

HEALTH AND WELLBEING BOARD

15 SEPTEMBER 2015

CO-COMMISSIONING OF GENERAL PRACTICE SERVICES

Report from: Dr Peter Green, Chief Clinical Officer, NHS Medway CCG

Author: Alison Burchell, Chief Operating Officer , NHS Medway CCG
Dr Peter Green, Chief Clinical Officer, NHS Medway CCG

Summary

This report provides an update on the co-commissioning of general practice services and the intentions of NHS Medway CCG.

1. Budget and Policy Framework

- 1.1 Co-commissioning of primary medical services (general practice services) was introduced in April 2015.
- 1.2 Giving CCGs greater say over NHS England's primary care commissioning responsibilities is part of the wider strategy to support the development of "place-based" commissioning and join up care pathways. It is a critical step towards enabling the new models of care set out in the *NHS Five Year Forward View*, on the assumption that integrated commissioning is a key enabler of integrated provision.
- 1.3 Following a ten month policy and initiation programme jointly led by NHS England and CCGs, on 1 April 2015, 63 CCGs assumed delegated responsibility for the commissioning of general practice services and 86 CCGs took forward joint commissioning arrangements with NHS England.
- 1.4 In November 2014 The Next Steps towards primary care co-commissioning was published by NHS England. Further detail and background information can be found in the document via the following link
<http://www.england.nhs.uk/commissioning/wp-content/uploads/sites/12/2014/11/nxt-steps-pc-cocomms.pdf>
- 1.5 Co- commissioning is outside the council's policy and budget framework.

2. Background & current position

- 2.1 NHS England has set out the key dates and the application process for those CCGs who wish to apply in 2015/16 to assume new delegated and joint commissioning arrangements.
- 2.2 The CCG's preferred option is to apply for delegated commissioning – full responsibility for commissioning general practice services.
- 2.3 Member practices have been engaged in this review and discussion and at the monthly GP meeting on 16 July 93.5% voted in support of the changes required to the CCG constitution to enable the CCG to apply for delegated commissioning (95% of practices voted).
- 2.4 The CCG is now working up the detailed implementation plan to support the application. The detail of this plan will be shared with member practices in October prior to final review and decision by the CCG Governing Body at the end of October.
- 2.5 The CCG's application must be submitted to NHS England by 6 November 2015.
- 2.6 Appendix 1 provides a summary of the journey so far and next steps.

3. Risk management

- 3.1 The CCG has identified key risks and mitigations in Appendix A (slide 9). These will be continually assessed as the implementation plan is developed.

4. Consultation

- 4.1 As already detailed the proposal to move forward with delegated commissioning has already been discussed with and supported by member practices. The Kent Local Medical Committee has also been engaged in discussions with NHS England and CCGs.

5. Financial implications

- 5.1 Under delegated commissioning the CCG would receive the budget for commissioning general practice services. Through the constitution changes the CCG has agreed to ring-fence the baseline GP Primary Care budget at the value delegated to it by NHS England and, as a minimum, apply all future nationally implemented funding changes. Any changes to this, as we look at pathways of care across the different sectors and move towards 'place based' commissioning would be discussed and agreed with the membership.

6. Legal implications

- 6.1 The CCG amongst an array of other duties must, pursuant to section 26 of the Health and Social Care Act 2011 which inserts section 14S into the National Health Service Act 2006, support the NHS England in discharging its duty under section 13E so far as relating to securing continuous improvement in the quality of primary medical services.

7. Recommendations

- 7.1 To note the intention of the CCG to apply for delegated commissioning by 6th November 2015 and the engagement of member practices who have supported this direction of travel.

Lead officer contact

Alison Burchell, Chief Operating Officer, NHS Medway CCG
Alison.burchell@nhs.net

Appendices


Appendix 1 - Delegated Commissioning - Update

Background Papers

None

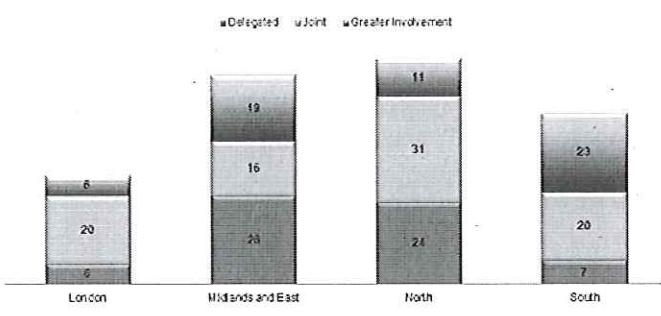
NHS
Medway
Clinical Commissioning Group

Co-Commissioning



NHS
Medway
Clinical Commissioning Group

Overview of Co-Commissioning



Region	Delegated	Joint	Greater Involvement
London	5	20	6
Midlands and East	23	16	19
North	24	31	11
South	7	20	23

- 63 CCGs implemented delegated arrangements;
- 86 CCGs took forward joint arrangements with NHS England; and
- 60 CCGs implemented the 'greater involvement' model with NHS England.

- In Q2 of 2015/16, a further 11 CCGs will take forward joint commissioning arrangements with local NHS England teams.

2

Co-commissioning - the Medway journey so far

NHS
Medway
Clinical Commissioning Group

- Requested practices voted on the options in March 2015
- Practices discounted option 1 – greater involvement
- Practices voted (75%) for co-commissioning but only 37% voted for constitution change
- This therefore left us with the option to work closer with NHS England, which was and is happening anyway
- Discussing/developing the approach to primary care development for the future and to deliver Five Year Forward View (FYFV)

Options for 2016/17

NHS
Medway
Clinical Commissioning Group

**Greater
involvement in
primary care
decision-making**

**Joint
commissioning
arrangements**

**Delegated
commissioning
arrangements**

1st July (CCGs who
chose to defer till July
2015 – not apply to
Medway)
1st October 2015
1st January 2016
1st April 2016

Midday on 6 November
2015

What is delegated commissioning?

NHS
Medway
Clinical Commissioning Group

CCG would:

- assume full responsibility and take a delegated budget from NHSE for primary care
- need to manage conflicts of interest
- **not** need to secure agreement from NHS England with regard to primary care commissioning decisions

The functions which would be delegated to CCGs are:

- General Practice contracts
- Designing and influence Locally Commissioned and National Quality and Outcomes Framework or alternative locally designed incentive schemes
- The ability to establish new GP practices in an area and approving practice mergers
- Making decisions on other payments and schemes affecting GP's.
- GP practice premises issues

What functions will NHS England retain?

NHS
Medway
Clinical Commissioning Group

NHS England will retain the functions below:

- individual **GP performance management** (medical performers' list for GPs, appraisal and revalidation)
- The **terms of GMS contracts** – and any nationally determined elements of PMS and APMS contracts

For the avoidance of doubt, CCGs will be required to adopt the findings of the ***national PMS and Minimum Practice Income Guarantee (MPIG) reviews.***

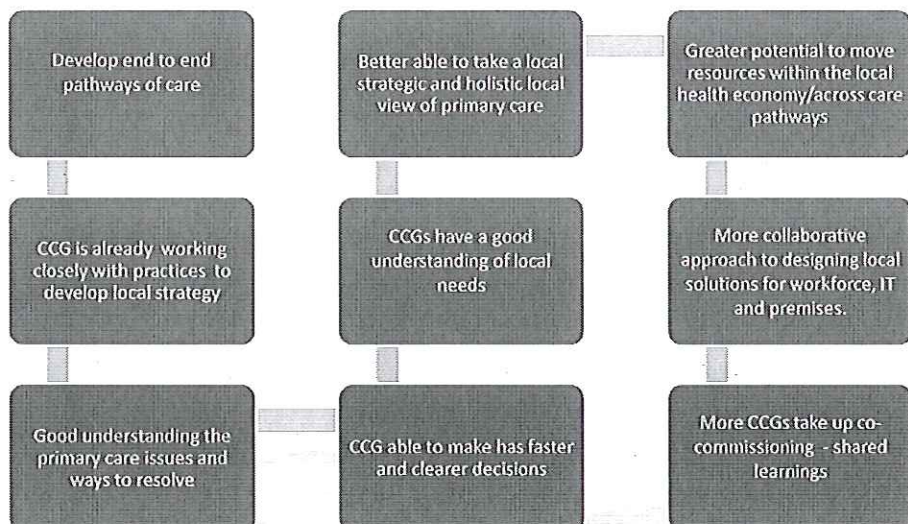
What does co-commissioning really mean for Medway ?

NHS
Medway
Clinical Commissioning Group

- The ability to create a joined up, clinically-led commissioning system which delivers seamless, integrated out-of-hospital services based around the needs of local populations.
- Improved health outcomes, equity of access, reduced inequalities
- A better patient experience through more joined up services

Benefits of delegated commissioning

NHS
Medway
Clinical Commissioning Group



Risks

NHS
Medway
Clinical Commissioning Group

Risk	Controls	Mitigation
Capacity and capability within the CCG	<ul style="list-style-type: none"> CCG Governing Body Establish a CCG Primary Care Commissioning Steering Group with oversight 	<ul style="list-style-type: none"> Utilising our existing workforce and resources differently Potentially share resources across Kent and Medway Build on existing skills and utilise rather than duplicate roles and requirements Explore NHS England staff for transfer and secondment opportunities
NHSE Staff Depleted		
Primary Care Allocation from NHS	<ul style="list-style-type: none"> Establish CCG Primary Care Commissioning Steering Group with oversight Audit Committee scrutiny Financial planning and reporting arrangements 	<ul style="list-style-type: none"> Established regular transition meetings with CCG/NHS England and phase in, as NHSE phase out Close working re: due diligence and validation re allocations – shared approach across Kent and Medway Management alongside the whole of the CCGs allocation and financial budget setting processes
Impact of acute overtrade	<ul style="list-style-type: none"> Establish a CCG Primary Care Commissioning Steering Group with oversight Audit Committee scrutiny Financial planning and reporting arrangements 	<ul style="list-style-type: none"> Incorporation into business as usual and approach to assurance Ring fence primary care budget

Engagement with Member Practices

NHS
Medway
Clinical Commissioning Group

- Delegated Commissioning Webinar held for Medway Practices on the 8th July 2015
- GP Monthly Meeting 16 July – presentation and discussion with all practices
- Support gained from practices to change the constitution to support delegated commissioning :
 - **95% practices voted**
 - **93.5% supported constitution changes**

Future dates


Medway
Clinical Commissioning Group

October 2015 – Implementation plan shared with member practices prior to final review by Governing Body

28 October 2015 – Recommendation and implementation plan submitted to Governing Body for approval

6 November 2015 - submission to NHS England

December 2015- decision from NHS England

1st April 2016 - commence delegated (if agree to proceed and approved at each stage above)