

Report to:	Primary Care Commissioning Committee
Date of Meeting:	Friday 25 th October 2019
Title of Report:	GP Practice Visit Process
Presented by:	Kate Memluks, Commissioning Lead - Quality
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STATUS OF THE REPORT:

To approve	<input checked="" type="checkbox"/>	To endorse	<input type="checkbox"/>
To ratify	<input type="checkbox"/>	To discuss	<input type="checkbox"/>
To consider	<input type="checkbox"/>	For information	<input type="checkbox"/>
To note	<input type="checkbox"/>		

PURPOSE OF REPORT:

This paper describes the Primary Care Quality Assurance process that the CCG proposes to adopt in order to meet our statutory duty relating to the quality assurance of primary care medical service provision. This includes the introduction of the Primary Care Commissioning Policy on Monitoring and Evaluation.

The approach is designed in such a way as to address quality assurance, support improvement in General Practice and provide a systematic process for managing unwarranted variation.

RECOMMENDATIONS:

The Primary Care Commissioning Committee is recommended to approve:

1. the introduction of the Primary Care Commissioning Policy on Monitoring and Evaluation;
2. the reporting of the policy by the Primary Care Quality and Performance Sub Committee to the Primary Care Commissioning Committee

REPORT EXEMPT FROM PUBLIC DISCLOSURE No Yes

If yes, detail grounds for exemption

CCG STRATEGIC OBJECTIVE

Integrated and Joint Commissioning - NHS Hull CCG jointly commission General Medical Services from GP Practices in Hull.

The Process will support the monitoring and assurance of Primary Care Quality and Safety.

IMPLICATIONS:

Finance	Implementation of the process and policy should support the CCG to identify outlying practices and provide the appropriate support to reduce unwarranted variation. Thereby improving quality by reducing waste and hitherto delivering financial savings.
HR	None
Quality	<p>Key Issues: The CCG Primary Care Quality Assurance process is designed to operate in tandem with NHS England's quality assurance processes. As well as provide a robust systematic process for supporting quality improvement in general practice.</p> <p>Key Risks: Implementation of this process and policy should mitigate against instances where a practice may not meet defined minimum core standards of primary care provision, there are potential issues of safety or there is non-engagement from the practice over a range of areas.</p>
Safety	The CCG must have robust measures in place to monitor safety, effectiveness and experience (inclusive of both patient and staff experience). The process will provide such assurance.

ENGAGEMENT:

The CCG has engaged with the Humberside LMC and the other CCGs within the Humber Coast and Vale Area regarding the Pre Visit Questionnaire and the process, all feedback has been taken into account.

LEGAL ISSUES:

There is a possibility that contractual sanctions may be enacted should it be deemed that any GP Practice is not fulfilling its legal obligations.

EQUALITY AND DIVERSITY ISSUES:

	<i>Tick relevant box</i>
An Equality Impact Analysis/Assessment is not required for this report.	x
An Equality Impact Analysis/Assessment has been completed and approved by the lead Director for Equality and Diversity. As a result of performing the analysis/assessment there are no actions arising from the analysis/assessment.	
An Equality Impact Analysis/Assessment has been completed and there are actions arising from the analysis/assessment and these are included in section xx in the enclosed report.	

THE NHS CONSTITUTION:

The process supports:-

The NHS provides a comprehensive service, available to all

Commitment to quality of care

Quality of care and environment

Informed choice

The NHS aspires to the highest standards of excellence and professionalism

Commitment to quality of care

1 Introduction

Hull CCG has the delegated authority for contracting primary care medical services, as well as the existing statutory duty to assist and support NHS England with the quality assurance of primary care medical service provision.

The CCG also has a responsibility for improving and developing the quality of primary care general practice, reducing variation and in supporting their member practices.

This paper describes the approach that the CCG will be adopting in respect of Quality Assurance, Performance and monitoring of the local primary care medical services designed in such way to address quality assurance, support improvement in general practice and provide a systematic process for managing unwarranted variation.

2 Background

Practices, as providers of primary care services, are accountable for the quality of service, and are required to have their own quality monitoring processes in place. The CCG as commissioner has a responsibility for quality assurance. The principle is to be supportive whilst enhancing quality and preventing harm to patients. Through the duty of candour and the contractual relationship with commissioners, practices are required to provide information and assurance to commissioners and engage in system wide approaches to improving quality. The CCG is committed to improving the quality of care for our patients and therefore assessing, measuring and benchmarking quality and supporting general practice to deliver high quality care is a key focus.

The Primary Care Commissioning Policy on Monitoring and Evaluation describes our proposed approach to monitoring and assuring quality and improvement in all Primary Care commissioned medical services. This process is also designed to support improvement in general practice and provide a systematic process for managing unwarranted variation.

3 Quality Assurance process

The CCG must have in place robust systems and processes to regularly monitor and evaluate primary care commissioning provision in terms of:-

- Activity
- Quality; safety; effectiveness and experience (inclusive of both patient and staff experience)
- Sustainability

The approach will cover the areas described above and the monitoring will take place through routine internal contractual processes and clinical governance structures and external sources such as CQC, peer reviews, national surveys etc.

The governance arrangements will include the routine monitoring of a primary care quality dashboard by the members of the Primary Care Quality and Performance Committee. This Committee will have membership from across the CCG directorates; Service Redesign and Planning Primary Care Leads, Nursing and Quality, Business Intelligence and NHS

England in order to identify potential or actual risks to quality, agree a response and to ensure that concerns about quality are reported to the CCG Clinical Governance Committee and risks are escalated appropriately to the Primary Care Commissioning Committee. In line with sub-committee requirements, any decisions arising from a practice visit would be brought to this committee for a decision on appropriate action, e.g. contract sanctions.

The process is described in detail in the Primary Care Commissioning Policy on Monitoring and Evaluation - Attachment 1. This includes routine quality assurance monitoring visits, Quality Surveillance and formal contract action. A two year cycle of routine practice visits will take place alongside any other identified monitoring required. Prior to any practice visit, a Pre-practice visit questionnaire will be sent to the GP practice and requested that it is completed and returned before the visit takes place.

4 Recommendations

The Primary Care Commissioning Committee is recommended to approve:

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2. the reporting of the policy by the Primary Care Quality and Performance Sub Committee to the Primary Care Commissioning Committee.