

Item for:	
Decision	X
Recommendation	
Information	



**AGENDA ITEM NO: 1**

<b>Meeting Title/Date:</b>	Primary Care Commissioning Committee – May 2021		
<b>Report Title:</b>	Primary Care Commissioning Operational Group – Funding to GP Practices for Participation in Local Enhanced Services 2021/22		
<b>Paper Prepared By:</b>	Kay Wilson	<b>Date of Paper:</b>	April 2021
<b>Executive Sponsor:</b>	Hilary Fordham	<b>Responsible Manager:</b>	Kate Hudson
<b>Committees where Paper Previously Presented:</b>	N/A		
<b>Background Paper(s):</b>	N/A		
<b>Summary of Report:</b>	This report provides recommendation from the Primary Care Commissioning Operational Group regarding the funding to general practices in respect of participation in the Local Enhanced Services for 2021/22 commissioned by the CCG.		
<b>Recommendation(s):</b>	The Committee is asked to review, and approve, the recommendation made by the Primary Care Commissioning Operational Group in respect of the proposal to protect income to practices for the first quarter of 2021/22.		
			<b>Please Select Y/N</b>
<b>Identified Risks:</b> (Record related, Assurance Framework or Risk Register reference number)	N/A		N
<b>Impact Assessment:</b> (Including Health, Equality, Diversity and Human Rights)	N/A		N
<b>Strategic Objective(s) Supported by this Paper:</b>	N/A		<b>Please Select (X)</b>
<b>Better Health</b> - improve population health and wellbeing and reduce health inequalities			X
<b>Better Care</b> - improve individual outcomes, quality and experience of care			X
<b>Delivered Sustainably</b> - create an environment for motivated, happy staff and achieve our control total			X
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**MORECAMBE BAY CCG PRIMARY CARE COMMISSIONING COMMITTEE**

**PRIMARY CARE COMMISSIONING OPERATIONAL COMMITTEE**

**RECOMMENDATION FOR REIMBURSEMENT TO GP PRACTICES FOR PARTICIPATION IN LOCAL ENHANCED SERVICES 2021/22**

**1. INTRODUCTION**

- 1.1 At its meeting on 25<sup>th</sup> March 2021 the Primary Care Commissioning Operational Group (PCCOG) asked for a Task and Finish Group to be established to review the Local Enhanced Services which would be provided by GP practices in the forthcoming financial year (2021/22).
- 1.2 The feedback from the Task and Finish Group was presented to the April 2021 meeting of PCCOG. PCCOG members supported the recommendation of the Task and Finish Group and noted that this needed to be presented to the Primary Care Commissioning Committee for ratification.

**2. BACKGROUND**

- 2.1 Local Enhanced Services (LESs) are commissioned from general practices on an annual basis. As such, a review is undertaken of all specifications usually during the last quarter of the year (January to March) to ensure that these continue to be appropriate and should be commissioned in forthcoming financial year. Whilst minor changes have been made in previous years, the CCG has continued to commission 7<sup>1</sup> LESs.
- 2.2 In 2020/21, the annual review of LESs was delayed due to the impact of the Covid-19 pandemic. To remove the concern by practices that there was the potential for a significant reduction in income which may have destabilised some practices, a decision was taken in October 2020 to continue the funding to practices based on the outturn levels for 2019/20<sup>2</sup>. Therefore, whilst the Committee acknowledged that practices would not be able to provide the same level of activity due to the impact of the pandemic, it recognised the need to ensure that practices remained viable.
- 2.3 It is not possible to work out the average payment to a practice in respect of income from providing the services as the payment is based either on activity according to patient need or achievement of certain targets and, therefore, not a standard payment simply based on the total practice list size; the value of the each LES is shown in Table 1 below.

<sup>1</sup> Oral Anti-coagulation monitoring has only been counted once

<sup>2</sup> Primary Care Commissioning Committee meeting held on 1<sup>st</sup> October 2020

**Table 1: Value of LESs**

LES	FUNDING TO PRACTICE
Quality Improvement Scheme	£7.00 per registered patient split into price per element achieved
Oral Anti-Coagulation (South Cumbria)*	£180 per appropriate patient
Oral Anti-Coagulation (Lancashire)*	£10.10 per appropriate patient
Minor Injuries	£42.00 per intervention
Post-Operative Dressings	£10.04 per appropriate patient
Prostate Cancer	£40.16 per appropriate patient
Shared Care	Level 1 drugs - £21.89 per patient Level 2 drugs - £30.89 per patient
Paediatric Minor Ailment Scheme	Payment to Pharmacists only

\* The need for the different levels in South Cumbria and Lancashire is based on an historic secondary care service position

- 2.4 The approximate spend for all services commissioned under local agreements in 2020/21 across the CCG area was £4,733,000<sup>3</sup>. This demonstrates a significant investment in GP practices for the provision of Local Enhanced Services.

### 3. FEEDBACK FROM TASK AND FINISH GROUP

#### General Principles

- 3.1 Following the PCCOG meeting in March 2021, the Task and Finish Group met on 15<sup>th</sup> April to review the current LES specifications. In light of the proposed organisational change and the potential that all LESs across the South Cumbria and Lancashire Integrated Care System (ICS) footprint could change in an effort to have increased consistency; the group agreed that, as long as the services commissioned by NHS Morecambe Bay CCG continued to be those services which needed to be commissioned from primary care providers locally, major changes were not appropriate at this time.
- 3.2 The group reviewed the specifications for each of the services offered, including the individual targets within the QIS scheme. The group agreed that the themes within the QIS remained relevant as well as the services commissioned through LES services. Therefore, the group agreed that it was not necessary to amend the indicators set out in the QIS or the specifications for the LESs.

#### Proposed Income Protection

- 3.3 The group discussed the difficulties practices had faced over the last 12 months and the need to ensure continued stability in primary care. However, the group was also mindful of the re-start of all health services announced by the Government. In light of this, the group concluded that it would not be appropriate to agree to continued income protection for the whole of 2021/22 at this point in the year. The group acknowledged that the re-start of services needed to be a well-managed process by practices and that the CCG wished to support this. Consequently, the group recommended that

<sup>3</sup> This figure includes funding of approximately £180,000 which is not paid against the services listed in Table 1 but is for A-typical populations and a local service funded for Optometrists

income should be protected for the first quarter only at this stage, ie April 2021 to June 2021 with payment reverting to being activity based for the remainder of the financial year. The group agreed to reconvene in June 2021 to review this position to ensure this was appropriate and on a quarter-by-quarter basis after that. This agreement was reached as the group was mindful that the potential impact of Covid-19 on the provision of services during the autumn / winter of 2021 was unknown at this point and, therefore, the group wanted to retain the option of reviewing the situation each month to determine whether specific action was needed later in the year.

### **Quality Improvement Scheme**

- 3.4 The group was aware of the on-going work around the possible development of ICS level quality contracts. Consequently, the Task and Finish Group agreed that a break-clause should be included in the QIS contract which would be effective after 6 months, ie September 2021. This would allow the CCG to amend the QIS at that point in order for any ICS driven changes to be introduced for the remainder of the year, if applicable. In this scenario, achievement against the QIS would be calculated with a reward being funded at an appropriate level. If the ICS quality standards were not finalised and unlikely to be introduced before the end of the financial year, then the Morecambe Bay CCG QIS would continue as planned.

## **4. RECOMMENDATION**

- 4.1 The recommendation from PCCOG to the Primary Care Commissioning Committee is to consider and approve the 2019/20 outturn (Pre-COVID) level as the basis of payments to GP practices for the provision of LESs during the first quarter of 2021/22 only, thereby giving a degree of income protection for practices.
- 4.2 For the remainder of the financial year, PCCOG recommends that this reverts to an activity based payment in line with normal commissioning arrangements. However, PCCOG also recommends that this position is reviewed on a quarterly basis; this approach will allow for flexibility, particularly over the winter period, should the effect of the pandemic have a further impact on the way primary medical services are provided.
- 4.3 If further income protection is considered to be appropriate by PCCOG a further request will be made to the Primary Care Commissioning Committee.

APRIL 2021