

**Agenda Item 11**

Report to: Primary Care Commissioning Committee

Date of Meeting: 4th February 2020

Subject: NHS England Update Report

Presented by: Erica Ellerington, Primary Care Contracts Manager, NHS England

**STATUS OF THE REPORT *(auto check relevant box****)*

For Information [x]

For Discussion [ ]

For Approval / Ratification [x]

Report Exempt from Public Disclosure [x]  No [ ]  Yes

|  |  |
| --- | --- |
| **PURPOSE OF REPORT:** | This report will update the Committee on various functions of Primary Care to include ;1. Contract Changes
2. Online Consulting Update
3. Locum Cover/GP Performer Payments APMS
 |
| **Recommendations:** | The Committee are asked to review and discuss the information presented and make a decision on the following;1. Support the contract variation in relation to APMS payments
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| **Committee Process and Assurance:** | The Humber Coast and Vale Primary Care Leads discussed this issue and agreed it should be taken to respective Primary Care Commissioning Committees for decision. |
| ***Implications:*** |  |
| **Risk Assurance Framework Implications:** | NHS England’s primary care team oversee requests for contractual changes. All changes are processed in line with regulatory requirements.The Humber Coast and Vale Primary Care Programme Board oversee and manage funding flows approval. |
| **Legal Implications:** | All legal implications for contractual changes are considered on receipt by NHS England and dealt with accordingly. |
| **Data Protection Impact Assessment implications (DPIA):** | Are you implementing a new system, data sharing arrangement, project, service redesign or changing the way you work? | **No** |
| If yes to the above – have the DPIA screening questions been completed? | Choose an item. |
| Does this project involve the processing of personally identifiable or other high risk data? | Choose an item. |
| If yes to the above has a DPIA been completed and approved? | Choose an item. |
| **Equality Impact Assessment implications:** | An Equality Impact Analysis/Assessment is not required for this report [x] An Equality Impact Analysis/Assessment has been completed and approved by the EIA Panel. As a result of performing the analysis/assessment there are no actions arising [ ]  from the analysis/assessmentAn Equality Impact Analysis/Assessment has been completed and there are actions arising [ ]  from the analysis/assessment and these are included in section \_\_\_\_ of the enclosed report |
| **Finance Implications:** | In relation to the GP Retention Scheme, the CCG will ned to consider the financial implications when approval requests to join the scheme. |
| **Quality Implications:** |  This report details a positive impact on quality. [x] The proposal put forwards, if agreed, would have a positive impact in terms of enabling providers to meet safe staffing targets. Retention and recruitment is forecast to be improved, which would have a positive impact on the safe delivery of local services.This report details a neutral impact on quality. [ ] The report will not make any impact on experience, safety or effectiveness. This report details a negative impact on quality. [ ] The report details the need for budgets to be significantly reduced. It is clear that the report summarises that quality will be negatively impacted by this as decisions to remove services/provide a lower level of provision to solely meet the ‘must do’s’ of provision in terms of meeting people’s needs has to be made. It is forecast that service user experience will be negatively impacted by this position. |
| **Procurement Decisions/Implications *(Care Contracting Committee):*** | N/A |
| **Engagement Implications:** | N/A |
|  |  |
| **Conflicts of Interest**  | *Have all conflicts and potential conflicts of interest been appropriately declared and entered in registers which are publicly available?* [x]  Yes [ ]  NoThe GPs have a conflict of interest in relation to the aPMS issue and should be excluded from voting on this time. |
| **Links to CCG’s Strategic Objectives** | [x]  Sustainable services [x]  Empowering people[ ]  Supporting communities [ ]  Delivering a fit for purpose organisation |
| **NHS Constitution:** | <https://www.gov.uk/government/publications/the-nhs-constitution-for-england>The NHS works across organisational boundaries and in partnership with other organisations in the interest of patients, local communities and the wider population. With this in mind, the Humber Coast and Vale group of CCGs work closely together to ensure that any areas of work are consistently delivered across the patch and that the various schemes for service improvement and workforce retention are offered to all. |
| **Appendices / attachments** | None |



**North East Lincolnshire Update**

Prepared by Erica Ellerington

Primary Care Contract Manager

NHS ENGLAND – North (Yorkshire & the Humber) 4th February 2020

## Contract Changes

There have been no contractual changes within this period.

**Action for the Committee**

None

## Online Consulting Update

From 1st April 2020, it will become a contractual requirement for GP practices to offer online consulting to their patients.

There has been good progress on the position in North East Lincolnshire. 13 practices have now launched the system, with a further 6 practices currently engaging with the programme, for example arranging system demos and mobilisation plans. There is only one practice (Birkwood) that has yet to engage.

NHSE have agreed to fund some specific patient engagement for online consulting across Humber Coast and Vale. East Riding of Yorkshire CCG are leading on this and currently working with a marketing agency to agree materials that will be provided to practices and CCGs to use as part of ongoing communications.

A website has been developed to track progress in North Yorkshire and the Humber

<https://sites.google.com/riperian.co.uk/hcv-online-consultation/home>

**Action for the Committee**

The Committee is asked to note this update.

## 3. General Practice Electronic Declaration (eDec)

The General Practice Electronic Declaration (eDEC) is an annual contractual requirement in which GP Practices complete a return to NHS England and NHS Improvement to provide assurance regarding contractual compliance. The CCG have been advised that all North East Lincolnshire Practices submitted a return.

The responses will be fed back to the CCG later in the year and a further update brought to a future Committee meeting. Any arising issues will be fed into the CCG’s practice visits arrangements.

**Action for the Committee**

The Committee is asked to note this update.

## 4. Protocol in respect of locum cover or GP performer payments (APMS)

**Issue**

Eligibility for the payment of the locum allowance or payments for parental or sickness leave for GPs attached to practices with APMS contracts.

**Background**

**The General Medical Services Contracts Statement of Financial Entitlement Directions 2013** (SFE) as amended in the SFE (amendment) Directions 2017, 2018 and 2019 set out the provisions, conditions and payments relating to reimbursement to GP practices for GP performers covering parental leave and sickness leave.

**The Primary Medical Care Policy and Guidance Manual** includes a protocol for the management of the scheme and payments.

The protocol is applied only to GMS practices but with the expectation that commissioners should ensure they treat Primary Medical Services (PMS) practices equitably.

The Protocol does not include reference APMS practices. The assumption would then be that the GPs engaged and employed by APMS contractors are not eligible to claim the allowances under the Scheme.

The APMS contracts for primary medical care services for the North Yorkshire. and Humber area are listed below:

|  |  |
| --- | --- |
| **CCG** | **Practices** |
| ERY | Fieldhouse, Bridlington – Humber FTWolds View, Bridlington - CHCP |
| Hull | Northpoint, Hull – Humber FTHaxby Kingswood, Hull - HaxbyHaxby Newington, Hull - HaxbyKingston Medical Group, Hull - CHCPEast Park Practice, Hull - CHCP  |
| North East Lincolnshire | Humberview, Grimsby – Pelham GroupOpen Door, Grimsby – Care PlusQuayside, Grimsby – Care PlusAshwood, Grimsby – Roxton@Weelsby  |
| North Lincolnshire | Market Hill, Scunthorpe – Core Care FP |
| Scarborough and Ryedale  | Castle Health – Scarborough – Intrahealth Ltd |
| Vale of York | None |
| Hambleton, Richmond and Whitby  | None |

**Summary of Context and Issues**

The claim forms that GP practices in Humber Coast and Vale submit are processed through our local Business Office. The Team referencing the Protocol, have rejected applications from all GPs attached to or working in APMS Practices based on the extract from the protocol below:

*2.1.2 This protocol applies only to GMS practices, but commissioners should ensure they treat Primary Medical Services (PMS) practices equitably.*

There has been an assumption that the Scheme was applied and covered all GPs regardless of the contractor. This doesn’t appear to have been the case and in turn, has raised concerns that application of this policy could raise the risk of indirectly discriminating against those GPs engaged within an APMS contract.

Within the context of the local position and pressure on the clinical workforce capacity, this may not be helpful. Equally as the value for core services provided under local APMS contracts have been aligned with the GMS equivalent values over the last 5 years with the result that the commercial need or expediency to exclude APMS contracts from accessing the Scheme shouldn’t be necessary. A revised offer may prove helpful in supporting and increasing the resilience of these contracts.

**Proposal and Action**

To apply local discretion and:

* agree to extend the scheme to cover GPs attached to and working in practices or providers with APMS contracts.
* issue CVs to existing APMS contracts to include equivalent terms to the SFE specifically for this Scheme and align the management of applications with the broad principles of the approach set out in the Protocol as appropriate to include GPs working with GMS, PMS and APMS Contractors.

**Action for the Committee**

The Committee is asked to support the issue of a Contract Variation (CV) and the implementation of equivalent terms to ensure equivalent terms for APMS GPs.