

Agenda Item: 12

Report to: **Primary Care Commissioning Committee**
 Date of meeting: **04/08/2020**
 Date paper distributed: **30/07/2020**
 Subject: **GP Practice electronic Declaration (eDec)report**
 Presented by: **Rachel Barrowcliff**
 Previously distributed to: **Risk Committee**

STATUS OF THE REPORT (auto check relevant box)	
Decision required	<input type="checkbox"/>
For Discussion to give Assurance	<input type="checkbox"/> (Only if requested by Committee member prior to meeting)
For Information	<input checked="" type="checkbox"/>
Report Exempt from Public Disclosure	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

PURPOSE OF REPORT:	To update the committee of the actions taken regarding the review of the GP Practice Electronic Declaration(eDec) report for 2019-20.
Recommendations:	To receive and note this update regarding the review and subsequent actions taken by the CCG.
Clinical Engagement	Not applicable
Patient/Public Engagement	Not applicable
Committee Process and Assurance:	This paper was approved by the Risk Committee on 8 th July 2020 as part of the initial COVID-19 response in the absence of the Primary Care Commissioning Committee.

Link to CCG's Priorities	<ul style="list-style-type: none"> • Sustainable services <input checked="" type="checkbox"/> • Empowering people <input type="checkbox"/> 	<ul style="list-style-type: none"> • Supporting communities <input type="checkbox"/> • Fit for purpose organisation <input checked="" type="checkbox"/>
Are there any specific and/or overt risks relating to one or more of the following areas?	<ul style="list-style-type: none"> • Legal <input type="checkbox"/> • Finance <input type="checkbox"/> • Quality <input type="checkbox"/> • Equality analysis (and Due Regard Duty) <input type="checkbox"/> 	<ul style="list-style-type: none"> • Data protection <input type="checkbox"/> • Performance <input type="checkbox"/> • Other <input type="checkbox"/>

Provide a summary of the identified risk

None identified

Executive Summary

1. Document purpose

This document summarises the contents of the self-declaration completed by each practice in 2019. It provides assurance to the Committee on a range of markers that demonstrates practice adherence to a number of contractual requirements.

2. Context

In accordance with NHS England's Primary Medical Care Policy and Guidance Handbook (PGM) commissioners of Primary Medical Care are responsible for the quality, safety and performance of services delivered by providers, within their area of responsibility. Commissioners have a statutory duty to conduct a routine annual review of every primary care medical contract it holds. This is covered through the annual GP practice self-declaration (eDec) collection which NHS England and NHS Improvement (NHSE/I) has established. In North East Lincolnshire, this has been undertaken directly by NHSE/I local team on behalf and with the support of the CCG through the delegation agreement.

CQC also use it to check that GP practices meet the CQC registration requirements.

3. Background

3.1 The annual eDec mandatory data collection was first introduced to practices in April 2013. Information is collected in eight categories:-

- Practice details
- Practice staff
- Practice premises and equipment
- Practice services
- Information about the practice and its procedures
- Governance
- Compliance with CQC
- GP Information Technology

It captures information such as, operating policies, opening times and assurance about practice procedures. This information will link with contractual requirements and may also contain responses to 'reasonable requests for information' e.g. from other government departments and bodies, parliamentary questions and freedom of information requests. The information declared is shared with the CCG and the CQC reducing the burden of separate information returns across organisations e.g. as part of pre-inspection information requests.

4. Annual e-Declaration for 2019/20

4.1 All practices were required to submit their eDec electronically during a six week period ending 17th December 2019 through the NHS Digital Strategic Data Collection Service (SDCS). It is usually submitted by a senior member of the practice staff, usually the practice manager and/or senior partner. There was 100% compliance by GP practices in the North East Lincolnshire area.

4.2 The 2019/20 eDec was prepopulated with responses provided from 2018/19 collection. It included

mandatory and voluntary questions. For questions that were marked voluntary, practices were encouraged to complete responses to these questions but could leave the questions blank if they prefer.

- 4.3 Following the submissions by practices, commissioners are then expected to review the practice eDec returns. It is important to note that whilst exercising of the functions passes to the CCG, the liability for the exercise of any of its functions remains with NHS E/I.

5. Outcomes of the 2019/20 submission

- 5.1 Individual practice declarations for 2019/20 were reviewed by the CCG primary care team and a number of queries were raised with practices.

Incorrect Practice Contract Types: Two Practices recorded their contract types as GMS rather than PMS. **This was an incorrect answer and practices were informed of the error.**

Safeguarding/Chaperone Arrangements: Two Practices detailed that they did not have a Chaperone policy or policies and procedures for information sharing for safeguarding children and adults and chaperones. Also, they did not confirm clear training arrangements for safeguarding. **These were incorrect answers and both practices confirmed that all such policies, procedures and training arrangements are in place.**

Premises: Three practices reported that they had an improvement plan for elements of their premises, agreed with NHS E/I. **All practices have confirmed this was an error and there are no plans required.**

Accessing services: One practice did not confirm that it can evidence how it is meeting the reasonable needs of its patient population and access to service throughout core hours in case of emergency: **This practice have confirmed that this was an incorrect answer and all arrangements are in place.**

Out of Hours: One practice completed this section, detailing that they were responsible for the provision/commissioning of care in OOH period and had a sub-contracting arrangement in place. **Following explanation by the CCG, the practice confirmed that they do not have these arrangements and acknowledged the CCG commission this service from Core Care Links.**

One practice answered NO to the question that asked if they could evidence that it has arrangements in place to monitor and report on any patient or practice concerns about the quality of the OOH service: **Following explanation by the CCG, the practice confirmed that this was an incorrect answer and understood the service is commissioned and monitored by the CCG.**

Patient Participation Group questions: There are three practices in North East Lincolnshire who are not able to evidence that it has engaged with a PPG that is representative of its population throughout the year and make feedback available to the practice population including actions and reports. **These practices have reported that despite their efforts to recruit patients as PPG members they have not been able to. It should be noted that the CCG has recently recruited a Primary Care Community Lead and one of the areas that we will be asking them to concentrate on is to reinvigorate the PPG groups.**

Whistleblowing/Freedom to Speak up guardian: There were queries for four practices relating to updating their whistleblowing policy and identifying a freedom to speak up guardian/local whistleblowing lead. **All practices confirmed that these actions have been addressed and are in place.**

Private GP Services: Two practice did not confirm that they are not advertising the provision of private GP services either by itself or through any other person: **Both practices have confirmed this was incorrect**

and they do not advertise any private services.

Dispensing Doctors: Three practices did not confirm that they could demonstrate they had clear procedures, as dispensing doctors, that are followed in practice monitored and reviewed for controlled drugs: **All practices are not dispensing doctors, therefore this question did not apply.**

Data Protection Officer(DPO): One practice did not confirm that they have either appointed a DPO or has plans to do so: **This practice has confirmed that DPO arrangements are in place.**

Online Appointments: Contractually, practices are required to make 25% of appointments available for booking online. **Nine practices answered no to this question. Seven practices have since confirmed that they do offer 25% appointments, however there are two practices that do not currently do so. The reasons for this are that one practice uses an alternative online platform called “askmyGP” which is an online consultation and workflow system, and would not function effectively if they also operated online booking capability from Systmone. Patients are able to be dealt with efficiently on the day and initial patient feedback is good. The other practice operates with a model for patients on a walk-in basis only and no appointments are available online. This has been in place for a number of years, and the CCG is not aware of any patient dissatisfaction with this approach, but will continue to monitor it.**

Direct Booking into 111: Nine practices did not confirm that they could process directly booked appointments from NHS111. **This has now been resolved, and all practices are able to do so.**

5.2 The eDec also assisted in identifying practices opening times, ensuring there were no half day closures in North East Lincolnshire practices. It is one of the requirements of the primary care network (PCN) directed enhanced service that no PCN member practice will be closed for half a day week on a weekly basis. There were queries with five practices who had reported closures, however, these have been explained that they are due to either the monthly PTL session, or apply to branch surgeries.

6. Recommendations

The Committee is asked to:-

- receive and note this update regarding the review and subsequent actions taken by the CCG.