

Item: 7.1

Report to:	Primary Care Commissioning Committee – Part 1
Date of Meeting:	22 nd April 2022
Title of Report:	Strategic Commissioning Plan for Primary Care & Primary Care Update
Presented by:	Debbie Leadbetter, Primary Care Contracts Manager, NHSE
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STATUS OF THE REPORT:			
To approve	<input checked="" type="checkbox"/>	To endorse	<input type="checkbox"/>
To ratify	<input type="checkbox"/>	To discuss	<input type="checkbox"/>
To consider	<input type="checkbox"/>	For information	<input checked="" type="checkbox"/>
To note	<input type="checkbox"/>		

<p>PURPOSE OF REPORT:</p> <p>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.</p> <p>RECOMMENDATIONS:</p> <p>In relation to the closed list application for Hastings Medical Practice, the Primary Care Commissioning Committee are asked to:</p> <ul style="list-style-type: none"> • Note the contents of the reports • Consider and confirm if the practice application to extend its list closure is: <ul style="list-style-type: none"> ○ To be supported ○ Supported for the period of time requested or a different period <p>In relation to the expected list closure application from Princes Medical Practice, the Primary Care Commissioning Committee are asked to consider how they would like to</p>

hear the report on the expected list closure in light of timescales (next meeting planned 24th June) and potential urgency.

It is recommended that the Primary Care Commissioning Committee note all other NHS England updates

REPORT EXEMPT FROM PUBLIC DISCLOSURE

No Yes

If yes, detail grounds for exemption

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.

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)

Engagement has taken place with Hastings Medical Centre re: list closure extension.

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

None at this stage.

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.	√
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 and to provide national updates around primary medical care.

2. CONTRACT CHANGES

2.1 Dr Cook (Practice Code B81095): Notivation of contract to City Health Care Partnership

Effective from 1 April 2022, Dr Cook's practice, also known as Field View Surgery, has been transferred to City Health Care Partnership.

Recommendation

Primary Care Commissioning Committee are asked to note this change.

2.2 Hastings Medical Practice (Practice Code – B81075): Application for temporary list closure extension

Appendix 1 is the report

Recommendation

In relation to the application for an extension of the closed list for Hastings Medical Centre, the Primary Care Commissioning Committee are asked to:

- Note the contents of the reports
- Consider and confirm if the practice's application to close its list are:
 - Not to be supported
 - Supported for the period of time requested or a different period

2.3 Princes Medical Practice (Practice Code – B81052): Expected application for list closure, following 'requires improvement' rating

The practice was subject to a CQC inspection in December 2021 and the report published March 2022 gave a rating of 'requires improvement'.

NHSE and the CCG are expecting that the practice will apply for list closure to provide them with time to work through the actions. NHSE will support the practice with resilience funding once the actions needed are known and a plan in place.

Recommendation

Primary Care Commissioning Committee are asked to consider how they would like to hear the report on the expected list closure in light of timescales (next meeting planned 24th June) and potential urgency to consider the request.

3. NHS ENGLAND UPDATE

3.1 GP fellowship schemes

A new Fellowship programme has been developed specifically to support with the recruitment and retention of GP's across the HCV locality. The HCV GP Fellowship Programme will support GPs in their journey from Certificate of Completion of Training (CCT) through to their mid-career and will help local practices with their recruitment and retention across our area. Funding has been made available to support the delivery and the GPs time spent on the programme. Funded mentor sessions are also available. The schemes have been offered to all practices in the CCG and a webinar was held for interested parties on 14th February.

The 3 elements of the programme are:

- **CATALYST**
A 2 year programme delivered by HYMS at Hull University for GPs within 12 months of qualifying, GPs participate in one session per fortnight. With limited places for GP qualified with 24 months.
- **Enhanced offer**
A 2 year programme delivered by our local training hub for GPs 24 months since qualification. Funding to support this element of the programmes will, in the first instance, be targeted at practices identified as being within under doctored areas across HCV (Hull, NEL, Scarborough, Withernsea, Hornsea and Bridlington).
- **Phoenix**
A 1 year programme for mid-career (5 – 10 years) GPs. Delivered in partnership with secondary care colleagues which enables GPs to develop areas of special interest.

3.2 General practice contract arrangements in 2022/23

This letter sets out the GP contract arrangements for 2022/23 including changes to the core GP Contract and the Network Contract DES. The letter also describes the arrangements for the Quality and Outcomes Framework (QOF) in 2022/23 along with minor changes to Vaccinations and Immunisations

[NHS England » Letter: General practice contract arrangements in 2022/23](#)

Specifically, further details on the latest changes can be found on the [GP Contract pages](#) of the website and include:

- **GP Contract 2022/23 financial information**
This information includes a letter and appendix setting out the financial implications of the 2022/23 contractual changes for commissioners, including guidance on implementing GP contract changes for PMS and APMS contracts. It also shares a practice and PCN income ready reckoner to assist PCNs in planning their finances for 2022/23.

- Network Contract Directed Enhanced Service (DES)**
 This page contains all the information for the 2022/23 Network Contract Directed Enhanced Service (DES). This includes a cover note which sets out the 2022/23 changes, the Network Contract DES contract specification, supplementary guidance (including on the Investment and Impact Fund-IIF) and frequently asked questions.
- Quality and Outcomes Framework (QOF) changes for 2022/23 and QOF guidance**
 This page contains information on the Quality Outcomes Framework (QOF) changes for 2022/23 and includes the latest version of the QOF guidance.
- Weight Management Enhanced Service 2022/23**
 This page contains the service specification for the 2022/23 Weight Management Enhanced Service.
- General practice pay transparency**
 This page provides an update on the delay to the implementation of general practice pay transparency.

3.3 Investment and Impact Fund 2022/23

Some of the details communicated to systems earlier in March about the IIF have since been updated. Please see the published [guidance document](#) for confirmation of final details of the scheme, along with advice and clinical resources which may be helpful. We have also produced a [one-page summary](#) for primary care teams.

3.4 Refreshed NHS App promotional leaflet available

The NHS App has now recorded over 26 million registrations, and can be used to book appointments, order repeat prescriptions and register organ donations. A [refreshed leaflet](#) is available aimed at patients, which includes a step-by-step guide on downloading and registering for the App. Practices can request pre-printed leaflets via email appambassadors@nhs.net.

[Guidance for GP practices](#) is also available to help enable NHS App features in GP IT systems, from creating appointments to activating secure non-urgent messaging.

3.5 PCN payment automation

NHSE is working with a number of payment systems to automate all Network Contract DES-related payments to Primary Care Networks, and thus enable any legally constituted organisation to act as a PCN nominated payee. When implemented, this change will enable all Network Contract DES-related payments to be paid automatically via the PCSE Online system, irrespective of the identity of the nominated payee. Due to

Covid-related pressures, completion of this project has been delayed from April 2022 to Autumn 2022. Practice should continue to maintain their existing processes for payments under the Network Contract DES to PCNs.

3.6 Friends and Family Test (FFT)

The FFT has now restarted from 1 April 2022, after a temporary suspension during the pandemic. We are aware that it will take practices time to get fully up to speed in submitting their FFT returns and with this in mind, commissioners should not be expecting FFT data to be submitted until Q2 in 22/23 onwards.

3.7 Ukrainian nationals

The Government has announced that all Ukrainians arriving in England will be able to access NHS healthcare free of charge. This includes GP and nurse consultations, hospital services, urgent care and COVID-19 vaccinations. We encourage all services to support Ukrainians to register with a GP and to access a new patient consultation to assess their health and care needs. There are a range of support materials and translated documents to support practices with new registrations, including a [welcome guide for Ukrainians arriving in the UK](#) and [Doctors of the World materials](#).

It is recommended that Primary Care Commissioning Committee note the NHS England updates

Appendix 1