

Bristol, North Somerset and South Gloucestershire

Clinical Commissioning Group

Primary Care Commissioning Committee (PCCC)

Date: Tuesday 26th March 2019

Time: 9:00am -11:00am

Location: Vassall Centre, Gill Avenue, BS16 2QQ

Agenda item: 11

Report title: Medical Contract Overview Report - March 2019

Report Author: David Moss, Health of Primary Care Contracts

Report Sponsor: Lisa Manson, Director of Commissioning

1. Purpose

This report provides an overview of BNSSG CCG contracts and performance in 2018/19 year to date.

2. Recommendations

To note the performance and contractual status of Primary Care

3. Financial Resource Implications

There are no specific financial resource implications highlighted within this paper. Any contractual change requests will be considered via separate papers and will include any relevant financial implications.

4. Legal Implications

There are no specific legal implications highlighted within this paper. Any contractual change requests will be considered via separate papers and will include any relevant legal implications.

5. Risk Implications



There are no specific risk implications highlighted within this paper. Any risks associated with contractual change requests will be considered via separate papers and will include any relevant risk implications.

6. Implications for Health Inequalities

Monitoring of Primary Care performance will highlight any areas of health inequalities within BNSSG CCG which will be addressed accordingly.

7. Recommendations for Equalities (Black and Other Minority Ethnic / Disability / Age issues)

Monitoring of primary care performance alongside practice demographic information will help to highlight areas of variation of services, which will then be addressed accordingly.

8. Implications for Public Involvement

Whilst there has not been consultation and communication with the public in the production of this paper, patient experience and public involvement is recognised as an important factor in reviewing and gaining assurance regarding primary care services.

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Report title: Medical Contract Overview Report – March 2019

Report Author: David Moss, Head of Primary Care Contracts
Report Sponsor: Lisa Manson, Director of Commissioning

1. Purpose

To update primary care operational group on the status of BNSSG primary care contracts.

2. Current Contracts

CCG	APMS	PMS*	GMS	Total
Bristol, North Somerset and South Gloucestershire (BNSSG)	8**	66	10	84

^{*}NHS England has offered new contracts to all PMS practices

2.1 PMS Contract Update

All PMS practices were offered a new PMS contract by NHS England. There is one PMS Practice that has not yet returned a signed contract and this is due to a change in circumstances. The practice has been in contact with the Primary Care Contracting team due to recently becoming a Single Handed Partnership, and the Contract Team are supporting the practice with the appropriate variation process, as well as providing support with any sustainability concerns.

The lack of a signed contract is an issue that will need resolution as soon as practically possible in order to avoid any uncertainty. In the interim, given that services are continuing to be provided and the practices are receiving payment a contract is 'implied' between the parties. The local terms of the agreement will reflect what can be inferred

^{**}APMS contract for SAS included

as having been agreed between the parties based on correspondence between, notes of meetings, drafts exchanged and so on. It would be reasonable to assume that the implied contract would incorporate the drafted terms of the PMS contract. Therefore, contractual issues can still be discussed and raised with parties as necessary.

2.2 Single handed Contractors holding GMS/PMS contracts

Practice	Code	List Size (01/01/19)	Contract Type
Cedars/Worle (Pimm)	L81643	15,487	PMS
Monks Park Surgery (Langton)	L81669	5,718	PMS

The Contracting team have reviewed both single-handed contracts. The Single Handed GP Contractor Assurance Framework has been sent to the Cedars Practice and the return has been reviewed by the Primary Care Contracts Team. A visit to the practice to understand any practice level concerns, and their plans for the future has been arranged.

The Monks Park Surgery became a single handed practice at the beginning of February 2019. The Contracts team has met with the remaining partner, and is providing support to undertake the contract variations and to work through the Single Handed GP Contractor Assurance Framework documentation.

2.3 Core Hours assurance

Core Hours is defined as 8.00 to 18:30 on any day from Monday to Friday except Good Friday, Christmas day or bank holidays.

The latest e-Declaration submission closed in December 2018. Initial review by the Primary Care contracting team has highlighted a total of 21 practices that may not be compliant. For example the declaration may indicate that the practice is closed for a period during the day or not opening until 08:30. These opening times may be permitted providing that there are arrangements in place so that patients can access services in an emergency during core times. This can include maintaining a telephone line during these hours.

The Primary Care contracting team will contact the practices involved to fully assess compliance. Of those 21 practices identified, 4 practices were flagged as non-compliant during the previous review. Once the position has been fully assessed it may be necessary to issue contractual breach notices.

3. Procurements/Contract Expiries

3.1 Current Procurements

Service	Locality	Status	Expected Contract Award date	Anticipated Commence ment date
Northville Family Practice	South Glos	PCCC approved an extension to the end of Sept 2019, PIN released on 4/01/19	tbc for longer term contract	tbc
Charlotte Keel Medical Practice	ICE	PCCC approved an extension until the end of March 2020, PIN released on 4/01/19	tbc for	
Bishopston Medical Practice	N&W	PCCC approved an extension until the end of March 2020, incumbent wishes to extend to end of Sept 2019. PIN released on 4/01/19	longer term contract	tbc

3.2 APMS Contract Expiries

Practice	Locality	Contract	Agreed	Notes
		Туре	End date	
Locality Health	North Somerset	APMS	31/10/2019	With option to
Centre (Weston)	North Somerset	AI WO	31/10/2019	extend by 1 year
Northville Family	South	APMS	30/09/2019	Contract
Practice	Gloucestershire		*offered	commenced on
				16/01/2016
Bishopston	North and West	APMS	31/03/2020	Contract
Medical Practice			*offered	commenced
				February 2018
Charlotte Keel	ICE	APMS	31/03/2020	Contract
Medical Practice			*offered	commenced
				01/04/18
Broadmead		APMS	30/09/2031	With option to
Medical Centre				extend by 5+5 years
(Y02578)				
Homeless Health		APMS	30/09/2021	With option to
Service (Y02873)				extend by 5+5 years

Practice	Locality	Contract Type	Agreed End date	Notes
Emersons Green	South	APMS	31/01/2032	With option to
Medical Centre	Gloucestershire			extend by 5+5 years
(L81362)				

4. Practice mergers

4.1 Approved mergers

No new applications.

4.2 New Merger Applications

A draft merger application has been received for review from Clarence Park and Graham Road. Mary Adams (Patient and Public Engagement Manager) and the Primary Care Contracts Team continue to work with the practice to ensure the process is followed. One Care has also worked to support the practice and have supplied supporting Financial Information for the Business Case. Communications informed the Primary Care team that the North Somerset Health Overview Scrutiny Committee (HOSC) had the merger as an item on the agenda for 28th February, but no feedback has been received from this Committee as yet.

5. Closed list Applications

No new applications

6. Approved List Closures

None

7. Temporary Practice Hour changes

Practices have the ability to submit applications to close for a number of hours to allow them to plan for things such as training sessions and periods of significant IT downtime etc. All applications are considered individually, and the practices have to demonstrate the reasons for closure and the contingency for patients during these closures. Applications are approved by NHSE and BNSSG jointly up until March 2019, and subsequent applications will be considered solely by BNSSG.

The table below details the number of applications received since 1 April 2018.

	N/Somerset	Bristol	S Glos	Totals
Applications	1	7	8	16
Practices	1	6	6	13

Two applications have been received in March and have been approved. The closures relate to staff events and training. The first is in March and the second due to take place in May. We have reminded the practice that in future the CCG require 4 weeks' notice of any proposed. closure.

8. **Applications to Change Practice Boundaries**

No applications received

9. **Branch Surgery Closures**

No applications received

Contract Breach and Remedial Notices 10.

No Contract Breach or Remedial Notices have been issued.

11. **Primary Care Performance Management Monitoring**

BNSSG CCG currently commission Improved Access from One Care (BNSSG) Ltd. One Care are commissioned to deliver on average an additional 45 minutes / 1000 population (weighted) per week access to general practice. Current performance across BNSSG is as follows:

	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan
Av Minutes / week BNSSG	39.6	37.9	44.2	39.4	39.2	48.9	36.3	37.6	45.6	46.4

The number of minutes delivered across BNSSG increased, as expected, during January 2019. All six localities met the minimum standard of 30 minutes per 1,000 population per week. The number of minutes delivered across February is expected to increase in line with the implementation of winter plans. OneCare are working with practices to refine plans up to the end of March 2019.

4 out of the 6 localities use BrisDoc to provide 1 hour of cover on a Sunday. Utilisation of this remains low at 3%. The CCG has queried the timing of slots, these currently sit around lunchtime / afternoon. It was queried whether there would be better uptake if these were earlier, however, due to the model BrisDoc need the opportunity to have the AM to book people into the later slot times. The remaining two localities offer their own service and in contrast utilisation rates are higher. Current GPFV reporting indicates that BNSSG Sunday

utilisation for January is around 76.11%. Early indications are that South Gloucestershire locality will be switching to the BrisDoc model from 1 April 2019. Sunday availability and utilisation across January 2019 is shown below:

Date	Available	Booked	DNA	Utilsisation
6 Jan	100	61	3	58%
13 Jan	81	64	10	67%
20 Jan	108	89	3	80%
27 Jan	71	60	5	77%
Total	360	274	21	76.11%

The primary care contract team will be looking at Emergency Department presentation data in order to establish if there are considerable cohorts of attendees deemed suitable to be seen in a primary care setting and presentation numbers on a Sunday.

As at 4 March 2019 1 practice is not advertising IA services on their website. The practice has requested that this be amended but are reliant on their Web Page owner to make this change on their behalf and have therefore suffered a delay. It has been clarified with OneCare that a £5,000 penalty will therefore apply to cover the period up to end of December 2019. The Primary Care contracting team will re-audit at the start of March 2019. If there remain practices failing to advertise at the end of March 2019 a further £5,000 penalty may be due.

12. Enhanced Service Expression of Interest Review

Expressions of interest are being collated by the Primary Care Contract team. 15 practices are yet to return their forms and will be contacted. Early indications are that all practices have signed up to the dementia enhanced service. 1 practice has indicated that they do not wish to take up the DVT enhanced service, this practice will be contacted to discuss the reason. The success of the DVT pathway is dependent on maximum uptake of this enhanced service which represents phase 1, with GP care commissioned to undertake phases 2 and 3 of the pathway. 1 practice has indicated that it does not wish to sign up to supplementary services but this is anticipated to be in error and the practice will be contacted. A summary of uptake across each enhanced service is included in appendix 1.

13. Financial resource implications

Any change requests will be considered via separate papers and will include any relevant financial implications.

14. Legal implications

Any change requests will be considered via separate papers and will include any relevant legal implications.

15. Risk implications

Any change requests will be considered via separate papers and will include any relevant risk implications.

16. Implications for health inequalities

Any change requests will be considered via separate papers and will include any relevant health inequalities implications.

17. Implications for equalities (Black and Other Minority Ethnic/ Disability/Age Issues)

Any change requests will be considered via separate papers and will include any relevant equalities implications.

18. Consultation and Communication including Public Involvement

Any change requests will be considered via separate papers and will include any relevant consultation/communication implications.

19. Appendices

Appendix 1 EOI Review

Glossary of terms and abbreviations

APMS	Alternative Provider of Medical Services - Type of GP contract
GMS	General Medical Services – Type of GP contract
PMS	Personal Medical Services – Type of GP contract
PIN	Prior Information Notice

Appendix 1 – BNSSG LES Sign up Table as at 12 March 2019

								GP	
							Specialist	support	
			Anticoag				Meds	to Care	Supplementary
Area	Locality	Anticoag Basic	Advanced	Insulin	Dementia	DVT	Monitoring	Homes	Services
Bristol	Inner City and East	12	2 (10)	12	12	11 (1)	11 (1)	6 (6)	11
	North and West	10	2 (8)	8 (2)	10	10	10	10	10
	South Bristol	12	2 (10)	11 (1)	12	12	12	8 (4)	12
North Somerset	Weston & Worle	6	4 (2)	6	6	6	6	6	6
	Woodspring	5 (1)	6	6	6	6	6	6	6 (1)
South Gloucestershire	South Gloucestershire	22	5 (17)	19 (3)	22	22	22	21 (1)	22
	Total	67 (1)	21 (47)	62 (6)	68	67 (1)	67 (1)	57 (11)	67 (1)