

Meeting of Primary Care Commissioning Committee

- Date: Tuesday 26 November 2019
- Time: 09:00 10:50

Location: Clevedon Hall, Elton Road, Clevedon, North Somerset, BS21 7RQ

Agenda Number :	11				
Title:	Contracts and Performance Report				
Purpose: For Information	Purpose: For Information				
Key Points for Discussion					
The purpose of this paper is to update Primary Care Commissioning Committee on the status of BNSSG primary care contracts and provide a summary of performance issues.					
Recommendations:	PCCC are asked to note the contents of this report for information				
Previously Considered By and feedback :	Not Applicable				
Management of Declared Interest:	Not Applicable				
Risk and Assurance:	There are no specific risks highlighted in this paper this month. Any risks associated with contractual changes will be highlighted via separate papers				
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.				
Legal, Policy and Regulatory Requirements	There are no specific legal implications highlighted within this paper. Any contractual change requests will be considered via separate				

Shaping better health

	papers and will include any relevant legal implications.
How does this reduce Health Inequalities:	Monitoring of Primary Care performance alongside practice demographic information will help to highlight areas of variation of services, which will then be addressed accordingly.
How does this impact on Equality & diversity	Monitoring of Primary Care performance alongside practice demographic information will help to highlight areas of variation of services, which will then be addressed accordingly.
Patient and 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.
Communications and Engagement:	There are no specific communication issues highlighted as a result of this paper. Any contractual change requests that require further engagement will be highlighted via separate papers.
Author(s):	Louisa Darlison and Steph Maidment, Senior Contract Managers, Primary Care
Sponsoring Director / Clinical Lead / Lay Member:	Lisa Manson, Director of Commissioning



Agenda item: 11

Contracts and Performance Report Report title: November 2019

1. Background

The paper provides a summary of the contractual status of the contracts held across the Primary Care Contract portfolio. This includes all GMS / PMS and APMS contracts as well as the locally commissioned Improving Access to General Practice Contract.

2. **Current Contracts**

CCG	APMS	PMS*	GMS	Total
Bristol, North Somerset and South Gloucestershire (BNSSG)	8**	63	10	81

*NHS England has offered new contracts to all PMS practices

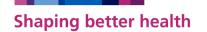
**APMS contract for SAS included

Single handed Contractors holding GMS/PMS contracts a.

Practice	Code	List Size (01/01/19)	Contract Type
Monks Park Surgery (Langton)	L81669	5,718	PMS

The contracts team have issued a contract variation to add to two additional partners to the Cedars Surgery contract. This has been returned and therefore this practice is no longer a single handed contractor.

The Monks Park Surgery became a single handed practice at the end of March 2019. The Contracts team has received a request to add a list of additional partners to the Monks Park contract and this request is currently being processed. In order to issue the final contract variation Monks Park are required to complete a 'Request for information relating to change from individual to more than one individual – PMS Agreements' form. This requires the contractor to list all additional partners and indicate whether they satisfy the eligibility criteria set out in regulation 5 of the PMS contract 'Conditions relating solely to medical practitioners'. All the additional partners are required to sign the document and therefore this has taken some time to finalise. It is expected to be returned to the CCG week commencing 25 November 2019 at which point the final variation can be issued.



3. National Variation October 2019

Following the publication of the GMS and PMS Regulations 2019 amendment, a national variation is due to be published shortly for all GMS and PMS contracts. Once available the Primary Care Contracts team will issue to each contract holder. The changes included in the variation include:

- Requirements to protect a minimum of 1 appointment per 3,000 list size for 111 direct booking
- Conditions relating to the participation of Primary Care Network activities including data sharing, participation at meetings and provision of information relating to registered patients.

The contents of the variation come into effect from 1 October 2019.

4. **Procurements/Contract Expiries**

a. Current Procurements

Service	Locality	Status	Expected Contract Award date	Anticipated Commencem ent date
Charlotte Keel Medical Practice	ICE	Ongoing procurement, tender published 2 September 2019.	TBC	1 st April 2020

b. APMS Contract Expiries

Practice	Locality	Contract	Agreed	Notes
		Туре	End date	
Horizon Health	North Somerset	APMS	31/10/2019	With option to
(Weston)	North Somerset		51/10/2019	extend by 1 year
Charlotte Keel	ICE	APMS	31/03/2020	Contract
Medical Practice				commenced
				01/04/18
Broadmead	ICE	APMS	30/09/2031	With option to
Medical Centre				extend by 5+5 years
(Y02578)				
Homeless Health	ICE	APMS	30/09/2021	With option to
Service (Y02873)				extend by 5+5 years
Emersons Green	South	APMS	31/01/2032	With option to
Medical Centre	Gloucestershire			extend by 5+5 years
(L81362)				
Graham Road	Weston & Worle	APMS	12/06/2020	With option to
				extend by 1 year

Shaping better health

Practice	Locality	Contract Type	Agreed End date	Notes
Bridge View Medical Special	N/A	APMS	30/06/2021	With option to extend by 2 years
Allocation Scheme				

c. Other Primary Care Contracts

Provider	Locality	Contract Type	Agreed End date	Notes
Language Empire	BNSSG	NHS	30/09/2021	With option to
Ltd	DN000	Standard	30/03/2021	extend by 2 years
Action on Hearing	BNSSG	NHS	30/09/2021	No further option to
Loss	DNSSG	Standard	30/09/2021	extend

In addition the Primary Care Contract team have issued 120 pharmacy enhanced service contracts for the provision of the community emergency supply service. All contracts are for the financial year 19/20 with an option to extend by 1 year.

5. Practice mergers

a. Approved mergers

No new applications.

b. New Merger Applications

A formal application to merge New Court Surgery and Longton Grove Surgery was approved on 19 October 2019 at PCCC. The partnership will merge from 1 April 2020.

6. Closed list Applications

No new applications

7. Approved List Closures

No new applications

8. Partnership Change Requests

The Primary Care Contract team have been asked to prepare contract variations to a group of practices in order to support the formation of a 'Super Partnership'. Following assurance received, the contract team are preparing the required variations.



9. 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 are asked to demonstrate the reasons for closure and the contingency for patients during these closures.

The table below details the number of applications received since 1 April 2019.

	N/Somerset	Bristol	S Glos	Totals
Applications	1	2	7	10
Practices	1	3	7	11

Practices are reminded that 4 weeks' notice is required for any proposed closure.

10. Applications to Change Practice Boundaries

No applications received

11. Branch Surgery Closures

No applications received

12. Contract Breach and Remedial Notices

No Contract Breach or Remedial Notices have been issued. There are currently no live notices in place with any practice.

13. 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	Мау	June	July	Aug	Sep
jAv Minutes / week BNSSG	37.0	37.9	42.5	41.7	38.0	38.9

The number of average minutes delivered per week in September was 38.9.

The average number of minutes delivered in September was 38.9. Practices delivered 33.6 of these minutes with utilisation levels of 83% and a DNA rate of 7%.



BrisDoc continue to provide appointments on a Sunday with three face to face bases in Knowle, New Court surgery and Cossham hospital. 6 patients were seen with representing 7% utilisation of available slots. OneCare are actively working with practices geographically located near the bases to encourage sign posting and booking of the Sunday provision. Going forward BrisDoc are working with One Care and local ED departments to create a link for Acute trusts to book into these slots. It is anticipated that patient feedback will also support the CCG to understand how the Sunday service should be focused from April 2020.

	North and West Bristol (178,964)	South Bristol (162,954)	Inner City and East (155,891)	Weston, Worle and Villages (117,756)	Woodspring (108,942)	South Glos. (249,059)
Average weekly mins / 1000 population	32.3	41.4	37.0	39.8	37.1	43.4

At locality level, three localities planned to deliver the minimum 30 mins per 1000 population per week across quarter 2 with the remaining three localities choosing to deliver the maximum contracted value of 45 minutes per 1000 per week.

Over recent months third party utilisation with PhysioNet has dipped from 92% to 57% to 22%. This has been due to the increase in provision to support delivery of extended hours. Therefore meaning more appointments are on offer. This is an MSK assessment services provided from four localities. Utilisation of the PhysioNet offer will be discussed at the next contract meeting. South Bristol are no longer using the service from 1 October 2019. This reduction in appointments may support an improved utilisation rate.

One Care have committed to support the Alamac system call process. It has been suggested that they will join the call on Mondays and Fridays. This will ensure primary care is represented and party to the conversations on wider Urgent care performance and delivery. One Care will also contribute to the winter planning process and have agreed to complete a template summarising specific pre-winter preparation that is in place, key initiatives planned for this winter, specific support requested from system partners, key risks anticipated and associated mitigations.

14. 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.

15. 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.

Shaping better health

16. Risk implications

There are no specific risks highlighted in this paper this month. Any risks associated with contractual changes will be highlighted via separate papers.

17. Implications for health inequalities

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

18. Implications 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.

19. Consultation and Communication including 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.

20. Recommendations

The committee are asked to note the contents of this report for information.

Report Author:Louisa Darlison and Steph MaidmentReport Sponsor:Lisa Manson

Glossary of terms and abbreviations

Please explain all initials, technical 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

