

NHS South Sefton CCG NHS Southport & Formby CCG Primary Care Commissioning Committee in Common- Part 1 Agenda

Date: **Thursday 16th July 2020 10:00-11:00am**

Venue: **Skype due to Covid 19**

Members		
Graham Bayliss	SS CCG Lay Member (Co Chair)	GB
Alan Sharples	SS CCG Lay Member	AS
Helen Nichols	S&F CCG Lay Member	HN
Fiona Taylor	S&F SS CCG Chief Officer	FT
Martin McDowell	S&F SS CCG Chief Finance Officer	MMc
Jan Leonard	S&F CCG Director of Place (North)	JL
Brendan Prescott	S&F CCG Chief Nurse and Quality Lead	BP
Angela Price	S&F SS CCG Programme Lead Primary Care	AP
Alan Cummings	NHSE Senior Commissioning Manager	AC
Dil Daly	S&F CCG Lay Member (Co Chair)	DD
Non- Voting Attendees:		
Dr Craig Gillespie	GP Clinical Representative	CG
Dr Kati Scholtz	GP Clinical Representative	KS
LMC Representative		
Healthwatch Representative		
Health & Well Being Representative		
Jane Elliott	SSECCG Locality Manager	JE
Richard Hampson	SSECCG Primary Care Contracts Manager	RH
Colette Page	SS SFCCG Practice Nurse Lead	CP
Minutes		
Jacqueline Westcott	SSECCG Senior Administrator	JW

No	Item	Lead	Report	Receive/ Approve	Time
PCCiC20/44.	Apologies for absence	Chair	V		
PCCiC20/45.	Declarations of interest regarding agenda items	All	V		
PCCiC20/46.	Minutes of the previous meeting : Date 21 st May 2020	Chair	R	A	
PCCiC20/47.	Action points from the previous meeting	Chair	R	R	
PCCiC20/48.	Report from Operational Group and Decisions made: 9 th July 2020	JL	R	R	
PCCiC20/49.	Healthwatch Issues	DB	V	R	
PCCiC20/50.	PCN Update PCNs in Sefton	CG/KS JL	V R	R R	
PCCiC20/51.	Primary Care Finances	RS	R	R	

No	Item	Lead	Report	Receive/Approve	Time
PCCiC20/52.	Primary Care Programme Report	RH	R	R	
PCCiC20/53.	Performance (OOHs/7 Day Access/Contractual Compliance/DES	RH	R	R	
PCCiC20/54.	Primary Care Quality Dashboard	RH	V	R	
PCCiC20/55.	Key Issues log	Chair	R	R	
PCCiC20/56.	Any Other Business <i>Matters previously notified to the Chair no less than 48 hours prior to the meeting.</i>	Chair			
PCCiC20/57.	Date and time of next Meeting: 17th September 2020 10.00am-11.00am Venue: TBC				



Declarations of Interest form

To be completed in all circumstances by the individuals listed below upon joining the CCG and thereafter at the request of the CCGs Governance Lead or Conflict of Interest Guardian.

- **All CCG employees**, including:
 - All full and part time staff;
 - Any staff on sessional or short term contracts;
 - Any students and trainees (including apprentices);
 - Agency staff; and
 - Seconded staff
- self-employed consultants or other individuals working for the CCG under a contract
- **Members of the governing body**
- All members of the CCG's committees, joint committees, sub-committees/sub-groups, including:
 - Co-opted members;
 - Appointed deputies; and
 - Any members of committees/groups from other organisations.

This includes each provider of primary medical services which is a member of the CCG under Section 14O (1) of the 2006 Act. Declarations should be made by the following groups:

- GP partners (or where the practice is a company, each director);
- Any individual directly involved with the business or decision-making of the CCG.

Name:	
Position within, or relationship with, the CCG (or NHS England in the event of joint committees):	
Please confirm you have read and understand the Conflicts of Interest Policy	

Detail of interests held (complete all that are applicable, add additional rows if required):				
Type of Interest* *See supplementary advice	Description of Interest (including for indirect Interests, details of the relationship with the person who has the interest)	Date interest relates From & To		Actions to be taken to mitigate risk (to be agreed with line manager or a senior CCG manager)
No interest to declare				

The information submitted will be held by the CCG for personnel or other reasons specified on this form and to comply with the organisation's policies. This information may be held in both manual and electronic form in accordance with the Data Protection Act 1998. Information may be disclosed to third parties in accordance with the Freedom of Information Act 2000 and published in registers that the CCG holds.

I confirm that the information provided above is complete and correct. I acknowledge that any changes in these declarations must be notified to the CCG as soon as practicable and no later than 28 days after the interest arises. I am aware that if I do not make full, accurate and timely declarations then civil, criminal, or internal disciplinary action may result.

I **do / do not [delete as applicable]** give my consent for this information to published on registers that the CCG holds. If consent is NOT given please give reasons:

Signed

Date

Signed

Position

Date

(Line Manager or Senior CCG Manager)

Please return to southsefton.ccg@nhs.net

Types of interest

Type of Interest	Description
Financial Interests	<p>This is where an individual may get direct financial benefits from the consequences of a commissioning decision. This could, for example, include being:</p> <ul style="list-style-type: none"> • A director, including a non-executive director, or senior employee in a private company or public limited company or other organisation which is doing, or which is likely, or possibly seeking to do, business with health or social care organisations; • A shareholder (or similar owner interests), a partner or owner of a private or not-for-profit company, business, partnership or consultancy which is doing, or which is likely, or possibly seeking to do, business with health or social care organisations. • A management consultant for a provider; • In secondary employment (In receipt of secondary income from a provider); • In receipt of a grant from a provider; • In receipt of any payments (for example honoraria, one off payments, day allowances or travel or subsistence) from a provider • In receipt of research funding, including grants that may be received by the individual or any organisation in which they have an interest or role; and • Having a pension that is funded by a provider (where the value of this might be affected by the success or failure of the provider).
Non-Financial Professional Interests	<p>This is where an individual may obtain a non-financial professional benefit from the consequences of a commissioning decision, such as increasing their professional reputation or status or promoting their professional career. This may, for example, include situations where the individual is:</p> <ul style="list-style-type: none"> • An advocate for a particular group of patients; • A GP with special interests e.g., in dermatology, acupuncture etc. • A member of a particular specialist professional body (although routine GP membership of the RCGP, BMA or a medical defence organisation would not usually by itself amount to an interest which needed to be declared); • An advisor for Care Quality Commission (CQC) or National Institute for Health and Care Excellence (NICE); • A medical researcher.
Non-Financial Personal Interests	<p>This is where an individual may benefit personally in ways which are not directly linked to their professional career and do not give rise to a direct financial benefit. This could include, for example, where the individual is:</p> <ul style="list-style-type: none"> • A voluntary sector champion for a provider; • A volunteer for a provider; • A member of a voluntary sector board or has any other position of authority in or connection with a voluntary sector organisation; • Suffering from a particular condition requiring individually funded treatment; • A member of a lobby or pressure groups with an interest in health.
Indirect Interests	<p>This is where an individual has a close association with an individual who has a financial interest, a non-financial professional interest or a non-financial personal interest in a commissioning decision (as those categories are described above). For example, this should include:</p> <ul style="list-style-type: none"> • Spouse / partner; • Close relative e.g., parent, grandparent, child, grandchild or sibling; • Close friend; • Business partner.

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Date

(Line Manager or Senior CCG Manager)

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Non-Financial Professional Interests	<p>This is where an individual may obtain a non-financial professional benefit from the consequences of a commissioning decision, such as increasing their professional reputation or status or promoting their professional career. This may, for example, include situations where the individual is:</p> <ul style="list-style-type: none"> • An advocate for a particular group of patients; • A GP with special interests e.g., in dermatology, acupuncture etc. • A member of a particular specialist professional body (although routine GP membership of the RCGP, BMA or a medical defence organisation would not usually by itself amount to an interest which needed to be declared); • An advisor for Care Quality Commission (CQC) or National Institute for Health and Care Excellence (NICE); • A medical researcher.
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NHS South Sefton CCG and NHS Southport & Formby CCG Primary Care Commissioning Committees in Common
Approved Minutes 16.07.2020 – Part I

Date: Thursday 16th July 2020 Time 10.00-11.00am
Venue: Skype meeting due to Covid-19 Pandemic

Members		
Graham Bayliss	SS CCG Lay Member (Co Chair)	GB
Dil Daly	SF CCG Lay Member (Co Chair)	DD
Alan Sharples	SS CCG Lay Member	AS
Helen Nichols	SF CCG Lay Member	HN
Fiona Taylor	S&F SS CCG Chief Officer	FT
Martin McDowell	S&F SS CCG Chief Finance Officer	MMc
Jan Leonard	S&F SSSCCG Director of Place (North)	JL
Angela Price	S&F SS CCG Programme Lead Primary Care	AP
Alan Cummings	NHSE Senior Commissioning Manager & Improvement	AC
Brendan Prescott	SS S&F Chief Nurse Quality Team	BP
Non- Voting Attendees:		
LMC Representative		
Healthwatch Representative	Healthwatch Sefton	
Health & Well Being Representative	Health & Wellbeing Representative	
Dr Craig Gillespie	GP Clinical Representative	CG
Dr Kati Scholtz	GP Clinical Representative	KS
Jane Elliott	Localities Manager SSSCCG	JE
Richard Hampson	Primary Care Contracts Manager SSSCCG	RH
Minutes		
Jacqueline Westcott	Senior Administrator SSSCCG	JW

Attendance Tracker D = Deputy ✓ = Present A = Apologies N = Non-attendance
C= Cancelled

Name	Membership	Jan 20	Feb 20	Mar20	April 20	May 20	July 20
Members:							
Graham Bayliss	SS CCG Lay Member (Chair)	A	C	✓	C	✓	✓
Dil Daly	S&F CCG Lay Member (Co Chair)	✓	C	✓	C	✓	✓
Alan Sharples	SS CCG Lay Member	✓	C	✓	C	✓	✓
Helen Nichols	S&F CCG Lay Member	✓	C	✓	C	✓	✓
Fiona Taylor	S&F SS CCG Chief Officer	A	C	✓	C	✓	A
Martin McDowell	S&F SS CCG Chief Finance Officer	A	C	✓	C	✓	✓
Jan Leonard	S&F CCG Director of Place (North)	✓	C	✓	C	✓	✓
Brendan Prescott	S&F CCG Chief Nurse and Quality Lead	N	C	N	C	N	N
Angela Price	S&F SS CCG Programme Lead Primary Care	✓	C	✓	C	✓	✓
Alan Cummings	NHSE Senior Commissioning Manager	A	C	✓	C	N	✓
Non- Voting Attendees:							
LMC Representative		N	C	✓	C	✓	A
Health Watch Representative		N	C	✓	C	✓	A

Name	Membership	Jan 20	Feb 20	Mar20	April 20	May 20	July 20
Dr Craig Gillespie	GP Clinical Representative	✓	C	✓	C	✓	✓
Dr Kati Scholtz	GP Clinical Representative	✓	C	✓	C	✓	✓
Tracy Forshaw	SS SF CCG Primary Care Quality Manager	A	C	✓	C	N	✓
Eshan Haqqani	SS SF CCG Interim Care Quality Manager	N	C	✓	C	✓	✓
Richard Hampson	SSECCG Primary Care Contracts Manager	✓	C	✓	C	✓	✓
Debbie Fairclough	SS SF CCG						✓
No	Item						Action
PCCiC20/44	<p>Apologies for absence</p> <p>Welcome and Introductions The members of the committee introduced themselves.</p>						
PCCiC20/45	<p>Declarations of interest regarding agenda items There were no declarations of interest declared that had a direct impact on the meeting's proceedings.</p>						
PCCiC20/46	<p>Minutes of the previous meeting Date 21st May 2020 was agreed as an accurate record.</p>						
PCCiC20/47	<p>Action points from the previous meeting Members reviewed the action tracker and the tracker was updated.</p>						

<p>PCCiC20/48</p>	<p>Report from Operational Group and Decisions Made:</p> <p>June 2020:</p> <p>Key Issues to report back to the Primary Care Commissioning Committee in Common – South Sefton</p> <p>A practice in Crosby submitted an application to close their list for 12 months. The committee agreed that they would support the practice to close for 6 months. An action plan will be put into place to help support the practice to open fully. It was noted that the practice have applied for some resilience funding to support transformation.</p> <p>Another practice in Crosby has requested that their list closure is extended for a further 6 months. This was supported by the group due to the number of new patient registrations when the list was open. Further work to be done with Crosby locality to address on-going issues of patient movement.</p> <p>It was proposed that the Primary Care Committee in Common should continue to meet bi-monthly as a result of assurances received by MIAA. Meetings would be via Skype during the Covid 19 pandemic.</p> <p>Key Issues to report back to the Primary Care Commissioning Committee in Common – Southport and Formby</p> <p>It was proposed that the Primary Care Committee in Common should continue to meet bi-monthly as a result of assurances received by MIAA. Meetings would be via Skype during the Covid 19 pandemic.</p> <p>July 2020:</p> <p>Key Issues to report back to the Primary Care Commissioning Committee in Common – South Sefton and Southport and Formby</p> <p>2 Premises Improvement Grant applications were included in the pack, the Committee reviewed these, there were no comments. These will be submitted to F&R committee for approval.</p> <p>The process for reviewing QOF activity from 19/20 that has seen significant variance at practice level was discussed.</p> <p>It was reported that the 10 LeDer reviews are in the process of being submitted. The outcome of these and any learning will be shared back through the group.</p> <p>The recent outcome of a Judicial Review (elsewhere in the country) relating to payments to practices for Safeguarding work was discussed. Further work to agree a local rate for remuneration is required.</p> <p>It was noted that guidance from NHSE is expected imminently regarding the restarting of routine work in General Practice.</p> <p>The risk register was reviewed; a number of COVID risks were reduced. A new risk was added regarding access to phlebotomy services and the impact this is having on General Practice.</p> <p>An issue was highlighted regarding the weighting assigned to patients who reside in care homes. There was discussion around the process some concern that this may not be recorded correctly. Further work is being undertaken to understand the impact.</p>		
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PCCiC20/49	<p>Healthwatch Issues</p> <p>There was no representative from Healthwatch at the meeting.</p>		
PCCiC20/50	<p>PCN Update:</p> <p>South Sefton – Dr Gillespie gave feedback on the 2 PCNs in South Sefton, Seaforth and Litherland and the newly merged Crosby, Maghull and Bootle known as Team Sefton. 4 practices in Sefton have not signed to a PCN; however, 3 of the 4 practices have attended PCN meetings.</p> <p>Southport and Formby – Dr Scholtz gave feedback on Southport and Formby practices.</p> <p>Formby PCN continues to cover one practice not signed up to the Directed Enhanced Service (DES) for PCNs.</p> <p>Ainsdale and Birkdale PCN now cover one practice not signed up.</p> <p>Central and North localities no longer have PCN coverage.</p> <p>One practice in North did wish to sign up to the DES however there is not a geographically coterminous PCN to enable this.</p> <p>The CCG is working with providers and NHSE to ensure that the service specifications are delivered.</p> <p>PCNs in Sefton</p> <p>A PCN paper will be presented to the Leadership Team to review and authorise coverage of those practices that are not signed to a PCN.</p>		
PCCiC20/51	<p>Primary Care Finances</p> <p>It was reported that financial arrangements have changed due to Covid 19 with block arrangements in place to ensure delivery of services. The CCG is following advice from NHSE to support resolving the reported deficit of £152 to £78k for South Sefton to the end of July 2020. Southport and Formby reported deficit expected at £86k reducing to £71k following retrospective review. Advice from NHSE is to work through reviews on a month by month basis.</p> <p>Primary Care budgets are breaking even up to August 2020.</p>		

PCCiC20/52	<p>Primary Care Programme Report</p> <p>The Primary Care Programme Report was reviewed and updated, (updates highlighted blue) the exception is international recruitment which has no further update.</p>	
PCCiC20/53	<p>Performance (OOHs/7 Day Access/Contractual Compliance/DES</p> <p>South Sefton 7 Day Access service continued throughout the Covid 19 pandemic using a different operating model to reflect national guidance. Utilisation rates continue to rise above the national average set at 75% to 87%. The introduction of physiotherapy is now offered to patients.</p> <p>Go To Doc (GTD) is supporting the Covid Clinical Assessment Service for red and amber patients referred to the service by NHS 111. Regular meetings take place with Go To Doc to ensure contract compliance. It was noted that the Federation has been a great asset during the Covid 19 pandemic working alongside GTD and North West Boroughs to deliver services, the committee will write to the Federation expressing thanks for the support provided.</p> <p>The financial year 20/21 practices had 3 additional DES offered: Minor Surgery Out of Area Registrations Special Allocation Scheme</p> <p>Learning Disabilities DES is now part of LQC (for monitoring) all practices have signed up to this and have the option of providing the health check in practice or delegating to the Federation. Four practices in South Sefton have chosen the Federation option.</p> <p>Annual contract monitoring offering support and assurances will resume with practices as the CCG returns to usual business post Covid 19 with continued support from NHSE. There are no reported contract breaches.</p>	
PCCiC20/54	<p>Primary Care Quality Dashboard</p>	

PCCiC20/55	<p>Key Issues Log to Governing Body</p> <ul style="list-style-type: none"> • Joint Operational Group reports from June and July 2020 • PCN coverage of non- participating practices is robust in South Sefton. Southport and Formby are exploring coverage by alternative provider given the scale of no- participation. • The financial positon for the CCG was noted and block arrangements in place with providers. COVID expenditure being tracked and reported. • The Primary Care Programme report was noted. • Performance report relating to 7 Day Access, Out of Hours and Directed Enhanced Services was reviewed. A letter of thanks to be sent to South Sefton Federation and SF Health Ltd regarding their provision of services during COVID. 	
PCCiC20/56	<p>Any Other Business</p> <p>The GP survey has been released in July 2020; the survey was collected until March 20 therefore mainly unaffected by changes to ways in working a s a result of COVID. The performance of both CCGs is good and a further report will be presented to the next committee.</p>	
PCCiC20/57	<p>Date of Next Meeting: Date of Next Meeting: 17th September 2020 10.00-11.00am Venue: TBC</p>	
<p>Meeting Concluded.</p> <p>Motion to Exclude the Public: Representatives of the Press and other members of the Public to be excluded from the remainder of this meeting, having regard to the confidential nature of the business to be transacted, publicity on which would be prejudicial to the public interest, (Section 1{2} Public Bodies (Admissions to Meetings), Act 1960)</p>		

SS SF NHSE Primary Care Commissioning Committee in Common – Part 1 Action Tracker May 2020

Item		CCG	Lead	Time
PCCiC 19/55	Healthwatch are to submit a template to the committee breaking down into localities. This is to allow comparisons to be made between practices 15.8.19 Update: there were no representatives present today. Chase for next meeting 19.9.19 Update: the template will be available in October 19 17.10.19 Update: No further update as yet 16.1.20 update: update due in February 2020. 19.3.20 update: item remains active 21.5.20 update: request for a more structured reporting for the future	Both	DB	Aug 19
PCCiC 19/112	The Committee asked that the IT investments budget be presented to the F&R Committee. 16.1.20 Update: F&R Committee have been asked to present IT investment budget at the next meeting. 19.3.20 Update: item ongoing 21.5.29 update: item ongoing investment not yet reported	Both	PS	Dec 19
PCCiC 19/117	Healthwatch to present the access reports for Bootle and Central Southport GP Patient survey results for Bootle and Central Southport 16.1.20 Update: Feedback will be provided from Health Watch at the meeting scheduled for 20.2.20. 19.3.20 Update: Item is on the agenda for today's meeting 19.3.20 21.5.20 update: item ongoing as not yet finalised	Both	DB AP	Jan 20
PCCiC 20/08	The Draft PCN Service Specification December 2019 requires feedback and review from NHSE. 19.3.20 Update: The PCN specification has been re-issued and is on the agenda for today's meeting 19.3.20	Both	SH	Feb 20

Network Contract Directed Enhanced Service 20/21

1.0 Background.

The Network Contract Directed Enhanced Service (DES) was introduced during 2019 and will remain in place until at least 31 March 2024. For 2020/21, the Network Contract DES Directions came into force on 1 April 2020 and, following participation in the DES, the requirements on practices and Primary Care Networks (PCNs), as outlined in the Network Contract DES specification, will apply from that date.

The vast majority of practices in England participated in the Network Contract DES in 2019/20. These practices are therefore defined as Core Network Practices of a previously approved PCN established in the period 1 July 2019 to 31 March 2020. From 2020/21 onwards, there is a simple reconfirmation process for these previously approved PCNs to continue without changes. There is also the potential for these previously approved PCNs to continue with changes and for new PCNs to be formed.

1.1 Participation

A practice wishing to participate in the Network Contract DES from April 2020 will fall within one of six scenarios set out in the Network Contract DES Specification. To confirm participation in the Network Contract DES, the commissioner and practice must follow the steps set out in the Network Contract DES Specification depending on which of the six scenarios applies to each PCN.

- (1) A practice that is a Core Network Practice of a previously approved PCN and have had no changes to the identity of the Core Network Practices, the Nominated Payee, the Clinical Director or the Network Area.
- (2) A practice that is a Core Network Practice of a previously approved PCN and there have been changes to the information listed above.
- (3) A practice that has not previously participated in a Network Contract DES but wishes to become a Core Network Practice of a previously approved PCN.
- (4) A newly established practice wishing to become a Core Network Practice of a previously approved PCN.
- (5) A practice that is either a new practice or an existing practice and wishes to become a Core Network Practice of a newly proposed PCN.
- (6) A practice that cannot identify a PCN that is willing to allow the practice to become a Core Network Practice.

Commissioners are not required to await 100 per cent geographical coverage in order to approve Core Network Practice participation and PCN continuation or formation.

2.0 Role of Commissioners and LMCs in reconfirming PCN establishment

Commissioners and LMCs will need to work together to ensure all practices who wish to join or continue their participation in the Network Contract DES are included within a PCN. Commissioners and LMCs will also need to work with PCNs to ensure that 100 per cent of registered patients are covered by network services, for example by commissioning a local incentive scheme. This may require discussion and mediation between the relevant PCN grouping and practices(s).

Commissioners will:

- a. Liaise with the relevant Integrated Care System (ICS) or Sustainability and Transformation Partnership (STP) to ensure each PCN Network Area continues to or does support delivery of services within the wider ICS/STP strategy.
- b. Engage with LMCs and bring practices together to resolve issues to ensure 100 per cent population coverage is maintained.
- c. Engage with LMCs to aid a practice's participation in the Network Contract DES where the practice is unable to find a PCN.
- d. Reconfirm or approve practice participation in the Network Contract DES as part of a PCN, ensuring that the participation requirements have been met.
- e. Have oversight of PCN footprints to ensure these make long term sense for service delivery and in the context of the GP contract framework.
- f. Support PCN development via investment and development support outside of the Network Contract DES.

Commissioners are required to ensure that that any patients of a practice that is not participating in the Network Contract DES have access to network services. In those instances where a practice has chosen not to sign up to the Network Contract DES and a commissioner is required to secure network services for the patients of that practice, a commissioner may contract with any suitable provider for the delivery of network services, such as another PCN or a community services provider.

3.0 Local Position.

3.1 South Sefton CCG

25 out of the 29 practices have signed up to the DES. The 4 non participating practices remain unchanged from last year.

Seaforth & Litherland PCN remains unchanged from the previous year.

Bootle PCN and Crosby & Maghull PCN have opted to form a merged PCN, 'Bootle, Crosby and Maghull Partnership PCN' and have submitted the required documentation to support this application. The rationale for this merger is to enable efficiencies from working at a larger scale, in particular regarding to clinical leadership and delivery of the service specifications for the DES.

This PCN will deliver network services for the non- participating practice patient populations within their boundaries.

3.2 Southport & Formby CCG

7 out of 18 practices have signed up to the DES (18 practices equates to 17 plus Hightown Surgery. Freshfield Surgery and Trinity Practice are not included as despite remaining separate contracts they have had a data merge with their 'host' practice).

Formby PCN remains unchanged from the previous year and will continue to provide network services for the non- participating practice patient populations within their boundaries.

Ainsdale & Birkdale PCN. The PCN continues without Family Surgery. The PCN will provide network services for the non- participating practice patient population of Family Surgery.

Central PCN

This PCN has disbanded. None of the central practices have signed up to the DES.

North PCN

This PCN has disbanded. With the exception of Roe Lane Surgery, none of the practices in North have signed up to the DES.

The CCG will now work with Roe Lane surgery to identify a PCN for them to join. If negotiations with PCNs and the LMC are unsuccessful the CCG can allocate the practice to a PCN.

The CCG will work with suitable providers to identify solutions for delivery of the network service specifications for the non-participating practice populations.

4. Summary

The Committee is to note the contents that were approved by LT:

- 1) Summary of DES sign up
- 2) Approval of the following PCNs
 - Seaforth & Litherland
 - Bootle, Crosby & Maghull Partnership
 - Formby
 - Ainsdale & Birkdale
- 3) Support negotiations to find a suitable PCN for Roe Lane Surgery to join
- 4) Support negotiations to identify a suitable provider to delivery services for non-participating practices in Central and North Southport.

A further paper will be presented to LT regarding 3) and 4) following further discussions.

Primary Care Commissioning Committee in Common 16th July 2020

Agenda Item: 20/50	Author of the Paper:
Report date: June 20	Jan Leonard Director of Place - North Jan.leonard@southportandformbyccg.nhs.uk] 07826903286
Title: Primary Care Networks in Sefton	
Summary/Key Issues: This paper sets out the current position for sign up to Primary Care Networks in Sefton in 20/21. Practices were asked to sign up to the Network Contract Directed Enhanced Service by 31 st May 20. The applications were then reviewed by the CCG Leadership Team.	
Recommendation The Primary Care Commissioning Committee is asked to note the content of the report.	Note Approve <input type="checkbox"/> Ratify <input type="checkbox"/>

Links to Corporate Objectives	
	To support the implementation of Sefton2gether and its positioning as a key delivery plan that will realise the vision and ambition of the refreshed Health and Wellbeing Strategy.
x	To ensure that the CCG continues to aspire to improve performance and quality across the mandated constitutional measures.
x	To ensure delivery of the CCG's QIPP plan and to align it with Sefton2gether and the work plan of established programmes including Primary Care Networks, the Provider Alliance, Acute Sustainability and the Integrated Commissioning Group.
x	To support primary care development ensuring robust and resilient general practice services and the development of Primary Care Networks (PCNs).
x	To work with partners to achieve the integration of primary and specialist care; physical and mental health services and health with social care as set out in the NHS long-term plan and as part of an accepted place-based operating model for Sefton.
x	To progress a potential CCG merger to have in place an effective clinical commissioning group function.

Process	Yes	No	N/A	Comments/Detail
Patient and Public Engagement				
Clinical Engagement	x			
Equality Impact Assessment				
Legal Advice Sought				
Resource Implications Considered	x			
Locality Engagement				
Presented to other Committees		x		CCG Leadership team

Links to National Outcomes Framework	
x	Preventing people from dying prematurely
x	Enhancing quality of life for people with long-term conditions
x	Helping people to recover from episodes of ill health or following injury
x	Ensuring that people have a positive experience of care
x	Treating and caring for people in a safe environment and protecting them from avoidable harm

Primary Care Commissioning Committee in Common 16th July 20

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Approve	<input type="checkbox"/>						
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Process	Yes	No	N/A	Comments/Detail
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Process	Yes	No	N/A	Comments/Detail
Patient and Public Engagement		x		
Clinical Engagement	x			
Equality Impact Assessment				
Legal Advice Sought		x		
Resource Implications Considered				
Locality Engagement				
Presented to other Committees		x		CCG Leadership Team

Links to National Outcomes Framework	
x	Preventing people from dying prematurely
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Primary Care Commissioning Committee July 2020

Agenda Item: 20/51	Author of the Paper:	
Report date: July 2020	Robert Smith Management Accountant robert.smith@southseftonccg.nhs.uk Tel: 0151 317 8475	
Title: Primary Care – General Medical Services – Financial Position as at 30 June 2020		
Summary/Key Issues: This paper presents the Primary Care Commissioning Committee with an over view of the financial position regarding delegated budgets for Primary care – General Medical Services at 30 th June 2020.		
Recommendation	Note	<input checked="" type="checkbox"/>
The Primary Care Commissioning Committee is asked to receive this report noting:	Approve	<input type="checkbox"/>
<ul style="list-style-type: none"> • Temporary financial arrangements have been implemented for the first four months of 2020/21 as part of the COVID-19 response. Further guidance regarding the remainder of the financial year is expected. • As at 30th June the year to date financial position is a deficit of £152k and the full year forecast position is a deficit of £78k. 	Ratify	<input type="checkbox"/>

Links to Corporate Objectives 2020/21	
x	To support the implementation of Sefton2gether and its positioning as a key delivery plan that will realise the vision and ambition of the refreshed Health and Wellbeing Strategy.
x	To ensure that the CCG continues to aspire to improve performance and quality across the mandated constitutional measures.
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Process	Yes	No	N/A	Comments/Detail
Patient and Public Engagement	X			
Clinical Engagement	X			
Equality Impact Assessment			X	
Legal Advice Sought			X	
Quality Impact Assessment			X	
Resource Implications Considered	X			
Locality Engagement		X		
Presented to other Committees	X			Finance and Resource Committee – July 2020

Primary Care – General Medical Services – Financial Position as at 30th June 2020

1. Financial Position as at 30th June 2020

This report focuses on the financial performance of the Delegated Co-Commissioning budget – General Medical Services for South Sefton CCG as at 30 June 2020.

In response to the COVID emergency, temporary financial arrangements have been implemented for the period April – July 2020 and the original CCG financial plan has been suspended. CCG allocations have been revised and performance is assessed against the revised allocations. Further guidance relating to the remainder of the financial year is expected to be published in due course.

As part of the revised financial regime for 2020/21, income for General Practice has been protected at 2019/20 levels to recognise the need to direct primary care resources to the COVID response rather than the business as usual activities which generate some of the GP contract payments.

The table below shows performance against budget allocation for the year to 30th June 2020. The total budget presented is for the period April to July 2020.

Table 1 – Delegated Co-Commissioning Position

Category	M1-M4 Budget.	YTD Budget.	YTD Actual.	YTD Variance.	Forecast Variance.
Core Contract	5,194,384	3,895,789	3,803,078	(92,711)	0
Premises	468,676	351,505	340,448	(11,057)	(14,524)
Staff Costs	93,390	70,043	70,063	20	0
QOF	742,777	557,080	536,936	(20,144)	0
Enhanced Schemes	58,952	44,214	44,214	0	0
PCN Schemes	522,053	391,538	383,005	(8,533)	0
Prescribing	29,234	21,925	21,925	0	0
Other	(293,429)	(220,072)	28,770	248,842	92,222
CCG Staff	0	0	35,156	35,156	0
Grand Total	6,816,037	5,112,022	5,263,594	151,572	77,698

The year to date financial position at 30th June 2020 is a deficit of £152k. The full year forecast for 2020/21 is a deficit of £78k.

As a consequence of the revised allocations, the Delegated Co-Commissioning budget was reduced by £1.032m for M1-M4, equating to a £258k reduction per month. This has resulted in a negative contingency budget of £329k which is included within the other category in Table 1.

At this early stage of the financial year, emphasis should be placed on the YTD variance. In line with NHS England and Improvement guidance a reconciliation and analysis of in year spend is planned in M4 in order to provide an accurate forecast going forward.

2. Recommendations

The Primary Care Commissioning Committee is asked to receive this report noting:

- Temporary financial arrangements have been implemented for the first four months of 2020/21 as part of the COVID-19 response. Further guidance regarding the remainder of the financial year is expected.
- As at 30th June the year to date financial position is a deficit of £152k and the full year forecast position is a deficit of £78k.

Robert Smith
Management Accountant
July 2020

Primary Care Commissioning Committee July 2020

Agenda Item: 20/51	Author of the Paper:						
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Note	x						
Approve							
Ratify							

Links to Corporate Objectives 2020/21	
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x	To progress a potential CCG merger to have in place an effective clinical commissioning group function.

Process	Yes	No	N/A	Comments/Detail
Patient and Public Engagement	X			
Clinical Engagement	X			
Equality Impact Assessment			X	
Legal Advice Sought			X	
Quality Impact Assessment			X	
Resource Implications Considered	X			
Locality Engagement		X		
Presented to other Committees	X			Finance and Resource Committee – July 2020

Primary Care – General Medical Services – Financial Position as at 30th June 2020

1. Financial Position as at 30th June 2020

This report focuses on the financial performance of the Delegated Co-Commissioning budget – General Medical Services for Southport & Formby CCG as at 30 June 2020.

In response to the COVID emergency, temporary financial arrangements have been implemented for the period April – July 2020 and the original CCG financial plan has been suspended. CCG allocations have been revised and performance is being assessed against the revised allocations. Further guidance relating to the remainder of the financial year is expected to be published in due course.

As part of the revised financial regime for 2020/21, income for General Practice has been protected at 2019/20 levels to recognise the need to direct primary care resources to the COVID response rather than the business as usual activities which generate some of the GP contract payments.

The table below shows performance against budget allocation for the year to 30th June 2020. The total budget presented is for the period April to July 2020.

Table 1 – Delegated Co-Commissioning Position

Category	M1-M4 Budget.	YTD Budget.	YTD Actual.	YTD Variance.	Forecast Variance.
Core Contract	4,111,172	3,083,378	3,021,342	(62,036)	0
Premises	526,457	394,842	386,341	(8,501)	(8,849)
Staff Costs	24,614	18,461	32,768	14,307	14,307
QOF	639,042	479,281	486,231	6,950	22,299
Enhanced Schemes	92,640	69,481	69,481	0	0
PCN Schemes	444,818	333,612	229,636	(103,976)	0
Prescribing	34,954	26,216	26,216	0	0
Other	(248,824)	(186,618)	21,480	208,098	57,881
CCG Staff	0	0	15,921	15,921	0
Grand Total	5,624,873	4,218,653	4,289,416	70,763	85,639

The year to date financial position at 30th June 2020 is a deficit of £71k. The full year forecast for 2020/21 is a deficit of £86k.

As a consequence of the revised allocations, the Delegated Co-Commissioning budget was reduced by £356k for M1-M4, equating to a £89k reduction per month. This has resulted in a negative contingency budget of £277k which is included within the other category in Table 1.

At this early stage of the financial year, emphasis should be placed on the YTD variance. In line with NHS England and Improvement guidance a reconciliation and analysis of in year spend is planned in M4 in order to provide an accurate forecast going forward.

2. Recommendations

The Primary Care Commissioning Committee is asked to receive this report noting:

- Temporary financial arrangements have been implemented for the first four months of 2020/21 as part of the COVID-19 response. Further guidance regarding the remainder of the financial year is expected.
- As at 30th June the year to date financial position is a deficit of £71k and the full year forecast position is a deficit of £86k.

Robert Smith
Management Accountant
July 2020

Primary Care Commissioning Committee in Common 16th July 2020

Agenda Item: 20/53	Author of the Paper:						
Report date: 16 th July 2020	Name: Richard Hampson Job Title: Primary Care Contracts Manager richard.hampson@southseftonccg.nhs.uk Tel: 0151 296 7116						
Title: Performance Out of Hours, 7 Day Access / DES Participation and Contractual Compliance							
Summary/Key Issues: To review current utilisation and participation of Primary Care Services across Southport and Formby.							
Recommendation The Primary Care Commissioning Committee is asked to note the content of the report.	<table border="1" style="float: right;"> <tr> <td>Note</td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> </tr> <tr> <td>Approve</td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Ratify</td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </table>	Note	<input checked="" type="checkbox"/>	Approve	<input type="checkbox"/>	Ratify	<input type="checkbox"/>
Note	<input checked="" type="checkbox"/>						
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Links to Corporate Objectives	
	To support the implementation of Sefton2gether and its positioning as a key delivery plan that will realise the vision and ambition of the refreshed Health and Wellbeing Strategy.
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Process	Yes	No	N/A	Comments/Detail
Patient and Public Engagement		x		
Clinical Engagement	x			
Equality Impact Assessment		x		
Legal Advice Sought		x		
Resource Implications Considered	x			
Locality Engagement	x			
Presented to other Committees		x		

Links to National Outcomes Framework	
x	Preventing people from dying prematurely
x	Enhancing quality of life for people with long-term conditions
x	Helping people to recover from episodes of ill health or following injury
x	Ensuring that people have a positive experience of care
x	Treating and caring for people in a safe environment and protecting them from avoidable harm

Report to the Primary Care Commissioning Committee in Common July 2020

1. Introduction and Background

The purpose of this report is to highlight practice utilisation for 7 Day Access and Out of Hours. It will also highlight Direct Enhanced Service Sign Up and report on any breach notices that may have been issues by the CCG.

7 Day Access

7 Day Access provision is currently being provided to Southport & Formby practices by the Southport & Formby Federation. The CCG has regular quarterly contract monitoring reviews with the federation to ensure compliance and activity is submitted into the CCG on a monthly basis.

As of February 2020, it was reported that the 7 Day Access service was operating ahead of the nationally set target by NHS England (75% utilisation by March 2020).

Southport & Formby	Appointments Available	Booked	DNA	Utilisation	Month	GP	Advanced Nurse Practitioner	Practice Nurse	Health Care Assistant	Physio
Apr-19	985	639 64.87%	73 11.4%	57.46%						
May-19	1000	722 72.20%	72 10.0%	65.00%	May-19	256 35.5%	244 33.8%	57 7.9%	52 7.2%	113 15.7%
Jun-19	999	687 68.77%	68 9.9%	61.96%	Jun-19	261 38.0%	215 31.3%	80 11.6%	41 6.0%	90 13.1%
Jul-19	1115	652 58.48%	64 9.8%	52.74%	Jul-19	239 36.7%	219 33.6%	54 8.3%	33 5.1%	107 16.4%
Aug-19	1161	632 54.44%	71 11.2%	48.32%	Aug-19	261 41.3%	215 34.0%	68 10.8%	33 5.2%	97 15.3%
Sep-19	1117	695 62.22%	62 8.9%	56.67%	Sep-19	237 34.1%	237 34.1%	71 10.2%	55 7.9%	95 13.7%
Oct-19	1125	914 81.24%	104 11.4%	72.00%	Oct-19	253 27.7%	434 47.5%	209 22.9%	127 13.9%	160 17.5%
Nov-19	951	791 83.18%	81 10.2%	74.66%	Nov-19	189 23.9%	376 47.5%	57 7.2%	52 6.6%	115 14.5%
Dec-19	972	788 81.07%	75 9.5%	73.35%	Dec-19	214 27.2%	366 46.4%	42 5.3%	52 6.6%	101 12.8%
Jan-20	1057	919 86.94%	89 9.7%	78.52%	Jan-20	224 24.4%	369 40.2%	110 12.0%	71 7.7%	145 15.8%
Feb-20	1055	931 88.25%	93 10.0%	79.43%	Feb-20	224 24.1%	385 41.4%	86 9.2%	58 6.2%	168 18.0%

The 7 day service was suspended in March due to the COVID19 pandemic; however the service resumed in June with a new operating model to reflect national guidance.

During the suspension of the 7 day service the federation provided a 'red' service operating from 2 locations for patients with suspected COVID symptoms, and a dedicated 'amber' site. A visiting service has also been introduced working in conjunction with GtD.

Out of Hours

The Out of Hours provision is currently being provided by GtD, who provides this service across all of Sefton.

The CCG have regular quarterly meetings with the provider to ensure contractual compliance and to look at activity through the service. These activity figures are also provided on a monthly basis to the CCG for monitoring:

Southport and Formby	APAS (replaced 999 as of Jan 19)	Booking	999	Dr Advice	Healthcare Professional	Medication Enquiry	Nurse Advice	See Clinician	Speak To Clinician	Treatment Centre	Visit	TOTAL
Apr-19	27	2		105	17	30	92	2	162	421	192	1023
May-19	30	2		108	12	48	115	1	133	444	231	1124
Jun-19	28	1		133	16	31	87	1	164	372	159	992
Jul-19	23	1		106	24	23	57	3	146	305	139	827
Aug-19	23	2		111	30	36	97	3	164	430	179	1075
Sep-19	23	3		96	15	35	63	5	137	366	141	884
Oct-19	16	4		84	26	28	62	14	159	349	161	903
Nov-19	30	7		128	24	17	76	4	157	378	146	967
Dec-19	17	7		129	24	15	100	12	211	483	211	1209
Jan-20	34	2		93	33	19	61	5	159	374	181	961
Feb-20												
Mar-20												

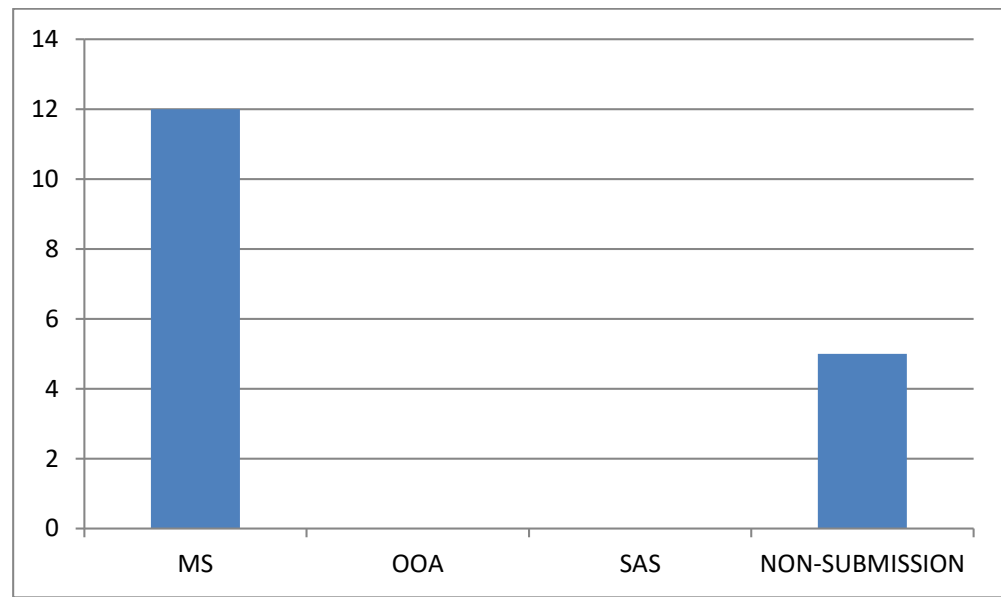
Since the start of the COVID19 pandemic, GtD Out Of Hours model has evolved to include a COVID19 Clinical Assessment Service (CCAS) which continues to operate. Patients with symptoms of COVID 19 who contact NHS111 who then require further clinical assessment are referred to CCAS.

COVID-19 Clinical Assessment Service - Southport and Formby	Mar-2020	Apr-2020	May-2020	Jun-2020	Total
COVID risk Clinical Assessment service 1 hour	30	36	15	11	92
COVID risk Clinical Assessment service 2 hours	35	121	40	9	205
COVID risk Clinical Assessment service 4 hours	21	65	25	5	116
COVID risk Clinical Assessment service 6 hours	46	132	36	8	222
COVID risk Clinical Assessment service 12 hours	29	29	11	6	75
Total	161	383	127	39	710

DES Participation

For the financial year 2020-2021, practices had three additional Direct Enhanced Services to choose to sign up to. These include: Minor Surgery, Out of Area patients and SAS / Violent patient scheme.

Sign up for practices (19 in total) for Southport & Formby CCG are as follows:



Primary Care Networks

Sign up to primary care networks is covered in item 20/50.

Learning Disability Health Checks

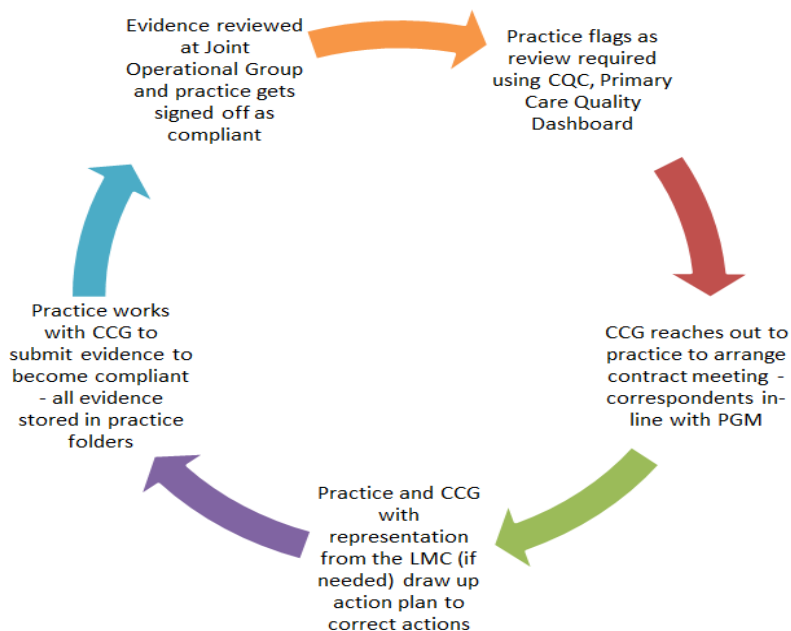
Currently South Sefton Federation are offering their services to support practices in providing (through sub-contracting arrangements) learning disability health checks. So far, no practices in Southport & Formby CCG have accepted the offer of a federation delivery.

Where practices have opted to provide these services themselves, the CCG will be contacting them and asking for an action plan outlining the delivery for the service in 2020-2021 following on from a review of individual practices achievement for learning disability for 2019-2020. All practices across Sefton have signed up to the Learning Disability Health Check enhanced services due to the requirement outlined in the LQC.

1. Contractual Monitoring & Breaches

Currently no breaches have been issued to any practices in the Southport & Formby area. The CCG, prior to the COVID19 pandemic were undergoing regular annual contract monitoring reviews for practices via a rolling annual system using information from CQC visits, the Primary Care Quality Dashboard and local intelligence. Since March, no face to face visits have been possible, however meetings via remote ways of working have enabled the CCG to continuously support practices through the pandemic. As further guidance is received from NHS England regarding the way general practices operates moving forward, the CCG hopes to resume face to face contractual monitoring visits.

Following on from the MIAA Primary Care audit in February the CCG has developed a comprehensive monitoring template and monitoring cycle that we will use to support practices across Southport & Formby CCG:



Primary Care Commissioning Committee in Common

16th July 2020

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Links to Corporate Objectives

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Process	Yes	No	N/A	Comments/Detail
Patient and Public Engagement		x		
Clinical Engagement	x			
Equality Impact Assessment		x		
Legal Advice Sought		x		
Resource Implications Considered	x			
Locality Engagement	x			
Presented to other Committees		x		

Links to National Outcomes Framework	
x	Preventing people from dying prematurely
x	Enhancing quality of life for people with long-term conditions
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7 Day Access provision is currently being provided to South Sefton practices by the South Sefton Federation. The CCG has regular quarterly contract monitoring reviews with the federation to ensure compliance and activity is submitted into the CCG on a monthly basis.

As of February 2020 it was reported that the 7 Day Access service was operating ahead of the nationally set target by NHS England (75% utilisation by March 2020).

South Sefton	Appointments Available	Booked	DNA	Utilisation	Breakdown of Appointments	Month	GP	Advanced Nurse Practitioner	Practice Nurse	Physio
Apr-19	1438	1040 72.3%	111 10.7%	64.60%		Breakdown of Appointments	Apr-19	337 32.40%	552 53.08%	151 14.52%
May-19	1459	1172 80.3%	111 9.5%	72.72%	May-19		354 30.20%	661 56.40%	157 13.40%	
Jun-19	1377	1040 75.5%	105 10.1%	67.90%	Jun-19		357 34.33%	544 52.31%	139 13.37%	
Jul-19	1451	1141 78.6%	107 9.4%	71.26%	Jul-19		356 31.20%	644 56.44%	141 12.36%	
Aug-19	1475	1225 83.1%	115 9.4%	75.25%	Aug-19		373 30.45%	652 53.22%	200 16.33%	
Sep-19	1445	1215 84.1%	77 6.3%	78.75%	Sep-19		379 31.19%	626 51.52%	210 17.28%	
Oct-19	1447	1255 86.7%	102 8.1%	79.68%	Oct-19		377 30.04%	660 52.59%	232 18.49%	
Nov-19	1454	1333 91.7%	91 6.8%	85.42%	Nov-19		374 28.06%	620 46.51%	288 21.61%	
Dec-19	1390	1129 81.2%	82 7.3%	75.32%	Dec-19		409 36.23%	587 51.99%	170 15.06%	
Jan-20	1365	1211 88.7%	107 8.8%	80.88%	Jan-20		488 40.30%	575 47.48%	200 16.52%	
Feb-20	1380	1292 93.6%	90 7.0%	87.10%	Feb-20		439 33.98%	578 44.74%	248 19.20%	9 0.70%
Mar-20	1543	862 55.9%	66 7.7%	51.59%	Mar-20					

The 7 day service continued throughout the COVID19 pandemic; however the operating model was changed to reflect national guidance. The introduction of a physiotherapy service the federation is working collaboratively with North West Boroughs and GtD to support the delivery of red / amber COVID19 sites and visiting arrangements to support the system through the COVID19 pandemic.

Out of Hours

The Out of Hours provision is currently being provided by GtD, who provides this service across all of Sefton.

The CCG have regular quarterly meetings with the provider to ensure contractual compliance and to look at activity through the service. These activity figures are also provided on a monthly basis to the CCG for monitoring:

South Sefton	APAS (replaced 999 as of Jan 19)	Booking	999	Dr Advice	Healthcare Professional	Medication Enquiry	Nurse Advice	See Clinician	Speak To Clinician	Treatment Centre	Visit	TOTAL
Apr-19	47	3		121	28	38	103	2	196	370	166	1074
May-19	36	2		108	26	63	133	4	217	412	189	1190
Jun-19	32	3		125	25	34	77	4	194	413	159	1066
Jul-19	31	2		108	30	28	82	4	134	372	132	923
Aug-19	17	5		106	32	30	105	7	182	417	176	1077
Sep-19	26	1		112	31	29	64	6	146	376	170	961
Oct-19	29	3		80	36	29	64	3	195	371	149	959
Nov-19	22	1		105	38	18	95	3	196	398	143	1019
Dec-19	32	6		153	32	24	129	8	286	569	203	1442
Jan-20	28	2		108	46	21	77	2	183	382	153	1002
Feb-20												
Mar-20												

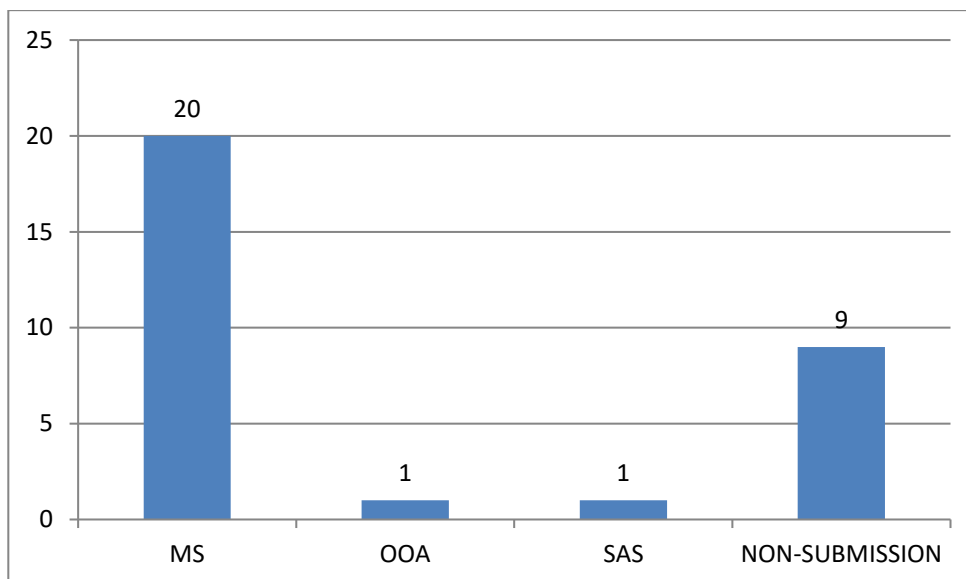
Since the start of the COVID19 pandemic, GtD Out Of Hours model has evolved to include a COVID19 Clinical Assessment Service (CCAS) which continues to operate. Patients with symptoms of COVID 19 who contact NHS111 who then require further clinical assessment are referred to CCAS.

COVID-19 Clinical Assessment Service - South Sefton	Mar-2020	Apr-2020	May-2020	Jun-2020	Total
COVID risk Clinical Assessment service 1 hour	64	80	32	18	194
COVID risk Clinical Assessment service 2 hours	88	207	73	24	392
COVID risk Clinical Assessment service 4 hours	62	86	69	21	238
COVID risk Clinical Assessment service 6 hours	84	199	49	22	354
COVID risk Clinical Assessment service 12 hours	47	53	17	9	126
COVID risk Clinical Assessment Service next working day	0	0	0	2	2
Total	345	625	240	96	1,306

DES Participation

For the financial year 2020-2021, practices had three additional Direct Enhanced Services to choose to sign up to. These include: Minor Surgery, out of Area patients and SAS / Violent patient scheme.

Sign up for practices (30 in total) for South Sefton CCG are as follows:



Primary Care Networks

Sign up to primary care networks is covered in item 20/50.

Learning Disability Health Checks

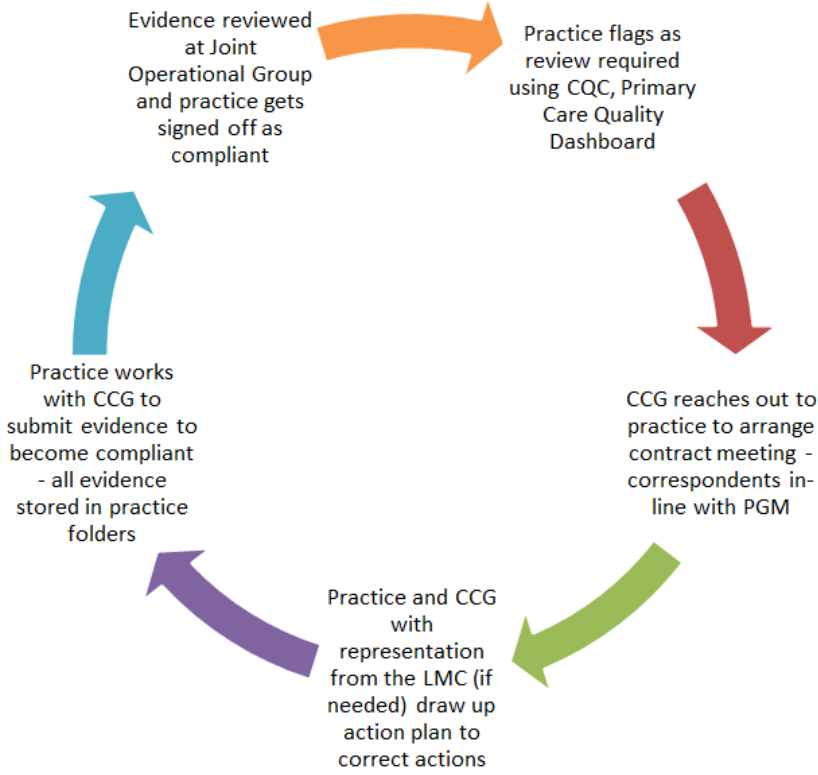
Currently the South Sefton Federation is offering their services to support practices in providing (through sub-contracting arrangements) learning disability health checks. So far 4 practices in South Sefton have accepted the offer of a federation delivery. All practices across Sefton have signed up to the Learning Disability Health Check enhanced services due to the requirement outlined in the LQC.

Where practices have opted to provide these services themselves, the CCG will be contacting them and asking for an action plan outlining the delivery for the service in 2020-2021 following on from a review of individual practices achievement for learning disability in 2019-2020.

Contractual Monitoring & Breaches

Currently no breaches have been issued to any practices in the South Sefton area. The CCG, prior to the COVID19 pandemic were undergoing regular annual contract monitoring for practices via a rolling annual system using information from CQC visits, the Primary Care Quality Dashboard and local intelligence. Since March, no face to face visits have been possible; however via remote ways of working have enabled the CCG to continuously support practices through the pandemic. As further guidance is received from NHS England regarding the way general practices operates moving forward, the CCG hopes to resume face to face contractual monitoring visits.

Following on from the MIAA Primary Care audit in February the CCG has developed a comprehensive monitoring template and monitoring cycle that we will use to support practices across South Sefton CCG.



Primary Care Commissioning Committee in Common July 2020

Agenda Item: 20/52	Author of the Paper:
Report date: July 2020	Angela Price Primary Care Programme Lead angela.price@southseftonccg.nhs.uk Tel: 01513178379
Title: GPFV / Primary Care Programme Report	
Summary/Key Issues: This report highlights the work programmes currently undertaken and the progress to date. The report now focuses on areas of transformation, delegation, and CCG projects.	
Recommendation The Primary Care Commissioning Committee is asked to note the areas of work and progress to date.	Note Approve <input checked="" type="checkbox"/> Ratify <input type="checkbox"/>

Links to Corporate Objectives	
x	To support the implementation of Sefton2gether and its positioning as a key delivery plan that will realise the vision and ambition of the refreshed Health and Wellbeing Strategy.
x	To ensure that the CCG continues to aspire to improve performance and quality across the mandated constitutional measures.
x	To ensure delivery of the CCG's QIPP plan and to align it with Sefton2gether and the work plan of established programmes including Primary Care Networks, the Provider Alliance, Acute Sustainability and the Integrated Commissioning Group.
x	To support primary care development ensuring robust and resilient general practice services and the development of Primary Care Networks (PCNs).
x	To work with partners to achieve the integration of primary and specialist care; physical and mental health services and health with social care as set out in the NHS long-term plan and as part of an accepted place-based operating model for Sefton.
x	To progress a potential CCG merger to have in place an effective clinical commissioning group function.

Process	Yes	No	N/A	Comments/Detail
Patient and Public Engagement			x	
Clinical Engagement	x			

Process	Yes	No	N/A	Comments/Detail
Equality Impact Assessment			x	
Legal Advice Sought			x	
Resource Implications Considered	x			
Locality Engagement	x			
Presented to other Committees		x		

Links to National Outcomes Framework	
x	Preventing people from dying prematurely
x	Enhancing quality of life for people with long-term conditions
x	Helping people to recover from episodes of ill health or following injury
x	Ensuring that people have a positive experience of care
x	Treating and caring for people in a safe environment and protecting them from avoidable harm

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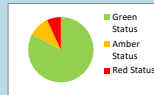
Process	Yes	No	N/A	Comments/Detail
Patient and Public			x	

Process	Yes	No	N/A	Comments/Detail
Engagement				
Clinical Engagement	x			
Equality Impact Assessment			x	
Legal Advice Sought			x	
Resource Implications Considered	x			
Locality Engagement	x			
Presented to other Committees		x		

Links to National Outcomes Framework	
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SF/SSCCG Primary Care Programme Report

Last Updated	09/07/2020 12:31
Total Projects	29
Green Status	24
Amber Status	3
Red Status	2
Closed	5



Project	Usual/Transformation/National	Programme	Programme	Start Date	Planned End Date	Status	NHSE Contact	Resource Name	Comments/Updates
Resilience Funding	Transformation	GP Five Year Forward View	GP Resilience Programme	01.04.2017	31.03.2021	G	Sharon Howard	Angela Price/Jane Elliott/ Clare Touhey / Richard Hampson	All practices and federations have received information from NHSE on the 19/20 process to apply for resilience funding. The deadline to submit bids to NHSE was 12pm 1st July 2019. A panel where all CCGs & LMCs were able to send a representative to agree those schemes that meet the national criteria took place on 15th July 2019. The C&M funding available is approx. £350K Successful practices received an MOU in August. Following this process there is still £260K funding still available. Practices have been notified and asked to get further bids in by the 4th October, the next panel to consider these submissions will take place on 21st October 2019 - Update - SS&SF CCG had two resilience submissions declined, and 1 approved which supported work to support a merger. 2020/2021 We are currently awaiting guidance from NHSE on resilience funding within this financial year.
Clerical and Admin Training (Active Signposting)	Transformation	GP Five Year Forward View	Releasing Time for Care	01.04.2017	31.03.2021	G	Sharon Howard	Jane Elliott/ Claire Touhey	A training post is operational via iMerseyside to support signposting. There was a presentation at both wider groups re document management. Practices have now confirmed whether they will participate in the training, which has been organised to take place in both CCGs from October onwards. Thornfields have provided and completed the training in 2019/20. 2020/2021 Signposting funds will support the digital champion programme until the end of the financial year. The CCG are awaiting receipt of the 20/21 signposting funds. A plan will be developed to ensure maximum benefit from the final year of funding
International Recruitment	Transformation	GP Five Year Forward View	GP Five Year Forward View	01.04.2017	31.03.2021	R	Sharon Howard	Craig Gillespie/Kati Scholtz	Meeting held on Tuesday 26th June 2018- 5 interested practices attended. Further weekend event being held for potential recruits currently being planned for early 2019. Potentially there are two recruits identified within C&M. Practice readiness forms will need to be completed by GP practices NHSE/ manage the IGPR programme with clinical support from HEE. It has been identified that some international GPs do not have the equivalent experience as English GPs and further training may be required. Westway MC have completed a Tier 2 Visa application to enable them to employ an international GP from outside of the EEA. The application and licence costs will be reimbursed by NHSE/ There is no further update
GPV - Additional 5000 Doctors	Transformation	GP Five Year Forward View	GP Five Year Forward View	01.04.17	31.03.2021	R	Sharon Howard	Angela Price	5000 is the number of doctors required nationally, this drilled down to C&M is 194 additional doctors. Information is being collected quarterly via the GPV monitoring returns on the number of hours provided by GPs in alternative settings. AS requested a break down of funding data for SS & SF with variances.
ETTF- Estates Bids	Transformation	GP Five Year Forward View	ETTF	01.04.2017	ongoing	A	David Scannell	Jan Leonard/Sam McCumiskey	3 bids for co-location originally submitted, this has reduced to two bids, one for Maghull and one for Formby. The bids are at PID stage, further discussion has taken place with Formby practices who have agreed this submission will no longer be progressed 2020/2021 update required
E-Consultations/Online Consulting	Transformation	GP Five Year Forward View	Online Consulting	01.04.2017	31.03.2020	G	Sharon Howard	Jane Elliot/Paul Shillcock	A roll out plan has been agreed across both CCGs. Discussions are in place regarding how this could work in the 7 day access service and at PCN level. There is an opportunity to establish an e-hub pilot with one PCN in both CCGs. In order to do this all practices within a PCN would need to be utilising e-consult. Currently there are 26 out of 49 practices across Sefton who are either using e-consult or are in a planned stage of roll out. We will be in a position to trial an e-hub in approximately 6 months time should a PCN be identified to trial. Primary care team and iMerseyside to meet to develop an e-consult strategy. Funding is available through NHSE to raise the profile of e-consult, other suggestions for the use of funding have been requested across C&M, covering the additional costs to support PCN/Federation level access has been suggested. Both CCGs will submit bids to fund licence costs to support working at scale through both federations. Bids submitted to NHSE in October have been successful. A meeting is being organised with the Hurley Group and both federations to discuss further and develop pathways. Funding for licences has been successful from NHSE. Process mapping for the 7 day access service for both SS & SF will take place. SS have embraced the service. Practices are now in the mobilisation phase and most have gone live, the deadline for going live is 31.3.20. 2020/2021 Every GP practice across both CCGs are utilising E-consult in accordance with the national deadline. This now forms part of a virtual offer to patients following the COVID 19 outbreak. Emergence of the pandemic disrupted South Sefton Federation plans to adopt E-consult which will now progress as originally intended. There is an option to explore whether E-consult can be used for monitoring of some long term conditions.

Project	Usual/Transformation/National	Programme	Programme	Start Date	Planned End Date	Status	NHSE Contact	Resource Name	Comments/Updates
7 Day Access	Transformation	GP Five Year Forward View	Primary Care HUB	01.08.2017	ongoing	G		Angela Price /Clinical Leads	Both services went live on Monday 1st October 2018, positive feedback is being received. Monthly reporting data is being received. iMerseyside are working with NHS Digital regarding ERS and ICE testing took place in March 2019. First contact physiotherapy has started in S&F, and is due to begin in South Sefton. Contract meetings with both providers taking place quarterly. Both services were commissioned via an APMS contract for a 2 year period (September 2020) with the option to extend for a year if needed. Utilisation rates have steadily improved, there have been changes made to both services to maintain activity levels and address DNA's. It is noted these are still relatively new services. 2020/2021 S&F - 7 day access services were suspended due to the outbreak of COVID 19. The service transformed to become the red sites for Southport and Formby practices. The 7 day access service resumed on 15th June incorporating several changes to adapt to the challenges of a 'new normal'. SS - 7 day access services continued with adaptations throughout COVID, which included support to the 'red site' in Litherland WIC. Physiotherapy is now available as part of the service. Both services have had a contract extension to March 2021, to come into line with the introduction of one single access offer in April 2021.
Clinical Pharmacists	Transformation	GP Five Year Forward View	Workforce	01.04.2017	ongoing	G	Sharon Howard (Cathy Leech for C&M – GM can act as SS/SF link)	Susanne Lynch/Clinical Leads	7 PCNs across the two CCGs have signed up to the CCG clinical pharmacist offer which includes the medicines management hub, facilitation of the prescribing QI work within QoF and PCN level pharmacist prescribing clinics. NHSE scheme pharmacists have been transferred to PCN funding (4.16WTE) with the CCG as the employer. Recruitment underway for a further 2.84WTE pharmacists via the PCN funding (CCG as the employer). Clinical pharmacist offer fully integrated with CCG core medicines management support. Dr Anna Hunter funded by CCG to offer a session each month as clinical supervisor for the team and to fulfil requirements of the NHSE scheme. The pharmacy hub have been supporting practices with medication reviews, discharge summaries, communications, out of stock queries. Recruitment to their hub is ongoing. 2020/2021 Due to COVID 19 there have been several changes to the way that the medicines management team have worked with GP practices to support the system. MMT have supported the primary care and community care support to care homes introduced in May, each care home has a named medicines lead. MMT are supporting the Structured Medication Review and Medicines Optimisation programme as part of the 2020/21 PCN DES
Apex/Insight	Transformation	GP Five Year Forward View	Workload		ongoing	G	Gemma Murray (Cathy Leech for C&M – GM can act as SS/SF link)	Angela Price	Apex/Insight has been demonstrated at both wider group meetings. Practices have been asked to express an interest in using the tool as part of an NHSE pilot. Awaiting an implementation date, roll out of the tool has been delayed. Louise Taylor is going to work with both CCGs to help standardise reporting from APEX/Insight, potentially this could be used to support an access scheme for Phase 6 LQC. A meeting took place in November 19 with Apex/Insight to progress implementation. 2020/2021 There has been a delay in the roll out of Apex/Insight due to COVID 19. Apex/Insight remains a priority in the LQC, and roll out of the programme to be resumed.
ETTF- IT	Transformation	GP Five Year Forward View	ETTF	01.04.2017	ongoing	A	David Scannell	Jane Elliot/Paul Shillcock	The amount of money for ETTF IT bids has reduced this year in order to increase ETTF for premises. There is an IM&T group looking at IT requirements, this includes representation from the primary care team, finance team, GP practice and iMerseyside 2020/2021 update required
Practice Nurse 10 Point Plan	Transformation	GP Five Year Forward View	Practice Nurse 10 point plan	23.07.2017	Ongoing	G	Pippa Rose	Colette Page	ETP has employed a p/t mentor to increase numbers of practices accepting student nurses and number of mentors within practices. Slow rise in number of practices willing to accommodate students seen. 9 PNs trained as clinical supervisors allowing them to offer clinical supervision to PNs & HCAs across both CCGs. A further course for another 8-10 PNs/ ANPs with Edge Hill University is planned for early 2020. Currently a 12 month preceptorship programme provided by NHSE workforce lead is underway for new to practice PNs with plans for a second cohort being made, 4 new PNs have accessed this. Promoting 'All our Health' learning platform - to embed prevention, health protection and promotion of wellbeing - MECC training delivered previously and training in Anti-Microbial Resistance ongoing. Health Education England (HEE) have opted to distribute the CPD flexible cash allocation now to Enhanced Training Practice including a funded places for Non -Medical Prescribing, 7 PNs completed the GPN Leadership for Quality programme. No applications from either CCGs were made for the 2 year Advanced Care Practitioner course. In discussion with NHSE lead to promote Nursing Associate trainees within practices, 1 practice has supported a HCA with her application and another showing interest. Recruitment and retention continues to be challenging for many practices nationally. Promoting GPN as a viable career pathway is ongoing. Flexible cash allocation for CPD from Health Education England now issued to the Enhanced Training Practice. PN Lead will continue to accept and process applications for training fund support and NMP places on behalf of the ETP until capacity secured by ETP. No further update at this time
Workforce Steering Group	Transformation	GP Five Year Forward View	Workforce	01/05/2018	ongoing	A	Alan Cummings/Sharon Howard	Angela Price	A C&M workforce steering group has been developed. This is an extension of the Task and Finish Group for International Recruitment. This group will feed into the LWAB (Local Workforce Action Board). 2020/2021 - Meetings have resumed, RH will be attending these moving forward.
2019/2020 GP Contract	GP Contract	Delegation		01.04.2019	31.03.2021	G	Alan Cummings/ Jan Hughes	Angela Price	Practice guide and timetable circulated to practices.

Project	Usual/Transformation/National	Programme	Programme	Start Date	Planned End Date	Status	NHSE Contact	Resource Name	Comments/Updates
Primary Care Networks	GP Contract	Delegation	DES	01.04.2019	31.03.2021	G	Sharon Howard / Gemma Murray	Angela Price	PCN registration documents for 7 PCNs submitted and approved in May 2019. South Sefton PCN are using the federation to deliver extended access. A local incentive scheme between the CCG and PCNs who are willing to cover populations where GP practices have not agreed to become part of a PCN has been developed. 1 practice in S&F is not part of a PCN, 4 practices in South Sefton have declined to be part of the PCN. NHSE have provided a PCN national data sharing agreement. There will be a variation to the GP contract in October to include a duty of co-operation to data share. Richard Hampson supporting with contracting documentation for networks. 'Network Contract Direct Enhanced Service Draft Outline Service Specifications' was published on 24th December, feedback on the plans is requested by January 15th 2020. The final version of the specifications will be published in early 2020 as part of the wider GP contract package for 2020/21. CT will share the results and feedback with input from LMC. 2020/2021 - Practices have confirmed their intention re participation in PCN DES. SS - All practices apart from 4 are part of a PCN. A merger between 2 of the South Sefton PCNs has taken place. South Sefton PCNs now consist of :- Seaforth and Litherland PCN, and Bootle, Crosby and Maghull Partnership. S&F - 8 practices are participating in the PCN DES, resulting in there being 2 PCNs, Formby PCN and Ainsdale and Birkdale PCN. Practice populations from North and Central localities will have PCN DES specifications delivered by Southport and Formby Federation. Local agreements will be in place to cover these arrangements
Minor Surgery		Delegation	DES	01.04.2019	31.03.2021	G	Alan Cummings	Angela Price	DES participation is now confirmed. Practices who do not provide this service can refer patients to Joint Health or DMC. A GPSI is in discussion to provide locum session with a small number of practice in Southport and Formby. Richard Hampson supporting with variations and uptake data 2020/2021 National guidance awaited on the commencement of minor surgery DES
Out of Area Registrations		Delegation	DES	01.04.2019	31.03.2021	G	Alan Cummings	Angela Price	A number of practices across Sefton have signed up to provide this DES, awaiting information from NHSE about how home visits were provided for this cohort of patients pre delegation. Richard Hampson supporting with variations and uptake data 2020/2021 - Currently collating practice expressions of interest.
Special Allocation Scheme		Delegation	DES	01.04.2019	31.03.2021	G	Alan Cummings	Angela Price	One practice in Sefton operates this scheme, and has signed up to deliver this DES again in 2019/20. Richard Hampson supporting with variations and uptake data. Also supporting with monthly reviews for the practice who is signed up to the DES 2020/2021 The same practice have agreed to continue to deliver this scheme in Sefton
Learning Disabilities	GP Contract	Delegation	DES	01.04.2019	31.03.2021	G	Alan Cummings	Angie Price	All practices in S&F have agreed to do the learning disabilities for their own patients. 4 practices in SS have opted for the federation to deliver scheme. The CCG have met with South Sefton Federation to review how the health checks are delivered, a revised scheme has been developed to include home visits. The revised process has been shared with GP practices for implementation in 2019/20. Further plans to expand the scheme in 2020 are currently being developed. Work is currently being done to clarify practice reporting arrangements, and to understand how the national figures are calculated. Michelle Lyons is supporting and liaising with S&F and Sefton practices to finalise their 2019/20 Learning Disability options and complete the QTR 1 and QTR 2 payments and data analysis. Michelle Lyons has interrogated CQRS variances and the figures have improved and been corrected. 2020/2021 South Sefton Federation have agreed to deliver this scheme on behalf of practices who do not wish to sign up to this DES. Practices have had a communication with this offer, CCG are currently collating responses.
GP Contract	Business As Usual	Delegation	NHS Digital Finance Data	01.04.2019	31.03.2021	G	N/A	Angela Price	Practice financial information based on NHS digital data on NHS funding earned in 2018/19 is currently being produced. Data has been shared with GP practices with the offer of a practice visit to discuss. Offers have been made to practices for review and understanding of income funding, and unclaimed finances, 1 practice in SS and 1 practice in SF have taken up the offer.
Local Quality Contract Phase 4	Business As Usual	Primary Care Operational	Business As Usual	01.04.2018	01.09.2019	G	N/A	Angela Price/ Craig Gillespie/ Kati Scholtz	Phase 4 LQC has been operational 01.04.18 - 31.03.19. Validation panel has met to agree outcomes for both CCGs. An evaluation of phase 4 is now available
Local Quality Contract Phase 5	Business As Usual	Primary Care Operational	Business As Usual	01.04.2019	01.09.2020	G	N/A	Angela Price/Craig Gillespie/Kati Scholtz	Phase 5 LQC agreed and circulated to GP practices - Practice sign up complete, quarter 1 invoices have been processed. Monitoring of phase 5 is ongoing - new tracking excel sheet has been implemented to support collation of the quarterly returns Dates have been arranged for data cleanse ready to go to practices, compliance required by 03/2020. 2020/2021 The COVID 19 pandemic has disrupted progress of the LQC in the last month of delivery. Quarter 4 invoices have been processed. Validation for this LQC is due to take place in July 2020
Local Quality Contract Phase 6	Business As Usual	Primary Care Operational	Business As Usual	01.04/2020	01.09.2021	G	N/A	Angela Price/Craig Gillespie/Kati Scholtz	Phase 6 LQC was developed and approved for implementation in April 2020. This has been delayed due to the COVID 19 pandemic. This LQC has recently been reviewed and revised accordingly to reflect current priorities, and new ways of working which have recently been introduced in general practice as a result of the pandemic. It is intended that the revised LQC will cover August 2020 - March 2021
Localities	Business As Usual	CCG	CCG	01.04.2019	ongoing	G	N/A	Jane Elliott/ Claire Touhey	Business as usual, PCNs have formed some discussions at localities. Locality managers - Claire Touhey for Southport and Formby, and Jane Elliott for South Sefton. There is an option to merge locality and PCN meetings to maximise efficiencies, this is currently being discussed locally. MOU have been drafted and sent to PCN in South Sefton. Maghull locality will remain the separate. S&F are holding bi-monthly locality meetings.

Project	Usual/Transformation/National	Programme	Programme	Start Date	Planned End Date	Status	NHSE Contact	Resource Name	Comments/Updates	
Influenza Coordination 2019/2020	National Mandate	CCG	CCG	01.04.2019	ongoing	G	Julie Byrne	Colette Page	Member of Flu task & Finish group with NHSE and sub group at Sefton Local authority. Begin developing coordination plans for 2019/20 season. Practices who had not ordered enough vaccines to reach targets set by NHSE were encouraged to increase numbers, some did. All practices advised to switch on their automatic emis extraction for flu data onto Immform. This allows easy identification of groups not accessing vaccination and surgery can be encouraged to be proactive inviting in. Support given to Bootle PCN with pilot for delivering vaccinations to housebound and residents of care homes. Created a focus group of PNs for 2-3 year old flu as massive variation across both CCGs. Lowest performing practice only vaccinating 2.2% (2 out of 88 eligible children) Highest practice reaching 100%. Some will only need to vaccinate a few children to reach 100%. Appears some may not be inviting children in. PN lead and member of BI now have access to Immform to view vaccination data regularly. Delay for Sanofi vaccines has occurred (under 65yr olds). Practices already suffering as result, some state pharmacies are ahead with vaccinating patients. Practices advised by PHE not to order for next year yet as advice from JCVI not yet published. Antiviral prescribing out of hours secured with GTD. In-hours yet to be determined. Practico data reviewed frp, Immform, practices struggling to meet national target. Federation are keen to offer vaccines to patients attending extended access appointments. 2020/2021 Prioritisation of housebound/vulnerable groups features in the revised Phase 6 LQC, to enable these cohorts to be vaccinated first when vaccinations from suppliers are received. There is a plan to train more vaccinators locally in order to provide resilience. Currently scoping a drive - through option to support social distancing, and a locally developed app for patients to book vaccination slots. Exploring the possibility of a wholesale license, and collaborative working with community pharmacy.	
Local Authority Health Protection Forum	National Mandate	CCG	CCG	01.04.19	ongoing	G	Charlotte Smith	Colette Page	Attend bi monthly Health Protection Forum (HPF) chaired by the LA. Flu subgroup reports into the HPF, which then feeds into NHSE.	
NHSE/ PHE S&I Programme Boards	National Mandate	CCG	CCG	01.04.2019	Ongoing	G	Hayley Mercer	Colette Page	Attend/ dial in for quarterly Screening & Immunisation Programme Boards. Review targets achieved by CCGs and address concerns. Contact practices not attaining national targets to gain assurance or assist/ provide support where necessary. Liaise with PHE S&I coordinator/ managers.	
PHE/ S&I practice visits	Business As Usual	CCG	CCG	01.06.19	ongoing	G	Julie Byrne	Colette Page	Visit practices with PHE S&I coordinators as part of the PHE 3 yearly site visit quality assurance programme, aim to meet members of the nursing team and practice manager as a minimum. Discussions had re all V&I programmes, detailed data for each practice reviewed and issues identified can be addressed. Support offered for how to increase targets where necessary. St Mark's and North Park visits complete with recommendations made.	
Practice Nurse/ HCA meetings	Business As Usual	CCG	CCG		ongoing	G	N/A	Colette Page	Arrange and coordinate PN/ HCA meetings and training events. Source speakers/ training providers. Work with ETP regarding training needed for PNs/ HCAs using HEE CPD flexible cash. Provide a 2nd clinical supervision course for 8-10 PNs to offer supervision across the CCG in line with GPEV PN 10 PP. Review priorities across CCG in LTCs/ disease areas and focus training for PNs/ HCAs around these. Promote attendance at meetings as a network and supportive environment.	
Protected Learning Time (PLT)	Business As Usual	CCG	CCG		ongoing	G	N/A	Colette Page	Arrange 4-6 PLT events per year. Source consultants and expert speakers from acute/ community/ voluntary providers. Arrange for pharmaceutical sponsors to support the events. Facilitate the afternoon with 150-200 delegates in attendance. The CCG with the LMC have reviewed the historic PLT scheme which was inequitable across practices, with agreement that the funds will be utilised to support admin and PM training - a training plan to be devised with input from PMs regarding topics to prioritise. 60 admin staff received training as chaperones, A further 4 sessions (60 places) are booked in September with plans underway to provide another 4 sessions early 2020.	
						Project RAG Key				
						G				

Project	Usual/Transformation/National	Programme	Programme	Start Date	Planned End Date	Status	NHSE Contact	Resource Name	Comments/Updates
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Key Issues Reporting to Primary Care Commissioning Committee in Common



South Sefton Clinical Commissioning Group
Southport and Formby Clinical Commissioning Group

Care Joint Operational Group, Thursday 9 th July 2020	Chair: Jan Leonard
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Key Issues to report back to the Primary Care Commissioning Committee in Common – South Sefton

2 Improvement Grant applications were included in the pack, the group had reviewed these and no one had any comments. These will be approved via F&R committee.

The process for reviewing QoF activity from 19/20 that has seen significant variance at practice level was discussed.

It was reported that the 10 LeDeR reviews are in the process of being submitted. The outcome of these and any learning will be shared back though the group.

The recent outcome of a Judicial Review (elsewhere in the country) relating to payments to practices for Safeguarding work was discussed. Further work to agree a local rate for remuneration is required.

It was noted that guidance from NHSE is expected imminently regarding the restarting of routine work in General Practice.

The risk register was reviewed, a number of COVID risks were reduced. A new risk was added regarding access to phlebotomy services and this is having an impact of General Practice.

A issue was highlighted regarding the weighting assigned to patients who reside in care homes. There was discussion around the process required to trigger the higher weighting and some concern that this may not be recorded correctly. Further work is being undertaken to understand the impact.

Key Issues to report back to the Primary Care Commissioning Committee in Common – Southport and Formby

It was noted that 1 Improvement Grant application, the group had been approved via F&R committee.

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Key Issues Reporting to Primary Care Commissioning Committee in Common



South Sefton Clinical Commissioning Group
Southport and Formby Clinical Commissioning Group

Primary Care Joint Operational Group, Thursday 11th June 2020

Chair:
Jan Leonard

Key Issues to report back to the Primary Care Commissioning Committee in Common – South Sefton

42 Kingsway submitted an application to close their list for 12 months. The committee agreed that they would support the practice to close for 6 months. An action plan will be put into place to help support the practice to open fully. It was noted that the practice have applied for some resilience funding.

Blundellsands Surgery has requested that their list closure is extended for a further 6 months. This was supported by the group.

It was proposed that the Primary Care Committee in Common should continue to meet via skype bi-monthly during the Covid 19 pandemic.

Key Issues to report back to the Primary Care Commissioning Committee in Common – Southport and Formby

It was proposed that the Primary Care Committee in Common should continue to meet via skype bi-monthly during the Covid 19 pandemic.