Agenda Item 5

Lincolnshire COUNTY COUNCIL Working for a better future		THE HEALTH SCRUTINY COMMITTEE FOR LINCOLNSHIRE	
Boston Borough	East Lindsey District	City of Lincoln	Lincolnshire County
Council	Council	Council	Council
North Kesteven	South Holland	South Kesteven	West Lindsey District
District Council	District Council	District Council	Council

Open Report on behalf of Lincolnshire West Clinical Commissioning Group

Report to	Health Scrutiny Committee for Lincolnshire
Date:	18 November 2015
Subject:	Update on Delegated Commissioning Arrangements for GP Services – Lincolnshire West Clinical Commissioning Group

Summary:

The paper describes the new responsibility Lincolnshire West Clinical Commissioning Group has for commissioning GP services and the governance arrangements in place to mitigate potential conflicts of interest.

Actions Required:

To consider and comment as necessary on the content of the report.

1. Background

When the Health and Social Care Act 2012 was initially implemented in April 2013, the responsibility for the commissioning of primary care services was undertaken by the Leicestershire and Lincolnshire Area Team of NHS England.

In May 2014, NHS England invited clinical commissioning groups (CCGs) to come forward with expressions of interest to take on an increased role in the commissioning of primary care services. The intention was to empower and enable CCGs to improve primary care services locally for the benefit of patients and local communities.

Lincolnshire West CCG, (along with colleague Lincolnshire CCGs), made a successful application to take on delegated responsibility for GP commissioning. Since 1 April 2015 the CCG has been responsible for carrying out the functions relating to the commissioning of primary medical services under section 83 of the NHS Act, except those relating to individual GP performance management, which have been reserved to NHS England.

This includes the following activities:

- General Medical Service (GMS), Primary Medical Services (PMS) and Alternative Provider Medical Services (APMS) contracts (including the design of PMS and APMS contracts, monitoring of contracts, taking contractual action such as issuing branch/remedial notices, and removing a contract); but not the alteration of the Terms and Conditions of any national contract.
- Designing, developing, introducing and monitoring new newly enhanced services ("Local Enhanced Services" and "Directed Enhanced Services"), and modifying or stopping existing schemes.
- Designing and managing of local incentive schemes as an alternative to the Quality Outcomes Framework (QOF).
- Determining whether to establish new GP practices in an area.
- Approving practice mergers.
- Making decisions on 'discretionary' payment (e.g., returner/retainer schemes).

Governance

All CCGs taking on responsibility for GP commissioning were required to establish an independent Primary Care Commissioning Committee to exercise and oversee the delegated Primary Care commissioning functions. Such committees are required to have a lay chair and a majority on non GP members.

The Lincolnshire West CCG committee has a total of 11 members and is chaired by a lay member. To further support good governance an additional lay member was recruited with a specific remit for primary care commissioning. Details of the membership are given below:

- Lay Chair of the CCG* (or lay vice chair if the chair is a General Practitioner)
- Chief Operating Officer or nominated deputy*
- Chief Nurse or nominated deputy *
- Chief Finance Officer or nominated deputy*
- Lay member for Public & Patient Involvement*
- Lay member for primary Care*
- Secondary Care Clinician Governing Body member*
- NHS England Representation
- The Clinical Accountable Officer
- GP Clinical Advisor

The four CCG Localities chairs

Voting rights are indicated by *. No GPs have voting rights. In addition to members listed above, representatives from Lincolnshire Healthwatch and the Lincolnshire Health and Wellbeing Board are invited to attend the meeting as observers, and attend regularly. Meetings are open to the public and are normally held on third Wednesday in the month.

Conflicts of Interest Policy

To mitigate potential conflicts of interest the CCG revised its Conflicts of Interest policy in accordance with new national guidance. The revised policy was reviewed and approved as part of the CCG's application to take on delegated primary care commissioning.

Funding for Commissioning GP Services

The revenue budget for commissioning GP primary care services has been delegated to the CCG. The CCG also holds the budget for GP IT. Funding for infrastructure such as development of primary care premises has been retained centrally, although this may change in future. Some NHSE staff have been assigned to the four Lincolnshire CCGs to support administration, but the CCG's nationally set management allowance was not increased as a result of taking on these additional responsibilities, in fact the CCG's management allowance was cut by 10% in 2015/16.

Quarterly Declaration

CCGs who have taken on responsibility for delegated primary care commissioning are required as part of the new assurance process, to submit a quarterly declaration regarding these duties. A copy of the quarter 1 declaration is attached as Appendix 1

Key Issues

The Primary Care Commissioning Committee has met monthly since April 2015 and has discussed a number of issues including:

- 1. Concordat for the Sharing of information and the Management of Concerns relating to the Professional and Contractual Performance of Primary Medical Practitioners.
- 2. Estates issues.
- 3. Quality Assurance for Primary Care
- 4. QOF [Quality and Outcomes Framework] 2013/14 Heart Failure Indicator Performance by Practice.
- 5. Practice/Locality Profiles.
- 6. Prescribing and Physiotherapy.
- 7. Policy for Practices in Crisis (including failing practices).
- 8. Individual Practice Issues.
- 9. Care Quality Commission Reports.

2. Conclusion

The CCG believes that by taking on delegated commissioning responsibilities for GP Primary Care Services, along with its existing responsibilities, enables it to commission

services in a more integrated way which will benefit the population of Lincolnshire West CCG.

3. Consultation

This is not a direct consultation item

4. Appendices

These are listed below and attached at the back of the report		
Appendix A	Quarter 1 Declaration	

5. Background Papers

No background papers within Section 100D of the Local Government Act 1972 were used in the preparation of this report.

This report was written by Sarah Newton, who can be contacted on Sarah.newton@lincolnshirewestccg.nhs.uk