



Item: 6.1

Report to:	Primary Care Commissioning Committee		
Date of Meeting:	28 February 2020		
Title of Report:	Primary Medical Care Commissioning - Final Internal Audit Report		
Presented by:	Phil Davis, Strategic Lead - Primary Care, NHS Hull CCG		
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STATUS OF THE REPORT:			
To appro	ve To endorse		
To ratify	To discuss		
To consid	der For information		
To note	x		
PURPOSE OF REPORT: The purpose of this report is to provide the Primary Care Commissioning Committee the Primary Medical Care Commissioning Final Internal Audit Report. RECOMMENDATIONS: It is recommended that the Primary Care Commissioning Committee: (a) Note the contents of the report; (b) Note that the actions identified within the Audit Report for completion by end of February 2020 have been completed.			
REPORT EXEMPT FROM PUBLIC DISCLOSURE No X Yes If yes, detail grounds for exemption			
CCG STRATEGIC OBJECTIVE (See guidance notes on page 4) Integrated commissioning – to ensure the appropriate governance arrangements are in			

place for the commissioning of primary medical care services.

IMPLICATIONS: (summary of key implications, including risks, associated with the paper),		
Finance	Not applicable	
HR	Not applicable	
Quality	Not applicable	
Safety	Not applicable	

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 – the Audit was based upon guidance published by NHS England in August 2018.

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.

PRIMARY MEDICAL CARE COMMISSIONING - FINAL INTERNAL AUDIT REPORT

1. INTRODUCTION

The purpose of this report is to provide the Primary Care Commissioning Committee the Primary Medical Care Commissioning Final Internal Audit Report.

2. BACKGROUND

Where NHS England delegates its functions to Clinical Commissioning Groups, it still retains overall responsibility and liability for these and is responsible for obtaining assurances that its functions are being discharged effectively.

In August 2018 NHS England published *Primary Medical Care Commissioning and Contracting: Internal Audit Framework for delegated Clinical Commissioning Groups.* The document provided the framework for delegated Clinical Commissioning Groups undertaking internal audit of their primary medical care commissioning arrangements.

The scope of the audit framework mirrors the Delegation Agreement entered into between NHS England and Clinical Commissioning Groups and covers the following functions of the commissioning cycle:

- 1. Commissioning and procurement of services
- 2. Contract Oversight and Management Functions
- 3. Primary Care Finance
- 4. Governance (common to each of the above areas)

Clinical Commissioning Groups were required to incorporate primary medical care commissioning within 2018/19 audit plans where possible and where this has been possible the full set of audits, 1 - 4 above, must be completed by March 2021.

3. INFORMATION

Following agreement with Audit One it was agreed that the audit to be undertaken in 2018/19 would be 1. Commissioning and procurement of services. The Primary Care Commissioning Committee received the Final Audit Report at the April 2019 meeting. It was subsequently agreed with Audit One that the scope of the audit in 2019/20 would be 2. Contract Oversight and Management Function with a scope as follows:

- i. GP Practice opening times and the appropriateness of sub contracted arrangements
- ii. Managing patient lists and registration issues (for example, list closures, targeted list maintenance, out of area registration, special allocation schemes)
- iii. Identification of practices selected for contract review to assure quality, safety and performance, and the quality of the subsequent review and implementation of outcomes

- iv. Decisions in relation to the management of poorly performing GP practices and including, without limitation, contractual management decisions and liaison with the CQC where the CQC has reported non-compliance with standards (but excluding any decisions in relation to the performers list)
- v. Overall management of practice: (1) mergers (2) closures

The audit results were presented to the CCG Integrated Audit and Governance Committee in January 2020. The conclusion was as follows:

Governance, risk management and control arrangements provide **substantial assurance** that the risks identified are managed effectively. Compliance with the control framework was found to be taking place.

Three recommended actions were identified with completion dates as follows:

- 1. The Primary Care Commissioning Committee should receive a report relating to e-Dec submissions to NHS England on an annual basis. (29/2/20)
- 2. The CCG should formally review on an annual basis any outsourced assurances that it receives from Capita, NHS Digital and NHS England around list management and Special Allocation Scheme (SAS) to ensure that such assurance is sufficient. Where gaps in assurance are identified, the CCG should liaise with outsourced providers to address these. In addition, the CCG should ensure that any reports that have been received are presented to the relevant CCG Committees. (31/3/20)
- 3. Any decisions in respect of whether action plans should not be brought to the Primary Care Quality & Performance Sub-committee meeting for monitoring should be formally minuted and include detailed rationale for the decision. (31/1/20)

The two actions for completion by 29/2/20 and 31/3/20 respectively have been completed.

The full audit report is attached at Appendix 1.

The final two audits, covering Primary Care Finance, and Governance are expected to be undertaken by Audit One during 2020/21.

4 RECOMMENDATIONS:

It is recommended that the Primary Care Commissioning Committee:

- a) Note the contents of the report;
- b) Note that the actions identified within the Audit Report for completion by end of February 2020 have been completed.