

Title of Meeting:		Primary Care Commissioning Committee			Agenda Item: 7.0		
Date of Meeting:		23 July 2020			0	-' (T '-1)	
Paper Title:		Primary Care Update			Session (Tick) Public X		
					Private		
					Development Session		
Responsible PCCC Member Lead Wendy Balmain			ead	Report Autho David Iley	r and .	Job Title	
Director of Strategy and Inf		and Integrat	ion	Primary Care Assistant Contracts Manager			
Purpose							
(this paper if for)	Decision D		Discussion	Assurance		Information	
						X	
Has the report (or variation of it) been presented to another Committee / Meeting?							
If yes, state the Committee / Meeting: No							
Executive Summary							
O construction NIIIO Facility I Night of standard in 1882 of the 1							
Summary from NHS England North of standard items (including contracts, planning, finance							
and transformation) that fall under the delegated commissioning agenda.							
Recommendations							
The Primary Care Commissioning Committee is being asking to:							
Note the contents of the paper							
Note the contents of the paper.							
Monitoring							
N/A							
Any statutory / regulatory / legal							
/ NHS Const	itution	implication	is				
Management of Conflicts of				No conflicts of interest have been identified prior to the			
Interest Communication / Public &			N/A	meeting.			
Patient Engagement			IN/A				
Financial / resource implications		ns N/A					
		2.16					
Outcome of Impact Assessments completed			N/A				

Name – David Iley Title – Primary Care Assistant Contracts Manager



North Yorkshire CCG Delegated Commissioning Primary Care Update July 2020

Prepared by David Iley Primary Care Assistant Contracts Manager NHS England and NHS Improvement – (NE and Yorkshire) 14 July 2020

1.0 Quality and Outcomes Framework (QOF) 19/20

QOF this year was automatically signed off due to COVID-19. On looking at the achievement figures, there were some discrepancies between QOF achievement 18/19 and 19/20. NHS England and NHS Improvement received the breakdown of QOF data for Humber, Coast and Vale (HCV) for 19/20 achievement in comparison to 18/19 achievement from NHS Digital as well as a letter from CQRS which contained instructions for CCGs in relation to protecting practice income in line with national guidance published during COVID-19.

This letter suggested that:

In making a fair adjustment, Commissioners should consider practice performance from September 2019 onwards and discuss with their individual practices if necessary. Where the points difference between 2018/19 and 2019/20 is minimal i.e. a fall of less than 30 points, we would expect Commissioners to offer income protection to 2018/19 payment values

In North Yorkshire this related to 22 practices and, in line with the letter, the CCG made payments that protected practice income.

There were a further 4 practices in North Yorkshire whose points difference was more than 30. In this instance, the letter suggested that:

Where there is a significant fall in achievement at year end which is also apparent in reported achievement through the year then this is unlikely to be solely due to Covid-19 activities. Commissioners will need to consider what would be a reasonable adjustment in these circumstances, if any.

The CCG was provided with further information around QOF achievement for these practices during 19/20 which enabled it to make an informed decision and a payment was made to the practices that protected practice income.

All CCGs within HCV took the same decisions.

2.0 Covid-19

2.1 Primary Care and General Practice updates and guidance

Links below to regular updates provided to primary care and general practice regarding the emerging COVID-19 situation

https://www.england.nhs.uk/coronavirus/primary-care/ https://www.england.nhs.uk/coronavirus/primary-care/general-practice/

2.2 Minimising the Spread of Infection

A letter was issued on 9th June 2020 setting out specific actions that NHS organisations should take to minimise the spread of infections. This included actions for primary care contractors to undertake whilst maintaining patient access to services.

https://www.england.nhs.uk/coronavirus/publication/minimising-nosocomial-infections-in-the-nhs/

2.3 GP Standard Operating Procedure (SOP)

Version 3 of the GP SOP for general practice in the context of coronavirus has been published and is available in the following weblink

https://www.england.nhs.uk/coronavirus/publication/managing-coronavirus-covid-19-in-general-practice-sop/

2.4 Clinical Negligence Indemnity arrangements during COVID-19

NHS Resolution has published guidance in relation to its indemnity schemes and claims management during the COVID-19 pandemic. General practice specific guidance aims to clarify how the management of claims interactions between general practice indemnity beneficiaries and NHS Resolution will proceed during the pandemic. It also provides answers the most common questions regarding Clinical Negligence Scheme for General Practice (CNSGP) indemnity cover under COVID-19 working arrangements

https://resolution.nhs.uk/scheme-documents/covid-19-guidance-for-general-practice/

2.5 NHS Support for Patients who are Shielding

A letter was published confirming actions for the NHS after the Government published updated guidance on shielding. The letter is included as appendix 1

2.6 Rick Assessment for at-risk staff groups

In a letter from NHS England and NHS Improvement on 24th June regarding the completion of staff risk assessments (weblink below) a request was made to NHS employing organisations to ensure that risk assessments were completed within 4 weeks. CCGs have been asked to submit a sit rep containing the following information for every GP Practice, the initial deadline for the return is 17th July.

- Have you offered a risk assessment to all staff?
- What % of all your staff have you risk assessed?
- What % of risk assessments have been completed for staff who are known to be 'at-risk', with mitigating steps agreed where necessary?
- What % of risk assessments have been completed for staff who are known to be from a BAME background, with mitigating steps agreed where necessary?

https://www.england.nhs.uk/coronavirus/wp-content/uploads/sites/52/2020/06/C0625-risk-assessments-for-at-risk-staff-groups-letter.pdf

2.7 Second Phase of the General Practice Response to Covid-19

On 9th July NHS England and NHS Improvement published a letter on the second phase of the general practice confirming contractual arrangements from July and income protection. A copy of the letter is included as appendix 2. The key elements highlighted in the primary care bulletin that accompanied it were;

- General Practice is being asked to continue its vital role in supporting high-risk patients with ongoing care needs, but also to resume as soon as possible services which may have been paused, managing pre-existing conditions and urgent demand.
- Practices will need to re-prioritise aspects of care not related to COVID-19, the Quality and Outcomes Framework (QOF) requirements for 2020/21 will be modified to support this.

General Practice is being asked to resume new patient reviews, routine medication reviews, over-75 health checks and clinical reviews of frailty – but to prioritise these using their clinical judgement and a risk-based approach. The letter also describes how flexibilities under the GP contract may be reinstated to support with management of local outbreaks.

3.0 Primary Care Network (PCN) Workforce Planning

PCNs are required to complete a workforce planning template which asks each PCN to confirm their plans for this financial year as well as intentions for future years. The deadlines PCNs need to be aware of are;

- 31st August 2020 to provide details of recruitment plans for 20/21
- 31st October 2020 to provide details of indicative recruitment intentions through to 2023/24

A link to the workforce planning template can be found through the following weblink https://www.england.nhs.uk/publication/pcn-workforce-planning-template-2020-21/

The Committee is asked to note the updates in the paper