

**Minutes of the NHS England and Cambridgeshire and Peterborough CCG
Primary Care Commissioning Committee (PCCC) Meeting in Public
held on Tuesday 13 July 2021 at 11:15 am by Microsoft Teams.**

Present: Voting Members:

Nikki Pasek, Lay Member and Chair of the PCCC
Julian Huppert, Lay Member and Vice Chair of the PCCC, CCG
Jan Thomas, Accountable Officer, CCG
Carol Anderson, Chief Nurse, CCG
Jessica Bawden, Director of Primary Care, Medicines Optimisation & Out of Hospital
Urgent Care Collaborative, CCG
Wanda Kerr for Louis Kamfer, Chief Finance Officer, CCG

Non-Voting Members:

Sharon Fox, Director of Governance and CCG Secretary
Julie McNeill for Sandie Smith, Chief Executive, Healthwatch
Alice Benton for Dr Katie Bramall-Stainer, Local Medical Committee
David Parke, Associate Director, Primary Care, CCG

In Attendance:

Lucy MacLeod, Strategic Premises & Estates Manager for Primary Care, CCG
Danielle Harding, Primary Care Quality & Workforce lead (South)
Karen Key, Primary Care Quality & Workforce lead (North)
Teresa Johnson, Executive Assistant, CCG

Agenda Item 1 – General Issues

PC21/65 Welcome and Introductions

The Chair welcomed everyone to the meeting of the Primary Care Commissioning Committee held in Public. The meeting was held virtually via Microsoft Teams.

PC21/66 Apologies for Absence

Apologies were received from Sandie Smith, Louise Jinks, JC Lewis, Lucy James, Dawn Jones, Dr Katie Bramall-Stainer and Jude Bowler.

PC21/67 Declarations of Interest

There were no declarations of interest in relation to the agenda.

PC21/68 Notification of Any Other Business

There was no notification of any other business.

PC21/69 Minutes of the Last Meeting

The minutes of the Committee meeting held in public on Tuesday 15 June 2021 were agreed as an accurate reflection of the meeting.

PC21/70 **Matters Arising ACTION LOG**

The action log was received for review and had been updated. This was appended as a separate document.

Concerning the CCG Premises and Estates Steering Group Terms of reference that had been circulated, the Chair asked that the membership and quoracy be checked. As the quoracy said the Chief Finance Officer should attend but was not listed on the membership. David Parke noted that the Senior Finance Manager attended and fed back to the Chief Finance Officer. He agreed to amend the detail.

Agenda Item 2 – Operational Primary Care Issues

PC21/71 **Primary Care Finance Report Month 2 - 2021/22 –**

Wanda Kerr gave an update on the financial position; she summarised the following key points: Guidance from NHSE on CCG reporting for the first six months of the financial year; the Delegated Commissioning budget for 2021/22; the month 2 financial position and the Month 1 to 6 forecast position. She added that the CCG had received additional COVID-19 Capacity funding and surge hubs would continue to be funded until September 2021. The CCG had now completed the month 2 reporting (Table 3) and this indicated that Primary Care had a year-to-date underspend of £440k and a forecast breakeven position for months 1 to 6. The Core Reserve for primary care would be returned back to the main budget. There were overspends already emerging in Delegated Commissioning for the new year, this included some additional premises costs.

The Committee discussed the detail. Alice Benton commented that where the Quality Outcome Framework (QOF) costs had increased and included the childhood immunisations and vaccinations, this had moved from Direct Enhanced Services (DES) into QOF. She asked that this was clear in the narrative.

With reference to the new enhanced services, Alice Benton asked when the CCG would see the allocations for that. Wanda Kerr said there would be extra funding, but it is not known when it will be received. She emphasised to the Committee that H2, the second half of the year, October 2021 to March 2022 would be a difficult time. There was already much on going in terms of finances and the CCG will need to work up more savings as we return back to the pre-pandemic trying to operate the business as usual.

The Chair thanked Wanda Kerr for the summary of the report. She said that any savings in Delegated Commissioning and Primary Care would need to come back to this Committee for awareness. Wanda Kerr confirmed that the Primary Care Finance Manager was working on this and would discuss internally at the Operational Group before sharing with the Committee.

The Primary Care Commissioning Committee **noted** the Month 2 year to date position and the M1 to 6 forecast position for 2021/22.

PC21/72 Delegated Commissioning Update

David Parke gave a summary of the report which informed the Committee on any emerging issues and risks in the Primary Care Commissioning Team's work plan that had been discussed and managed through the Primary Care Operational Group (PCOG). The key points to note were: A Pilot Scheme supporting Translation Services for the Deaf had been appointed to DA Languages, the objective of the pilot scheme was to reduce barriers deaf patients currently face when booking appointments with GPs, Dentists, Opticians, and Pharmacists, by enabling them to access an interpreter to book their primary care appointment for them; also a voluntary opportunity to participate in the new National Enhanced Primary Care Services, the new service specifications came into effect from 1 July 2021 and would continue until 31 March 2022. This would focus on supporting patients with managing symptoms of Long Covid and Weight Management. Danielle Harding asked if this service was for children and adults. David Parke confirmed this was for adults only at the moment.

David Parke also updated on the Tranche 2 Alternative Personal Medical Services (APMS) Contract Procurement Options for the two APMS Contracts relating to Waterbeach Surgery and Roysia Surgery that are scheduled to expire in November 2021 and December 2021 respectively. The Committee previously approved these Contracts in 2020, which both had options to extend for a further 12 months until 2022 to allow more time for procurement and options. Alice Benton acknowledged the Contracts were due to expire during a Quarter 4 period, she pointed out the difficulties and constraints for Contracts starting in Quarter 4, she said it would be better to start at the half year point or April 2022. Jessica Bawden said this would be taken back for consideration, and David Parke said a Quarter 4 start was manageable and any change of the start date will give additional expense and risk.

Julie McNeill said that previously Roysia patients had been confused with the previous Contract changes and some thought that they were no longer NHS patients. She asked that communications to patients on the changes be made very clear, particularly on the Practice website. David Parke said he has been made aware of the previous communication issues at the contract award. He said that CCG did support messaging with the Provider, MKGP+ and would continue to ensure messages were clear as we work on the extension.

Concerning the pilot scheme supporting Translation Services for the Deaf, the Chair asked will this service be monitored, how would we know that the patients are satisfied with the service and is the deaf community aware of the services that are becoming available to them. David Parke said he would highlight the points to NHSE/I and request feedback regarding service availability and service satisfaction rates.

The Chair thanked David Parke for the update.

The Committee **noted** the updates in this report and **approved** the extension to the two APMS Caretaker contracts for Waterbeach Surgery and Roysia Surgery until December 2022.

PC21/73 Agenda Item 3 – CAF and Primary Care Risk Register

Sharon Fox updated the Committee on the latest CCG Assurance Framework and Risk Register (CAF) for 2021/22 for discussion in relation to the work of the Primary Care Commissioning Committee, this had been approved at the Governing Body held 6 July 2021. She advised the Committee that CAF 07 had been discussed at the Governing Body, as the Committee had agreed at the previous meeting on 15 June 2021 that this could now be archived given the progress made and arrangements were in place to mitigate the risk. She added that the Governing Body agreed that the risk should continue to be monitored at Directorate Risk Register level. *Extracted for reference: CAF 07 - There is a risk that the business models for delivering primary care services become unsustainable impacting on access to primary care services.*

Sharon Fox highlighted that the Committee also agreed at the June meeting to add the following as a new risk to the CAF. *CAF 13 Risk of insufficient capacity to meet general practice demand.* This had now been included in Version 2. She reminded the Committee that the new risk had been proposed because of increased demand significantly impacting on general practice as it tried to restore services to pre-pandemic levels and while many practices were still involved in delivering the national Mass Vaccination Programme. This situation was being exacerbated by long waits for acute services and the need for patients need to be managed in the community. The Committee **noted** on the current status of this particular risk.

Jessica Bawden added that the Primary Care Team was linking in detail regarding this new risk, CAF13 which included working with Practices to embed good practice and support Practices, also working to support issues around access to services.

The Chair thanked Sharon Fox for the update.

The Primary Care Commissioning Committee **reviewed and noted** the current version of the CAF 2021/22, in particular, risks relevant to Primary Care.

PC21/74 Agenda item 4 – Questions from the Public

There were no members of public present at the meeting.

PC21/75 Date of next meeting

The date of the next meeting in public was confirmed as Tuesday 10 August 2021.

The Chair thanked everyone for joining the meeting which ended at 11.50am.

Author ***Teresa Johnson***
Executive Assistant
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