



NHS England - Primary Care Update

NHS England – Primary Care Update
NHS Hull CCG – Primary Care Joint Commissioning Committee
24th February 2017
Public Paper

Prepared by Hayley Patterson
Assistant Primary Care Contracts Manager
NHS England - North (Yorkshire & the Humber)

Report for: NHS Hull CCG - Primary Care Joint Commissioning Committee
 Report from: NHS England
 Report Title: Primary Care General Practice Report

1.0 Contract Changes

The following table confirms any contract changes that are currently under discussion:

Practices	Further Information	Action Needed
Dr Shaikh (B81682)	Retirement rescinded	For Information
Dr Dave (B81653)	Status changed from GP Partner to salaried GP	For Information
Dr Malczewski (B81080)	Application for a 6month temporary list closure, currently out for consultation	For Information
Orchard 2000 (B81018) and Dr Awan (B81685)	Practice merged on 1/1/17	For Information
Kingston Health (B81011)	Approval given for practice to change its boundary. NHS England are working with the practice and will report further at the next meeting	For Information

Action for the committee:

The Committee is asked to note the information

Practices	Further Information	Action Needed
Haxby (YO2747) - Priory Surgery	<p>The practice's application to vary the contract to close the Priory Surgery and relocate the services to both Kingswood and Orchard Park Surgeries was considered previously at the October 2016 meeting. The recommendation from NHS England was that the priority should be for Haxby to look to relocate to space vacated by City Health Care Partnership (CHCP) in the Calvert Centre and that the closure and relocation is supported by comprehensive consultation and engagement plan to support service change.</p> <p>Following discussion with both NHS England and the CCG, the practice submitted a formal application to close the surgery.</p> <p>The attached report was circulated for consideration by members. The report reflected the issues raised in the application but also set out key areas which highlighted concerns with maintaining the resilience of the service and ultimately patient safety on the site together with points raised in the discussion at the Committee in October for consideration (patient engagement) and the subsequent recommendation.</p> <p>Decision made: Application to close the Priory Surgery was virtually</p>	For ratification

Practices	Further Information	Action Needed
	approved. The date for the surgery to be closed will be agreed with the Practice. Patients can remain registered with the Practice and access services at Orchard Park or Kingswood if they wish.	

Action for the committee:

The Committee is asked to ratify the approval to close the Priory Surgery. The date for closure to be agreed with the Practice

2.0 Hull APMS Procurement Update

The NECS Recommended Bidder Report (RBR) for all 8 contracts under the Hull APMS procurement was approved by NHS England Senior Management Team (SMT) on 7th February 2017. Standstill letters were issued by NECS on 10th February 2017 to both bidders with the 10 day standstill period commencing on 11th February 2017 and ends at midnight on 20th February 2017. Contracts will then be awarded 21st February 2017 and the mobilisation period will begin on 22nd February 2017 in advance of the new contract start dates of 1st April 2017.

The RBR will be presented for retrospective approval at the NHSE Commercial Executive Group (CEG) meeting on 7th March 2017. NHS England Yorkshire & the Humber were informed of the need for CEG approval at a late stage in the procurement process and as such could not meet the submission deadline for presentation of papers to the February CEG meeting. The decision was therefore taken to seek this retrospective approval in order to mitigate the risk to patient services, allow for the contracts to be awarded and mobilisation period to commence.

Action for the committee:

The Committee is asked to note the information

3.0 New GP contract for 2017/18

It was announced on 7th February 2017 that NHS England, the Government, and the British Medical Association’s General Practitioners Committee have reached agreement on changes to the general practice contract in England for 2017/18.

The new agreement includes an increased focus on some of the most vulnerable, with tailored annual reviews offered to frail pensioners, and an increase in the number of health checks for people with learning disabilities.

The new contract also includes provisions to encourage practices to expand access and not to close for half-a-day a week. GP practices which regularly close for mornings or afternoons on a week day will lose their eligibility for the current extended hour’s scheme claimed by most practices. Practices that join together with other GPs in their local area to offer more evening and weekend appointments will be eligible for extra non-contractual funding over and above the current scheme.

Strengthening requirements in the 2016/17 contract, general practices will also help determine a new patient’s eligibility for NHS healthcare. This will help with the identification of patients from the European Economic Area and should make it easier for the NHS to reclaim money from their home countries.

The new contract, to take effect from 1st April 2017, will see investment of around £238 million going into the contract for 2017/18.

In addition, £157 million from a previous earmarked scheme will be transferred into core GP funding so that family doctors can be more flexible in how they care for the most frail patients.

This is part of NHS England's plan, set out in the General Practice Forward View last year, to reverse previous years of under-investment in general practice.

For GPs, agreement has been reached to cover the rising costs for practices in a number of key areas, including costs of CQC inspection, indemnity costs, and other areas of workload.

The investment announced will provide a pay uplift of one per cent for GPs with other agreed changes including:

- Increased investments into a scheme to help GP retention
- Improved payment arrangements to cover parental leave and sickness absence

The document below highlights the key changes in more detail.



GP Contract changes
2017-18.pdf

Action for the committee:

The Committee is asked to note the changes to the GP Contract for 2017/18

4.0 Clinical Pharmacists in General Practice

The General Practice Forward View committed to over £100m of investment to support an extra 1,500 clinical pharmacists to work in General Practice by 2020/21. This is in addition to over 490 clinical pharmacists already working in general practice as part of a pilot, launched in July 2015. NHS England, Health Education England, the Royal College of General Practitioners and the British Medical Association's GP Committee are working with the Royal Pharmaceutical Society to support this.

In July 2015, a pilot was launched to kick start the expansion of clinical pharmacy in general practice. As a result, by December 2016, over 490 additional clinical pharmacists were working across approximately 650 GP practices across the country.

Following the success of the pilot, NHS England will be inviting GP practices and other providers of general practice medical services to apply for funding to help recruit, train and develop more clinical pharmacists to meet the commitment of an additional 1,500 clinical pharmacists in general practice by 2020/21.

Providers participating in the programme will receive funding for three years to recruit and establish clinical pharmacists in their general practices for the long term. Applicants from provider organisations will be able to submit applications from 9th January 2017 through an online portal. The first cohort of successful participating providers will be announced in March. If there are any successful applications from the Hull area, the Committee will be updated in due course.

Action for the committee:

The Committee is asked to note this update and ensure all Hull practices are aware of the programme

5.0 Publication of GP Practices serving Atypical Populations

In December 2016, NHS England published this document which guides commissioners to the types of issues and data sources they could consider in coming to a judgement about support that is relevant to a practice's particular circumstance, where commissioners and individual practices have a shared concern about meeting the health needs of their patients. This is in relation to practices that serve populations that are so significantly atypical that when using the national funding formula it may not be adequate to ensure the delivery of an adequate practice service.



Action for the committee:

The Committee is asked to note the publication and decided if a review of Hull GP Practices is required to identify if there are any practices that fall under the remit of the guidance

6.0 Humber Coast and Vale STP Update

STP Team

All posts now appointed to as follows:

- Programme Lead – Helen Phillips (in post)
- Project Officer – Melissa Brolls (in post)
- Project Officer – Jane Wild (start date awaited)
- Administration Support – Fiona Pedlingham (in post)

STP Primary Care Work plan

The STP Team work plan will be agreed with the Primary Care Group which includes the Primary Care Lead for each CCG, LMC and NHS England. The work plan to date includes the following:

- Care Navigator Training
- International Recruitment proposal to be submitted 8th February 2017
- Career Plus Scheme – Hull CCG has been approved nationally for the pilot using CHCP as the employing organisation. Work is now ongoing to put plans in place to develop the scheme
- Resilience Funding proposals and Vulnerable Practice Scheme proposals