

ICB Primary Care Commissioning Committee

Date of meeting	20 July 2023
Title of paper	Delegated Services Assurance Framework
Presented by	Amy Lepiorz, Associate Director Primary Care
Author	Amy Lepiorz, Associate Director Primary Care
Agenda item	2.2
Confidential	No

Purpose of the paper

This paper provides the Primary Care Commissioning Committee with completed assurance frameworks for the four delegated primary care services for the period April 2023 to June 2023. This is in line with the local approach to ensuring compliance with the assurance requirements NHS England will expect from the ICB in relation to the commissioning of delegated primary care services. This local approach was discussed and approved at the June meeting of the Primary Care Commissioning Committee.

Executive summary

The ICB holds a Delegation Agreement with NHS England which requires the ICB to make primary care commissioning decisions in line with relevant legislation, national policy and agreed processes. NHS England has published an assurance framework which focuses on the responsibilities that have been delegated to the ICB. The ICB will be required to complete a retrospective annual self-declaration to confirm compliance. To support ICBs in the completion of the return, NHS England have developed a suite of proposed evidence which can be gathered to provide assurance against each domain. The four domains, associated assurance questions and suggested evidence have been collated into a local delegated services assurance framework. This paper contains completed assurance frameworks for each of the four delegated primary care services for the period April 2023 – June 2023. The frameworks have been completed by the lead managers for the four delegated primary care services with the Delivery and Assurance team. The completion of frameworks has been informed by discussions in the four delegated service groups.

Recommendations

The Primary Care Commissioning Committee is requested to:

1. Approve the completed assurance frameworks for the four delegated primary care service groups for the period April 2023-June 2023

Governance and reporting

Meeting	Date	Outcomes
Primary Medical Services Group	15 th June 2023	Approved return for submission to Primary Care Commissioning Committee
Primary Dental Services Group	29 th June 2023	Approved return for submission to Primary Care Commissioning Committee

Primary Optometric Services Group	26 th June 2023	Approved return for submission to Primary Care Commissioning Committee		
Pharmaceutical Services Group	21 st June 2023	Approved return for submission to Primary Care Commissioning Committee		
Conflicts of interest identified				
No identified conflicts				
Implications				
<i>If yes, please provide a brief risk description and reference number</i>	Yes	No	N/A	Comments
Quality impact assessment completed			X	
Equality impact assessment completed			X	
Data privacy impact assessment completed			X	
Financial impact assessment completed			X	
Associated risks			X	
Are associated risks detailed on the ICB Risk Register?			X	

Report authorised by:	Craig Harris Chief of Strategy Commissioning and Integration
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ICB Primary Care Commissioning Committee

Delegated Services Assurance Framework

1. Introduction

- 1.1 This paper provides the Primary Care Commissioning Committee with completed assurance frameworks for the four delegated primary care services for the period April 2023 to June 2023.
- 1.2 This is in line with the local approach to ensuring compliance with the assurance requirements NHS England will expect from the ICB in relation to the commissioning of delegated primary care services. This local approach was discussed and approved at the June meeting of the Primary Care Commissioning Committee.

2. Background

- 2.1 The ICB has delegated responsibility from NHS England for the commissioning of primary care services. These are:
 - Primary Medical Care Services (GP practices)
 - Primary Dental and Prescribed Dental Services (Dental practices)
 - Primary Ophthalmic Services (Optometry practices)
 - Pharmaceutical Services and Local Pharmaceutical Services (Pharmacies)
- 2.2 The ICB holds a Delegation Agreement with NHS England which requires the ICB to make primary care commissioning decisions in line with relevant legislation, national policy and agreed processes.
- 2.3 NHS England has published an assurance framework which focuses on the responsibilities that have been delegated to the ICB, structured around four domains:
 - Compliance with mandated guidance issued by NHS England
 - Service provision and planning
 - Contracting
 - Contractor/provider compliance and performance
- 2.4 The ICB will be required to complete a retrospective annual self-declaration to confirm compliance with the four domains. A copy of the return can be found in **Appendix One**. The ICB is required to have internal audit processes in place and to submit the return to NHS England on an annual basis. Mersey Internal Audit Agency will also be undertaking a review of the ICB's arrangements for delegated services within the financial year.
- 2.5 To support ICBs in the completion of the return, NHS England have developed a suite of proposed evidence which can be gathered to provide assurance against each domain. This evidence will not be routinely requested by NHS England but should be available if required.

3. Delegated Services Assurance Framework

- 3.1 The four domains, associated assurance questions and suggested evidence have been collated into a local delegated services assurance framework.
- 3.2 The relevant groups for each of the delegated primary care services have completed their section of the assurance framework for the period April 2023 – June 2023, based on the activity that took place during that quarter. The sections have been reviewed by the Associate Director for Primary Care to ensure consistency in approach before combining into one document which is attached as **Appendix Two**
- 3.3 The framework uses a RAG rating with the following key:
- Green- compliant
 - Amber- complaint with some risks identified
 - Red- non-compliant

4. Recommendations

- 4.1 The Primary Care Commissioning Committee is requested to:
1. Approve the completed assurance frameworks for the four delegated primary care services for the period April 2023-June 2023

Amy Lepiorz

June 2023

Appendix One- NHS England Assurance Framework

ICB Assurance Framework

Delegated Primary Care Functions - Self-certification

For each question, please rate your response following the key provided below. Full details of what assurance is required for each domain is set out in Table 1 of the Framework.

Red	Non-compliant
Amber	Compliant but some risks identified
Green	Fully compliant

ICB Name	
Year to which certification applies	

General		
	R/A/G Rating	Comments
Compliance with the Delegation Agreement Has the ICB complied with the terms and associated responsibilities and measures required to ensure the effective and efficient exercise of the Delegated Functions?		If Red or Amber, please provide further details
Governance structures Does the ICB have the appropriate governance structures for the delegated functions in place to enable the commissioning and delivery of high quality care		
Pharmaceutical Services		
	R/A/G Rating	Comments
Compliance with mandated Guidance issued by NHS England Has the ICB understood and complied with all nationally set operating procedures and policies (e.g. the Pharmacy Manual)?		
		If Red or Amber, please provide further details
Service provision and planning		

Has the ICB been actively involved with all Pharmaceutical Needs Assessments (PNA) in their area, as undertaken by HWBs in year?		If Red or Amber, please provide further details
Has the ICB assured itself that there are no material gaps (as defined by the PNA) in pharmaceutical provision and has it taken action to address any gaps identified?		If Red or Amber, please provide further details
Can the ICB confirm that all payments made to community pharmacy contractors, dispensing appliance contractors and dispensing doctors are as outlined in the Drug Tariff, in line with usual NHS Business Services Authority (NHSBSA) custom and practice or are made within other formal contractual routes (e.g. Local Pharmaceutical Services contracts or NHS Standard Contract)?		If Red or Amber, please provide further details
Can the ICB confirm that all contracts put in place for local enhanced services are in line with <u>The Pharmaceutical Services (Advanced and Enhanced Services) (England) Directions 2013?</u>		If Red or Amber, please provide further details
Has the ICB obtained written consent of NHS England prior to making any new LPS schemes?		If Red or Amber, please provide further details
Can the ICB confirm that all applications for the Pharmaceutical List received by the ICB related to community pharmacy contractors, dispensing appliance contractors and dispensing doctors have been decided within their regulatory timescales? Reasons should be provided where this is not the case.		If Red or Amber, please provide further details
Contractor/ Provider compliance and performance		
Can the ICB confirm that it has the necessary processes in place to comply with all guidance/regulations for contractor compliance and has taken appropriate action where necessary.		If Red or Amber, please provide further details
Can the ICB confirm that contractors have completed the Community Pharmacy Assurance Framework (CPAF) and it has		If Red or Amber, please provide further details

taken appropriate action where this is not the case?		
Primary Ophthalmic Services		
	R/A/G Rating	Comments
Compliance with mandated Guidance issued by NHS England		
Has the ICB understood and complied with all nationally set operating procedures and policies (e.g. the Eye Health Policy Book)?		If Red or Amber, please provide further details
Service provision and planning		
Can the ICB confirm that it has the necessary processes in place to plan and manage service provision.		If Red or Amber, please provide further details
Contracting		
Can the ICB confirm that it is managing the processes involved for new, varied and terminated contracts effectively and efficiently.		If Red or Amber, please provide further details
Contractor/ Provider compliance and performance		
Can the ICB confirm that it has the necessary processes in place to comply with all guidance/regulations for contractor compliance and has taken appropriate action where necessary.		If Red or Amber, please provide further details
Dental Services		
	R/A/G Rating	Comments
Compliance with mandated Guidance issued by NHS England		
Has the ICB understood and complied with all nationally set operating procedures and policies (e.g. the Policy Book for Primary Dental Services)?		If Red or Amber, please provide further details
Service provision and planning		
Can the ICB confirm that it has the necessary processes in place to plan and manage service provision.		If Red or Amber, please provide further details
Contracting		

Can the ICB confirm that it is managing the processes involved for new, varied and terminated contracts effectively and efficiently.		If Red or Amber, please provide further details
Does the ICB have local process mechanisms in place for the collection of data relating to decisions on Discretionary Payments or Support?		If Red or Amber, please provide further details
Contractor/ Provider compliance and performance		
Can the ICB confirm that it has the necessary processes in place to comply with all guidance/regulations for contractor compliance and has taken appropriate action where necessary.		If Red or Amber, please provide further details
Primary Medical Services		
	R/A/G Rating	
Compliance with mandated Guidance issued by NHS England		
Has the ICB understood and complied with all nationally set operating procedures and policies (e.g. the Primary Medical Care Policy and Guidance Manual?		If Red or Amber, please provide further details
Service provision and planning		
Can the ICB confirm that it has the necessary processes in place to plan and manage service provision		If Red or Amber, please provide further details
Contracting		
Does the ICB have local process mechanisms in place for the collection of data relating to decisions on Discretionary Payments or Support?		If Red or Amber, please provide further details
Does the ICB have processes to implement Premises Costs Directions Functions?		If Red or Amber, please provide further details
Contractor/ Provider compliance and performance		
Has the ICB got the appropriate systems and processes in place to manage quality and performance of providers? Has the ICB taken appropriate action where necessary.		If Red or Amber, please provide further details

Appendix Two- Delegated Services Assurance Framework

	Assessment				
General	Q1	Q2	Q3	Q4	Evidence/Comments/File pathway
Compliance with the Delegation Agreement					
Has the ICB complied with the terms and associated responsibilities and measures required to ensure the effective and efficient exercise of the Delegated Functions?	G				All processes followed in quarter one have been in line with national policy
Governance structures					
Does the ICB have the appropriate governance structures for the delegated functions in place to enable the commissioning and delivery of high-quality care	G				Primary care governance structure in place with associated terms of reference

	Assessment				
Dental	Q1	Q2	Q3	Q4	Evidence/Comments/File pathways
Compliance with mandated guidance issued by NHS England					
Has the ICB understood and complied with all nationally set operating procedures and policies (e.g. the Policy Book for Primary Dental Services)?	G				
<i>Number of risks and issues managed by the group?</i>	9				There are 9 issues included on the dental issues log which is reviewed on a monthly basis at the ICB's Primary Care Commissioning Dental Services Group
<i>Number of risks and issues escalated?</i>	1				Patients unable to access routine dental care has been escalated to the ICB's Risk Register. A Lancashire and South Cumbria wide review is

					currently being developed to support an integrated approach to increasing access
Service provision and planning					
Can the ICB confirm that it has the necessary processes in place to plan and manage service provision.	A				
<i>Mapping tool in place, highlighting access rates</i>	Under Development				Dental 'dashboard' is under development to share access metrics across the Lancashire and South Cumbria
<i>Number of new contracts awarded</i>	0				
<i>Number of Oral Health Needs Assessments undertaken</i>	0				
<i>Number of relocation/practice merger requests which include patient engagement</i>	0				
<i>Number of non-recurrent contracts awarded</i>	9				The ICB has 3 commissioned pathways to support patients who require: - Pathway 1: urgent care Pathway 2: follow up treatment to finalise an urgent intervention Pathway 3: comprehensive care for patients where their oral health impacts on wider health or where there is a significant risk of oral health deterioration (priority groups) 1 Pathway 1 provider and 8 Pathway 2 providers were commissioned in Q1
<i>Has there been a review of waiting lists, i.e. Minor Oral Surgery and General Anaesthesia</i>	No				This will be undertaken on a quarterly basis, next one due in July 2023
Contracting					

Can the ICB confirm that it is managing the processes involved for new, varied and terminated contracts effectively and efficiently.	G				
<i>Number of contracts where activity levels have been reviewed</i>	12				Dental access and contract performance is routinely reviewed on a quarterly basis and any issues reported to the Dental Services Group
<i>Total number of contracts held</i>	246				
<i>Value of contract handbacks</i>	£945,688				£887,776.24 recurrent handbacks in Q1, 2 equate to practice closures, 3 equate to partial handbacks £57,911.61 non recurrent handbacks in Q1 from 4 contracts
<i>Value of contract handbacks re-invested</i>	£245,550				<p>The ICB has 3 commissioned pathways to support patients who require: -</p> <p>Pathway 1: urgent care</p> <p>Pathway 2: follow up treatment to finalise an urgent intervention</p> <p>Pathway 3: comprehensive care for patients where their oral health impacts on wider health or where there is a significant risk of oral health deterioration (priority groups)</p> <p>1 x Pathway 1 provider and 8 x Pathway 2 providers were commissioned in Q1.</p> <p>Plans are in place to invest uncommitted resources budgeted from hand backs</p>
<i>Commissioned Units of Dental Activity level</i>	2,546,509				
<i>Commissioned Units of Orthodontic Activity (UOA) level</i>	164,221				
<i>Number of flexible commissioned schemes in place</i>	2				Enhanced Paediatric Care and Blackpool Together Scheme

<i>Number of providers that have received Discretionary Payments or Support</i>	0				
<i>Number of contractual discussions around Units of Dental Activity underperformance</i>	0				
<i>Number of breach notices issued for under performance</i>	0				
<i>Number of non-recurrent reductions of Units of Dental Activity</i>	1,870				
<i>Number of recurrent reductions of Units of Dental Activity</i>	30,107				
Does the ICB have local process mechanisms in place for the collection of data relating to decisions on Discretionary Payments or Support?	N/A				The ICB has not made any discretionary payment or support to date.
Contractor/provider compliance and performance					
Can the ICB confirm that it has the necessary processes in place to comply with all guidance/regulations for contractor compliance and has taken appropriate action where necessary.	G				
<i>Number of remedial/breach notices/satisfaction letters issued</i>	0				
<i>Number of contractors where NHS Business Services Authority have raised concerns</i>	0				
<i>Number of complaints shared with CQC</i>	0				
<i>Number of Care Quality Commission inspection with compliance concerns</i>	0				

<i>Number of contracts where activity is below 30% at mid-year</i>	N/A				The mid-year review process does not take place until Q3
<i>Number of contracts where activity is below 30% at mid-year</i>	N/A				The mid-year review process does not take place until Q3
<i>Value of discretionary payments issued</i>	0				

	Assessment				
Pharmaceutical	Q1	Q2	Q3	Q4	Evidence/Comments/File pathway
Compliance with mandated guidance issued by NHS England					
Has the ICB understood and complied with all nationally set operating procedures and policies (e.g. the Pharmacy Manual)?	G				The ICB has adopted processes to follow guidance detailed in the NHS England Pharmacy Manual 2023.
<i>Number of risks and issues managed by the sub-group?</i>	9				There are 9 risks/ issues identified for management by the group. The issues log is being reviewed.
<i>Number of risks and issues escalated?</i>	0				No risks have been escalated
Service provision and planning					
Has the ICB been actively involved with all Pharmaceutical Needs Assessments (PNA) in their area, as undertaken by Health and Wellbeing Boards (HWBs) in year?	G				Pharmaceutical needs assessment - Lancashire County Council Cumbria PNA 2022
<i>List of PNAs engaged with</i>	N/A				Lancashire County Council, Blackburn with Darwen Council, Blackpool Council and Cumbria
Has the ICB assured itself that there are no material gaps (as defined by the PNA) in pharmaceutical provision and has it taken action to address any gaps identified?	G				The Delivery Assurance team link with each Health and Wellbeing Board as stakeholders involved in the production of the PNA Work is ongoing within the Delivery and Assurance Team to map closures and opening hours and if required develop local hours plans.
<i>Number of market entry applications received</i>	0				

<i>Number of market exit notifications received</i>	1				
Can the ICB confirm that all payments made to community pharmacy contractors, dispensing appliance contractors and dispensing doctors are as outlined in the Drug Tariff, in line with usual NHSBSA custom and practice or are made within other formal contractual routes (e.g. LPS contracts or NHS Standard Contract)?	G				Payment processes are in place to ensure all contractors are paid in line with NHSBSA custom and practice.
Can the ICB confirm that all contracts put in place for local enhanced services are in line with The Pharmaceutical Services (Advanced and Enhanced Services) (England) Directions 2013?	G				All contracts use the NHS standard contract template
<i>Number of enhanced services commissioned</i>	6				
Has the ICB obtained written consent of NHS England prior to making any new LPS schemes?	G				No new LPS schemes have been commissioned
<i>Number of new LPS schemes approved</i>	0				
<i>Number of Fitness to Practice (FtP) decisions made for LPS superintendents</i>	0				
Can the ICB confirm that all applications for the Pharmaceutical List received by the ICB related to community pharmacy contractors, dispensing appliance contractors and dispensing doctors have been decided within their regulatory timescales? Reasons should be provided where this is not the case.	G				The ICB has adopted processes to follow guidance detailed in the NHS England Pharmacy Manual.
<i>Number of applications not processed within the regulatory timescale</i>	0				
<i>Number of appeals decisions upheld</i>	0				

<i>Number of appeals decisions overturned</i>	0				
Contractor/provider compliance and performance					
Can the ICB confirm that it has the necessary processes in place to comply with all guidance/regulations for contractor compliance and has taken appropriate action where necessary.	G				The ICB has adopted processes to follow guidance detailed in the NHS England Pharmacy Manual
<i>Number of Community Pharmacy Assurance Framework (CPAF) visits undertaken (1-3% of contractors to be visited per year)</i>	9				
<i>Number of new pharmacies/change of ownerships that received Community Pharmacy Assurance Framework (CPAF) visit in first 12 months of opening</i>	0				
Can the ICB confirm that contractors have completed the Community Pharmacy Assurance Framework (CPAF) and it has taken appropriate action where this is not the case?	G				The ICB has adopted processes to follow guidance detailed in the NHS England Pharmacy Manual. Where contractors have not completed the CPAF questionnaire, CPAF visits are planned.
<i>Number of pharmacies where action has been taken due to non-compliance</i>	2				
<i>Number of unscheduled closures</i>	31				
<i>Number of contractual sanctions issued</i>	0				

	Assessment				
Ophthalmic	Q1	Q2	Q3	Q4	Evidence/Comments/File pathways
Compliance with mandated guidance issued by NHS England					
Has the ICB understood and complied with all nationally set operating procedures and policies (e.g. the Eye Health Policy Book)?	G				The ICB has processes in place to follow the requirements of the Eye Health Policy Book and national guidance and regulations.
<i>Number of risks and issues managed by the sub-group?</i>	4				Four risks are currently included on risk register for review
<i>Number of risks and issues escalated?</i>	0				Currently no issues requiring escalation
Service provision and planning					
Can the ICB confirm that it has the necessary processes in place to plan and manage service provision.	G				The ICB has processes in place to follow guidance outlined in the NHS England Eye Health Policy Book. Quality visits, remedial and breach notices, processing new applications, disputes, contractual issues and more are outlined in the guidance to manage the provision of services.
<i>Number of needs assessments undertaken</i>					No assessments have been undertaken to date
<i>Number of new contracts</i>	3				Additional Services contract - LSC Mandatory Services contract - Fleetwood Mandatory Services contract in Lytham St Annes
<i>Number of contract closures</i>	4				Additional Services contract - LSC Mandatory Services contract in Colne Mandatory Services contract in Lytham St Annes LSC - Terminated a Mandatory Services contract in line with contractual requirements - Briercliffe
<i>Number of enhanced services in place</i>					

<i>Number of patient access concerns</i>	0				
Contracting					
Can the ICB confirm that it is managing the processes involved for new, varied and terminated contracts effectively and efficiently.	G				Business Services Authority (BSA) undertake checks in line with Regulation/Eye Health Policy. LSC team counter check all documentation prior to contract or CV being issued.
<i>Number of contract variations issued</i>	3				2 x change in banking details 1 x authorised signatures 1 x Change Company name/change address/change registered office
Contractor/provider compliance and performance					
Can the ICB confirm that it has the necessary processes in place to comply with all guidance/regulations for contractor compliance and has taken appropriate action where necessary.	G				Business Services Authority (BSA) undertake PPV on behalf of the ICB. ICB can request PPV where concerns are raised. QIO undertaken by ICB, process enable compliance issues to be identified.
<i>Number of Post Payment Verification samples undertaken</i>	0				No LSC contractors have been identified for PPV during this quarter
<i>% of contractors undertaking Quality in Optometry</i>	3				2 x Mandatory services contracts 1 x Additional services contracts No concerns identified
<i>Number of complaints received</i>	27				Business Services Authority (BSA) request information on annual basis. This process is currently being undertaken. To date data indicated 27 complaints. LSC have 55 contractors that have not responded

<i>Number of remedial/breach notices/satisfaction letters issued</i>	0				
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	Assessment				
Medical	Q1	Q2	Q3	Q4	Evidence/Comments/File pathways
Compliance with mandated guidance issued by NHS England					
Has the ICB understood and complied with all nationally set operating procedures and policies (e.g. the Primary Medical Care Policy and Guidance Manual)?	G				The ICB has adopted processes to follow guidance detailed in the NHS England Policy & Guidance Manual, The National Health Service (General Medical Services Contracts and Personal Medical Services Agreements) Regulations 2021
<i>Number of risks and issues managed by the sub-group?</i>	17				Risk and issues log has been collated for the Medical Group for review
<i>Number of risks and issues escalated?</i>	0				No risks have been escalated to date for inclusion onto the corporate ICB risk register
Service provision and planning					
Can the ICB confirm that it has the necessary processes in place to plan and manage service provision	G				The ICB has in place processes to follow guidance outlined in the NHS England Policy and Guidance Manual for list dispersals, contract mergers, contract awards and new and varied commissioning arrangements. Processes in place to commission services (e.g. Local Incentive Schemes)
<i>Number of LIS commissioned</i>	35				Qtr1 - rolled over from previous organisations
<i>Number of list closures</i>	0				One application for a list closure within the quarter but this was not approved.
<i>Number of patient list dispersals</i>	2				Old Links Surgery, Leyland Liverpool House Surgery, Barrow-in-Furness
<i>Number of times legal advice was sought</i>	1				Qtr1 - linked to an agreed incorporation
<i>Number of live procurements</i>	2				
Contracting					

Does the ICB have local process mechanisms in place for the collection of data relating to decisions on Discretionary Payments or Support?	G				Any applications for discretionary payments and support will be approved via the Medical Group. No approvals for discretionary support and funding have been approved for Q1
<i>Number of providers that have received Discretionary Payments or Support</i>	0				
Does the ICB have processes to implement Premises Costs Directions Functions?	G				The ICB currently commissions a service from the Midlands and Lancashire CSU to implement the Premises Costs Directions Functions.
Contractor/provider compliance and performance					
Has the ICB got the appropriate systems and processes in place to manage quality and performance of providers? Has the ICB taken appropriate action where necessary.	G				Processes being implemented to review quality and performance of providers including the implementation of dashboards and escalation processes where contractual action needs to be considered
<i>Number of remedial/breach notices/satisfaction letters issued</i>	0				
<i>Number of Care Quality Commission (CQC) inspections and ratings</i>	0				CQC visits currently on hold so there have been no visits/ratings issued in in Q1.