

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

**EXTRAORDINARY MEETING**

Date: **Wednesday 21<sup>st</sup> April 2021 10:00-11:00am**

Venue: **MS Teams due to Covid 19**

<b>Members</b>		
Dil Daly	S&F CCG Lay Member (Co-Chair)	DD
Fiona Taylor	S&F SS CCG Chief Officer	FT
Martin McDowell	S&F SS CCG Chief Finance Officer	MMc
Alan Sharples	SS CCG Lay Member	AS
Helen Nichols	S&F CCG Lay Member	HN
Jan Leonard	S&F CCG Director of Place (North)	JL
Angela Price	S&F SS CCG Programme Lead Primary Care	AP
Alan Cummings	NHSE Senior Commissioning Manager	AC
Tracey Forshaw	SS S&F Deputy Chief Nurse Quality Team	TF
<b>Stephen Cox</b>	<b>Graham's replacement????</b>	<b>SC</b>
<b>Non-Voting Attendees:</b>		
Dr Kati Scholtz	GP Clinical Representative	KS
Richard Hampson	Primary Care Contract Manager SSCCG	RH
Jennifer Piet	Primary Care Quality Team	JP
Debbie Fairclough	Interim Programme Lead – SS SF CCG Corporate Services	DF
Joe Chattin	LMC Representative	JC
Diane Blair	Healthwatch	DB
Rob Smith	SS SF CCG Finance	RS
<b>Minutes</b>		
Susan Spofforth	Senior Administrator	SS

No	Item	Lead	Report	Receive/Approve	Time
PCCiC21/32.	Apologies for absence received from HN, KS, FT and TF. DF deputising for FT.	Chair	V		
PCCiC21/33.	Declarations of interest regarding agenda items	All	V		
PCCiC21/34.	Minutes of the previous meeting : Date 18 <sup>th</sup> March 2021	Chair	R	A	
PCCiC21/35.	JOG Key issues March/April	AP	R	R	
PCCiC21/36.	LQC	AP	R	R	
PCCiC21/37.	Risk Register	JL	R	R	

No	Item	Lead	Report	Receive/ Approve	Time
PCCiC21/38.	Any Other Business  <i>Matters previously notified to the Chair no less than 48 hours prior to the meeting.</i>	Chair			
PCCiC21/39.	<b>Date and time of next Meeting: 20<sup>th</sup> May 2021 10.00am-11.00am</b>				

**NHS South Sefton CCG and NHS Southport & Formby CCG Primary Care Commissioning Committee in Common**  
**Approved minutes 21<sup>st</sup> April 2021 – Part 1 EXTRAORDINARY MEETING**

**Date: Wednesday 21<sup>st</sup> April 2021**

**Venue: MS Teams due to Covid-19 Pandemic**

<b>Members</b>		
Dil Daly	S&F CCG Lay Member (Co-Chair)	DD
Fiona Taylor	S&F SS CCG Chief Officer	FT
Martin McDowell	S&F SS CCG Chief Finance Officer	MMc
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Diane Blair	Healthwatch	DB
Rob Smith	SS SF CCG Finance	RS
<b>Minutes</b>		
Susan Spofforth	Senior Administrator	SS

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

Name	Membership	Nov 2020	Jan 2021	Mar 2021	Apr 2021	May 2021							
<b>Members:</b>													
Dil Daly	SF CCG Lay Member (Co Chair)	✓	✓	✓	✓								
Fiona Taylor	S&F SS CCG Chief Officer	✓	N	N	A								
Martin McDowell	S&F SS CCG Chief Finance Officer	✓	✓	✓	✓								
Alan Sharples	SS CCG Lay Member	✓	✓	✓	✓								
Helen Nichols	S&F CCG Lay Member	✓	✓	✓	A								
Jan Leonard	S&F CCG Director of Place (North)	✓	✓	✓	✓								
Angela Price	S&F SS CCG Programme Lead Primary Care	✓	✓	✓	✓								
Alan Cummings	NHSE Senior Commissioning Manager	✓	✓	N	✓								
Tracy Forshaw	SS&SFCCG Deputy Chief Nurse and Quality Lead	N	A	N	A								
<b>Non-Voting Attendees:</b>													
Dr Kati Scholtz	GP Clinical Representative	✓	✓	✓	A								
Richard Hampson	Primary Care Contracts Manager	✓	✓	✓	✓								
Joe Chattin	LMC Representative	✓	N	N	N								
Debbie Fairclough	SS SF CCG Corporate Services	N	N	N	D								
Diane Blair	Healthwatch	✓	N	A	✓								
Rob Smith	SS SF CCG Finance	N	✓	✓	N								
Jennifer Piet	Programme manager – Quality & Performance	N	N	N	✓								

No	Item	Action
PCCiC 21/31.	<p><b>Introductions and apologies</b></p> <p>DD opened the meeting; apologies were received from HN, KS, FT and TF. DF deputising for FT.</p>	
PCCiC 21/32.	<p><b>Declarations of interest</b></p> <p>There were no declarations of interest declared that had a direct impact on the meeting's proceedings.</p>	
PCCiC 21/33.	<p><b>Minutes of the previous meeting</b></p> <p>Date: Thursday 18<sup>th</sup> March 2021 agreed with no changes or issues raised.</p>	
PCCiC 21/34.	<p><b>Reports from the Joint Operational Group - JL</b></p> <p>March</p> <ul style="list-style-type: none"> <li>• JOG has received a list closure application which requires further clarification in order to consider</li> <li>• An application to extend a GP retainer was approved</li> <li>• Protected learning time plans will be discussed by a task and finish in light of the closer working with PCNs</li> </ul> <p>No questions were asked</p> <p>April</p> <ul style="list-style-type: none"> <li>• PC24 have taken over Out of Hours provision from 1<sup>st</sup> April. The feedback from Stakeholders has been positive.</li> <li>• LQC 20/21 is currently being refreshed</li> <li>• The process for improvement grants was discussed</li> <li>• Feedback was received on LEDER reporting and safeguarding issues.</li> </ul> <p>No questions were asked</p>	
PCCiC 21/35.	<p><b>LQC – AP</b></p> <p>AP provided attachment re local quality contract.</p> <ul style="list-style-type: none"> <li>• LQC Phase 6 began in July 2020, the introduction had been delayed due to the COVID pandemic</li> <li>• Phase 6 was suspended in January 2021 to enable primary care to focus on the COVID vaccination programme</li> <li>• The vaccination programme is still continuing with 2<sup>nd</sup> doses being more complex to organise/administer due to availability of two different vaccinations, the time period needed between doses and the volume of queries from patients</li> <li>• There has been a delay in information from NHSE regarding national changes to QOF and DES's. A Phase 7 scheme is in development, but is reliant on knowing what is in the national schemes to avoid duplication</li> <li>• In March 2021 the Leadership Team agreed a proposal to extend the suspension of Part 1 LQC schemes until the end of Quarter 1.</li> </ul>	

	<ul style="list-style-type: none"> <li>JL stated that they will bring a paper with suggested new LQC proposal going forward for discussion at the next meeting in May.</li> </ul> <p>Reason for paper today, is for this Committee's ratification of a decision made in March by the Leadership Team to suspend Phase 6 LQC Part 1 schemes until the end of Quarter 1 , with the introduction of a new LQC from Quarter 2.</p> <ul style="list-style-type: none"> <li>Group ratified to suspend LQC.</li> </ul>	
PCCiC 21/36.	<p><b>Primary Care Risk Register Part 1</b></p> <p>The risk register was reviewed and updated.</p> <p>C33 – Primary Care / Secondary interface, has improved more of an issue in South Sefton than S&amp;F CCG. A number of issues arose from the interface. GPs did feel was improving but not sufficiently to reduce the risk. The committee decided to keep this risk on as still problematic.</p> <p>JC03 – General Practice pressure, this is not mitigated. Significant work around 2<sup>nd</sup> doses of COVID vaccine. Access remains an issue, despite a significant increase in appointments (on line, via telephone) and via different service offerings, the expectation from the general public would appear to be regarding face to face appointments. Further work to be done to understand the issues.</p> <p>JC05 - PCSE – no update, issues continue.</p> <p>JC39 - Vaccination Programme is much more stable now, with better access to staffing and workforce as sites developed.</p> <p>Care home 2<sup>nd</sup> doses and housebound has been difficult due to patient movement. Both CCGs doing well in terms of vaccine uptake.</p> <p>JC41 – Estates in South Sefton. A meeting has taken place and actions have been identified. Further meetings planned going forward.</p> <p>AS said risks JC05 and JC41 the narrative gives reference to 2018 in both of them, would like to know when the earlier narrative will be dropped if no longer relevant.</p> <p>DF advised that this has previously been discussed but resolution delayed due to the pandemic.</p>	
PCCiC 21/37.	<p><b>Any Other Business</b></p> <p>None discussed</p> <p><b><i>Matters previously notified to the chair no less than 48 hours prior to the meeting.</i></b></p>	
<b>Meeting Concluded.</b>		
<b>Date of Next Meeting:</b> Thursday 20 <sup>th</sup> May 2021 10.00am-11.00am.		
<b>Venue:</b> MS Teams		

# Key Issues Reporting to Primary Care Commissioning Committee in Common



South Sefton Clinical Commissioning Group  
Southport and Formby Clinical Commissioning Group

South Sefton Primary Care Joint Operational Group, Thursday 11<sup>th</sup> March 2021  
Southport and Formby Clinical Commissioning Group

Chair:  
Jan Leonard

## Key Issues to report back to the Primary Care Commissioning Committee in Common

The group reviewed an application for a list closure from Drs Bird & Kassha practice in Crosby. The group felt the application lacked detail and asked for the practice to resubmit with an action plan in order for a decision to be made.

Estates issues within Crosby (and wider issues in South Sefton) were discussed and it was agreed that a meeting with key stakeholders would be convened to discuss further.

An application to merge the practice lists of Dr Sapres practices in Maghull was supported – the two contracts operate from a single site and will reduce administration in the future.

An application for an extension to the GP retainer scheme was approved for a South Sefton practice. This will support our workforce aspirations to increase the number of GPs working in Sefton.

The group discussed the Protected Learning Time agenda and agreed to mobilise a small task and finish group to review the agenda in light of closer working with PCNs during quarter two.

The group reviewed the funding now devolved to CCGs (from NHSE) to support resilience, and GP Forward View funding streams around retention and reception training.

The risk register was reviewed.



# Key Issues Report to Primary Care Commissioning Committee



South Sefton Clinical Commissioning Group  
Southport and Formby Clinical Commissioning Group

SF SS NHSE Joint Operational Group, Thursday 8<sup>th</sup> April 2021

Chair:  
Jan Leonard

## Information Points for Joint Commissioning Committees (for noting)

The group noted the new provider for Primary Medical Services out of hours had commenced on 1<sup>st</sup> April 21. PC24 took over from Go to Doc, communications from PC24 have been shared with all practices.

The group discussed the LQC for 21/22 and plans to review and refresh now that guidance had been issued regarding the Network Contract Directed Enhanced Service and the Quality and Outcomes Framework.

The process for Improved Grants was discussed noting the requirement for expressions of interest to be submitted to NHSE ahead of further CCG scrutiny.

The quality team fed back on LEDER reporting and safeguarding issues.



## PRIMARY CARE COMMISSIONING COMMITTEE in COMMON April 2021

<b>Agenda Item:</b>	<b>Author of the Paper:</b>	<b>Clinical Lead:</b>						
<b>Report date:</b> April 2021	Angela Price Primary Care Clinical Lead Southseftonccg.nhs.uk	Kati Scholtz						
<b>Title:</b> Local Quality Contract								
<p><b>Summary/Key Issues:</b></p> <p>CCG's are unable to continue to commission services via Local Enhanced Services within Primary Care. A Local Quality Contract (LQC) is commissioned from General Practice via an NHS Standard Contract.</p> <p>The Phase 6 LQC was approved in March 2020, however was not implemented due to COVID 19. A revised LQC was approved and started in July 2020, then suspended in January 2021 due to the letter issued on the 7<sup>th</sup> January by NHSE which advised that capacity should be released to enable focus on the COVID vaccination programme.</p>								
<p><b>Recommendation</b></p> <p>The Committee is asked to ratify the decision taken at Leadership Team to support the suspension of phase 6 LQC until the end of quarter 1.</p>		<table style="border-collapse: collapse;"> <tr> <td style="padding: 2px;">Receive</td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> </tr> <tr> <td style="padding: 2px;">Approve</td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> </tr> <tr> <td style="padding: 2px;">Ratify</td> <td style="border: 1px solid black; width: 20px; height: 15px; text-align: center;">x</td> </tr> </table>	Receive		Approve		Ratify	x
Receive								
Approve								
Ratify	x							

### Links to Corporate Objectives 2020/21

	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.
	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).
	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.
	To progress a potential CCG merger to have in place an effective clinical commissioning group function.

Process	Yes	No	N/A	Comments/Detail ( <i>x those that apply</i> )
Patient and Public Engagement		<b>X</b>		
Clinical Engagement		<b>Y</b>		
Equality Impact Assessment		<b>N</b>		
Legal Advice Sought		<b>N</b>		
Quality Impact Assessment		<b>N</b>		
Resource Implications Considered		<b>Y</b>		
Locality Engagement		<b>N</b>		
Presented to other Committees	<b>x</b>			CCG leadership team

## Report to the Primary Care Committee April 2021

### 1. Introduction and Background

The Phase 6 LQC was approved in March 2020, however was not implemented due to COVID 19. A revised LQC was approved and started in July 2020, then suspended due to the letter issued on the 7<sup>th</sup> January by NHSE which advised that capacity should be released to enable focus on the COVID vaccination programme.

### 2. Key Issues

Following the letter of the 7<sup>th</sup> January, part 1 LQC phase 6 was suspended until the end of March 2021, activity schemes in part 2 and part 3 have still continued.

The suspension was to allow primary care to be released to enable focus on the COVID vaccination programme. Primary care are starting to operate business as usual, alongside the vaccination programme which is still progressing for cohorts 1 – 9. The programme has become more complex due to the 2<sup>nd</sup> doses being administered. The involvement of primary care in the programme will continue until 31<sup>st</sup> August 2021.

The LQC is again being reviewed with the aim that phase 7 will broadly mirror the schemes in phase 6, although there is a need to alter certain areas to reflect services affected by the pandemic, and any national changes to PCN schemes.

A proposal to extend the suspension of part 1 LQC schemes until the end of quarter 1 was agreed by Leadership Team in March 2021.

It is intended that a phase 7 LQC will be finalised in the next few weeks, ready for the approval process. This LQC will cover a 9 month period, the 1<sup>st</sup> July 2021 until March 2022.

### 3. Recommendation

The Committee is asked to ratify the decision taken at Leadership Team to support the suspension of phase 6 LQC until the end of quarter 1.

**Angela Price**  
**Primary Care Programme Lead**  
**April 2021**

PTI/PTII		COVID-19										Update: Q4 2020/21: 31 March 2021															
Details of Risk												Initial Score		Residual Risk Q4 2020-21			Lead Review Date		Comm Review Date		Mitigating Actions				Review		
Committee	Area/Team Ref	SF	SS	date	Area/Team/Function	Description of Risk (Description of the actual risk i.e. There is a risk that X risk caused by Y event resulting in Z effect)	Owner	Likelihood	Consequence	Score	Key controls and assurances in place (and actions completed) (What controls systems are already in place to prevent the risk from being realised...)			Likelihood	Consequence	Score	Lead Review Date	Comm Review Date	Proposed Action	Action Owner/Lead	Q4 19/20	Q1 20/21	Q2 20/21	Q3 20/21	Trend to prior Q	Overall Trend	Theme
											4	4	16														
COVID	Primary Care Commissioning Committee in Common	C33	SF	SS	Q1 15/4/20 (C-19)	Primary Care	Jan Leonard	5	5	25	NHSE guidance to primary care is to continue referring as normal, however no similar instruction has been issued to trusts who were advised to stop elective activity at the beginning of the COVID outbreak. North Mersey CCGs are in discussion with LUFT and other Trusts to ensure all services are open again ASAP. Advice given to primary care regarding use of Advice and Guidance, adding as much detail as possible to referral letter to aid secondary care triage, use of 2w/w urgent pathways, and safety netting procures within general practice	4	4	16	Mar-21	Mar-21	Further discussions have resulted in a consensus for secondary care/primary care to work together to enable a seamless interface. Meetings continue between secondary and primary care to establish safe working mechanisms to return to BAU. Consensus over the clinical review of referrals prior to being sent back to practices. Risk increased. Situation has improved, however is variable across specialities. Interface group addressing issues. Less of an issue in SF CCG for referrals to S&O. Interface meetings being held. Impact of 2nd wave of COVID to be understood. Primary Care Risk has been reduced but will leave on CRR and update as and when appropriate	Jan Leonard	N/A	9	16	16	---	↓	Primary Care Services		
PTI	Primary Care Commissioning Committee in Common	JC03	SF	SS	Mar 2017; Q4 2016/17	Commissioning	Jan Leonard	4	4	16	Strategic priority of the CCG. Scrutiny at Joint Commissioning Committee. GPSPFV transformation plans. LOC funding to support transformation. PCN development.	4	4	16	Mar-21	Mar-21	International recruitment application due at end Nov 17. Primary care workshop planned for mid Nov to review Shaping Sefton plans. Views from localities to be gathered to build plan. 2 year LOC to be considered. LOC planning meetings scheduled. Further clinical pharmacist application to be submitted. specification for Extended Access (7 days services) near finalised, to be presented to GB Feb 18 ahead of procurement. Despite GPFV roll out no reduction in pressure in practices. Clinical pharmacist application submitted. LOC being finalised. LOC has been approved via approvals panel. Clinical Pharmacy pilot bid successful. Plan to mobilise clinical pharmacists progressing. Bids for Primary Care Network funding being progressed. Pilot is being trialled in North locality for 3 months then will be rolled out to all localities. 7 day access live, monitoring appointment usage and impact on core hours. 7 of the 8 Localities have been successful in obtaining funds to develop Primary Care Networks. 7 day access Hub is now live and offering appointment between 5pm and 8pm weekday evenings and 10am to 1pm weekends. staff include GP, ANP, PN and physio from November 2018. Working through implications of new GP contract and changes regarding PCN formation. LT will review applications on behalf PCCC. 7 PCNs have been authorised by the CCG and plans in place to cover populations of non PCN practice populations. PCNs asked to confirm plans to mobilise extended hours. CCG support offer made to PCNs for medicines management and social prescribing. Resilience funding secured for several practice with further application to be submitted by Sept 2019. PCNs have secured funding to enable a first five scheme and a last five scheme to be implemented which will support new GPs in their first five years and also GPs who are approaching retirement. 2nd C19 doses still need to be carried out so risk is still active	Jan Leonard	16	16	16	16	---	---	Primary Care Services		
PTI	Primary Care Commissioning Committee in Common	JC06	SF	SS	Apr 2017; Q1 2017/18	Commissioning	Jan Leonard	5	4	20	PCSE working groups, regular updates to practices. Discussed at Joint Committee and LMC liaison meetings.	3	4	12	Mar-21	Mar-21	Attendance at meeting by CCG reps. JL has written to NHSE regarding on-going situation and lack of progress, awaiting formal response. Issues raised at Regional Meeting, similar issues in other areas, await formal response. Issues continue with concerns over performers lists - meeting with NHSE Jan 18 to discuss actions. Issues continue to be raised and forwarded to NHSE / PCSE. JL to escalate to FT. No further update although PCSE staff now based within Regatta Place with NHSE which may help with resolving issues. Survey undertaken, poor response rate identified issues with pensions rather than operational issues. Issues continue, committee felt risk of likelihood has increased. Further incidents have been identified around children not being invited for screening. A subgroup has been set up to reduce further incidents. Practice views to be sought re current situation with PCSE in practice. It was agreed at PCCC that practices should be contacted on a quarterly basis to establish if problems are resolving with PCSE or if they continue. The first survey will take place in October 2019. The survey demonstrated that whilst some practices hadn't had an incident in recent months, those that did continued to struggle to get any resolution. Issue will be raised again with NHSE. The PCCC reviewed the survey and agreed that the risk can be reduced. Escalation process with T Knight at NHSE agreed. There is no escalation process in place at PCSE. Confirmation received that individual issues to be shared with NHSE on an individual basis. A further survey will be undertaken within general practice to establish current situation.	Jan Leonard	12	12	12	12	---	↓	Corporate Systems and Processes		
PTI	Primary Care Commissioning Committee in Common	JC39 new	SF	SS	21/01/2021	Primary Care	Jan Leonard	4	4	16	Mass Vaccine strategic group established to oversee the Mass Vacc programme across all PCN areas. Support from CCG Medicines Management Lead. Primary Care Lead, Mass Vacc lead and wider CCG team. CCG representation on the CCG on the CSM Mass Vaccine group. Systems in place to define key roles within sites, roles reviewed and risks to delivery escalated appropriately. Process in place to attract and increase workforce to sustain delivery longer term. Mutual aid also being explored. Plans for second doses under way. NHSE inviting sign up for cohort 10-12 delivery.	3	4	12	Mar-21	Mar-21	PCN groupings have worked through cohorts 1-9 for first doses. Targeted work has been undertaken for hard to reach groups. Expansion of offer as new groups brought into current cohorts. Guidance updated and adopted due to changes in vaccine SOPs. PCN groupings opted not to vaccinate cohorts 10+, CCG working with NHSE to look to bring in more provision for these cohorts.	Jan Leonard	N/A	N/A	N/A	16	---	↓	Primary Care Services		
PTI	Primary Care Commissioning Committee in Common	JC41 new	SF	SS	11/03/2021	Primary Care	Jan Leonard	4	3	12	Initial review by estate team to identify gaps.	4	3	12	Mar-21	Mar-21	Initial review by estate team to identify gaps.	Jan Leonard									Primary Care Services