

**Reference:** FOI.ICB-2324/029

**Subject:** Medical Practices and Management

*I can confirm that the ICB **does hold some of the information requested**; please see responses below:*

QUESTION	RESPONSE
Please refer to requesters template enclosed.	

***The information provided in this response is accurate as of 17 May 2023 and has been approved for release by Jenny Bowker, Deputy Director of Primary Care for NHS Bristol, North Somerset and South Gloucestershire ICB.***

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I can confirm that the ICB does hold some of the information requested; please see responses below:

## **QUESTION**

### **1. LES Specifications**

1.1 Who writes the Local Enhanced Services (LES) specifications?

1.1.1 Does the LES Review Steering Group act on any guidelines from NHS England (or other departments) to ensure LES's are managed the same by all ICB's or are there no guidelines?

1.1.2 What management policies are included in LES specifications to ensure staff recruited by Medical Practices is not below the standard of other, directly funded services supplied by the ICB. In particular do the specifications provide any Terms of Reference (TORs) for contracted personnel to avoid duplication or delays in treatment and to ensure efficient use of public finances?

## **RESPONSE**

1.1 The LES specifications are written collaboratively between clinical leads and managers at BNSSG ICB (Bristol, North Somerset and South Gloucestershire Integrated Care Board) (Formerly CCG), the specifications are subject to an annual desktop review by leads and managers and this work is held by the LES Review steering group. The outputs of this group are shared through appropriate governance.

1.1.1 The LES specifications and the types of LES and ICB can offer are up to local determination. LESs are not agreed nationally and they can vary across the country in terms of scope and funding. It is an option for a practice to sign up to a LES. A LES will include NICE guidance where relevant.

1.1.2 we do not make a distinction in our LESs between recruitment of staff for the purposes of delivering enhanced services over staff recruited to deliver other funded services such as the Core GP contract. All specifications are written to ensure pathways are as efficient as possible and with value or money in mind. The LES contracts are issued to practices on the NHS Standard Contract Template which have their own national terms and conditions that would be applicable. This information can be found here: <https://www.england.nhs.uk/nhs-standard-contract/>

### **2 MSK Services**

2.1 The term "hold" is a little confusing. I am trying to ascertain who originates the policy for MSK management of services. From my investigations it seems ICB's in England originate policies which are

2.1 The ICB does not hold specific policies for MSK services, with the exception of policies related to access and funding, which are available on the ICB website -

**QUESTION**

often different, for example I could not get a GP referral to a consultant without having a cortisone injection but this is not the policy if I live in Bath. Could please confirm if this assumption is correct or not?

**RESPONSE**

<https://bnssg.icb.nhs.uk/about-us/governance/interventions-not-normally-funded-innf/commissioning-policy-directory/>  
BNSSG ICB does not hold the commissioning policies for other ICBs and it is the decision of each commissioning body with clinical input to agree these policies for their relevant population. The ICB only holds policies which relate to access and funding of MSK services. Therefore, any other policies relating to MSK services would need to be requested from the services directly.

2.1.1 Could you confirm there is a post code lottery on access to MSK services in England because of different or no access policies depending on decisions made by ICB's?

2.1.1 BNSSG ICB is unable to confirm or comment on access to MSK services in other ICBs.

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