

## ICB Primary Care Commissioning Committee

<b>Date of meeting</b>	13 February 2025
<b>Title of paper</b>	Primary Care Commissioning Committee Groups Decision Making Matrix - Review
<b>Presented by</b>	Peter Tinson, Director of Primary and Community Care
<b>Author</b>	Paul Juson, Head of Delivery Assurance
<b>Agenda item</b>	9
<b>Confidential</b>	No

### Executive summary

The ICB holds over 1,000 core primary care contracts, resulting in the need to make a significant number of contractual decisions.

The contractual requirements for all four primary care contractor groups are underpinned by national legislation and contractual frameworks. In addition, NHS England publishes policy books to support commissioners in the interpretation of the legislation and to ensure consistency in approach to contractual and commissioning decisions.

In accordance with the legislation, national contract models and policy books, the types of decisions that need to be made can be roughly split into three types - those where the commissioner has no discretion if due process has been followed; those where the commissioner has a degree of discretion but there is a clear policy to be followed (local or national); those where the commissioner has more flexibility in its decision making. A decision-making matrix was developed based on these principles to support the groups in safely and effectively discharging its duties. The decision-making matrix was approved by the Primary Care Commissioning Committee (PCCC) in May 2024.

The decision making matrix has been reviewed by a working group to ensure it enables the PCCC to focus on its strategic assurance responsibilities and its supporting groups to make operational decisions.

The proposed updated matrix is enclosed for PCCC consideration.

### Advise, Assure or Alert

#### Advise the committee

- That a review of the decision making matrix has taken place for all five committee groups.

### Recommendations

The Primary Care Commissioning Committee is asked to:

- Approve the proposed updated decision making matrix.

Which Strategic Objective/s does the report contribute to		Tick
1	Improve quality, including safety, clinical outcomes, and patient experience	
2	To equalise opportunities and clinical outcomes across the area	
3	Make working in Lancashire and South Cumbria an attractive and desirable option for existing and potential employees	
4	Meet financial targets and deliver improved productivity	✓
5	Meet national and locally determined performance standards and targets	✓
6	To develop and implement ambitious, deliverable strategies	

### Implications

	Yes	No	N/A	Comments
Associated risks		✓		
Are associated risks detailed on the ICB Risk Register?		✓		
Financial Implications		✓		

### Where paper has been discussed (list other committees/forums that have discussed this paper)

Meeting	Date	Outcomes
Primary care senior management team working group	31 <sup>st</sup> January 2025	Proposed updated decision making matrix

### Conflicts of interest associated with this report

Not applicable

### Impact assessments

	Yes	No	N/A	Comments
Quality impact assessment completed			✓	
Equality impact assessment completed			✓	
Data privacy impact assessment completed			✓	

### Report authorised by:

Craig Harris, Chief Operating Officer & Chief Commissioner

# ICB Primary Care Commissioning Committee

## 13 February 2025

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### Primary Care Commissioning Committee Groups Decision-Making Matrix

#### 1. Introduction (headings and text should be in Arial 12 point)

- 1.1 This paper is seeking the Primary Care Commissioning Committee's approval for the revision of the decision-making matrix used by the groups that support the committee to safely and effectively discharge its duties.
- 1.2 There are five groups, one for each primary care provider group and one for capital investments:
  - Primary Medical Services Group
  - Primary Dental Services Group
  - Pharmaceutical Services Group
  - Primary Optometric Services Group
  - Capital Group

#### 2. Background

- 2.1 The ICB holds over 1,000 core primary care contracts, resulting in the need to make a significant number of contractual decisions.
- 2.2 The contractual requirements for all four contractor groups are underpinned by national legislation and contractual frameworks. In addition, NHS England publishes policy books to support commissioners in the interpretation of the legislation and to ensure consistency in approach to contractual and commissioning decisions.
- 2.3 The ICB is also responsible for making decisions on capital investment in line with national legislation. This funding is primarily aimed at general practice and decisions on capital spend can often have contractual impacts and vice versa.
- 2.4 As result of the legislation, national contract models and policy books the types of decisions that need to be made can be roughly split into three types - those where the commissioner has no discretion if due process has been followed; those where the commissioner has a degree of discretion but there is a clear policy to be followed (local or national); those where the commissioner has more flexibility in its decision making.

#### 3. Decision Making Matrix

- 3.1 A decision-making matrix was developed based on these principles to support the groups in safely and effectively discharging its duties. The decision-making matrix was approved by the Primary Care Commissioning Committee (PCCC) in May 2024.
- 3.2 The decision making matrix has been reviewed by a working group to ensure it enables the PCCC to focus on its strategic assurance responsibilities and its supporting groups to make operational decisions.

- 3.3 This review included consideration of the PCCC agenda items for the past 12 months.
- 3.4 The proposed updated matrix is enclosed for consideration (changes are identified in red text).

#### **4. Recommendations**

- 4.1 The Primary Care Commissioning Committee is asked to:
  - Approve the proposed updated decision making matrix

**Paul Juson**

**4<sup>th</sup> February 2025**