



Item: 8.2

Report to:	Primary Care Commissioning Committee			
Date of Meeting:	24 June 2022			
Subject:	Extended Primary Care Medical Services			
Presented by:	Phil Davis, Strategic Lead Primary Care, NHS Hull CCG			
Author:	Colin Webb, Programme Delivery Lead, NHS Hull CCG			
STATUS OF THE	REPORT:			
To appro	ove To endorse x			
To ratify	To discuss			
To consi	ider For information			
To note				
PURPOSE OF RE	PORT:			
The purpose of this paper is to present the intention to contract under the new PCN configuration the Extended Primary Care Medical Services to the Primary Commissioning Committee to endorse:  • Administration of GnRH Analogues				
Secondary Care Phlebotomy     Shared Care Manitoring				
<ul><li>Shared Care Monitoring</li><li>Dementia DES+</li></ul>				
Extended Medicines Management Scheme				
<ul><li>Wound Management</li><li>Minor Surgery</li></ul>				
<ul> <li>Extended Access to Primary Care</li> </ul>				
<ul><li>Fostering and Adoption Medicals</li><li>Ring Pessary Fitting</li></ul>				
Secondary Care Generated Interventions				

•	12 L	ead	Electroc	ardiogram

PSA Monitoring

### **RECOMMENDATIONS:**

It is recommended that the Primary Care Commissioning Committee;

 Endorse the contracting of Extended Primary Care Medical Services utilising a Local Incentive Scheme (as part of the network DES under the new Primary Care Network configuration.

REPORT EXEMPT FROM PUBLIC DISCLOSURE  If yes, grounds for exemption	No x Yes
CCG STRATEGIC OBJECTIVE (See guidance notes below) Integrated Delivery	
This report supports the CCG objective of Integrated Deliver extended primary care medical services at scale.	ry through the development of

IMPLICATIONS: (summary of key implications, including risks, associated with the paper),					
Finance	The finance implications associated with these services is detailed within the paper.				
HR	None				
Quality	Improved equity of services due to contracting at PCN level. Further quality aspects are identified within the individual service specifications.				
Safety	None				

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

Project groups were established to review the service specifications prior to approval from the Primary Care Commissioning Committee in October and December 2021 and in January 2022 these comprised of representations from:

- Commissioning
- Contracting
- Finance
- Quality
- GP Board Members
- LMC
- Medicines Optimisation Team

Please note that in addition to this finance has confirmed an uplift of 1.7% in the tariffs for 2022/23

**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.	
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 7 in the enclosed report.	

**THE NHS CONSTITUTION:** (How the report supports the NHS Constitution)
This report supports 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.

### **BASKET OF SERVICES - EXTENDED PRIMARY CARE MEDICAL SERVICES**

#### 1. BACKGROUND

As part of the Extended Primary Care Medical Services (EPCMS) review carried out in 2021, it was agreed by the Primary Care Commissioning Committee that all of the services delivered under Extended Primary Care Medical Services would be contracted at Primary Care Network level to:

- Help reduce inequality of care across Hull through provision of an accessible and convenient service in an out of hospital environment,
- Increase choice for all patients
- Provide an integrated and collaborative approach to ensure a seamless service.
- Provide faster access to management of gynaecology conditions in a primary care setting.

### 2. FUTURE INTENTIONS

# 2.1 New PCN Configuration

A piece of work is to be undertaken to establish the intentions of the newly configured PCN structure to successfully deliver each service whilst maintaining equitability. A document will be provided to each PCN to show the extended services already contracted to each practice within their network and to ask if there is to be any change. Following this a gap analysis will be undertaken to establish any shortfall in provision and to ensure that the PCNs can offer to these services to 100% of their population.

# 2.2 Activity

As of April 2022 (Q1) protected income on EPCMS payments ceaseed and all claims will be through the North Yorkshire and Humber Enhanced Services Portal (as per pre Covid). This portal has been updated to include templates for the services commissioned during Covid and to account for an uplift of 1.7% on the tariff-based payments (please see 2.3)

## 2.3 Tariff

NHS Hull CCG finance has instructed that tariff payments for EPCMS are to be uplifted by 1.7% for 2022/23.

# 3. SERVICE SPECIFICATIONS

The service specifications have all been previously approved by the Primary Care Commissioning Committee.

# 4. **RECOMMENDATIONS**

It is recommended that the Primary Care Commissioning Committee:

 Endorse the contracting exercise including gap analysis to ensure the continuation of extended primary care medical services on an equitable basis for the population of Hull.