

**L & SC Integrated Care Board  
Primary Care Contracts Sub-Committee**

<b>Date of meeting</b>	3 <sup>rd</sup> July 2025
<b>Title of paper</b>	Committee Escalation and Assurance Report
<b>Presented by</b>	Peter Tinson, Director of Primary and Community Care
<b>Author</b>	Sarah Danson, Senior Delivery Assurance Manager David Armstrong, Senior Delivery Assurance Manager
<b>Agenda Item</b>	8
<b>Confidential</b>	No

### Purpose of the paper

#### Executive Summary

This report highlights key matters, issues, and risks discussed at the group meetings detailed below to advise, assure and alert the Primary Care Contracts Sub Committee.

- Primary Medical Services Group: Peter Tinson (Director of Primary and Community Care)
- Primary Dental Services Group: Amy Lepiorz (Associate Director Primary Care)
- Pharmaceutical Services Group: Amy Lepiorz (Associate Director Primary Care)
- Primary Optometric Services Group: Dawn Haworth (Head of Delivery)
- Primary Care Capital Group: Paul Juson (Head of Delivery Assurance)

Each summary report also highlights any issues or items referred or escalated to other committees or the Board. Appended to the report are the risks currently being managed by the respective groups.

Reports approved by each Group Chair are presented to Committee to provide assurance that the committees have met in accordance with their terms of reference and to advise the Committee of business transacted at their meeting.

#### Recommendations

The Primary Care Contracts Sub Committee is requested to:

- **Receive** and **note** the Alert, Assure, Advise (AAA) reports from the five delegated primary care groups

#### Governance and reporting (list other forums that have discussed this paper and any other engagement that has taken place)

Meeting	Date	Outcomes
Primary Medical Services Group	4 <sup>th</sup> June 2025	To provide oversight to the Primary Care Commissioning Committee of business conducted at the Groups during this period
Primary Dental Services Group		*no meeting in reporting period

Primary Optometric Services Group	11 <sup>th</sup> June 2025				
Pharmaceutical Services Group	18 <sup>th</sup> June 2025				
Primary Care Capital Group	11th June 2025 25 <sup>th</sup> June 2025				
Conflicts of interest identified					
Implications					
If yes, please provide a brief risk description and reference number	YES	NO	N/A	Comments	
Quality impact assessment completed			X		
Equality impact assessment completed			X		
Privacy impact assessment completed			X		
Financial impact assessment completed			X		
Associated risks	X			Any risks for the Committee’s awareness are included in the triple A report	
Are associated risks detailed on the ICS Risk Register?	X			Where applicable	
Report authorised by	Craig Harris, Chief of Strategy, Commissioning and Integration				

**ICB Primary Care Contracts Sub Committee**  
**25<sup>th</sup> June 2025**

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**Committee Escalation and Assurance Report**

## 1. Introduction

- 1.1 This report highlights key matters, issues, and risks discussed at the Service Group meetings since the last report to the Committee to advise, assure and alert the Primary Care Contracts Sub Committee.

Committee: Primary Medical Services Group	Date: 4 <sup>th</sup> June 2025	Chair: Peter Tinson
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Key Items Discussed		
Issue	Committee Update	Action
Alert		
	Nothing to Escalate	
Advise		
Complaints Escalation Process	<p>A proposed process for managing complaints escalation, aimed at addressing practices that delay responding to complaints. The process includes several steps –</p> <ul style="list-style-type: none"><li>- Contacting the practise to request a response</li><li>- Involving the Local Medical Committee (LMC) for support</li><li>- Consider potential remedial action if the practise fails to respond.</li></ul> <p>Group noted the importance of having a backstop for complaints and agreed to endorse the process with some amendments, including ensuring that the LMC is informed and involved in offering support to practises.</p> <p>The process aims to ensure timely responses to complaints and provide necessary support to practises to manage complaints effectively.</p>	
Asylum Seeker/Refugee update including Tiers 1 and 2 Specifications	<p>The Asylum Seeker/Refugee update discussed the continuation of two-tiered specifications to support asylum seekers and Afghan citizens arriving in the UK.</p> <p><b>Tier 1 Specification:</b> This applies to asylum seekers housed in hotels. The ICB can claim £150 per arrival, with £45 allocated to general practices for the initial patient registration appointment.</p> <p><b>Tier 2 Specification:</b> This is for Afghan arrivals, who often come from countries with poor healthcare systems. The ICB can claim £2600 per arrival, with £600 allocated to general practices for the initial patient check</p>	

	<p>and referrals. The remaining funds support secondary care costs.</p> <p>The specifications aim to provide necessary healthcare support and integration assistance for these populations.</p>	
SMS Funding in Primary Care (General Practices) 2025-26	<p>The ICB has allocated a budget of £1,000,000 for SMS funding in primary care for 2025/26. This budget will be distributed to general practices on a fair share's basis, with guidance provided on appropriate usage, such as appointment reminders and test results notifications.</p> <p>Practices will receive an indicative budget and fragment cost to help manage their usage.</p> <p>The ICB will work with neighbouring regions to ensure consistent management of SMS usage. Practices are expected to seek approval for additional usage if they exceed their budget.</p> <p>Further work will be done to clarify how practices can manage within their allocation and address any legal implications of exceeding their budget.</p>	
Clinical Waste Management Agent	<p>The ICB currently commissions services from a clinical waste management agent, Anenta, to handle regulatory aspects and contracts with providers like Stericycle, PHS, and FCC.</p> <p>The current six-month contract expires on September 30, 2025, and the proposal is to access the waste services managing agent framework to award a five-year contract to Anenta.</p> <p>The estimated cost for the first year is £74.8K, with a total of £401.5K over five years. This contract is essential as the ICB lacks the capacity and expertise to manage regulatory aspects of clinical waste independently.</p> <p>The Primary Medical Services Group agreed to recommend this to the primary care contract subcommittee</p>	Paper to be presented at Primary Care Sub-Contracting Committee July 2025
<b>Assure</b>		
	<b>Nothing to Escalate</b>	

**2. Summary of items or issues referred to other committees or the Board over the reporting period.**

Committee and Date	Item or Issue	Referred to
Primary Medical Services Group 4 <sup>th</sup> June 2025	Clinical Waste Management Agent	Primary Care Sub-Contracting Committee July 2025

Committee: Primary Care Dental Services Group	Date: 26 <sup>th</sup> June 2025	Chair: Amy Lepiorz
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Key Items Discussed		
Issue	Committee Update	Action
<b>Alert</b>		
	Nothing to Escalate	
<b>Advise</b>		
<b>Assure</b>		

**2. Summary of items or issues referred to other committees or the Board over the reporting period.**

Committee and Date	Item or Issue	Referred to

Committee: Primary Optometric Services Group	Date: 11 <sup>th</sup> June 2025	Chair: Dawn Haworth
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Key Items Discussed		
Issue	Committee Update	Action
<b>Alert</b>		
	Nothing to Escalate	
<b>Advise</b>		
Twins Eyecare Ltd	<p>After receiving an application for an Additional Service contract, NHSBSA advised Greater Manchester ICB (GM) of some concerns, in relation to behaviour during the initial contract visit. Colleagues in GM arranged a meeting to gain assurances prior to issuing a contract.</p> <p>The Group was requested to approve a delay issuing a contract to Twins Eyecare until a Welcome meeting has been undertaken and assurances have been sought from the contractor. This was following concerns raised by the BSA to GM ICB with regards to the contractors behaviour during contract visits.</p>	

	The Delivery Assurance Team has contracted Twins Eyecare Ltd, via email to arrange a Welcome meeting. No response has been received. The team will continue to email to arrange a Welcome meeting.	
<b>Quality in Optometry (QIO)</b>	<p>The programme of QIO visits continue. Two practices are currently providing the Delivery Assurance Team with evidence which will be reviewed prior to visit dates being agreed. Visits are in the process of being arranged</p> <p>Assurance visits are also undertaken, when there is a 100% change in directors, a significant re-fit to the practice. Visits are also undertaken when there are any issues or concerns raised.</p>	
<b>Post Payment Verification (PPV)</b>	<p>Practice identified as outliers for PPV risk-based sampling period four (4) have been released. The sampling period to be reviewed is between 1 July 2021 and 30 June 2023.</p> <p>The NW region (LSC/GM/C&amp;M) are only allocated seven practices across the regions.</p> <p>The metrics below are used to identify outliers.</p> <ul style="list-style-type: none"> <li>- High number of tests with an early retest code (aged 16-69)</li> <li>- High number of GOS3 vouchers issued in relation to an early retest code</li> <li>- High number of GOS3 to GOS1 or GOS6 (during the normal interval period)</li> <li>- High % of tints and prism in relation to total GOS3</li> <li>- High volume of GOS4 claims submitted with small time lapses between GOS3 &amp; GOS 4 (children)</li> </ul>	
<b>Complaints Annual Submission</b>	Further to issuing Breach notices to eight (8) contractors. Two practices have contacted the Delivery Assurance Team to discuss. One practice is in the process of providing evidence of submission of their annual complaints. One practice advised due to outside factors beyond their control both submission windows were missed.	

	NHSBSA have advised that the 2024 to 2025 Complaints Survey will be opening on the 28 April 2025 and will close on 6 June 2025.	
<b>PCSE Claims retained in system</b>	<p>The Delivery Assurance Team have received retained in the system claims for February, March and April.</p> <p>The affected practices will be emailed with details of the claims, requesting they validate the information and complete the return confirmation slips. A deadline date for completion and return will be provided.</p> <p>The Delivery Assurance Team will again be requesting Pennine Lancs and Lancashire and Morecambe Bay LOC's offer support in encouraging practices to respond.</p>	
<b>Special Schools</b>	<p>The Delivery Assurance Team along with colleagues in Greater Manchester and Cheshire and Mersey have been contacted by the Northeast Commissioning Support Unit (NECS) in relation to procurement of the service across the Northwest Region.</p> <p>An initial meeting has been held with NECS, and work has started on the development of a Request for Information (RFI) to understand the interest in the services from providers.</p> <p>Internally a project group is being formed and meeting arranged. A paper is being developed in relation to securing the funding for the service.</p>	
<b>Homeless Service</b>	<p>During the financial year 2024 – 2025 LSC Homeless providers have visited</p> <p>17 different shelters and provided 245 eye tests in the following shelters.</p> <p>5 shelters had only one or two episodes delivered in the whole year.</p> <p>Service users:</p> <ul style="list-style-type: none"> <li>- 72.5% Male</li> <li>- 27.5% Female</li> </ul>	
<b>Assure</b>		

2. Summary of items or issues referred to other committees or the Board over the reporting period.

Committee and Date	Item or Issue	Referred to

Committee: Pharmaceutical Services Group	Date: 18 <sup>th</sup> June 2025	Chair: Paul Juson
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Key Items Discussed		
Issue	Committee Update	Action
<b>Alert</b>		
<b>Unforeseen Benefits – Acquiring UK Services Limited</b>	Acquiring UK Services Limited haven't met the requirements sufficiently. The Group therefore rejected the application. Appeal rights are to be circulated to the applicant.	
<b>Redetermination Following Appeal – NMS-PPV FAW42</b>	During the appeal the Contractor provided insufficient information to NHS Resolution and the BSA and therefore their appeal was deemed as invalid.  The Group agreed to approve the request to reclaim any payments as per the recommendation.	
<b>Core Hours – Rosegrove Pharmacy FFL68</b>	Pharmacy requested the redistribution of their core hours to enable them to maintain their core hours obligation.  The Group agreed to grant the recommendation to redistribute core hours but to push back the date for another two weeks from today	
<b>Advise</b>		
	<b>Nothing to Escalate</b>	
<b>Assure</b>		
	<b>Nothing to Escalate</b>	

2. Summary of items or issues referred to other committees or the Board over the reporting period.

Committee and Date	Item or Issue	Referred to

Committee: Primary Care Capital Group	Date: 11 June 2025	Chair: Paul Juson
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Key Items Discussed
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Issue	Committee update	Action
<b>Alert</b>		
<b>General Practice – Notional Rent revaluations.</b>	<p>The group reviewed the District Valuation Offices' tri-annual reports for notional rents for a number of practices. All revaluations are reported in line with the Premises Cost Directions (2013 or 2024).</p> <p>The group approved all notional rent reviews recommended by the District Valuation Office in line with all approved occupancy information, except for the additional increase for the practice above.</p>	Issue documentation to practices notifying and requesting acceptance of the revised values
<b>Advise</b>		
<b>Improvement Grant Applications.</b>	<p>The group undertook a review of a grant application under the Utilisation and Modernisation Fund programme (UMF).</p> <p>The application submitted was in full compliance with the premises cost directions 2024 and the criteria required to access the UMF capital resources. The application provided a full and thorough justification for the grant investment, and were supported with drawings and a minimum of 3 commercial quotations to assure value for money.</p> <p>The application is to refurbish and reconfigure the premises, to provide more adaptable and multi-functional clinical rooms to improve the general standards but more importantly to expend the clinical capacity of the practice. The scheme will not incur any additional revenue costs for the ICB.</p> <p>The group approved the awarding of the grant, and will progress through the NHS England UMF programme.</p>	The ICB CFO will be requested to sign the PID / Grant Application form, to be sent to NHSE NW to progress through the NHSE governance for the UMF programme.
<b>Assure</b>		
<b>None</b>		

<b>Committee: Primary Care Capital Group</b>	<b>Date: 25 June 2025</b>	<b>Chair: Paul Juson</b>
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<b>Key Items Discussed</b>		
Issue	Committee update	Action
<b>Alert</b>		
<b>Advise</b>		
<b>Improvement Grant Applications.</b>	The group undertook a review of 12 grant applications under the Utilisation and Modernisation Fund programme (UMF), as the NHSE NW deadline for submission of PID is set at 30 <sup>th</sup> June 2025.	The ICB CFO will be requested to sign the fully documented PIDs to be sent to NHSE NW to progress through the NHSE

	<p>Applications for two sites were confirmed as fully compliant with the UMF criteria and the premises cost directions 2024, and as such are recommended for a grant</p> <p>All other applications required further documents to be provided to support the applications in order to be fully compliant with guidance regarding grants. All outstanding documentation is to be requested and provided by the end of August to allow time for full implementation and completion within the programme deadlines.</p> <p>The group approved the awarding of the two grants, approved in principle all other, and will progress through the NHS England UMF programme.</p>	governance for the UMF programme. The remaining PIDs to be confirmed to NHSE NW as approved in principle pending documentation.
<b>Assure</b>		
<b>None</b>		

## 2. Conclusion

- 2.1 Each of the service groups has concluded their business in line with their terms of reference.
- 2.2 A copy of the associated risk registers can be found in appendix one.

## 3. Recommendations

- 3.1 The Primary Care Commissioning Committee is requested to:
  - Receive and note the Alert, Assure and Advise (AAA) reports and risk register from the five delegated primary care groups.

**Sarah Danson and David Armstrong**  
**Senior Delivery Assurance Managers**

**June 2025**