



Item: 7.1

Report to:	Primary Care Commissioning Committee	
Date of Meeting:	28 th June 2019	
Title of Report:	Strategic Commissioning Plan for Primary Care & Primary Care Update	
Presented by:	Hayley Patterson, Assistant Primary Care Contracts Manager, NHS England Phil Davis, Head of Primary Care, NHS Hull CCG	
Author:	Hayley Patterson, Assistant Primary Care Contracts Manager, NHS E Phil Davis, Head of Primary Care, NHS Hull CCG	
STATUS OF THE REPORT:		
To appro	ove X To endorse	
To ratify	To discuss	
To consi	ider For information	
To note		

PURPOSE OF REPORT:

The purpose of this report is to update the committee on primary medical care matters including contract issues within Hull and to provide national updates around primary medical care.

RECOMMENDATIONS:

It is recommended that the Primary Care Commissioning Committee (PCCC) note the 'for information' stages of the mergers below and approve the final stages:

(a) Mergers of Dr Malczewski and East Hull Family Practice; and merger of Dr GM Chowdhury and East Hull Family Practice.

It is recommended that the PCCC note the NHS England updates in relation to the:

- (b) MJOG Implementation
- (c) Primary Care Activity Report
- (d) GPFV Funding

REPORT EXEMPT FROM PUBLIC DISCLOSURE

No	х

Yes

If yes, detail grounds for

CCG STRATEGIC OBJECTIVE (See guidance notes on page 4)

Integrated Delivery

The updates contained within this report support the CCG objective of Integrated Delivery through the development of primary care medical services at scale, the implementation of incentive schemes in primary care to manage need and the development of pathways across primary, community and acute care.

IMPLICATIO	IMPLICATIONS: (summary of key implications, including risks, associated with the paper),		
Finance	Financial implications where relevant are covered within the report.		
HR	HR implications where relevant are covered in the report.		
Quality	Quality implications where relevant are covered within the report		
Safety	Safety implications where relevant are covered within the report.		

ENGAGEMENT: (*Explain what engagement has taken place e.g. Partners, patients and the public prior to presenting the paper and the outcome of this*)

None

LEGAL ISSUES: (Summarise key legal issues / legislation relevant to the report)

None

EQUALITY AND DIVERSITY ISSUES: (summary of impact, if any, of CCG's duty to promote equality and diversity based on Equality Impact Analysis (EIA). **All** reports relating to new services, changes to existing services or CCG strategies / policies **must** have a valid EIA and will not be received by the Committee if this is not appended to the report)

	Tick relevant box
An Equality Impact Analysis/Assessment is not required for this report.	V
An Equality Impact Analysis/Assessment has been completed and approved by the lead Director for Equality and Diversity. As a result of performing the analysis/assessment there are no actions arising from the analysis/assessment.	
An Equality Impact Analysis/Assessment has been completed and there are actions arising from the analysis/assessment and these are included in section xx in the enclosed report.	

THE NHS CONSTITUTION: (How the report supports the NHS Constitution)

The report supports the delivery of the NHS Constitution as the commissioning of primary care services will aid in the delivery of the following principles, rights and NHS pledges:

- 1) The NHS aspires to the highest standards of excellence and professionalism
- 2) NHS works across organisational boundaries and in partnership with other organisations in the interests of patients
- 3) Quality of care
- 4) You have the right to expect NHS organisations to monitor, and make efforts to improve, the quality of healthcare they commission or provide.

STRATEGIC COMMISSIONING PLAN FOR PRIMARY CARE & PRIMARY CARE UPDATE

1. INTRODUCTION

The purpose of this report is to:

- Update the committee on primary medical care matters including contract issues within Hull
- Provide national updates around primary medical care

2. BACKGROUND

Not applicable

3. CONTRACT CHANGES

There are the following contract changes to report:

Practice(s)	Further Information	Action Needed
Dr Malczewski (B81080)	Application received for Dr Malczewski to merge with East Hull Family Practice (EHFP) to facilitate the retirement of Dr Malczewski.	
	There is a staged approach to this merger:	
	A contract variation has been drawn up to allow one of the GP partners from EHFP to go onto the contract of Dr Malczewski as at 31/5/19.	For information
	Dr Malczewski retired on 31/5/19.	For information
	On 1/6/19, the remaining GP partners from EHFP will go onto the contract and the contract will be known as EHFP (M).	For information
	The final stage is for the contracts and clinical system to merge at which point the GMS contract of Dr Malczewski (EHFP (M)) will be terminated. The clinical system merge date has been confirmed as 1 st July 2019.	For approval
	Action: for the PCCC to note the 'for information' stages and approve the final stage of the merger	
Dr GM Chowdhury (B81066)	Application received for Dr GM Chowdhury to merge with East Hull Family Practice (EHFP)	
	There is a staged approach to this merger:	
	A contract variation has been drawn up to allow one of the GP partners from EHFP to go onto the contract of Dr GM Chowdhury as at 26/4/19.	For information
	On 1/7/19, the remaining GP partners from EHFP will go onto the contract, both Dr GM and Dr R Chowdhury will come off the contract and the practice will be known as EHFP (Park HC).	For information

Practice(s)	Further Information	Action Needed
	The final stage is for the contracts and clinical system to merge at which point the GMS contract of Dr GM Chowdhury (EHFP (Park HC)) will be terminated. The clinical system merge date has been confirmed as 29 th July 2019.	For approval
	Action: for the PCCC to note the 'for information' stages and approve the final stage of the merger	

4. NHS ENGLAND UPDATE

4.1 MJOG Implementation

In February 2018, the Committee approved the funding for 3 year licences for all the practices in Hull to have access to MJOG as well as the CCG and Healthshare.

There have been numerous delays in the implementation of this due to technical difficulties. These have now been overcome and MJOG is currently being rolled out across Hull with training taking place in those practices where it has been installed.

A group is being established across the Humber to ensure that where MJOG is installed, it is fully utilised and, where appropriate, consistent messages, including public health campaigns, are communicated to patients.

4.2 Primary Care Activity Report

The Primary Care Commissioning Activity report (PCAR) was introduced in 2016/17 to support greater assurance and oversight of NHS England's primary care commissioning responsibilities. It collects information on local commissioning activity regardless of the commissioning route (e.g. NHS England or CCGs with delegated authority).

The guidance covering the collection for the annual reporting period 1st April 2018 – 31st March 2019 was recently published and can be found through the following link: <u>https://www.england.nhs.uk/wp-content/uploads/2019/03/primary-care-activity-report-guidance-notes-for-completion.pdf</u>

The key areas of interest for the 2018/19 reporting round include:

- Management of contractual performance
- Financial assistance to providers
- Procurement and expiry of contracts
- Availability of services, including closed lists.
- Assurance of policy compliance and implementation

The deadline for completion was Friday 17th May. The NHS England local team has completed the return on behalf of all CCGs within the Direct Commissioning Organisation (DCO) area.

4.3 General Practice Funding View (GPFV) Funding programme 2019/20

Funding for four of the Primary Care Transformation Fund Programme budgets will be going direct to Humber Coast and Vale (HCV) Health and Care Partnership for 2019/20 rather than directly to CCGs or NHS England.

The four programme areas included in the allocation are:

- General Practice Resilience Programme
- GP Recruitment and Retention Programme
- Reception and Clerical Staff Training
- Online Consultation

Following agreement between the Clinical Lead for Primary Care for HCV Partnership and the Programme Director for Primary Care, the following timescale for investment has been approved and submitted to region:

• 8th April 2019 – NHS England Head of Primary Care wrote to Heads of Primary Care across the Partnership to invite proposals against each of the four programmes 2019/20

• 26th April 2019 – CCGs provided the Programme Board with an outline of investment against the following programmes from previous financial years identifying any gaps

• 30th May 2019 – CCG Proposals to be received outlining priorities for investment against each programme

• 30th June 2019 – Review of all proposals identifying which schemes will be prioritised for investment, the panel will consist of Clinical lead for Primary Care, Programme Director for Primary Care, Humberside LMC, YORLMC and Programme Lead for GP Forward View Programme

HCV GPFV Programme Allocation	19/20 Allocation
Practice Resilience	£201,020
GP Retention	£319,080
Reception and Clerical	£239,682
Online Consultation	£391,006
Total	£1,150,788

• 31 July 2019 – Programme Board to ratify investment plans

4.4 West Hull development

Approval has been received from NHS England to move to Stage 1 Business Case development for the new primary care facility in the west of the city. A number of queries and issues are being addressed and a draft is expected to be completed by end of June.

5 **RECOMMENDATIONS:**

It is recommended that the Primary Care Commissioning Committee (PCCC) note the 'for information' stages of the mergers below and approve the final stages:

- (a) Merger of EHFP contract with Dr Malczewski
- (b) Merger of EHFP contract with Dr Chowdhury

It is recommended that the PCCC note the NHS England updates in relation to the:

- (c) MJOG Implementation
 (d) Primary Care Activity Report
 (e) GPFV Funding
 (f) West Hull development