

CCG REPORT COVER SHEET

Meeting Title:	Primary Care Commissioning Committee - PUBLIC	Date: 7 JUNE 2022	
Report Title:	Delegated Commissioning update	Agenda Item: 2.2	
Chief Officer:	Jessica Bawden Director of Primary Care		
Clinical Lead:			
Report Author:	Dawn Jones Head of Primary Care Commissioning		
Document Status:	Final		
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:	For Assurance	x	For Decision
			For Approval
			For Recommendation
Recommendation:	The Committee is asked to note the updates for all sections 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
CAF12	Risk of insufficient capacity to meet general practice demand		16
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)			
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: 2.2

DATE: 7 JUNE 2022

TITLE: PRIMARY CARE DELEGATED COMMISSIONING UPDATE

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

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 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 PCOG, which has been formally established as a sub-group of the Primary Care Commissioning Committee, met on Wednesday 25 May 2022 and it was agreed that the following key Primary Care related issues from the meeting would be brought to the attention of the Committee:

- **Tranche 2 2022/23 – APMS Procurement update**
- **NHSE/I Policy & Guidance Manual Updates**
- **Primary Care Commissioning Committee in the ICB**

3 PRIMARY CARE COMMISSIONING UPDATES

3.1 Tranche 2 2022/23 – APMS Procurement update

At the Committee meeting in April 2020 approval was granted for the re-procurement of APMS contracts at Roysia Surgery and a contract at Waterbeach with a Cottenham branch, for the standard term of 7 years with an option to extend by 3 years.

A business case for the APMS contracts has been submitted to NHS England & NHS Improvement Commercial Executive group (CEG), which is required in all cases where a total term is 10 or more years. The business case was tabled at the CEG meeting held on 10 May 2022, provided approval is received the Invitation to tender will be published on 6 June 2022.

A copy of the business case is attached as **Appendix A** for information along with an updated copy of the C&P Sustainable APMS Policy **Appendix B** which has been refreshed

to include the changes to the APMS contracts currently held, timelines and recent market engagement.

Table 1 below presents a draft timeline for the procurement:

Table 1

Key Milestones	Start date (where relevant)	Complete by Date
NHSE&I Commercial Executive Group Meeting	-	10/05/2022
Procurement and Evaluation Strategy Sign Off	03/06/2022	06/06/2022
Invitation to Tender (ITT) published	-	06/06/2022
Deadline for receipt of ITT submissions from Bidders	-	15/07/2022
Evaluation and Moderation Period	16/07/2022	19/08/2022
Sign off and approval of Preferred Bidder	26/08/2022	13/09/2022
Preferred Bidder announced and voluntary 10-day standstill period commences	13/09/2022	27/09/2022
Contract award	-	30/09/2022
Contract Issue and Signing	27/09/2022	01/10/2022
Mobilisation commences	01/10/2022	-
Service commencement	-	01/01/2023

A brief summary of the market engagement event and key responses from the provider questionnaire referenced above are included at 3.4.2 in the business case (pages 10 and 11).

The Committee will note that Arden & Gem are referenced on the appendices, so for the purpose of clarification, support will be provided by the North of England Commissioning Support Unit (NECS) for this procurement, however all CEG papers in relation to Primary Care procurements must be submitted via Arden & Gem who then table these at the relevant CEG meeting. NECS are not able to submit papers to CEG and nor can NHSEI colleagues submit these directly.

The timeline means that the new Investment Committee or the Primary Care Commissioning Committee with delegation will need to approve the final bidder by 13 September 2022.

3.2 NHSE/I Policy & Guidance Manual Updates

NHSE/I has recently published an updated version of its Policy and Guidance Manual (PGM) which is attached as **Appendix C** along with a summary document providing a summary of the changes as **Appendix D**

The PGM provides commissioners with the context, information and tools to commission and manage GP contracts. The PGM describes mandatory functions (i.e., those proscribed in legislation) as well as guidance or best practice. All the new and revised policies therein

aim to ensure a consistent and compliant approach to primary care commissioning across England.

Cambridgeshire & Peterborough CCG has full delegated responsibility for the commissioning and contract monitoring of GP services in their localities; with NHSE/I having overall accountability. The CCG's Primary Care Commissioning Committee is therefore required to review and consider the revised PGM so that NHSE can be assured that the CCG is fulfilling its delegated responsibilities in a proper manner

3.3 Primary Care Commissioning Committee in the ICB

The Health and Care Bill has been through Parliament and has been granted Royal Assent. Integrated Care Boards (ICBs) will be established on 1st July 2022; and NHS England (NHSE), via a Delegation Agreement will delegate the exercise of the following delegated functions to ICBs:

- Primary medical services
- Primary dental services and Prescribed Dental Services
- Primary ophthalmic services
- Pharmaceutical services and local pharmaceutical services.

It is proposed that primary medical services will be delegated to the Cambridgeshire and Peterborough ICB from 1st July 2022 and the other services from 1st July 2023 (with closer working between NHSE and the ICB during the months leading up to this date).

The ICB will be required to perform the Delegated Functions in such a manner as to ensure NHSE's compliance with NHSE's statutory duties in respect of the Delegated Functions, having regard to NHSE's accountability to the Secretary of State and Parliament.

NHSE's draft primary care delegation agreement can be found at **Appendix E** and the accompanying explanatory note at **Appendix F**.

The agreement is flexible in that different primary care services can be added at different times. There is a clear demarcation between Delegated Functions and Reserved Functions within the agreement. The former are those functions to be exercised by ICBs. The latter functions are retained by NHSE on the basis that they are core to its national accountability and regulatory roles (e.g., management of the national performer lists and national contract negotiation) or can be managed more efficiently on a national footprint (e.g., primary care support services).

The agreement reflects increased ICB responsibilities and flexibilities in comparison to their CCG predecessors. Locally agreed terms are possible but on an exceptional basis only.

Neither the Health and Care Act nor the Delegation Agreement mandates ICBs to establish a Primary Care Commissioning Committee (PCCC) to discharge primary care functions. However, ICBs may wish to retain their PCCC while considering how to integrate Primary Care with their wider responsibilities.

The following parameters must be observed and are stated within the delegation agreement:

- ICBs may delegate the discharge of its primary care functions to another relevant body or to joint committees of ICBs, but not to providers nor to joint ICB/provider committees (although providers may be members of a delegated committee at 'place' level.
- Other delegations or joint committees are permitted subject to approval by NHSE.

- The further delegation of a function from a body which has delegated functions from the ICB ('triple delegation') is prohibited.

ICBs must develop an operational scheme of delegation defining those individuals or groups of individuals, including committees, who may discharge aspects of the delegated functions. The arrangements made must be effective, safe, efficient and economic.

Cambridgeshire and Peterborough ICB will continue to operate a PCCC, whereby papers are socialised, scrutinised, amended and either agreed to be submitted to the Commissioning and Investment Committee for final approval and sign off. This mechanism is needed to transition safely and effectively from CCG to ICB.

The CCG Terms of Reference (ToR) will be changed and updated to reflect this change in statutory governance. This work will complete once the ToR and governance arrangements are published for the Commissioning and Investment Committee.

4 RECOMMENDATIONS

- 4.1 Note** the updates in this report for all sections and in section 3.1 for the need to timetable the new ICS Investment Committee or Primary Care Commissioning Committee with delegation to approve the preferred bidder in time for mobilisation.

Author ***Dawn Jones***
Head of Primary Care Commissioning CCG
25th May 2022

Appendices:

<i>Appendix A</i>	<i>CEG Business Case</i>
<i>Appendix B</i>	<i>Refreshed C&P Sustainable APMS Policy</i>
<i>Appendix C</i>	<i>Policy and Guidance Manual (PGM)</i>
<i>Appendix D</i>	<i>A document providing a summary of the changes</i>
<i>Appendix E</i>	<i>Delegation Agreement</i>
<i>Appendix F</i>	<i>Accompanying explanatory note for delegation agreement</i>