

Minutes of the Meeting (Part A) of the **Somerset Primary Care Commissioning Committee** held on **Thursday, 4 March 2021** Via **Microsoft Teams**

Present:	David Heath	Chair, Non-Executive Director, Patient and Public Engagement, Somerset CCG
	Basil Fozard	Non-Executive Director, Secondary Care Specialist Doctor, Somerset CCG
	Alison Henly	Director of Finance, Performance and Contracting, Somerset CCG
	Michael Bainbridge	Associate Director of Primary Care and Community Care, Somerset CCG
	Dr Karen Sylvester	Chairman, Somerset LMC
	Val Janson	Deputy Director of Quality and Nursing, Somerset CCG
	Louise Woolway	Deputy Director of Public Health, Somerset County Council
	Tanya Whittle	Deputy Director of Contracting, Somerset CCG
	Dr Chris Campbell	External GP Member
	Judith Goodchild	Chair of Healthwatch Somerset, Healthwatch
	Sandra Wilson	PPG Chairs Network Representative
In Attendance	Ben Casson	Primary Care Commissioning & Clinical Strategy Accountant, Somerset CCG
	Neil Hales	Director of Commissioning, Somerset CCG
	Christine Young	Primary Care Contracts Officer, Somerset CCG
Secretariat	Sarah Matthews-Attree	Primary Care Contracts Officer, Somerset CCG
Apologies:	Sandra Corry	Director of Quality and Nursing, Somerset CCG
	Dr Emma Keane	Associate Clinical Director of Primary Care, Somerset CCG
	Jacqui Damant	Associate Director of Finance, Somerset CCG

PCCC 001/2021 WELCOME AND INTRODUCTIONS

David Heath welcomed everyone to the Somerset Primary Care Commissioning Committee meeting.

The main function of the Somerset Primary Care Commissioning Committee is to provide a forum for commissioning of primary medical services.

David Heath highlighted that meetings and decisions of the Somerset Primary Care Commissioning Committee are held in public to ensure accountability and transparency. Due to the current guidelines on public meetings, this meeting was taking place over Microsoft Teams with members of the public welcome. It was confirmed there were no questions received in advance of the meeting.

David Heath welcomed observers to the meeting.

PCCC 002/2021 APOLOGIES FOR ABSENCE

Apologies for absence were received as shown above.

PCCC 003/2021 REGISTER OF MEMBERS' INTERESTS

The Somerset Primary Care Commissioning Committee was asked to review the register of interests, check for accuracy and declare any changes. Basil Fozard noted his interests had been updated and this will be reflected for the next meeting.

Action: Update the register to reflect the above change.

PCCC 004/2021 DECLARATIONS OF INTEREST RELATING TO ITEMS ON THE AGENDA

No Interests were declared.

PCCC 005/2021 MINUTES OF THE PART A SOMERSET PRIMARY CARE COMMISSIONING COMMITTEE MEETING HELD ON 7 DECEMBER 2020

The Minutes of the Part A meeting held on 7 December 2020 were reviewed by the Somerset Primary Care Commissioning Committee. The Somerset Primary Care Commissioning Committee approved the minutes as an accurate record of the meeting and these were subsequently signed by the Chair.

PCCC 006/2021 MATTERS ARISING

The Somerset Primary Care Commissioning Committee reviewed the action log and the following updates were given:

Action 062/2020 – Action has been completed with various actions arising from this meeting; all of which have been progressed.

Action 013/2020 – Alison Henly identified that the area of concern was the ability for physical prescriptions to be altered. There has been proactive communications to pharmacists to reinforce appropriate measures and

policies in place. It was confirmed that this is a reducing risk as the use of electronic prescriptions is increasing. It was agreed that the action will be marked as complete, however the CCG will review it again in the counter fraud audit next year.

Action 014/2020 – Michael Bainbridge suggested this item be presented at a future Committee meeting. An update will be presented on the recent commitments and anticipated specification.

Action: Add PCN Update to the forward planner for the September Committee meeting.

Access to GP services

Michael Bainbridge provided an update on access to GP services, following on from the previous committee discussions. Previously it was noted that on aggregate activity levels had returned, or increased, to pre-pandemic levels. Work has continued to progress with regional and national colleagues to gain more detailed information on an individual practice level. Although, the CCG are still unable to access individual practice data; data from 7 practices appeared to show activity remained low. Having reviewed these practices, it was confirmed that the reduced levels were due to a technical issue with the categorisation not being recorded in the EMIS appointments book; resulting in the inability to extract the data. The CCG were satisfied that the activity in these practices was as expected.

PCCC 007/2021 COVID-19 VERBAL UPDATE

Michael Bainbridge shared that the CCGs priority remains to provide quality primary care services and have therefore been guided by national policy. The CCG has followed the national priorities, which have been focusing on restoring activity to pre-Covid-19 levels as well as resolving any backlogs. These also involved providing additional support for vulnerable patients, who have been identified as required to shield, and additional investment in addressing health inequalities; with a focus on providing health checks for patients with Learning Disabilities. Michael noted the priority to promote self-care and self-management. It was acknowledged that this priority has been accelerated by the pandemic as patients have been empowered to take control over the management of their health; an example being the pulse oximetry process in which patients take their own readings and contacts a clinician as required.

Michael noted the establishment of the Covid Recovery Service, which has been set up to manage patients who experience longer term effects of Covid, with practices being asked to identify and refer patients.

During the pandemic there has also been a significant impact on staff sickness, with a number of localised outbreaks in practices. The CCG created an outbreak process and it has now been over a month with no further primary care outbreaks. The impact for practices has been substantial and for practices that require additional assistance during the pandemic, the CCG have created an escalation reporting process which can be used.

Tanya Whittle provided an update on the mass vaccination progress. In Somerset there is a range of vaccination sites including; county vaccination sites at Taunton Racecourse and Shepton Mallet Bath and West Showground, hospital vaccination hubs at Musgrove Park and Yeovil, community pharmacy sites currently in Yeovil, Taunton and Bruton, and a local vaccination service in each of the 13 PCNs. It was established that the county and community pharmacies vaccination sites are booked through the national booking service with local arrangements for PCNs and hospital sites. The difference in the two approved vaccines was noted, identifying that PCNs are currently delivering both. The Pfizer vaccine is fragile and needs to be used within 3-4 days, which can make it difficult for planning when vaccine notice is often quite short.

Tanya shared that figures published the previous Thursday showed that over 200,000 vaccinations in Somerset have been delivered, with the majority of these through PCNs. There has been a great uptake in Somerset to date but there continues to be a focus to ensure those eligible are receiving the vaccination, particularly considering hard to reach groups. The team are following the guidance for vaccination of the relevant cohorts, with cohorts 1-4 being completed by 15 February 2021, cohorts 5-6 to be completed by 15 March 2021 and all over 50s by 15 April 2021. It was recognised that second doses are now being delivered alongside continuation of first dose delivery.

Moving forward, consideration needs to be given to creating a sustainable solution for PCNs and securing the additional workforce required for this programme. The CCG will be utilising this opportunity to try developing the workforce in Somerset and ensuring an ongoing Covid-19 response. Tanya expressed her thanks to all involved in the vaccination programme noting the momentous collaborative working undertaken.

The Committee appreciated the enormity of the ask of primary care and praised the response, echoing thanks to all involved. The Committee discussed the need to ensure that the volunteer workforce gained during the pandemic remains utilised. It was also noted that for any patients who may have been missed, the PCNs are continuously reviewing who has not yet been vaccinated and are liaising as appropriate. It was shared that some PCNs have been receiving contact from patients querying why they had not yet received an appointment; however, Tanya explained that PCNs often receive their allocations a week in advance so there is a short notice period for booking appointments. Louise Woolway emphasised the need to remind those who have received the vaccine that they need to continue to obey social guidelines as it takes some time to build resilience following administration. She shared that public health are currently looking into inequalities and vaccine hesitancy and are looking at how to increase uptake.

The Somerset Primary Care Commissioning Committee thanked Michael and Tanya and noted the update provided.

PCCC 008/2021 PRIMARY CARE FINANCE

Ben Casson presented the month 9, Quarter 3 primary care finance report, highlighting that there had been very little change since the last report. The

primary care delegated budgets allocation had increased in 2020/21 to £82.289 million.

Ben provided an overview of the delegated primary care budgets, explaining that due to Covid-19, alternative finance arrangements were put in place. Months 1-6 had a baseline budget of £39.363 million and a further £1.067million reclaimed via the retrospective top-up process. Ben confirmed that the month 6 funding, that had been outstanding at the time of the December Committee meeting, had now been received. For months 7-12, retrospective claiming ceased and the CCG received a fixed finance envelope. This included an additional resource to reflect the ongoing costs relating to Covid-19; which is non-recurrent. The Primary Care Medical delegated budget is expect to balance at end of year.

Ben discussed the non-delegated and LES funding, mentioning that the GP forward view funding for this financial year totals £1.1million. Ben shared that the Primary Care Improvement scheme is currently £170k underspent and that there is a further underspend of £200,000 due to the transfer of IUCD cost to Public Health. The underspend is being looked into to understand reasoning further, however, it is anticipated that the CCG will breakeven at the end of year.

The impacts of Covid-19 and the non-recurrent spend was discussed, with Alison Henly noting that the CCG have yet to receive their allocation for the next year, though work has been undertaken to ensure all funding commitments will be met. There was a detailed discussion about the potential decrease in spend for the LES services, with Michael Bainbridge providing reassurance that the underspend was not related to a reduction in delivery, but likely due to progression in how care is delivered. Michael detailed the anticoagulation service, noting costs in this service are reducing as clinicians are able to provide new, more cost effective and beneficial treatment, with Dr Karen Sylvester confirming that GPs are still undertaking the activity, just in different ways due to Covid-19.

The Somerset Primary Care Commissioning Committee noted the report.

PCCC 009/2021 PRIMARY CARE UPDATE REPORT

Michael Bainbridge provided a brief overview of the report, further highlighting specific items. Michael firstly noted item 12 within the report which is a complicated programme involving multiple organisations, though is essentially aiming to maximise clinical workforce by providing relevant support and building on existing services such as the Somerset GP Locum Agency. It was shared that £120,000 funding had been received from NHS England and Improvement to develop this area and that a programme board was currently being established. Discussion was held around the terms and conditions on which the locums would be employed and how to integrate them into the teams to ensure added value into primary care, with Michael confirming that there will be some standardisation to ensure these issues are resolved.

Michael Bainbridge highlighted item 13 and item 15, highlighting that the CCG noticed a service provision gap in Taunton for the ACES service and consequently a contract has been awarded to Crown Eyecare. The

significant levels of flu vaccination uptake was noted in Item 15, and Michael praised the positive collaborative system approach to delivery.

Michael noted item 16 and explained that the Special Allocation Scheme, previously the Violent Patient Scheme, is a service which provides primary medical services to patients who have either been threatening or violent in a primary care setting. Michael identified that the contract is technically held by NHS England, though the CCG took on responsibility through delegation. The contract is due to end June 2021, but does contain a clause to extend for a further 2 years. The Primary Care Operational Group agreed to this extension and a paper was presented to the Finance and Performance Committee seeking approval of the recommendation to extend. The Finance and Performance committee also approved the recommendation. The Somerset Primary Care Commissioning Committee was asked to endorse this decision and unanimous endorsement was given.

The Committee were also asked to endorse the decision made at the Finance and Performance Committee in relation to the Clinical Waste contract. The CCG had been operating the service under a Service Level Agreement and had looked to issue a contract; however, an ongoing dispute stopped any progress. The CCG have now reached an agreeable position with the provider and as such have entered into a contract, ending in March 2022. The Somerset Primary Care Commissioning Committee endorsed the item.

Finally, Michael shared that Ryalls Park Medical Centre will be integrating into Symphony Healthcare Services Ltd from 1 April 2021, subject to the relevant assurance, engagement and conditions to integration being met.

The Somerset Primary Care Commissioning Committee noted the report.

PCCC 010/2021 IMPROVING QUALITY IN PRIMARY CARE

Val Janson identified that at the previous Committee meeting in December she had advised that the Quality Team were looking to develop a dashboard for reporting. It was shared that work has progressed towards developing the dashboard and it should hopefully be ready for the June Committee meeting. Val reflected that the current report presented was quite a brief overview considering the significant volume of work the Quality Team are undertaking. Basil Fozard noted the difference in secondary and primary care quality information and that it was reassuring to hear the dashboard is being developed, which will hopefully be able to provide more insight into the data for the Committee to analyse.

Val Janson confirmed that there is still an opportunity to input on information that the Committee would like to see within the dashboard and invited members to share ideas with her for consideration.

Action: Committee members to share any ideas for information for inclusion in the Quality Dashboard with Val Janson.

The Somerset Primary Care Commissioning Committee noted the report.

PCCC 011/2021 ANY OTHER BUSINESS

There was no other business.

PCCC 012/2021 DATE OF NEXT MEETING

David Heath thanked members of the Somerset Primary Care Commissioning Committee for their attendance and confirmed the date of the next Primary Care Commissioning Committee was Wednesday 9 June 2021.

PCCC 013/2021 DATES OF FUTURE PRIMARY CARE COMMISSIONING COMMITTEE MEETINGS

Future meetings of the Primary Care Commissioning Committee are as follows:

- 29 September 2021
- 8 December 2021

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CHAIRMAN

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DATE