

# Primary Care Commissioning Committee

Date: 30<sup>th</sup> July 2019

Time: 9.00am – 11.10am

Location: Vassall Centre, Gill Avenue, Bristol, BS16 2QQ

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## Agenda number: 14

### Report title: Contract and Performance Report July 2019

Report Author: David Moss, Head of Primary Care Contracts

Report Sponsor: Lisa Manson, Director of Commissioning

#### 1. Purpose

To update Primary Care Commissioning Committee on the status of BNSSG primary care contracts.

#### 2. Recommendations

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

#### 3. Executive Summary

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.

#### 4. 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.

#### 5. 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.

#### 6. 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.



## **7. 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.

## **8. 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.

## **9. 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.

## Agenda item: 14

### Report title: Contract and Performance Report July 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)	10**	64	10	84

\*NHS England has offered new contracts to all PMS practices

\*\*APMS contract for SAS included

Please note the addition of 2 APMS contracts and removal of 2 PMS contracts to represent the new contractual arrangement for Graham Road and Clarence Park with effect from 17 June 2019.

##### a. PMS Contract Update

All PMS practices were offered a new PMS contract by NHS England. The final contractor that had not yet returned a signed copy has now done so and therefore we now have signed contracts for all GP providers across BNSSG.

##### b. 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 and appropriately assured.

The Monks Park Surgery became a single handed practice at the end of March 2019. The Contracts team 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.

### 3. Procurements/Contract Expiries

#### a. Current Procurements

Service	Locality	Status	Expected Contract Award date	Anticipated Commencement date
Northville Family Practice	South Glos	PCCC approved proposal for dispersal on 25 July 2019 with effect from 30 September 2019	N/A	N/A
Charlotte Keel Medical Practice	ICE	PCCC approved an extension until the end of March 2020, PIN released on 4/01/19	tbc for longer term contract	tbc
Bishopston Medical Practice	N&W	PCCC approved proposal for dispersal on 25 July 2019 with effect from 30 September 2019	N/A	N/A

#### b. APMS Contract Expiries

Practice	Locality	Contract Type	Agreed End date	Notes
Horizon Health (Weston)	North Somerset	APMS	31/10/2019	With option to extend by 1 year
Northville Family Practice	South Gloucestershire	APMS	30/09/2019 *offered	Contract commenced on 16/01/2016
Bishopston Medical Practice	North and West	APMS	30/09/2019 *offered	Contract commenced February 2018

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

#### 4. Practice mergers

##### a. Approved mergers

No new applications.

##### b. New Merger Applications

We have begun early discussions around a potential merger, any formal application received will be taken through due process.

#### 5. Closed list Applications

No new applications

#### 6. Approved List Closures

No new applications

#### 7. 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.

#### 8. 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. Following a joint review process up until March 2019, BNSSG CCG are now assessing applications solely from 1 April 2019.

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

	N/Somerset	Bristol	S Glos	Totals
Applications	1	1	5	7
Practices	1	1	5	7

Four applications have been received for closures since April 1<sup>st</sup> 2019 and have been approved. The closures relate to staff events and training. Practices are reminded that 4 weeks' notice is required for any proposed closure.

## 9. Applications to Change Practice Boundaries

No applications received

## 10. Branch Surgery Closures

No applications received

## 11. 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.

## 12. 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
Av Minutes / week BNSSG	36.6

The number of average minutes delivered per week in April was 36.6.

In April 2019 the number of minutes delivered across BNSSG decreased, as expected. This is due to some localities profiling their delivery to account for increased activity across the

winter period. Due to the uncertainty of the future contractual model some localities have chosen to deliver up to the maximum 45 minutes during the month.

	<b>North and West Bristol</b> (178,964)	<b>South Bristol</b> (162,954)	<b>Inner City and East</b> (155,891)	<b>Weston, Worle and Villages</b> (117,756)	<b>Woodspring</b> (108,942)	<b>South Glos.</b> (249,059)
Average weekly mins / 1000 population	29.4 (25.7)	40.0 (30.1)	30.3 (29.8)	39.3 (31.2)	41.4 (40.9)	40.3 (36.1)

NB: - (brackets indicated practice delivered IA)

North and West Bristol had reported delivery under 30 minutes but this has since been revalidated and has been confirmed as above 30 minute.

BrisDoc provided a one hour session of Sunday face to face appointments for 5 out of the 6 localities in April. They also delivered one hour of provision on Good Friday and Easter Monday at each of their three bases, accessible to all BNSSG practices. The bases are in Knowle, New Court Surgery and Cossham.

A Pan Bristol Improved Access working group met on 30 May 2019 to discuss the future model of delivery for IA in light of PCNs and the National Access Review. PCCC has agreed a timeline for contractual delivery of IA. This will allow the group consider delivery of IA across 19/20 and 20/21 prior to the national addition to the PCN contract DES from 1 April 2021. The group will also consider how to ensure Improved Access is being commissioned alongside and in support of other CCG priorities. In particular, the group will review the specification and look to develop this to support the Same Day Urgent Care (SDUC) initiative.

### 13. Local Enhanced Services

Contracts for Local Enhanced Services have now been issued for signature. Manual claim forms will be submitted for Quarter 1 payments. A report on Quarter 1 activity will be produced in August 2019.

### 14. Financial Implications

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## 15. Legal implications

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## 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. 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.

## 20. Recommendations

**Report Author: David Moss, Head of Primary Care Contracts**

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## Appendices

None

## Glossary of terms and abbreviations

Please explain all initials, technical terms and abbreviations.

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