Trailblazers - £177,000

Children and Young People's Services - £135,000

Sleep Service (pilot project extension) - £70,000

The Activity for 2020/21 saw:

502 Hip Replacements

35,742 Elective Admissions to Hospital

232,079 Outpatients follow-up appointments

3,077 Babies delivered

2,365,164 Primary Care Appointments

236,662 Primary Care Appointments missed

1,421 patients admitted to hospitals with COVID-19

945,689 items prescribed that are available "Over the Counter" e.g. paracetamol

JH stated that a full set of accounts is available for 2020/2021 within the CCGs' Annual Reports available online at www.northyorkshireccg.nhs.uk.

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

4 Next Stage – Supporting Recovery

There are some key challenges ahead as we look forward and focus on recovery

We will continue to deliver the NHS COVID vaccination programme – plan for the booster programme and the annual Flu programme

We will continue to support the recovery and restoration of planned care, supporting patients waiting for hospital procedures and where possible embrace change where it is appropriate to do so, so we can catch up more quickly ie: offering telephone/video conference outpatient appointments, when it is suitable to do so.

We aim to restore full operation of all cancer services and continue to ensure anyone requiring treatment is offered the treatment that they require. We urge everyone who may have put off accessing services to please come forward.

In primary care, a focus on reducing the backlog of routine reviews for patients with long term conditions and screening work is a priority. Where possible some reviews can be done over the phone rather than face to face. For those who are still concerned about accessing health care settings for reviews, we will consider other options that are available and more effective.

We continue to promote the NHS App which is an effective way of ordering repeat prescriptions and also NHS111 which can signpost you to the appropriate services locally and book you into available appointments.

We will focus on transforming community and urgent and emergency care – including continuing to join up health and social care and voluntary and community sector delivering services more locally while ensuring that those who do need urgent or emergency care people know how to access the services.

Primary Care

COVID-19 has hit all of our communities and NYCCG is very grateful for the support the NHS has had throughout. Everyone understands the impact of COVID and we encourage people to come forward for their routine reviews, or if they have any concerns.

Demand for primary care appointments is exceeding pre-pandemic levels and where possible we encourage the use of the NHS App. We know that there is some frustration about access to face-to-face appointments, but we want to reassure everyone that clinical judgment will always be used to determine if a face-to-face appointment is appropriate.

The data shows in April 2019 - 4 in every 5 patients were seen face-to-face in a GP practice (by a member of the team i.e.: GP, practice nurse or pharmacist) In April 2021 - 3 in every 5 patients were seen face to face.

This shows that we are still seeing more than half of patients face-to-face in primary care settings, but we have achieved an increase of 10,000 appointments a month by doing more telephone appointments. This is allowing practices to help more patients on a monthly basis. Across North Yorkshire we are providing 200,000 primary care appointments per month, a mix of face to face and telephone.

NHS Reforms

Legislative changes to NHS structures are imminent and the new legislation was presented to Parliament on 6 July 2021 and new structures will commence from 1 April 2022. Integrated Care Systems (known as ICS) will be established as statutory organisations from 1 April 2022 and ours will comprise all the partners that make up the health and care system across North Yorkshire and York and the Humber region. From that date all CCGs will be abolished, and the commissioning functions will be transferred to the ICS.



NYCCG will be absorbed into the ICS and continue working as part of Humber Coast and Vale delivering health care to the community and support integrated services.

Prior to 1 April 2022 NYCCG will ensure that the right infrastructure and relationships are in place and that North Yorkshire will benefit from being part of the ICS and will also continue to hear the voices of the local communities.

5 Questions and Answers

A number of questions had been submitted by members of the public either prior to the meeting or via the "chat box" at the meeting. There had also been a number of questions specifically relating to stroke services at Scarborough Hospital.

Questions were acknowledged from Sam Oakden, Councillor Maw, John Wane and Dr Hayes regarding the stroke services, and they were advised that due to limited time the aim was to hold a specific meeting with clinicians to address the queries about stroke services.

Question 1: The first question is a prescribing one asking why North Yorkshire CCG does not prescribe testosterone to women in menopause, when there are a lot of CCGs in the country that do?

Answer: Charles Parker - North Yorkshire CCG are working with local consultant gynaecologists and GPs with specialist interest of managing the menopause to review the current Hormone Replacement Therapy including the use of testosterone. As testosterone is no longer licensed for this use it would require discussion with our local prescribing committee for them to consider the evidence or efficacy and safety of prescribing testosterone for women in menopause.

Question 2: The CCG has responded to a recent Planning Application regarding the impact on GP services of a new development in Hunmanby so please can the CCG outline what plans have been developed to address the impact of new housing developments in the Hunmanby area?

Answer: Jane Hawkard - The CCG has a very important role to play in helping identify what additional future healthcare provision may be needed as the result of any population growth. We work with our local authority partners to ensure that future need is identified and costed early so that this can be considered as communities develop.

The CCG has been consulted on the latest Scarborough Borough Council Local Plan around the proposed future development sites. We have met with all the GP practices and the council planning team. Practices are currently responding in terms of the impact of any proposed future housing on their existing surgeries. Where there are significant issues, it would be hoped that the council takes that into consideration and that these housing sites are not included in the Local Plan. There is also a recognition that Scarborough Borough Council are committed to meeting their housebuilding targets and when we cannot prevent housing development, we are committed to securing developer funding contributions to ensure that we can adjust future healthcare provision to take into account increases in population.

The CCG has been, and will continue, to respond to further residential planning applications in this locality. As the accumulation of developments gain planning approval, it is expected that there will be a consolidated sum of Section 106 funding specifically available for redeveloping Filey and Hunmanby Surgeries

Question 3: This question is about access to GPs and the feeling that GPs have not been seeing patients, particularly face-to-face, during the pandemic and a concern that there may never be a return to face-to-face appointments.

Answer: Charles Parker - We know that demand for GP appointments is high and exceeding pre-pandemic levels and we know that it can be frustrating to have to wait for medical advice.

Throughout the pandemic everyone in the NHS has been working hard to make sure people get the care that they need safely. Primary care has remained open and available through the pandemic and as we talked in our presentation it is the adaptations to new ways of working which has enabled us to provide these services in a way that keeps both patients and staff safe.

Because of the infection prevention control measures in place it takes longer for a clinician to deliver a face-to-face appointment than a remote consultation. Our clinical colleagues will always be led by what is clinically in the best interests for the patients they serve. By delivering a blend of face-to-face and telephone appointments with over 60% of GP appointments happened face-to-face in North Yorkshire (according to data compiled by NHS Digital) we can help more people more quickly. We will continue to work with our clinical colleagues to makes sure that we can maximise our impact as we move out of the pandemic and this blended approach will likely remain part of the mix. We know that some patients will welcome the flexibility this brings.

Question 4: Please could I ask with regard to emergency and urgent care, is the emphasis purely on medical services or is the CCG also looking at this in the context of urgent and emergency dental care, together with NHS England and dental providers?

Answer: Amanda Bloor - North Yorkshire CCG does not commission NHS dentistry, this is NHS England. This is one of the advantages as we move forward I hope that the commissioning will become more joined up to support local dentistry pathways, especially for urgent dental care.

Question 5: How do charities that get small amounts of money through the CCG know that the new ICS will know about them? and the importance of still receiving vital money. We have had money from the CCG for the last 7 Years but only ever met once. This money is small but vital for community preventative services to continue. Do we contact them? Who?

Answer: Amanda Bloor - Under the Integrated Care System we will be delivering services through local places as North Yorkshire and York and there will remain the very strong relationships we have with our partners and voluntary sector organisations across North Yorkshire and York, and we would not want to move away from that.



Wendy Balmain clarified, Jason Stamp, chairs a Community and Voluntary Group across the Humber Coast and Vale and every place within the ICS is included and represented. It is recognised that the voluntary sector plays an important role, and we would want to continue that moving forward. If a local conversation is required, please do get in touch. We are also working with NYCC to ensure we have the right preventative services in place to support our vulnerable groups.

Question 6: Do you have to get your GPs permission to access your full medical record on the app, please could I ask if this is correct? If so, what is the process for this?

Answer: Dr Charles Parker - Yes, you can download the NHS APP to access your medical records. If you make this request, you will be contacted, to ensure you are the person making the request. The process takes two days to activate and is secure.

Question 7: Can I ask if the reported surge in mental health issues is being seen on the ground in North Yorkshire.

Answer: Dr Peter Billingsley - During the last fifteen months North Yorkshire has seen an increase in children with eating disorders, more people for autism, a rise in dementia patients needing diagnosis, an increase in patients using IAPT services. A general increase in patients requiring mental health services.

Question 8: What is planned in the coming year for cancer services?

Answer: Wendy Balmain - The restoration of cancer services is one of the key priorities. We are working very closely with the Cancer Alliance with the key aim to reduce patients waiting over 62 days for treatment. We are continuing to encourage patients to come forward if they are not feeling well, increasing screening in Primary Care, reviewing cancer care pathways making sure that all patients have access to living with and beyond cancer and have the support required. New diagnostic centres are coming on stream which will provide a rapid diagnostic service to patients.

Question 9: Will NYCCG publicise the GP Data for Planning and Research scheme?

Answer: Sue Peckitt - NHS Digital have engaged with GP practices regarding the data collection. The data was due to be released 1st July but will now be released 1st September 2021 by NHS Digital. North Yorkshire will not be publishing this data.

Question 10: What is being done to identify and then engage with the vulnerable groups that were mentioned during the presentation please? Have the vulnerable groups been identified?

Wendy Balmain - Work has been ongoing, working with local GP Practices and North Yorkshire County Council across North Yorkshire to identify vulnerable patients. The voluntary sector is also involved, and vulnerable patients have been identified and support systems have been put in place.

Amanda Bloor - We have engaged with the eastern European communities on the east coast of North Yorkshire to engage in the covid vaccination programme with the use of interpreters and social media.

Sue Peckitt - We are also working with our local safeguarding groups, North Yorkshire Safeguarding Board and Healthwatch and local charities to ensure voice of the vulnerable are heard.

Question 11: Are children going to be vaccinated against COVID as they seem to be catching this and passing this on to people that are double vaccinated at the moment?

Answer: Amanda Bloor- This decision would be made by the Joint Committee on Vaccination and Immunisation (JCVI). We all need to continue to observe the guidance and continue to follow "Hands, Face and Space" for us to stay safe.

Question 12: Are you worried about winter, with COVID and services being able to cope.

Answer: Dr Bruce Willoughby - Yes, we are always worried about winter and plan for it across the wider health and care system and this year we will again continue to have the pressures of COVID. It is very important for patients within North Yorkshire and York to have the flu vaccinations. Due to reduced exposure to viruses, we are expecting an increase in child infections which will rise higher during the winter months. Winter planning will commence shortly but the NHS is expecting it to be hard.

Question 13: The Integrated Care System (ICS) covers a large area. How can patients be reassured that their voice will be heard.

Answer: Amanda Bloor – Yes, geographically the ICS is large, but most importantly we are working in partnership in our places across North Yorkshire and York. I do anticipate the relationships that we have built over the last 15 months with our patients, partners and community groups to continue and be the building blocks for the future.

Question 14: Is there sufficient physiotherapy available for stroke patients when they are discharged?

Answer: Dr Billingsley: During the pandemic stroke patients and rheumatic patients have been prioritized to get physiotherapy whilst in hospital. We do have a very good physiotherapy service and rehabilitation is very important for stroke patients, but we do need to do more.

On discharge community physiotherapists take over stroke patients' rehabilitation. Moving forward to April 22 and with the commencement of ICS's working in partnerships this will have a positive impact on this service.

Please note all other questions relating to stroke services have been answered separately, details available on website.

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 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.

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

Meeting Closed