



**IPSWICH AND EAST SUFFOLK CCG  
PRIMARY CARE COMMISSIONING COMMITTEE**

**Tuesday, 22 February 2022 at 2.00pm**

In response to the challenges facing the NHS and to reduce the risk of coronavirus transmission, members of the public will not be able to attend this meeting but are invited to submit questions relating to agenda items via email to [jo.mael@suffolk.nhs.uk](mailto:jo.mael@suffolk.nhs.uk). A recording of the meeting, which will include answers to any questions submitted by the public will be available on the CCG website after the meeting.

**AGENDA**

1. **Apologies for Absence** *Chair*
2. **Declarations of Interest and hospitality and gifts** *All*
3. **Minutes of Previous Meeting** *Chair*  
*To approve minutes of Ipswich and East Suffolk CCG Primary Care Commissioning Committee meetings held on 21 December 2021*
4. **Matters arising and review of outstanding actions.** *Chair*  
*To review outstanding issues from the previous meeting of the Ipswich and East Suffolk CCG Primary Care Commissioning Committee.*
5. **General Update** *Maddie Baker-Woods*  
*To receive a verbal report from the Chief Operating Officer, Ipswich and East Suffolk CCG*
6. **Primary Care Contracts and Performance Report** *Maddie Baker-Woods*  
*To receive and note a report from the Chief Operating Officer* *(IESCCG PCCC 22-01)*
7. **Primary Care Delegated Commissioning – Finance Report** *Jane Payling*  
*To receive and note a report from the Director of Finance, Ipswich and East Suffolk CCG* *(IESCCG PCCC 22-02)*
8. **Care Quality Commission (CQC)** *Claire Pemberton*  
*To receive and note a report from the Head of Primary Care* *(IESCCG PCCC 22-03)*
9. **Date and Time of next meeting**  
*2.00pm – 4.00pm, Tuesday, 26 April 2022*
10. **Questions from the public – 10 minutes**

(See above)

**Exclusion of the Press and Public**



**NHS**

**Ipswich and East Suffolk**  
Clinical Commissioning Group

*The Primary Care Commissioning Committee is recommended to exclude representatives of the press, and other members of the public, from the meeting having regard to the confidential nature of the business to be transacted, publicity on which would be prejudicial to the public interest; Section 1(2), Public Bodies (Admission to Meetings) Act 1960.*

Ipswich and East Suffolk CCG Primary Care Commissioning Committee Members												
Title	First Name	Last Name	Declared Interest	Type of Interest			Direct or Indirect	Date of Interest		Date of Receipt	Action Taken to Mitigate	Consent to Publish
				Financial Interests	Non Financial Professional Interests	Non Financial Personal Interests		From	To			
Chief Operating Officer	Maddie	Baker-Woods	Trustee of Suffolk Arlink		✓		Direct	Mar-20	Ongoing	10/11/2021	To be declared when necessary	Yes
Lay Member	Steve	Chicken	Lay Member for West Suffolk CCG	✓			Direct	2014	Ongoing	06/10/2021	To be declared when appropriate	Yes
			Wife is President and Director of East of England Co-op			✓	Indirect	2018	Ongoing	06/10/2021	To be declared when appropriate	Yes
			Wife is Director of Eastern Savings and Loans Credit Union			✓	Indirect	2002	Ongoing	06/10/2021	To be declared when appropriate	Yes
			Wife is Director of Rainbow Saving Credit Union			✓	Indirect	2002	Ongoing	06/10/2021	To be declared when appropriate	Yes
Chief Officer	Ed	Garraff	Chief Executive West Suffolk CCG	✓			Direct	Mar-14	Ongoing	05/10/2021	To declare when appropriate	Yes
			Chief Executive North East Essex CCG	✓			Direct	Jan-19	Ongoing	05/10/2021	To declare when appropriate	Yes
			Executive Lead - Suffolk and North East Essex Integrated Care System	✓			Direct	Apr-19	Ongoing	05/10/2021	To declare when appropriate	Yes
			Visiting Professor of Integrated Care - University of Suffolk		✓		Direct	Apr-21	Ongoing	05/10/2021	To declare when appropriate	Yes
Director of Performance Improvement	Paul	Gibara	Director of Performance Improvement for SNEE CCGs	✓			Direct		Ongoing	04/10/2021	No further action required	Yes
Secondary Care Doctor	Lorna	Kerr	Husband works for Global Diagnostics				Indirect	2004	Ongoing	27/10/2021	To be declared when appropriate	Yes
Lay Member for Governance and Vice Chair CCG	Graham	Leaf	Director of Colchester Community Stadium Ltd	✓			Direct	2009	Ongoing	08/10/2021	No further action required	Yes
			Daughter works for Norfolk and Suffolk NHS Foundation Trust			✓	Indirect	2020	Ongoing	08/10/2021	No further action required	Yes
Director of Corporate Services and System Infrastructure	Amanda	Lyes	Director of Corporate Services and System Infrastructure for West Suffolk and North East Essex CCGs	✓			Direct		Ongoing	04/10/2021	No further action required	Yes
			Interim Director of Workforce for SNEE ICS	✓			Direct	Mar-21	Ongoing	04/10/2021		Yes
Lay Member for Patient and Public Involvement	Phanuel	Mulumburi	Business and Operations Director for Ipswich and Suffolk Council for Racial Equality (ISCRE)	✓			Direct	2020	Ongoing	25/10/2021	To be declared as necessary	Yes
			Partnership project between ISCRE and IESCCG for support for the BAME health and wellbeing programme				Direct		Ongoing	25/10/2021	To be declared as necessary	Yes
			Finance Director for the Suffolk Law Centre		✓		Indirect		Ongoing	25/10/2021	No further action required	Yes
			School Governor at The Beeches Community Primary School			✓	Indirect	2020	Ongoing			Yes
			Member of the Finance Committee at Asset Education Academies Trust				Indirect		Ongoing			Yes
			Board Member for Gecko Theatre			✓	Indirect	Aug-21	Ongoing	25/10/2021	No further action required	Yes
Director of Finance	Jane	Payling	Director of Finance for Ipswich and East Suffolk CCG and North East Essex CCG	✓			Direct	25/09/2017	Ongoing	25/10/2021	To declare when appropriate	Yes
			Trustee of Cambridge Theatre Trust				Direct	Oct-18	Ongoing	25/10/2021	To declare when appropriate	Yes
			Member of Cambridge Regional College Finance Committee			✓	Direct	Nov-21	Ongoing	25/10/2021	To declare when appropriate	Yes
CCG Chair	Mark	Shenton	Salaried Doctor and Board Member of Suffolk Primary Care	✓			Direct		Ongoing	13/10/2021	To be declared as necessary	Yes
			Professor of Integrated Care at University of Suffolk	✓			Direct		Ongoing	13/10/2021	No further action	Yes
			Wife (Dr Carrie Everitt) is a partner at Hadleigh PMS practice and a director of Hadleigh Health Ltd and Mill Pharm Ltd			✓	Indirect		Ongoing	13/10/2021	To be declared as necessary	Yes
			Practice participates in research ethics approved GSK clinical trial.	✓			Direct	01/09/2018	Ongoing	13/10/2021	To be declared as necessary	Yes
			Director of Stowhealth Holdings Ltd, a non-trading company holding shares in Virt Turi, a joint venture with Orbital Media to develop Avatar technology		✓		Direct	01/09/2018	Ongoing	13/10/2021	To be declared as necessary	Yes
			Suffolk primary care has agreed to renew its 12 month cluster contract to delivery clinical research studies. The contract provides financial assistance towards recruitment of a research nurse and research administrator	✓			Direct		Ongoing	13/10/2021	To be declared as necessary	Yes
			SPC Chair has a private small shareholding in L&R Pharmacy	✓			Direct		Ongoing	13/10/2021	To be declared as necessary	Yes
			Virt Turi Clinical Advisory Board Member (unpaid)		✓		Direct		Ongoing	13/10/2021	To be declared as necessary	Yes



**Meeting of the Ipswich and East Suffolk CCG Primary Care Commissioning Committee held on  
Tuesday 21 December 2021, via Microsoft Teams  
Members of the public were invited to email questions prior to the meeting.**

**PRESENT:**

Phanuel Mutumburi	Lay Member for Patient and Public Involvement (Chair)
Chris Armitt	Deputy Director of Finance
Maddie Baker-Woods	Chief Operating Officer
Steve Chicken	Lay Member
Dr Lorna Kerr	Secondary Care Doctor
Simon Jones	Suffolk Local Medical Committee
Kerry Overton	Healthwatch
Stuart Quinton	Senior Contract Manager (Suffolk and North East Essex STP)
Dr Mark Shenton	CCG Chair

**IN ATTENDANCE:**

David Brown	Deputy Chief Operating Officer
Jo Mael	Corporate Governance Manager
Sarah Portway	Head of Primary Care, West Suffolk CCG
Daniel Turner	Senior Estates Development Manager

**21/57 APOLOGIES FOR ABSENCE**

Apologies for absence were noted from:

Ed Garratt	Chief Executive
Paul Gibara	Director of Performance Improvement
Amanda Lyes	Director of Corporate Services and System Infrastructure
Jane Payling	Director of Finance

The meeting was confirmed as quorate.

**21/58 DECLARATIONS OF INTEREST AND HOSPITALITY AND GIFTS**

No declarations of interest were received.

**21/59 MINUTES OF THE PREVIOUS MEETING**

The minutes of an Ipswich and East Suffolk CCG Primary Care Commissioning Committee meeting held on 26 October 2021 **were approved** as a correct record.

**21/60 MATTERS ARISING AND REVIEW OF OUTSTANDING ACTIONS**

There were no matters arising and the action log was reviewed and updated.

## 21/61 GENERAL UPDATE

The Chief Operating Officer thanked members of the Committee for their understanding in respect of today's 'extraordinary' meeting taking place in 'extraordinary' times. Despite current work pressures it was felt necessary to provide an update to the Committee and members of the public, and also to express thanks to all practice staff for everything they were doing in respect of both the vaccination programme and in ensuring that ongoing care was provided.

The Committee was informed that further national guidance from NHSE supported by the BMA, had set out the areas for current work and that work which might need to be deferred in order to allow progression of the vaccination programme.

Practices had been asked to continue with care and response to patients that were acutely unwell; to continue with contraception work; child immunisations; flu vaccinations; medication issues that were unable to be managed by pharmacies; cancer work; end of life; wound dressings, care for the housebound; long term condition management; mental health; cervical smears; safeguarding and essential paperwork.

The guidance had also indicated those areas that could be delayed, such as lower risk long term condition management; minor surgery where it was not for cancer; and routine or non urgent screening. Practices would keep patients informed and ask them to present at a later date. Urgent care would continue to be provided via various methods that would include some face to face consultations.

Although all practices were working on the vaccination programme, not all practices were vaccination sites as many worked in groups

Across the Suffolk and North East Essex Integrated Care System (ICS) over two million vaccines had been administered to date, and of that number one million had been delivered by primary care. Whilst the ICS was in a strong position overall, it was recognised that there were some areas and communities that required increased information in partnership with community groups and practices in order to facilitate decision making.

Comments included;

Having queried whether there had been any guidance for practices in respect of the processing of complaints, it was explained that it remained important that complaints were acknowledged but should be recognised that there might be a time delay in response which was included in the guidance that would be disseminated to practices. Good communication was key going forward.

The work required to encourage anxious communities was recognised and the need to be aware of challenges and be able to step in to provide support when necessary, was emphasized.

**The Committee noted** the update **and thanked** practices and staff for their hard work and members of the public for their patience during such a challenging period.

## 21/62 DATE OF NEXT MEETING

The next meeting was scheduled to take place on Tuesday, 22 February 2022

## 21/63 QUESTIONS FROM THE PUBLIC

No questions were received.



**IPSWICH & EAST SUFFOLK CCG – PRIMARY CARE COMMISSIONING COMMITTEE  
ACTION LOG: 21 December 2021 (updated)**

MINUTE	DETAILS	ACTION	BY WHOM	TIMESCALE/UPDATE
<b>Meeting of 22 June 2021</b>				
21/27	Primary Care Contracts and Performance Report	With regard to LD and SMI patients, it was hoped that secondary care colleagues would give them the prioritisation they deserved during the recovery of elective care services. In respect of antibiotic prescribing, it was reported that NHSE identified the proportion used rather than the ASTRO-PU, and it was suggested they use ASTRO-PU figure going forward. The Chief Operating Officer agreed to discuss the matter with medicines management colleagues to seek further discussion at relevant forums in order to advocate change	Maddie Baker-Woods	Ongoing



**PRIMARY CARE COMMISSIONING COMMITTEE**

<b>Agenda Item No.</b>	<b>06</b>
<b>Reference No.</b>	<b>IESCCG PCCC 22-01</b>
<b>Date.</b>	<b>22 February 2022</b>

<b>Title</b>	<b>Primary Care Contracts and Performance Report</b>	
<b>Lead Director</b>	Maddie Baker-Woods, Chief Operating Officer	
<b>Author(s)</b>	Scott Pomroy	
<b>Purpose</b>	To provide the committee with an overview of primary care performance and to update on primary care activity where relevant	
<b>Applicable CCG Clinical Priorities:</b>		
<b>1.</b>	To promote self care	
<b>2.</b>	To ensure high quality local services where possible	<b>X</b>
<b>3.</b>	To improve the health of those most in need	
<b>4.</b>	To improve health & educational attainment for children & young people	
<b>5.</b>	To improve access to mental health services	
<b>6.</b>	To improve outcomes for patients with diabetes to above national averages	<b>X</b>
<b>7.</b>	To improve care for frail elderly individuals	
<b>8.</b>	To allow patients to die with dignity & compassion & to choose their place of death where appropriate	
<b>9.</b>	To ensure that the CCG operates within agreed budgets	<b>X</b>
<b>Action required by Primary Care Commissioning Committee:</b>		
To consider and discuss the information provided and agree any appropriate actions required.		

## 1. **Purpose**

- 1.1 To update the Committee on contractual and performance related matters in respect of GP Practices and actions taken; and to seek further recommendations and areas for consideration for the Primary Care team.

## 2. **Prescribing and Medicines Management**

### **Prescribing budget**

The CCG has continued to monitor the prescribing spend for 2021/22 and the headlines and comparators to last year are as follows:

- Year to date (M8) CCG is £217k (0.66%) over budget
- Year on year there has been an 1.62% increase in spend

Areas where increase spend have been identified include:

- Direct Oral Anticoagulants (DOACs) – linked to the Covid-19 pandemic and updated NICE guidance
- Over the Counter products
- Antisecretory preparations – linked to national ranitidine shortages

Areas where a reduction in spend has been achieved include:

- Incontinence and stoma appliances
- Blood glucose testing strips
- Gonadorelin analogues
- Medicines of low clinical value

### **Antibiotic prescribing**

Ipswich and East Suffolk CCG is currently exceeding (performing better than) the national targets for antibiotic prescribing (December 2020 to November 2021):

- Total antibacterial items per STAR-PU = 0.812 (national target: <0.871)
- Broad spectrum antibiotic prescribing as a proportion of all antibiotics prescribed = 8.61% (national target <10%)

### **Quality Innovation Productivity and Prevention (QIPP) delivery**

The QIPP target for 2021/22 has been set at £2million. Key areas for focus have been identified and include promoting self-care and over the counter medication, reducing the use of medicines deemed by the NHS to be of low clinical value and optimising the use of appliances and wound care products. The team are working collaboratively with surrounding CCGs, acute and mental health providers to support the delivery of these projects.

### **Actions – Ongoing:**

- Working with ICS stakeholders to review and update local Direct Oral Anticoagulant (DOAC) guidance to reflect NHSE commissioning recommendations and updated NICE guidance.
- Working with the ICS communication team to support a reduction in prescribing of over the counter products.
- Working with ICS colleagues to review the respiratory guidance and formularies to promote the use of lower carbon inhalers.
- Working to reduce the use of medication deemed by the NHS to be of low clinical value, in line with national guidance.



- Working with PCNs to support the delivery of structured medication reviews and optimise medication use
- Working with colleagues across the ICS to support the safe delivery of the Covid-19 vaccination programme.

### 3. **Performance Targets**

#### **Learning Disabilities (LD) Health Checks**

Cumulatively to December 2021, 51.4% of annual physical health checks have been completed. This is 0.6% short of the best ever Q3 performance, but 2.8% greater than the position one year ago, when the practices within the CCG went on to achieve, and exceed, the NHSE end of year target of 75% for the first time. Proactive work is underway between the CCG and the NSFT LD Nurses to engage with practices to try and ensure the annual target is achieved again this year.

Updates on initiatives to improve the quality of annual health checks and the health outcomes for LD patients in general are as follows.

- NSFT have completed the recruitment of a person to lead on the “deep dive” analysis of the LD registers. The purpose is to identify and focus effort on patients that are not attending annual health checks and screening appointments.
- Work to address the lower uptake of Covid boosters by eligible people with a learning disability compared to the general population has proved a great success. As at 1<sup>st</sup> Feb across the Suffolk and North East Essex ICS, 88% of eligible patients on the LD register had received the booster, compared to 86% of the general population. 88% is the best ICS performance in the East of England and two percentage points higher than the combined figure for the region.

#### **Severe Mental Illness (SMI) Physical Health Checks**

At the end of the Q3 20/21, practices in Ipswich and East Suffolk had completed 57.4% of annual health checks, which is up from 52.3% at the end of Q2 (based on a rolling 12 months data set). This is the best result since the CCG started reporting the numbers in Q1 of 2019. One year ago, just 27.7% of SMI patients had received all 6 physical health checks that make up the Annual Health Check, although this reflected the impact of the pandemic and was something of an outlier compared to average performance. The latest figure evidences a tremendous effort from Practices and colleagues in the NSFT SMI Suffolk Physical Health Team to not only recover the situation but to ensure that more SMI patients than ever have had their annual health check.

Eight Practices have achieved the NHSE target of 66.7% and a further ten have achieved at least 60%. In the Q2 results, 16 achieved less than 50% but that figure has reduced to 11 in the latest numbers.

#### **Dementia Diagnosis Rates**

The December Dementia diagnosis rates show a further small decline over the previous month, the usual impact of winter plus the exceptional impact of covid-19 influencing the numbers.

At present there is a great deal of attention at regional NHSE/I level to ensure recovery of the diagnosis rates but also with a focus annual care plan reviews.

### Dementia Diagnoses as a % of estimated prevalence

NAME	Dec-21	Nov-21	Change
NHS NORTH EAST ESSEX CCG	63.6	63.8	-0.2
England	61.8	62	-0.2
East of England	59.3	59.3	0
NHS WEST SUFFOLK CCG	58.9	59	-0.1
NHS IPSWICH AND EAST SUFFOLK CCG	58.8	58.9	-0.1

### Flu Vaccination

The flu vaccination programme for 2021 started in September. Based on figures published via the “Immform” platform, by the end of January the CCG has vaccinated **over 86%** of its population aged 65 years and over. This performance is slightly above the results at the same point in the previous year (85.3%), maintaining the significant improvement on the figures from Jan 2020 (74.7%).

Vaccination of pregnant women is at **41%**, down on the same point last year (44.7%) and Jan 2020 (47.4%)

The figures for children vary by age. Between the years of 2 and 4, vaccination has dropped compared to one year ago, although higher than it was in Jan 2020, significantly so for the under fours. Generally, between the ages of 5 and 10 vaccination is on a par with and higher than last year (except for 9-year olds) and significantly higher than Jan 2020.

Vaccination of 11 to 15-year olds is new this year and the rate is around 50% across all those age groups.

See Appendix A for details of adult flu vaccination by practice

See Appendix B for details of adult vaccination trends over the last 5 years

See Appendix C for details of child vaccination trends over the last 5 years

## 4. Quality Outcomes Framework (QoF) 2020/21

- 4.1 The latest Quality Outcomes Framework (QoF) results were published in October 2021.
- 4.2 Due to the impact of the COVID-19 pandemic on activity in general practice, QOF implementation was changed for 2020-21. The majority of QOF indicators were income protected (i.e. payments were made to practices irrespective of activity recorded for indicators in 2020-21), to enable practices to direct resources towards the COVID-19 response and to targeting care at the most vulnerable and high-need groups.
- 4.3 These changes mean that indicator data may be inaccurate for the 2020-21 reporting year, and comparisons with data from previous years would be misleading. However, for the record, the practices in the CCG achieved 98.6% of the points available (567 per practice), up 0.7% on the previous year. For the reasons stated above, this cannot be interpreted on the surface as an indication of an improved performance.

## 5. Primary Care Network (PCN) Development

The anticipated underspend against the Additional Roles Reimbursement Scheme budget is estimated to be £605,000. Monies which are not spent are retained by NHS England. The CCG wrote to all PCNs asking if they would wish to bring forward any recruitment from next year utilising these funds. A small number of posts are being brought forward, but the underspend will still be significant.

## PCN Specifications

PCNs are currently delivering against the service specifications for 2021/22: Extended Hours Access, Structured Medication Reviews, Enhanced Health in Care Homes, Early Cancer Diagnosis, with Cardiovascular Disease Prevention & Diagnosis and Tackling Neighbourhood Health Inequalities added in October. Recent updates to any services are provided below:

### *Tackling Neighbourhood Health Inequalities*

Due to the expansion of the COVID vaccination programme over recent months and the concurrent requirement to prioritise timely access to general practice services, there has been a change to the previously reported start date for the 'Tackling Neighbourhood Health Inequalities' service: the deadline for PCNs to have identified a priority cohort and commenced engagement has been put back to 28th February 2022 from the original date of 31st December 2021.

### *Early Cancer Diagnosis*

- Cancer champion events held across the system with great attendance from our community and primary care partners.
- C the Signs clinical decision tool has been launched across East Suffolk primary care with an evaluation on going.
- Cervical screening remains a priority with Suffolk Federation and primary care partners supporting the increase uptake.
- Tele dermatology advice and guidance pathway utilising the Rego platform remains working well in East Suffolk with a plan to review the two-week pathway.
- Vague Symptoms pathway live across East Suffolk and Education events to support increase uptake into the pathway ongoing.

## 6. Complaints

- 6.1 The following table illustrates a summary of complaints, by complaint category, made about Ipswich and East Suffolk practices during 2021/22 (up to Dec 2021) compared to the same period in the previous year, *based on complaints received by NHSE.*

Complaint Category	2021/22			2020/21	
	Total Complaints	Upheld	In Progress	Total Complaints	Upheld
GPD02 - Appointment (Obtaining inc 0844 numbers)	1	1		1	
GPD03 - Appointment Availability/Length	1	1		1	
GPD04 - Care Planning	-			1	1
GPD06 - Clinical Treatment (inc Errors)	5	1		8	4
GPD07 - Communications	2	1	1	2	2
GPD08 - Confidentiality (Breach etc.)	-			1	1
GPD10 - Delay in Diagnosis	1	1		1	
GPD24 - Practice Management	-			1	
GPD26 - Prescribing Error	1			-	
GPD15 - Failure to Diagnose	-			2	1
GPD33 - Removal from List	1		1	-	
<b>TOTAL</b>	<b>12</b>	<b>5</b>	<b>2</b>	<b>18</b>	<b>9</b>

- 6.2 Only three new complaints were recorded in Q3, two have been upheld and one is still under investigation. Cumulatively complaints are one third down on the position at the same time last year.
- 6.3 The 12 complaints received this year are spread across 9 GP Practices – three practices having received 2 each. There are no trends causing NHSE investigators any concerns.

7. **Recommendation:**

- Note the above information and to consider any further appropriate actions.

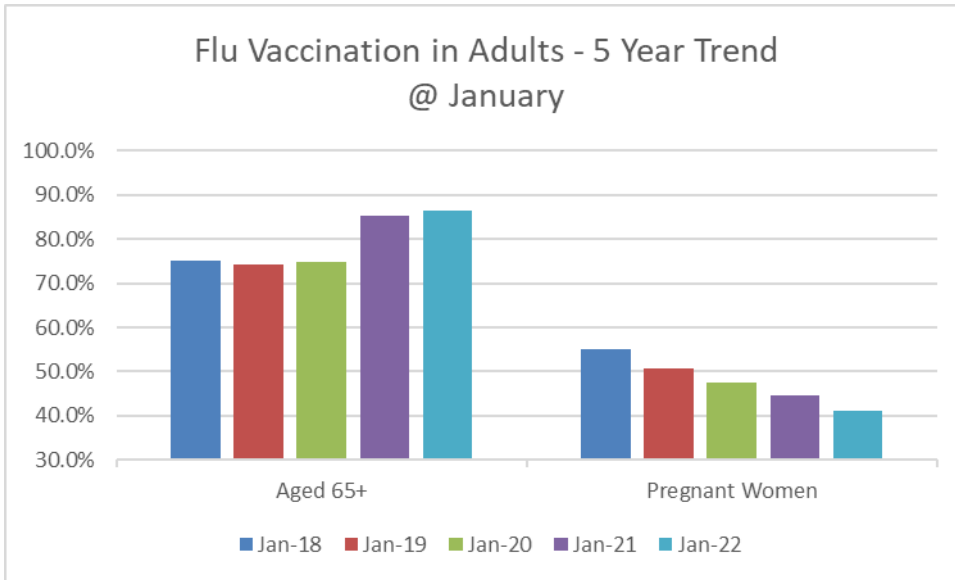
## Appendix A

### Adult Flu Vaccination Rates

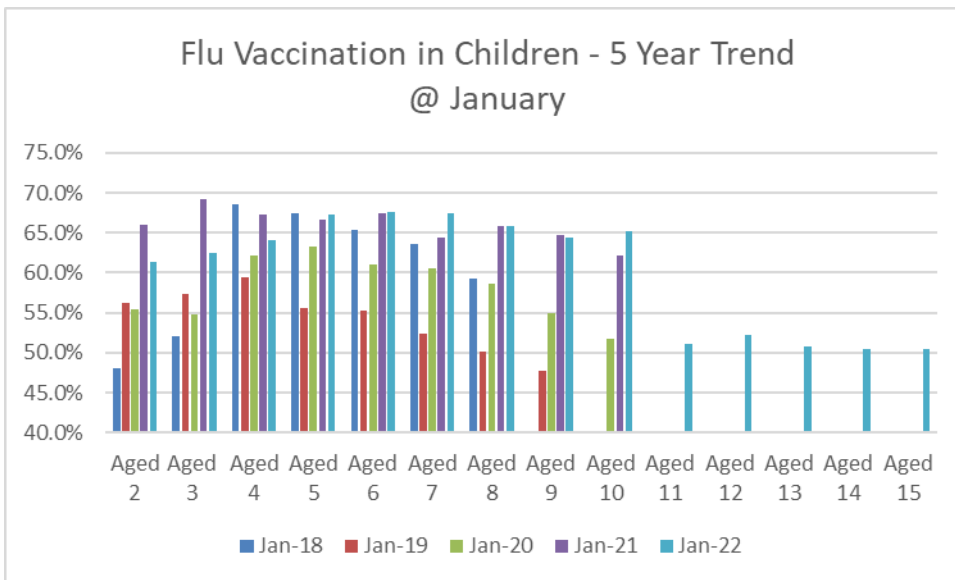
January 2022 (compared to Jan. 2021)

Practice	65 plus		All Pregnant Women	
	Jan-22	Jan-21	Jan-22	Jan-21
Constable Country Practice	89.3	87.5	51.7	50.0
Felixstowe Road, Ipswich	84.7	83.0	41.9	38.4
Bildeston	89.1	86.5	54.0	53.8
Ixworth	85.9	85.7	45.5	57.6
Burlington Road, Ipswich	82.4	81.7	17.2	11.5
Howard House	85.4	85.1	21.2	44.0
Needham Market	84.5	84.6	54.4	49.5
Mendlesham	88.2	88.4	35.5	54.7
Holbrook	90.8	89.1	61.2	54.5
Ivry Street, Ipswich	No data available	84.0	No data available	49.6
Framlingham	86.1	85.1	42.1	62.0
Leiston	88.5	88.3	43.3	41.0
Hadleigh	90.3	89.9	52.0	52.9
Debenham	91.3	88.6	57.4	40.7
Eye	83.9	83.4	44.0	45.2
StowHealth	86.3	85.7	56.1	55.0
Two Rivers, Ipswich	84.9	83.5	52.3	43.3
Grove Surgery, Felixstowe	89.4	86.6	50.9	61.6
Little St John's Street, Woodbridge	87.3	86.5	23.9	45.2
Cardinal Practice, Ipswich	85.1	82.1	36.0	41.4
Derby Road, Ipswich	87.3	85.3	38.3	37.4
Saxmundham	No data available	84.1	No data available	47
Alderton	87.3	83.6	51.3	53.1
Hawthorn Drive, Ipswich	77.9	78.4	26.6	38.5
Framfield House, Woodbridge	89.4	87.4	43.0	52.7
Barrack Lane, Ipswich	77.9	77.0	29.9	40.9
Wickham Market	85.8	85.3	34.6	59.0
Fressingfield	No data available	88.2	No data available	54.8
Orchard Street (Solway), Ipswich	77.9	77.0	35.6	29.2
Orchard Street, Ipswich	80.8	81.2	39.4	38.0
Combs Ford	86.6	84.0	37.9	48.6
Martlesham	90.2	91.0	48.1	67.6
Haven Health, Felixstowe	88.9	85.9	46.7	53.2
The Birches	86.9	83.0	36.2	55.9
Ravenswood, Ipswich	84.9	84.6	36.7	42.6
<b>Total</b>	<b>86.4</b>	<b>85.3</b>	<b>41.0</b>	<b>44.7</b>

**Appendix B**  
Adult Flu Vaccination Trends



**Appendix C**  
Child Flu Vaccination Trends





## PRIMARY CARE COMMISSIONING COMMITTEE

<b>Agenda Item No.</b>	<b>07</b>
<b>Reference No.</b>	<b>IESCCG PCCC 22-02</b>
<b>Date.</b>	<b>22 February 2022</b>

<b>Title</b>	<b>Primary Care Delegated Commissioning- Finance Report</b>
<b>Lead Director</b>	Jane Payling, Director of Finance
<b>Author(s)</b>	Jess Taylor-Allum
<b>Purpose</b>	To provide the committee with an overview of the M10 Primary Care Delegated Commissioning Budget

### Applicable CCG Clinical Priorities:

1.	To promote self care	
2.	To ensure high quality local services where possible	
3.	To improve the health of those most in need	
4.	To improve health & educational attainment for children & young people	
5.	To improve access to mental health services	
6.	To improve outcomes for patients with diabetes to above national averages	
7.	To improve care for frail elderly individuals	
8.	To allow patients to die with dignity & compassion & to choose their place of death where appropriate	
9.	To ensure that the CCG operates within agreed budgets	X

### Action required by Primary Care Commissioning Committee:

To note the report

## 1. Purpose

To provide the committee with an overview of the M10 Primary Care Delegated Commissioning Budget and other associated primary care budgets.

## 2. Key Points

At the end of M10, the Primary Care Delegated Budget was £199k overspent. This mainly due to overspend on the GMS contract value offset by reduction in professional fees.

The allocation received was lower than budget so the delegated plan was part funded by programme as detailed in the table below. If this was not the case the overspend would be £2.2m

Please see the table below for a summary of key variances:

APPLICATION OF FUNDS	YTD			Full Year forecast			Variance Analysis
	Budget	Actual	Variance	Budget	Forecast	Variance	
	£'000	£'000	£'000	£'000	£'000	£'000	
GMS/PMS Core Contract	36,531	36,663	131	43,874	43,995	121	OOH Opt outs were double counted in budget so overspend relates to GMS lines
QOF/Seniority/Other	6,028	6,116	87	7,286	7,339	52	QOF aspiration payments higher than planned
Enhanced Services	697	670	(26)	840	804	(36)	Q1-2 actuals, forecast based on actuals
Premises costs	3,960	3,876	(83)	4,754	4,628	(125)	PY benefit on premises costs
Professional fees - Disp/Prescr	3,208	2,966	(243)	3,875	3,536	(339)	Includes actuals up to M8, forecast based on PPA profile
Locum allowance/GP Retainers	235	207	(29)	297	248	(49)	PY benefit on locum costs
Primary Care Networks	4,930	4,930	(0)	6,102	6,415	313	Forecast takes into account request to draw down additional £600k above initial allocation, partially offset by py benefit
Other - Recharges	848	1,210	362	919	1,276	357	Credit contingency budget sits here and will show overspend as zero costs
Pension/Levy	0	(1)	(1)	0	0	0	
	<b>56,437</b>	<b>56,636</b>	<b>199</b>	<b>67,947</b>	<b>68,241</b>	<b>294</b>	
Funded from Programme		(1,987)		(2,594)			The allocation received was lower than plan so part funded from programme
<b>Primary Care Delegated Commissioning H1 Allocation</b>	<b>54,450</b>	<b>56,636</b>	<b>2,186</b>	<b>65,353</b>	<b>68,241</b>	<b>2,888</b>	

Other Primary Care shows an underspend of £250k at the end of M10, as summarised in the table below:

APPLICATION OF FUNDS	YTD			Full Year			Variance Analysis
	Budget	Actual	Variance	Budget	Forecast	Variance	
	£'000	£'000	£'000	£'000	£'000	£'000	
Local Enhanced Services	2,219	2,012	(207)	2,670	2,477	(193)	Underperformance on some cost and volume schemes YTD
Primary Care Contingency	(833)	0	833	(1,024)	0	1,024	
GP Forward View	2,513	1,636	(876)	3,055	1,608	(1,446)	GP+ contract value lower than plan plus under delivery on the contracted value. Forecast now includes future credits.
<b>Other Primary Care</b>	<b>3,898</b>	<b>3,648</b>	<b>(250)</b>	<b>4,700</b>	<b>4,085</b>	<b>(615)</b>	

## 3. Risks / Opportunities

Other primary care is fully offsetting the delegated overspend against budget. Ongoing risks include pending rent increases, forecast list size adjustments and locum costs.

## 4. Recommendation

The Committee is asked to note the financial performance at M10.





## PRIMARY CARE COMMISSIONING COMMITTEE

<b>Agenda Item No.</b>	<b>08</b>
<b>Reference No.</b>	<b>IESCCG PCCC 22-03</b>
<b>Date.</b>	<b>22 February 2022</b>

<b>Title</b>	<b>Care Quality Commission (CQC) Update</b>
<b>Lead Director</b>	Maddie Baker-Woods. Chief Operating Officer
<b>Author(s)</b>	Claire Pemberton, Head of Primary Care
<b>Purpose</b>	The purpose of this report is to inform the Committee about the outcomes of Care Quality Commission (CQC) inspections of Ipswich and East Suffolk GP practices and the actions which are proposed to address issues, share good practice and enable continuous improvement. The Committee is invited to review the report and to advise on any areas for action.

<b>Applicable CCG Clinical Priorities:</b>	
1. To promote self care	
2. To ensure high quality local services where possible	X
3. To improve the health of those most in need	
4. To improve health & educational attainment for children & young people	
5. To improve access to mental health services	
6. To improve outcomes for patients with diabetes to above national averages	
7. To improve care for frail elderly individuals	
8. To allow patients to die with dignity & compassion & to choose their place of death where appropriate	
9. To ensure that the CCG operates within agreed budgets	

<b>Action required by Primary Care Commissioning Committee:</b>
The Committee is invited to review the report and to advise on any areas for action.

**1. Purpose**

**1.1** The purpose of this report is to inform the Committee about Care Quality Commission (CQC) inspections of Ipswich and East Suffolk GP practices.

**2. Background**

**2.1** The CQC had put formal reviews on hold whilst the practices dealt with Covid however they are about to restart the reviews in February 2022.

**2.2** The CQC have concentrated on the practices who are at high or very high risk during Covid-19 by calling each practice and asking them a number of questions as part of the Emergency Support Framework (ESF). IESCCG do not have any practices in this category however the CCG contacted the practices to ask the questions to ensure practices felt supported and they all came back positive.

**2.3** I believe that there will be a number of visits planned as they start doing the reviews, I have alerted the practices to be ready.

### 3. Current Status

3.1 The following table demonstrates the latest outcomes for Ipswich and East practices:-

IES CCG Practices 2021	08/09/2016	14/03/2019	10/12/2019	04/04/2018	03/03/2018	08/09/2016	16/09/2016	06/06/2021	11/11/2017	17/10/2016	07/08/2016	25/11/2019	12/09/2016	03/03/2016	09/02/2016	23/11/2017	13/07/2018	18/11/2017	17/05/2019	18/02/2016	27/04/2016	10/04/2017	10/12/2017	01/03/2015	13/01/2019	04/05/2020	06/09/2021	19/07/2019	24/06/2018	14/01/2016	31/01/2016	23/09/2019	08/07/2019	02/03/2019	11/01/2018						
	Barrack Lane Medical Centre	Bildeston Health Centre	Birches Medical Centre	Burlington Road	Cardinal Surgery	Combs Ford Surgery	Constable Country	Debenham Surgery	Derby Road Surgery	Eye Health Centre	Felixstowe Road	Framfield House	Framlingham Surgery	Fressingfield Medical Centre	Grove Medical Practice	Hadleigh Medical Centre	Haven Health	Hawthorn Drive	Holbrook and Shotley	Howard House	Ixworth Surgery	Ivry Street	Leiston Surgery	Little St Johns Surgery	Martlesham Health	Mendlesham Health Centre	Needham Market Country	Orchard Street - White	Solway and Mallick	Peninsula Practice	Ravenwood Medical Centre	Saxmundham Health	Stow Health	Two Rivers Medical Centre	Wickham Market Medical						
Overall	G	G	G	G	G	G	G	G	G	G	G	G	G	G	G	G	G	G	G	G	G	G	O	G	G	G	G	G	O	G	G	G	G	G	G	G	G	G			
<b>The 5 questions CQC asked and what they found out</b>																																									
<a href="#">Are services safe?</a>																																									
<a href="#">Are services effective?</a>																																									
<a href="#">Are services caring?</a>																																									
<a href="#">Are services responsive to people's needs?</a>																																									
<a href="#">Are services well-led?</a>																																									
<b>The six population groups and what we found</b>																																									
Older people																																									
People with long term conditions																																									
Families, children and young people																																									
Working age people (inc those recently retired and students)																																									
People whose circumstances may make them vulnerable																																									
People experiencing poor mental health (inc people with dementia)																																									
<b>Key</b>	ding																																								

3.2 Overall it should be noted that Primary Care in Ipswich and East Suffolk remains good and above the national average for providing safe, high quality care for patients.

**4. Recommendation**

- 4.1 The Committee is invited to note the CQC's findings and to consider any further actions for the CCG or NHS England at this stage.