

CCG REPORT COVER SHEET

Meeting Title:	Primary Care Commissioning Committee in Public	Date: 15 JUNE 2021								
Report Title:	Delegated Commissioning update	Agenda Item: 2.4								
Chief Officer:	Jessica Bawden Director of Primary Care									
Clinical Lead:										
Report Author:	Dawn Jones, Head of Primary Care									
Document Status:										
Report Summary:	This report highlights current issues that the Primary Care Team is managing. The Committee is asked to note the content and approve any recommendations									
Report Purpose:	<table border="1"> <tr> <td>For Assurance</td> <td>x</td> <td>For Decision</td> <td></td> <td>For Approval</td> <td></td> <td>For Recommendation</td> <td></td> </tr> </table>	For Assurance	x	For Decision		For Approval		For Recommendation		
For Assurance	x	For Decision		For Approval		For Recommendation				
Recommendation:	The Committee is asked to note the updates in this Report									
Link to Corporate Objectives: 2020/22	Ensure everyone has the opportunity to improve their health and well-being									
	Level-up health and care provision to ensure our communities in areas of high deprivation and need get the resources needed to minimise inequalities	x								
	Focus time and resources on areas where people receive most of their health and care services, the community	x								
	Facilitate organisations to join forces at 'place' and offer 'patient first' well-co-ordinated efficient services to those who need them.									
	Deliver our statutory financial commitments as best as possible	x								
CAF (Strategic Risk) Reference	Description of Risk	Current Risk Score								
CAF08	Risk to maintaining robust CCG Governance Arrangements	04								
CAF12	Risk that the business models for delivering primary care services become unsustainable	10								
Impact Assessments	Equality	n/a								
	Health Inequalities	n/a								
	Health Impact	n/a								
	Data Privacy	n/a								
	Sustainability	n/a								
	Quality	n/a								
Financial Impact	N/A									
Chief Officer/ SRO Sign Off:	Jessica Bawden – Director of Primary Care									
Chief Finance Officer Sign Off: (if required)	N/A									
Legal implications	Failure to deliver on the Statutory duties of the CCG under Delegated Commissioning									
Conflicts of Interest	<i>None identified</i>									
Report history:	Update given quarterly at previous Primary Care Committee Meetings									
Next steps:	Updates will continue to be presented to the Primary Care Commissioning Committee and any recommendations that requires further sign off to be included in reports to Governing Body.									

MEETING: PRIMARY CARE COMMISSIONING COMMITTEE

AGENDA ITEM: 2.4

DATE: 15 JUNE 2021

TITLE: DELEGATED COMMISSIONING UPDATE

**FROM: DAWN JONES
HEAD OF PRIMARY CARE CCG**

1 ISSUE

- 1.1 There are a significant number of work streams associated with discharging the Clinical Commissioning Groups (CCG) delegated commissioning responsibilities under the NHS England/Improvement (NHSEI) /CCG Delegation Agreement, which requires the Primary Care Commissioning Committee (Committee) to be engaged with and accountable for.
- 1.2 The purpose of this quarterly report is to keep the Committee informed on any emerging issues and risks in the Primary Care Commissioning Team's work plan that have been discussed and managed through the Primary Care Operational Group (PCOG). It may also seek approval from The Committee on recommendations from PCOG.

2 KEY POINTS

- 2.1 The Primary Care Operational Group (PCOG), which has been formally established as a sub-group of the Primary Care Commissioning Committee, met on the 26 May 2021 and it was agreed that the following key Primary Care related issues from the meeting would be brought to the attention of the Committee:
- T1 & T2 APMS Procurement update
 - Translation & Interpreting Services Procurement
 - Supporting Practice Development and Clinical Governance
 - Primary Care Network Changes 2021/22

3 PRIMARY CARE UPDATES

3.1 T1 & T2 APMS Contract Procurement Updates

3.1.1 T1 APMS Contract Procurement Update

The T1 APMS Contract Procurement consists of 3 Lots: St Neots Health Centre, Willow Tree Surgery and Botolph Bridge Community Health Centre. The Procurement is currently live and in the final stages of Evaluation and Moderation of Bids. The Procurement timeline is on track to bring the outcome award report to an

extra-ordinary meeting of the Primary Care Commissioning Committee on the 29 June 2021 for decision in order to meet the contract start date of 1 October 2021.

3.1.2 T2 APMS Contract Procurement Update

The proposed second tranche procurement consists of 2 Lots: Waterbeach Surgery and Roysia Surgery which are currently subject to an options appraisal which will be presented to The Committee in July 2021. The options appraisal will include an indicative timeline for the preferred option as well as financial implications, for consideration by The Committee.

3.2 Translation & Interpreting Services Procurement

- 3.2.1 NHS England & Improvement (NHSE/I) who are leading on the procurement of the Interpreting and Translation services for the East Region, wrote to CCGs on the 30 May 2021 to provide the following update.
- 3.2.2 Due to the delay in the publication of the Crown Commercial Services Language Services Framework (CCS Framework) which forms the basis for the local service specification, NHSE/I have advised there is a need to delay the procurement by one month, and therefore the proposed start date is the 1 November 2021. This has been agreed with the commercial team.
- 3.2.3 This follows a rapid turnaround required by all CCGs in a review of the draft ITT documentation that included key performance indicators, performance measures, the evaluation questions and proposed Service specifications, which have been developed in partnership with Key stakeholders and service users to ensure they meet local needs.
- 3.2.4 To accommodate this delay the current contract holders DA Languages have had their contracts extended until 30 October 2021. The revised procurement timeline will be shared with The Committee in due course.
- 3.2.5 NHSE/I understand that the new CCS Framework also offers the opportunity to procure services for the deaf community separately to non-English speaking languages with a more local focus that will address the concerns raised in the engagement feedback. If NHSE/I adopt this approach, they recognise that practices will need to manage bookings with two providers and the region will need to manage two contracts, but NHSE/I will look to create a single portal with help from CCG digital teams. There will, therefore, in effect, be two procurements running.
- 3.2.6 NHSE have asked suggested It would be helpful to have a small number of CCG representatives to assess bids for both procurements with a moderation panel being planned for late June/early July and C&PCCG has put forward a member of the Primary Care Quality Team to support this process.

3.3 Supporting Practice Development and Clinical Governance

- 3.3.1 As we transition slowly towards business as usual, the CCG is keen to reinstate the pre-pandemic communication channels and resource practices and their respective Primary Care Networks to plan for a series of half day practice closures.

3.3.3 The CCG acknowledges that Practices have sacrificed this Continuing Professional Development protected time to support their response to the pandemic over the last year and recognises the importance of having protected time to enable Practices to transform their businesses and develop their workforce to thrive.

3.3.4 The proposal is as follows:

- I. **Monthly 1-hour webinars** hosted by the Primary Care Team on the last Thursday of every month starting at 13:30. These sessions will not be funded for backfill and will provide for communicating key issues from the CCG/NHSEI to specific colleagues (e.g., Practice Manager, Lead GP, etc.), depending on the subject matter.
- II. **Bi-monthly 2-hour webinars - 2 Member Practices' Meetings and 4 Primary Care Network (PCN) events.** The 2 CCG Member Meetings will be arranged by the Communication Team and led by our Chief Officers' Team. With the remaining 4 sessions committed to PCN development (transformational workshops, presentations, guest speakers, strategic and operational planning) for Clinical Directors and other identified roles depending on agenda. Attendance will be paid for to allow backfill.
- III. **Quarterly practice closure afternoons.** Practice protected time for inhouse staff training and development. Funding will be given directly to practices who close their surgery and divert their phones to an alternative provider. Practices will receive funding, to pay for any sub-contracted arrangements.

3.4 Primary Care Network (PCN) Changes 2021/22

3.4.1 Changes to Payment Process

In 2020/21 PCN Directed Enhanced Services Payments were made manually to all PCNs as the automatic calculations created on the Calculating Quality Reporting Service (CQRS) were not accurate. NHSEI/CCG took the decision to make manual payments to PCNs to ensure correct payments were made. The CCG is assured that PCNs/practices have not experienced any financial impact as a result.

For 2021/22 the Primary Care Operational group discussed the approval process for PCN finance payments which is a function currently undertaken by NHSE/I on behalf of the CCG. The Group were advised that members of the CCG Finance Team now have access to CQRS and therefore it would be better for the approval process to now sit with the CCG finance team to ensure better financial control and robust payment mechanisms are in place.

3.4.2 Octagon North PCN – Application to change PCN Configuration.

The Committee are advised that an application has been received from Octagon North Primary Care Network to change their current member practice configuration.

The Committee are reminded that previously, PCCC had agreed not to accept any applications from PCNs to change PCN configurations that would take effect from April 2021. This was to minimise the potential impact that any changes could have on the system, in particular the PCN Covid-19 vaccination programme, the Enhanced Health in Care Homes DES and associated care home alignments, as well as the

PCN Additional roles workforce used to support vaccine delivery at the designated sites.

Following PCCC approval of this recommendation, PCNs were advised that whilst changes from April 2021 would not be supported, this did not mean that new PCN configurations could not be considered during this commissioning year. PCNs were therefore advised to submit any planned applications to change PCN configurations for 2021/22 by 14 May 2021 so these could be considered by The Committee in June.

To date, one application had been received from Octagon North PCN. The application suggests 2 practices would leave Octagon North PCN to join other PCNs. However, applications had not been received from the receiving PCNs to support this.

The Primary Care Operational group have undertaken an initial review of the application which will now be progressed through the relevant due diligence process and brought back to The Committee with a recommendation.

The Committee are advised however that the proposal would potentially leave 2 'orphaned' practices as they would no longer be part of a PCN and therefore could be subject to allocation to a PCN by the CCG. The PCOG will ensure that the applying PCN make their current member practices aware of this risk.

4 RECOMMENDATIONS

4.1 The Committee is asked to **note** the updates in this Report

Author ***Dawn Jones***
Head of Primary Care CCG
4 June 2021