

**Report to the Commissioning Committee for Primary Care Commissioning on 10
March 2022**

Title: Primary Care Update Report	Enclosure G, Gi
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Version Number / Status:	1.0
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Summary and Purpose of Paper

The purpose of the report is to provide the Somerset Primary Care Commissioning Committee with an update on Primary Care in Somerset.

Recommendations and next steps

The Somerset Primary Care Commissioning Committee is asked to note the updates provided. Further updates will continue to be provided on a quarterly basis.

Impact Assessments – key issues identified

Equality	Not Applicable			
Quality	There is no direct impact on the quality of service delivery as a result of this report. The report provides updates on programmes which will influence the quality of primary care services in Somerset.			
Privacy	Not Applicable.			
Engagement	The outcome of any engagement activities will be reported in the respective item.			
Financial / Resource	Items will contain updates on the financial and resource position, if applicable.			
Governance or Legal	Not Applicable			
Risk Description	The Primary Care risks recorded on the risk register relate to various items which have been previously reported to the Committee. These include areas relating to: Burnham and Berrow Medical Centre list closures West Coker List Closure Frome Resilience Project Each risk has its own rating and description.			
Risk Rating	Consequence	Likelihood	RAG Rating	GBAF Ref

PRIMARY CARE UPDATE

**SOMERSET PRIMARY CARE COMMISSIONING
COMMITTEE**

10 March 2022

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ITEM 1: Current Contracts

1.1

GMS	PMS	APMS	Total
47	17	0	64

1.2 **Practices with only one GP holding the contract**

Practice	Code	CCG	Contract Type	Provider
West Coker Surgery	Y01163	Somerset	GMS	
Tawstock Medical Centre	L85619	Somerset	PMS	

ITEM 2: Mergers and Integrations

2.1 The following mergers and integrations have been approved with effect from various dates from 2019 onwards:

Practices merging from 2019 onwards
Bruton Surgery integrated with Symphony Healthcare Services Ltd 1 February 2019
Harley House Surgery and Irnham Lodge Surgery (Minehead) merged 1 April 2019
Creech Medical Centre integrated with Taunton and Somerset NHS Foundation Trust on 1 April 2019
North Petherton Surgery integrated with Somerset Partnership NHS Foundation Trust on 1 October 2019
Exmoor Medical Centre integrated with Symphony Healthcare Services Ltd on 1 April 2020
Ryalls Park Medical Centre Integration into SHS Ltd took place on 01 April 2021
Creech Medical Centre, Lister House Surgery*, North Petherton Surgery and Warwick House Medical Centre** integrated with SHS Ltd on 1 October 2021 following a transfer from Somerset NHS Foundation Trust

Lister House Surgery integrated with Taunton and Somerset NHS Foundation Trust in August 2018

Warwick House Medical Centre integrated with Taunton and Somerset NHS Foundation Trust in April 2017

ITEM 3: Contract Expiries and Procurements

3.1 **Contract Expiries**

There are currently none in Somerset.

3.2 **Contract Terminations**

There are currently none in Somerset.

3.3 **Contract Procurement**

There are currently none in Somerset

ITEM 4: Temporary Practice Closures

Temporary Practice Closures

4.1 The table below details the number of applications received since the January 2022:

Ryalls Park	25/01/2022 13:00-16:00	Approved
	23/02/2022 13:00-16:00	
	23/03/2022 13:00-16:00	
	28/04/2022 13:00 16:00	
Martock Surgery & South Petherton Medical Centre	20/01/2022 13:30-18:30	Approved
	26/01/2022 13:30-18:30	

	17/02/2022 13.30-18.30 17/03/2022 13.30-18.30 21/04/2022 13.30-18.30 19/05/2022 13.30-18.30 16/06/2022 13.30-18.30	
Hamdon Medical Centre	26/01/2022 13:00-18:30 03/02/2022 13:00-18:30 03/03/2022 13:00-18:30 07/04/2022 13:00-18:30 05/05/2022 13:00-18:30 02/06/2022 13:00-18:30 07/07/2022 13:00-18:30	Approved
Lister House Partnership	24/02/2022 13:30-18:30 23/04/2022 13:30-18:30 23/06/2022 13:30-18:30 25/08/2022 13:30-18:30 27/10/2022 13:30-18:30 15/12/2022 13:30-18:30	Approved
Crewkerne Health Centre	26/01/2022 13:30-18:30 15/02/2022 13:30-18:30 16/03/2022 13:30-18:30 14/04/2022 13:30-18:30 17/05/2022 13:30-18:30 15/06/2022 13:30-18:30 21/07/2022 13:30-18:30	Approved
Penn Hill Surgery	18/01/2022 13:30-17:00 16/02/2022 13:30-17:00 17/03/2022 13:30-17:00	Approved
St James Medical Centre	25/01/2022 13:00-16:00 23/02/2022 13:00-16:00 24/03/2022 13:00-16:00 29/04/2022 13:00-16:00 24/05/2022 13:00-16:00 29/06/2022 13:00-16:00 28/07/2022 13:00-16:00 19/08/2022 13:00-16:00 20/09/2022 13:00-16:00 19/10/2022 13:00-16:00 24/11/2022 13:00-16:00 16/12/2022 13:00-16:00	Approved
Bruton Surgery	16/02/2022 12:00-14:00 15/03/2022 12:00-14:00 26/04/2022 12:00-14:00 18/05/2022 12:00-14:00 21/06/2022 12:00-14:00 20/07/2022 12:00-14:00 16/08/2022 12:00-14:00 21/09/2022 12:00-14:00 18/10/2022 12:00-14:00 16/11/2022 12:00-14:00 13/12/2022 12:00-14:00	Approved
Highbridge Medical Centre	15/03/2022 13:00-18:00 19/04/2022 13:00-18:00 17/05/2022 13:00-18:00 21/06/2022 13:00-18:00 19/07/2022 13:00-18:00 16/08/2022 13:00-18:00 20/09/2022 13:00-18:00	Approved

Frome Medical Practice	22/03/2022 14:00-17:00 17/05/2022 14:00-17:00	Approved
Glastonbury Health Centre	06/04/2022 13:00-15:00	Approved

ITEM 5: Practice Boundary Changes

West Coker Boundary Change

- 5.1 Somerset CCG has been supporting West Coker Surgery with a number of operational challenges recently, recognising the position the practice finds themselves with reduced clinical capacity. As part of these discussions, it came to light that the contractual practice boundary did not reflect the boundary being operated.
- 5.2 In 2016 two previously named Westlake Surgery practices merged to become West Coker Surgery; both Westlake practices operated differing boundaries – one of which was significantly larger. It was formally agreed by an NHS England Committee that West Coker Surgery could reduce the overall boundary significantly to recognise the reduced clinical capacity, on the condition a proportion of Crewkerne was included to provide patient choice. There were further discussions between the practice and NHS England on whether Crewkerne should be included however neither party have any evidence to support a final decision; although we do have a copy of the Governance report approving the recommendation to reduce the overall boundary. On the understanding the agreement was formalised, West Coker Surgery began operating the revised boundary (excluding Crewkerne) however a contract variation was not enacted by NHS England to formalise the amendment.
- 5.3 Throughout our recent communication the practice shared concern that operating the formal contractual boundary (which they haven't for 5 years) had the potential to increase operational pressure to the point where a contract hand-back would have to be considered. On this basis it was agreed with the practice that given there is formal Committee agreement from NHS England that the reduced boundary could be operated, we would honour the decision on the basis a section of Crewkerne is included. We have since agreed a proportion of Crewkerne to be included and enlisted the support of the CSU Mapping team to conduct analysis which further supports this decision. Given the practice has been operating this boundary for 5 years, the inclusion of Crewkerne actually provides an increase to the practice boundary and therefore benefits local patients. A contract variation has been completed to formalise the amendment.

ITEM 6: Branch Surgery Closures and Changes

- 6.1 There have been no formal applications received for a closure or a change.

ITEM 7: Contract Breach and Remedial Notices

- 7.1 No New contract breaches or remedial notices have been issued.

ITEM 8: Contract Appeals

- 8.1 No new contractual appeals have been received.

ITEM 9: Sub-Contracting/Practices Working at Scale

- 9.1 No new sub-contracting arrangements since the last report

ITEM 10: Premises

Rent Reviews

- 10.1 There are currently a number of on-going rent and lease reviews; recent rent reviews include the below:

Practice	Status
Church View Medical Centre	On-going
Springmead Surgery	On-going
Tawstock Medical Centre	On-going
Crewkerne Health Centre	On-going
Ryalls Park Medical Centre	On-going
Essex House Medical Centre	On-going
Preston Grove Medical Centre	In Dispute
Beckington Family Practice (Fromefield)	On-going
Porlock Medical Centre	In Dispute
Milborne Port (main surgery)	On-going
Milborne Port (Rock House)	On-going
Queen Camel	On-going

- 10.2 Premises was a focal point for internal audit. There is a detailed update on the internal Audit further in this report.

ITEM 11: West Coker Temporary List Closure

- 11.1 In the absence of a formal Primary Care Operational Group in December, the group received a virtual item for consideration on 15th December which was the proposed application to temporarily close the practice list at West Coker Surgery. The application is for a period of 3 months from 1 January 2022 to support practice resilience given the surgery is currently experiencing significant challenge in recruiting a salaried GP following a recent resignation - in addition to a rapidly expanding list size. We are supporting the practice in their efforts to recruit, and an action plan is in place to ensure a positive outcome. The application received virtual approval and no concern was expressed.

- 11.2 Therefore, the practice list at West Coker Surgery will be closed from 1st January 2022 to 31 March 2022. We are content that the practice understands their contractual obligations whilst the list is closed.

ITEM 12: Burnham and Berrow Medical Centre List Closure

- 12.1 Following approval at the extraordinary Primary Care Commissioning Committee Burnham and Berrow Medical Centre have put in place a patient registration list closure for 12 months starting 6 January 2022. This means the practice can legitimately refuse patient registration on a case-by-case basis, even if the patient lives within the contractual boundary for

accepting patients. There are some terms associated with the closure which the practice must adhere to:

- Where there has been a breakdown of patient relationship with a neighbouring practice, registration will be considered (depending on home address)
- New family members of existing registered patients will be considered for registration e.g. new-borns
- New patients moving into the area north of the current practice boundary where only Burnham and Berrow Medical Centre cover will be considered as part of any registration request to ensure patients are not left without access to care

12.2 Every patient that requests to join the practice during the closure should be considered on a case-by-case basis and any rejections must be recorded alongside the reason for rejection and made available to the CCG upon request.

ITEM 13: Frome Resilience Project

13.1 PCOG were asked to note the latest quarterly report and to virtually approve the second year of funding (£61,794) for the Frome Resilience Project as set out in the MOU. All responses received were in support and funding has been approved. This project further develops and builds on the complex care hub service, increasing the capacity of the discharge liaison service, setting up a falls clinic and developing a home visiting service.

ITEM 14: Flu Vaccination

14.1 Flu vaccinations from primary care are commissioned through NHSEI. The Levels of influenza circulating in the UK have remained very low – which historically influences vaccine uptake. Frontline healthcare workers vaccinations are now progressing across Somerset with, as mid February, YDH and Somerset FT at 70%.

14.2 Somerset eligible cohort uptake has been good in the 65+ but less so in other at risk cohorts, with the obvious caveat that system and public focus has been on covid vaccinations. Ongoing work has signalled the link between deprivation and flu vaccine uptake.

14.3 As we move into an ICS, we will need to consider how we bring together all vaccination programmes and target deprived communities to increase uptake. Recommendations (with the caveat that immunisations are not CCG commissioned);

- The system needs to consider as it moves to an ICS bringing flu vaccine and other vaccination programs into mainstream primary care and infection control oversight rather than regarding as a separate program.
- For winter 2022/23 the system should consider bringing the flu vaccine program into the same workstream as the covid vaccination program
- The system should consider programs and investment to increase vaccinations in more deprived communities.

ITEM 15: Patient Survey Update

15.1 The Primary Care Team are continuing to work with practices in relation to the GP patient survey results. Communication has been developed to outline the CCG expectation regarding patient experience and access to initiate supportive conversations with practices. James Rimmer, Chief Executive will shortly be writing to all practices in relation to primary care recovery and expectations of which the inclusion of the patient survey results will be referenced. Meetings have already taken place with a selection of providers and further discussions will take place with those providers identified as potentially requiring support

over the coming weeks to address any challenges and share good practice across Somerset.

- 15.2 We have initiated conversations with Symphony Health Care Services (SHS) who are aware of our expectations regarding patient experience and are in the process of addressing this; improvement will be monitored via a new patient satisfaction survey. SHS have committed to work with the Improved Access Programme team in the future with a view to not only work on individual practices but support their work towards commonality across the organisation. We are working with SHS to confirm their action plan and will hold regular review meetings with the senior leadership team at SHS to maintain momentum.
- 15.3 The Committee is already aware of the on-going support being provided at Burnham Medical Centre and the practice is currently receiving support from the Access Improvement Programme which will strengthen the improvement of patient flow and access.
- 15.4 Shortly, once we have concluded offering our package of support to providers we will report into the Committee to share our findings, significant challenges and proposed direction of travel. We are fully committed to a collaborative approach with our providers to improve the overall general practice experience of Somerset patients.

ITEM 16: Internal Audit

- 16.1 The annual primary care delegation internal audit process was suspended in 2020/21 due to the COVID-19 pandemic and associated pressures and prioritisation of critical functions to support the pandemic response. The audit process is defined by a national framework which is designed around the NHS commissioning cycle and aims to test the following components of CCG primary care delegated responsibilities:
 - Commissioning and procurement of services;
 - Contract Oversight and Management Functions;
 - Primary Care Finance; and
 - Governance (common to each of the above areas).
- 16.2 It was agreed that the audit for 2021/22 would commence in December 2021 and test the current internal processes to provide assurance that:
 - The processes undertaken for administering the locum reimbursement scheme and rent reviews are robust
 - The processes for appointing to the Additional Roles to ensure the changes to structures are robust and correct payments are made
- 16.3 The audit aims to test both the design of process and their operational effectiveness, with each component awarded an assurance rating based on the evidence findings. The audit provides two levels of assurance, the first one is an assessment of compliance against the NHS England Framework as set out in appendix 3 and the second is an assessment against the BDO Auditors framework which is set out in appendix 2.
- 16.4 The CCG has achieved full assurance against the NHS England Framework, the highest rating available.
- 16.5 The BDO framework assess both the Design and Operational Effectiveness of the systems covered by the audit. The Design domain has been rated as Substantial assurance, the highest available, with Operational Effectiveness domain assessed as Moderate assurance.
- 16.6 As set out by the full report in appendix 1, the reason for the reduced assurance in the Operational Effectiveness domain is connected to the rent reviews process. The audit has highlighted the impact of pausing the process for 6 months during 2021/22 in response to the national mandate to prioritise services and channel available resource into the pandemic

response. By taking this approach there are a number of overdue rent reviews and the operation of the process inherited from NHS England, including the database, has not been prioritised for review since taking on delegation in April 2019. The CCG has accepted the findings with a strong commitment to reach a substantial level of assurance through the delivery of an action plan before the end of quarter one in the 2022/23 financial year.

ITEM 17: Items Discussed at PCOG

- 17.1 The following additional items have had initial discussion within Primary Care Operational Group in the last quarter:
- Dermis Contract
 - Brent Area Practice Boundary
 - Wells City Practice Premises
 - Contract Changes from PMS to GMS