**Report to:** Primary Care Commissioning Committee

**Date of meeting:** 10/08/2020

**Date paper distributed:** Click or tap to enter a date.

**Subject:** NHS England Update Report

**Presented by:** Helen Phillips, Head of Primary Care, NHS England

**Previously distributed to:** Click or tap here to enter text.

**STATUS OF THE REPORT *(auto check relevant box****)*

**Decision required**

**For Discussion to give Assurance**  *(Only if requested by Committee member prior to meeting)*

**For Information**

**Report Exempt from Public Disclosure**   No  Yes

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| --- | --- |
| **PURPOSE OF REPORT:** | This report will update the Committee on primary care medical matters, including contract issues, within North East Lincolnshire and provide national updates around primary medical care. |
| **Recommendations:** | **Recommendations**  **The Primary Care Commissioning Committee is being asked to:**   * **confirm that they are happy for NHS England to** * **Proceed with the Direct Award with the incumbent Clinical Waste Provider** * **Proceed with the addition of a Managing Agent to oversee the management of the clinical waste contract** * **Note the contents of section 2** |
| **Clinical Engagement** | N / A |
| **Patient/Public Engagement** | N / A |
| **Committee Process and Assurance:** | The Primary Care Commissioning Committee are responsible for the information within this report. |

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| --- | --- | --- | --- | --- |
| **Link to CCG’s Priorities** | * Sustainable services * Empowering people |  | * Supporting communities * Fit for purpose organisation |  |
| **Are there any specific and/or overt risks relating to one or more of the following areas?** | * Legal * Finance * Quality * Equality analysis (and Due Regard Duty) |  | * Data protection * Performance * Other |  |

**1.0 Items for a Decision**

**1.1 Clinical Waste Services**

**The Primary Care Commissioning Committee is asked to review the report in appendix 1 and confirm that they are happy for NHS England to**

* **Proceed with the Direct Award with the incumbent Clinical Waste Provider**
* **Proceed with the addition of a Managing Agent to oversee the management of the clinical waste contract**

1. **Items for Noting**

**2.1 PCN Organisational Development (OD) monies**

PCN OD Funding is now in its third year. During 20/21 Integrated Care Systems (ICSs), their constituent places, and PCNs were asked to use the development funding:

* To support recruitment, embedding and retention of new staff
* To enhance integration
* To continue to improve access
* To reduce inequalities by enhancing population health management

Due to the pandemic, progress against the priorities for 2020/21 was limited as primary care quickly adapted in ways to enable access to services in line with national infection prevention and control guidance and introduced total triage models.

Clinical Commissioning Groups (CCGs) have been working with partner organisations across the Humber, Coast and Vale (HCV) Integrated Care System (ICS) to agree an operational plan for 2021/22. This includes a focus on workforce, access and integration.

The Primary Care Operational Group, which has a representative from CCGs, NHS England/Improvement (NHS E/I), Local Medical Committee (LMC) and Local Pharmaceutical Committee (LPC), discussed an approach to investing the PCN OD funding for 2021/22.

It was agreed that outline plans (template to be developed to ensure a uniformed approach) would be submitted to CCG Heads of Primary Care (HoPC) outlining how the funding would be invested focusing on the following areas:

* Support Recruitment to Additional Roles Reimbursement Scheme (ARRS) roles
* To support access to Primary Care
* To reduce Health Inequalities through population health management

CCG HoPC will provide a summary of plans to NHS E/I leads to enable a review of any common areas of development that may support delivery at scale.

**2.2** **Continuing Professional Development (CPD) Funding for Nurse Training**

An email was circulated on 11th June informing PCNs that they were now able to claim their funding entitlement for nurse training, totaling £666 per member of staff covering 2 years of CPD training. This is available for every nursing associate, nurse, midwife and allied health professional (AHPs) and is solely for CPD.

It cannot be used for funding backfill or mandatory training but can be used for external courses i.e. asthma/diabetes etc, or in-house CPD activities, webinars, coaching etc.

The funding will be paid in two halves, 50% in Q1 and 50% in Q4. A brief assurance template will be required to be completed prior to Q4.

In addition to this CPD Funding, Humber Coast and Vale has an additional allocation that can be used for none CPD support covering a range of roles within the PCN so if there is a specific need linked to Population Health Needs and upskilling of workforce, there is a form to complete and submit to the training hub at Haxby by 17th July 2021.

**2.3 Update to GP contract arrangements for 2021/22**

[Letter: update to GP contract arrangements for 2021/22 (england.nhs.uk)](https://www.england.nhs.uk/wp-content/uploads/2021/06/C1302-Update-to-GP-contract-arrangements-for-2021-22-.pdf)

A letter was circulated to GP Practices and PCNs on 17th June 2021 regarding updates to the GP contracting arrangements for 21/22. It included

* Confirmation that further funding will be made available for PCN Clinical Director support for the period July to Sep 2021. It will be an equivalent as previously of an increase from 0.25 WTE to 1WTE. PCNs are eligible for this further support where at least one Core Network Practice is signed up to the Covid-19 Vaccination Programme Enhanced Service.
* Details of two new enhanced services available to GP Practices to support recovery from the pandemic.
* The Weight Management Enhanced Service encourages practices to develop a supportive environment for clinicians to engage with patients living with obesity about their weight and provides up to £20m funding for referrals to weight management services.
* The Long COVID Enhanced Service will support professional education, training and pathway development that will enable management in primary care where appropriate and more consistent referrals to clinics for specialist assessment. It will also support accurate coding and planning to ensure equity of access. NHS England will provide up to £30m for the service.

**2.4 Clinical Pharmacist on General Practice Programme**

Clinical Pharmacists that have remained on the Clinical Pharmacists in General Practice Scheme and are in post on 31 March 2021 can transfer to PCNs and be reimbursed under the Additional Roles Reimbursement Scheme (ARRS), in line with previous transfer arrangements. The opportunity will be available from 1 April 2021 to 30 September 2021.

**2.5 General Practice Appointment Data (GPAD)**

Guidance for practices on standard national general practice appointment categories was published earlier in the year to support the mapping of local appointment slots to these new categories. This follows on from guidance published in August 2020 jointly with NHS England and NHS Improvement and the British Medical Association General Practitioners Committee, which introduced an agreed definition of a general practice appointment.

Practices are required to record all appointments in their clinical systems in line with this definition. Primary care networks will be incentivised through the Investment and Impact Fund for their practices completing both the mapping and improvements in overall appointment data quality by 31st July 2021.

***The Committee is asked to note the updates in section 2 of the paper***