

**PRIMARY CARE COMMISSIONING COMMITTEE
CHAIR'S ANNUAL REPORT
1 APRIL 2019 TO 31 MARCH 2020**

1. Introduction

- 1.1 The purpose of this report is to provide an update on progress of the work of the Primary Care Commissioning Committee for the period April 2019 - March 2020. For the purposes of this report the term 'the Committee' will be used.
- 1.2 Since April 2017 the CCG has operated at Level 3, fully delegated commissioning, of primary medical care services.
- 1.3 The Committee has continued to manage conflicts of interest robustly and in line with the CCG Conflicts of Interest policy.

2. Role and Membership of the Primary Care Commissioning Committee

2.1 The role of the Committee is as follows:

- i GMS, PMS and APMS contracts (including the design of PMS and APMS contracts, monitoring of contracts, taking contractual action such as issuing breach/remedial notices, and removing a contract);
- ii Newly designed enhanced services ("Local Enhanced Services" and "Directed Enhanced Services");
- iii Design of local incentive schemes as an alternative to the Quality Outcomes Framework (QOF);
- iv Decision making on whether to establish new GP practices in an area;
- v Approving practice mergers;
- vi Making decisions on 'discretionary' payment (e.g., returner/retainer schemes); these decisions will be in line with The General Medical Services Statement of Financial Entitlements (Amendment) Directions 2019
- vii Currently commissioned extended primary care medical services;
- ix Newly designed services to be commissioned from primary care;
- x. Approving and supporting the development of Primary Care Networks in line with NHS England Guidance;
- xi. The Network DES including Network Agreement, DES specifications, Network funding including Network Engagement Funding, Network Administration Payment, Workforce Reimbursement and Clinical Lead funding.

and the membership is included as Appendix 1.

2.2 Part 1 meetings of the Committee are held in public and Part 2 meetings are held in private. 4 out of 6 Part 1 meetings and 4 out of 6 Part 2 meetings were quorate.

Where Voting members are unable to attend meetings nominated senior deputies may attend. Where a meeting was not quorate Voting members unable to attend provided the meeting with a view in order for decisions to be made.

Attendance at the Committee during the year for voting members was as follows:

DATE OF MEETING		26/04/19	28/06/19	25/10/19	13/12/19	24/02/20
Stamp	Jason	✓	✓	✓	✓	✓
Marshall	Karen	✓	✓	✓	✓	X
Goode	Ian			✓	✓	✓
Sayner	Emma	✓	✓	X (*)	✓	✓
Latimer	Emma	✓	X	✓	X	X
Dodson	Joy	X (*)	✓	✓	✓	✓
Lowe	Deborah	✓	✓	✓	✓	X
Roper	Dan	✓	✓	✓	✓	✓
Weldon	Julia	X (*)	X (*)	X (*)	X (*)	X (*)
Jackson	Paul	X				

Please note:

(*) – Deputy attended in place of Voting Member

the blocked sections on the chart indicate 'not a member at the time.'

In addition, 5 NHS Hull CCG Governing Body GP Members, the NHS Hull CCG Governing Body Practice Manager, two NHS England and NHS Improvement officers, a number of NHS Hull CCG officers, and representatives from Humberside LMCs, Healthwatch Hull and the Hull Health and Wellbeing Board attend the Committee as non-voting members.

2.4 The agendas of the meeting are managed under 3 discrete areas as follows:

- Governance
- Strategy
- System Development and Implementation

3. Governance

3.1 The terms of reference for the Committee were reviewed and considered by the July 2019 CCG Board meeting.

3.2 The Committee received two Primary Care Commissioning audits which provided substantial assurance in relation to the Commissioning and procurement of services, and Contract oversight and management functions of the CCG's delegation agreement.

- 3.3 The Committee approved the introduction of the Primary Care Commissioning Policy on Monitoring and Evaluation and the requirement for sign off of primary medical care contract documentation by the CCG Chief Officer and Chief Finance Officer.
- 3.4 The Committee approved a primary care engagement framework for use by the CCG and primary medical care providers which ensures that engagement and consultation requirements are carried out as required by the NHS Act.
- 3.5 The Committee received the General Practice self-declaration (eDEC).

4. Strategy

- 4.1 In terms of Strategy the Committee received regular updates on progress in implementing the CCG's Strategic Commissioning Plan for Primary Care (Hull Primary Care Blueprint) including various practice changes and mergers, requests to change practice boundaries and to close practice lists, and proposed changes to align PMS and GMS payments. Allocation of GP Resilience Fund resources were reported to the Committee.
- 4.2 The Committee received reports on estates issues, including the development of a new primary care facility in west Hull.
- 4.3 The Committee received from Modality Partnership Hull an engagement report and a proposal for the relocation and consolidation of services which included the cessation of service delivery from the Faith House Surgery with effect from August 2019. The Committee approved the proposal.
- 4.4 The Committee considered the Humber Coast and Vale Primary Care Strategy.

5. System Development and Implementation

- 5.1 The Committee received at each meeting risk update reports covering the CCG corporate risks associated with the work of the committee.
- 5.2 The Committee received regular reports from the Primary Care Quality and Performance Sub-Committee.
- 5.3 The Committee approved the establishment of 5 Primary Care Networks (PCNs) in Hull, each with a list size above the minimum of 30,000 patients and received information in relation to the Network Directed Enhanced Service (DES). A support framework for the PCNs was also approved. An update on the GP Contract Agreement 2020/21 – 2023/24 was received by the Committee in February 2020.
- 5.4 The Committee approved a proposal to support the utilisation of PMS Premium resources for the provision of a clinical decision support tool for general practices.
- 5.5 The Committee approved an extension to the Community Frailty quality premium scheme.
- 5.6 The Committee was advised that Hull had been selected as one of ten pilot sites for the implementation of the Targeted Lung Health Check Programme and

received regular updates on progress with implementation.

- 5.7 The Committee was advised that the CCG Planning and Commissioning Committee had approved the cessation of managed repeat prescriptions arrangements with effect from April 2020.
- 5.8 The Committee considered options for the future commissioning arrangements for the Extended Primary Care Medical Services and minor surgery services commissioned from general practices and approved an option to commission these services at scale through PCNs from April 2020. The service specifications for the Extended Primary Care Medical Services were also approved.

6. Summary

The evidence provided throughout the year and in this annual report provides assurance to the CCG Board that the Primary Care Commissioning Committee has fulfilled its functions as set out in the terms of reference for the Committee and the delegation agreement.

7. Recommendation

It is recommended that the CCG Board be assured that the Primary Care Commissioning Committee has fulfilled its functions as set out in the terms of reference for the Committee.

Jason Stamp

Chair, Primary Care Commissioning Committee 2019-20
June 2020

APPENDIX 1

PRIMARY CARE COMMISSIONING COMMITTEE MEMBERSHIP 2019-20

The membership will meet the requirements of NHS Hull Clinical Commissioning Group's constitution.

The Chair of the Committee shall be a Lay Representative of the NHS Hull CCG Governing Body.

The Vice Chair of the Committee shall be a Lay Representative of the NHS Hull CCG Governing Body.

There will be a standing invitation to Healthwatch, the Local Medical Committee and the Health and Wellbeing Board.

Membership of the Committee is determined and approved by NHS Hull CCG governing body and will comprise:

Member (Voting)

NHS Hull CCG

- NHS Hull CCG Governing Body, Lay Representative Strategic Change - Chair
- NHS Hull CCG Governing Body, Lay Representative Patient and Public Involvement - Vice Chair
- NHS Hull CCG Chief Officer
- NHS Hull CCG Chief Finance Officer (or nominated senior deputy)
- NHS Hull CCG Director of Integrated Commissioning (or nominated senior deputy)
- NHS Hull CCG Director of Quality and Clinical Governance/Executive Nurse (or immediate deputy)
- NHS Hull CCG Governing Body Lay Representative Audit, Remuneration and Conflict of Interest Matters
- NHS Hull CCG Governing Body GP Member(s) without a pecuniary interest
- NHS Hull CCG Governing Body Registered Nurse

Hull City Council

- Hull City Council Director of Public Health (or senior representative from Hull City Council)

Non-voting attendees

- NHS England and NHS Improvement – North East and Yorkshire Representative, Head of Co-Commissioning (Localities) (or nominated senior deputy)
- NHS England and NHS Improvement Representative, Assistant Primary Care Contracts Manager
- NHS Hull CCG Governing Body GP Members
- Healthwatch Hull Representative - Delivery Manager
- LMC Representative
- NHS Hull Associate Director of Corporate Affairs
- NHS Hull Associate Director of Communications and Engagement
- NHS Hull CCG Strategic Lead - Primary Care
- NHS Hull CCG Head of Commissioning – Integrated Delivery
- NHS Hull CCG Governing Body Practice Manager Representative
- Health and Wellbeing Board Representative – Elected Member

In attendance as and when required

- Commissioning Support Representatives
- Other Officers of the CCG
- Other Officers of NHS England and NHS Improvement – North East and Yorkshire