

**PRIMARY CARE COMMISSIONING COMMITTEE  
CHAIR'S ANNUAL REPORT  
1 APRIL 2021 TO 31 MARCH 2022**

**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 2021 - March 2022. 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.

The membership of the Committee 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.

Where voting members are unable to attend meetings nominated senior deputies may attend.

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.

Attendance at meetings during 2021-22 was as follows:

DATE OF MEETING	23/04/21	25/06/21	22/10/21	17/12/21	25/02/22
<b>MEMBERSHIP</b>					
NHS Hull CCG Governing Body Lay Representative Patient and Public Vice-Chair	√	√	√	√	√
NHS Hull CCG Governing Body Lay Representative Strategic Change Vice-Chair	√	√	√	√	√
NHS Hull CCG Governing Body Lay Representative Audit, Remuneration and Conflicts of Interest Matters	√	√	X	√	X
NHS Hull CCG Accountable Officer	X	X	X	X	X
NHS Hull CCG Chief Officer / Chief Operating Officer	√	X	√	√	√
NHS Hull CCG Chief Finance Officer (or nominated senior deputy)	√	√	√	X	D
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 Director of Nursing and Quality (or nominated senior deputy)	√	X	√	√	D
NHS Hull CCG Governing Body GP Member(s) without a pecuniary interest (Dr Dan Roper)	√	√	√	√	√
Hull City Council Director of Public Health (or senior representative from Hull City Council)	√	√	√	√	X
NHS Hull CCG Governing Body Registered Nurse	√	X	√	√	X
<b>Membership as per Terms of Reference published on the CCG website</b>					
<b>KEY</b>					
	Was not a member at the time				
	Extraordinary Meeting				
	Not Quorate				
Apologies submitted D = Deputy Present					
X not in attendance					
√ in attendance					
* Post Vacant					

2.3 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 but no changes were made.
- 3.2 The Committee received updates on the development of governance arrangements for primary care commissioning following the ending of the CCG.

#### **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) and updates from NHS England and Improvement including in relation to the Covid-19 Vaccination programme and the Winter Access Fund. The Committee made decisions in relation to requests to change practice boundaries and to close practice lists.
- 4.2 The Committee approved the continued support to PCNs for the following roles: Lead Nurse, Lead Clinical Pharmacist and Business Intelligence Lead.
- 4.3 The Committee considered and approved changes to the Primary Care Network configuration resulting in 6 Networks being in place from April 2022.
- 4.4 The Committee received reports on primary care workforce including the Additional Roles Reimbursement Scheme for Primary Care Networks.

#### **5. System Development and Implementation**

- 5.1 The Committee received reports throughout the year regarding the continued primary care response to the COVID-19 pandemic as well as provision of routine general practice services. These included details of national guidance and policies and subsequent updates, including the General Practice Standard Operating Procedure; changes to national contractual requirements for general practice; and details of local implementation of policy.
- 5.2 The Committee received at each meeting risk update reports covering the CCG corporate risks associated with the work of the Committee.
- 5.3 The Committee received regular Primary Care delegated finance reports.
- 5.4 The Committee received reports from the Primary Care Quality and Performance Sub-Committee.
- 5.5 The Committee considered and approved an Extended Primary Care Medical Service for the provision of 12 lead ECG and a new model for the PSA Monitoring Service.
- 5.6 The Committee received regular Primary Care Communications and Engagement Workplan updates including updates on the Primary Care COVID-19 engagement exercise undertaken to obtain views on changes that had taken place in how primary care services were being delivered during the pandemic, and engagement work regarding interpretation and translation services.
- 5.7 The Committee received and considered the Humberside LMC Report on Racism and Discrimination in Primary Care.

## **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 2021-22  
March 2022

## APPENDIX 1

### PRIMARY CARE COMMISSIONING COMMITTEE MEMBERSHIP 2021-22

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 Vice-Chair
- NHS Hull CCG Governing Body, Lay Representative Patient and Public Involvement - Chair
- NHS Hull CCG Accountable Officer
- NHS Hull CCG Chief Operating 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 Nursing and Quality (or nominated senior 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 – North East and Yorkshire 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 & NHS Improvement - North East and Yorkshire