

**NORTH YORKSHIRE CLINICAL COMMISSIONING GROUP
(NYCCG)**

Primary Care Commissioning Committee (PCCC)

**22 July 2021
14:00 – 16:00**

Via Microsoft Teams

Present (Voting Members)	
Wendy Balmain	Director of Strategy and Integration, NYCCG
Dr Peter Billingsley	NYCCG Governing Body GP
Jane Hawkard	Chief Finance Officer, NYCCG
Dr Mark Hodgson	Clinical Lead for Community & Integration, and Governing
Kate Kennady	Governing Body Lay Member, NYCCG
Sue Peckitt	Chief Nurse, NYCCG
Sheenagh Powell	Governing Body Lay Member, Chair, NYCCG
Dr Bruce Willoughby	NYCCG Governing Body GP

In Attendance (Non-Voting Members)	
Andrew Dangerfield	Head of Primary Care Transformation, NYCCG
Sharon Gent	Executive Assistant (attendance)
Dr Omnia Hefni	NYCCG GP
Helen Phillips	Head of Primary Care (North Yorkshire and Humber), NHSE
Cathy Tobin	Secretariat (Minutes)

In Attendance	
Neil Laurence	Service Improvement Manager - Primary Care
Tim Readman	Senior Communications Officer, NYCCG
Sasha Sencier (part)	Board Secretary and Senior Governance Manager, NYCCG

Apologies	
Ashley Green	Healthwatch
Angela Hall	Public Health Consultant, NYCC
David Iley	Primary Care Assistant Contracts Manager (NHSE)
Dr Sally Tyrer	GP and LMC representative

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.

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 (NYCCG).

No declarations of interests were declared in relation to the business of the meeting.

Declarations declared by members of the Primary Care Commissioning Committee are listed on the CCG website: <https://www.northyorkshireccg.nhs.uk/home/about-us/publications/conflicts-of-interest/>

The Primary Care Commissioning Committee:

Noted that no declarations of interests were declared in relation to the business of the meeting.

3.0 Questions from Members of the Public

The Chair advised that no questions had been submitted from members of the public prior to the meeting. Lynn Hanratty did enquire about joining the meeting as a member of the public but did not join.

The Primary Care Commissioning Committee:

Noted that no questions had been submitted from members of the public prior to the meeting and no members of the public joined the meeting.

Minutes and Matters Arising

4.1 Minutes from the Meeting held on Thursday 27 May 2021

Minutes of the meeting held on Thursday 27 May 2021 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 held on Thursday 27 May 2021 as an accurate and true record of the meeting.

4.2 Action log

The action log was reviewed by the Primary Care Commissioning Committee and the following was noted:

Action: 5.3 PCCC Forward Plan – Sheenagh sought clarity on the action and it was agreed that 'Schedule' should read ' Primary Care Strategy'. Wendy confirmed there is a primary care plan but that the development of a primary care strategy would be through the new operating arrangements of the Humber Coast and Vale (HCV) ICS as it becomes established. Wendy will provide an update on any developments at the next meeting.

ACTION: Action: 5.3 PCCC Forward Plan - the Committee agreed that 'Schedule' should read ' Primary Care Strategy'.

ACTION: An update on Primary Care Planning and HCV ICS Primary Care development to be presented to the next meeting.

The Primary Care Commissioning Committee:

Accepted the action log and the above changes.

5.0 Governance

5.1 Significant Risks

Sasha Sencier presented the significant risks report to the Committee for assurance and confirmed that she had recently met with the risk leads and verbally updated the Committee on the changes, however will present an updated report to the next meeting.

ACTION: An updated Significant Risk report will be presented to the next meeting.

The Primary Care Commissioning Committee:

Was assured of that no significant risks are identified for primary care and an updated report will be presented to the next meeting.

5.2 Operational Scheme of Delegation

Sasha presented the Operational Scheme of Delegation to the Committee and informed the Committee that it had been approved at Governing Body and was just to update the Committee on the approvals.

The Primary Care Commissioning Committee:

Noted the Operational Scheme of Delegation.

5.3 PCCC Forward Plan

Following discussion under agenda item 4.2 Action Log, the Committee agreed that 'Schedule' should read ' Primary Care Strategy'.

ACTION: Agenda item 4.2 Action Log, the Committee agreed that 'Schedule' should read ' Primary Care Strategy'.

The Primary Care Commissioning Committee:

Noted the PCCC Forward Plan and the above change.

6.0 Strategy and Planning

6.1 Primary Care Report

Wendy Balmain presented the Primary Care Report and highlighted the key areas below:

Primary Care remains extremely busy with increased patient demand. There is an increase in non-face to face appointments with face-to-face appointments still being available.

Primary Care are focusing on recovery and ensuring good patient access and it was noted that face to face appointments are widely available and there has been increased use of telephone and video consultation. Overall appointments have increased on pre-pandemic levels with a great mix in access type.

Bruce Willoughby also highlighted that Covid rates are back up. Despite the government's relaxing of protective measures from Monday 19 July, current infection, prevention and control measures will continue.

The Covid vaccination programme met its target offering the vaccination to all the over 18s and are now working towards phase 3 of the national road map which includes covid boosters and the winter flu jab.

Bruce added that additional roles have been recruited, to assist practices.

The Primary Care Commissioning Committee:

Noted the update of the Primary Care Report.

6.2 NHS England / Improvement

Helen Phillips presented the NHSE/ Improvement report and highlighted the key areas noted below:

PCN organisational development monies for the current year have been through the ICS Executive Group for approval and the PCNs have been informed of their allocations

Funding has been received from the ICS for Continuing Professional Development for nurse training, however interest has been low to date.

Further funding has been made available for PCN Clinical Director support.

Two new Enhanced Services are available to GP Practices to support recovery from the pandemic; Weight Management Enhanced Service and Long Covid Enhanced Service.

Clinical Pharmacists that have remained within the Clinical Pharmacists in the General Practice Scheme and in post at 31 March 2021 can transfer to the PCNs and be reimbursed under the Additional Roles Reimbursement Scheme (ARRS).

Work is on-going with the General Practice Appointment Data and NHSE have developed a consistent approach to assist primary care.

A decision was required regarding the clinical waste contract which NHSE manage, but the budget sits with NYCCG. NHSE have not been able to procure a new supplier but have been working nationally to undertake a 12-month direct contract award with the incumbent clinical waste provider. NHSE also propose to appoint a managing agent to oversee the management of the contract with the intention of undertaking a procurement exercise for a future clinical waste provider. The cost of the managing agent is £8k, however it is anticipated that 10% could be saved.

NHSE sought approval to proceed with the 12-month direct contract award with the incumbent clinical waste provider and the appointment of a managing agent to oversee the contract.

Sheenagh queried whether there would be any risks to the service and Helen confirmed that having the 12-month contract would ensure that the waste is being collected regularly. In addition, Helen stated that by appointing a managing agent they will offer guidance on future contracting models and will be able to resolve queries much faster.

DECISION: The committee approved the 12-month direct contract award with the incumbent clinical waste provider and the appointment of a managing agent to oversee the waste contract at a cost of £8k.

The Primary Care Commissioning Committee:

Noted the update from NHSE / Improvement and approved the 12-month direct contract award with the incumbent clinical waste provider and the appointment of a managing agent to oversee the contract.

6.3 Public Health

The Committee noted the Public Health report in the absence of Angela Hall and it was agreed that further detail could be brought to the next Committee if required.

The Primary Commissioning Committee:

Noted the update from Public Health.

6.4 Practice Changes and Rent Reviews

No practice changes or rent reviews were presented to the Committee.

The Primary Care Commissioning Committee:

Noted that no practice changes or rent reviews were presented to the Committee.

7.0 Finance and Performance

7.1 Finance Report

Jane Hawkard presented the finance report and highlighted the following:

The Co-commissioning allocation has a 2021/22 recurrent shortfall in allocation of £2.3m. This has been a consistent issue with the co-commissioning budget since the CCG merger.

The primary care co-commissioning budget is overspent by £975k for the first quarter this financial year, offset by other primary care benefits of £538k, giving an overall overspend of £437k, which would result in a forecast overspend of £1.134m for April to September. The primary care finance team are reviewing mitigations including rate changes on primary care premises.

The allocation of funding for the second half of the year has still not been advised and Jane stated that the budget has to balance at the end of March 2022 which carry risks.

A Humber, Coast and Vale Primary Care Management Executive group has been set up. Part of the groups remit is to recommend how primary care transformation funds are used and allocated. There is £24m of additional transformation funding expected in 2021 – 22.

Prescribing information is released to CCGs two months in arrears therefore only month one of the data has currently been received. The prescribing budget was overspent by £680k for the financial year 2020/21, due mainly to increased drug costs rather than increased prescribing.

The Primary Care Commissioning Committee:

Noted the contents of the Finance Report.

7.2 Integrated Quality Performance Report

Andrew Dangerfield presented the Integrated Quality Performance Report and highlighted the following:

98% of GP Practices in North Yorkshire have a CQC rating as good or outstanding. The national figure is 95%.

Patient Experience, Friends and Family data submissions have been suspended due to the pandemic and has not yet restarted for GP Practices.

The health check target for people with severe mental illness (SMI) for Q1 is 16.5% and NYCCG is currently at 4.1% but Andrew stressed that health checks tend to be undertaken towards the end of the year, therefore will expect the figure to rise.

Immunisation and screening for child immunisation and cervical screenings are both higher than national average.

GP Appointments have seen an increase of 65.5%, which is above the previous year. Nationally as well as across NY there has been high increase in face-to-face appointments and a lower increase in non-face to face appointments.

Andrew stated that all practices remained open during the pandemic but are still extremely busy and under significant pressure.

Helen informed the committee that a regional communications piece would be issued shortly and asked for any key messages. Wendy suggested a section about how the public access the different urgent care services e.g.111 / 999, would be useful.

The Primary Care Commissioning Committee:

Noted and was assured with the update from the Integrated Quality Performance Report.

8.0 Investment Decisions

There were no investment decisions to approve.

The Primary Care Commissioning Committee:

Noted that 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 the report to the Governing Body.

The Primary Care Commissioning Committee:

Noted the highlights of the minutes and key messages to the Governing Body.

10. Any Other Business

There was no other business to discuss.

The Primary Care Commissioning Committee:

Noted that there was no other business to discuss.

11. Meeting Reflection

The Chair thanked everyone for their contributions and closed the meeting at 3.05pm.

The Primary Care Commissioning Committee:

Noted the above.

12. Next Meeting

The Chair advised the Committee that the next PCCC meeting that was scheduled to take place on Thursday 23 September 2021 will now take place in October due to the frequency of the meetings reducing to quarterly rather than bi-monthly.

The Primary Care Commissioning Committee:

Noted that the next meeting will be re-scheduled from September to October 2021.

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 assurance around Significant Risks assigned to the committee. None of the risks are assigned a 15 risk score at present, however 3 have a score of 12. Consideration is currently being given to reassess the risk that, in a third wave, community services are unable to meet patient demand and this score may need to be increased.
- the recently revised Operational Scheme of Delegation was received and noted by the committee
- detailed reports from Primary Care and NHSE were received highlighting issues regarding PCN development and funding and recovery plans from Covid. It was emphasised that pressures in the system due to high covid rates were of concern.
- The committee approved a paper from NHSE proposing an extension to the clinical waste contract in Primary Care and the appointment of a managing agent for the contract. There will be an additional cost of £8k per annum. It is proposed there will be a nationally organised procurement exercise for this in 2022.
- a Public Health update was also received.
- a report from the Finance Director highlighted the shortfall in allocation for Primary Care Commissioning to meet the CCG's obligations and meet the needs of the population amounting to £2.3million. This was currently resulting in a forecast overspend against budget in the first half year. Whilst some mitigations were presented to hopefully offset this shortfall the risk of overspend still remains.
- a detailed integrated Quality Performance Report was received for assurance. The report highlighted the lower than target performance for health checks for the severely mentally ill and people aged 14 or over on the learning disability register. Plans are being put in place to improve this performance. The report also highlighted that primary care contacts have recovered from the lows during the early stages of the pandemic and are now at a higher level than in April 2019.

Appendix A

North Yorkshire Clinical Commissioning Group Actions from the Primary Care Commissioning Committee on 22 July 2021

Meeting Date	Item	Action	Responsibility	Action Completed / Due to be Completed (as applicable)
27 May 2021	5.3 PCCC Forward Plan	<p>Lisa Pope to check if the schedule should be included in the forward plan.</p> <p>11.06.21 – Lisa confirmed the schedule does not need to be included in the forward plan.</p> <p>22.07.21 – It was agreed that 'Schedule' above should read 'Primary Care Strategy' and that an update on Primary Care Planning and HCV ICS Primary Care Development to be presented to the next meeting.</p>	WB	21 October 2021
27 May 2021	7.1 Internal Audit Report	<p>LES Report to be brought to a future committee.</p> <p>22.07.21 – Andrew Dangerfield confirmed that the report was not ready but will be presented to the next meeting.</p>	AD	27 January 2022

**North Yorkshire Clinical Commissioning Group
Closed actions from the Primary Care Commissioning Committee**

Meeting Date	Item	Action	Responsibility	Action Completed / Due to be Completed (as applicable)
22 July 2021	5.1 Significant Risks	Sasha Sencier confirmed that an updated Significant Risk report will be presented to the next meeting.	SS	Complete
22 July 2021	5.3 Forward Plan	Noted the PCCC Forward Plan and that 'Schedule' should read 'Primary Care Strategy'.	SG	Complete
22 July 2021	12 Next meeting	The Chair advised that the next PCCC meeting that is scheduled to take place on Thursday 23 September 2021 will now take place in October due to the frequency of the meetings reducing to quarterly rather than bi-monthly.	SG	Complete