

BNSSG Primary Care Commissioning Committee (PCCC)

Date: 29th October 2019

Time: 9.00am – 10:45am

Location: Vassall Centre, Gill Avenue, Bristol, BS16 2QQ

Agenda Number :	8
Title:	Contracts and Performance Report
Purpose: For Information	
Key Points for Discussion:	
The purpose of this paper is to update Primary Care Commissioning Committee on the status of BNSSG primary care contracts and provide a summary of performance issues.	
Recommendations:	The committee are asked to note the contents of this report for information
Previously Considered By and feedback :	Not Applicable
Management of Declared Interest:	Not Applicable
Risk and Assurance:	There are no specific risks highlighted in this paper this month. Any risks associated with contractual changes will be highlighted via separate papers
Financial / Resource Implications:	There are no specific financial resource implications highlighted within this paper. Any contractual change requests will be considered via separate papers and will include any relevant financial implications.

Legal, Policy and Regulatory Requirements:	There are no specific legal implications highlighted within this paper. Any contractual change requests will be considered via separate papers and will include any relevant legal implications.
How does this reduce Health Inequalities:	Monitoring of Primary Care performance alongside practice demographic information will help to highlight areas of variation of services, which will then be addressed accordingly.
How does this impact on Equality & diversity	Monitoring of Primary Care performance alongside practice demographic information will help to highlight areas of variation of services, which will then be addressed accordingly.
Patient and Public Involvement:	Whilst there has not been consultation and communication with the public in the production of this paper, patient experience and public involvement is recognised as an important factor in reviewing and gaining assurance regarding primary care services.
Communications and Engagement:	There are no specific communication issues highlighted as a result of this paper. Any contractual change requests that require further engagement will be highlighted via separate papers.
Author(s):	Louisa Darlison and Steph Maidment, Senior Contract Managers, Primary Care
Sponsoring Director / Clinical Lead / Lay Member:	Lisa Manson, Director of Commissioning

Agenda item: 8

Report title: Contract and Performance Report October 2019

1. Background

The paper provides a summary of the contractual status of the contracts held across the Primary Care Contract portfolio. This includes all GMS / PMS and APMS contracts as well as the locally commissioned Improving Access to General Practice Contract.

2. Current Contracts

CCG	APMS	PMS*	GMS	Total
Bristol, North Somerset and South Gloucestershire (BNSSG)	8**	63	10	81

*NHS England has offered new contracts to all PMS practices

**APMS contract for SAS included

With effect from 1 October 2019 there are now a total of 81 contracts held across BNSSG CCG. This is a reduction from 84 due to the closure of 2 APMS contracts (Bishopston and Northville) and the closure of 1 PMS contract site (Clarence Park).

a. Single handed Contractors holding GMS/PMS contracts

Practice	Code	List Size (01/01/19)	Contract Type
Monks Park Surgery (Langton)	L81669	5,718	PMS

The contracts team have issued a contract variation to add to two additional partners to the Cedars Surgery contract. This has been returned and therefore this practice is no longer a single handed contractor.

The Monks Park Surgery became a single handed practice at the end of March 2019. The Contracts team has received a request to add a list of additional partners to the Monks Park contract and this request is currently being processed.

3. Procurements/Contract Expiries

a. Current Procurements

Service	Locality	Status	Expected Contract Award date	Anticipated Commencement date
Charlotte Keel Medical Practice	ICE	Extension with incumbent to March 31st 2020. Tender published September 2 nd 2019.	Issue of formal award notice: 10/12/19	1 st April 2020

b. APMS Contract Expiries

Practice	Locality	Contract Type	Agreed End date	Notes
Horizon Health (Weston)	North Somerset	APMS	31/10/2019	With option to extend by 1 year
Charlotte Keel Medical Practice	ICE	APMS	31/03/2020	Contract commenced 01/04/18
Broadmead Medical Centre (Y02578)	ICE	APMS	30/09/2031	With option to extend by 5+5 years
Homeless Health Service (Y02873)	ICE	APMS	30/09/2021	With option to extend by 5+5 years
Emersons Green Medical Centre (L81362)	South Gloucestershire	APMS	31/01/2032	With option to extend by 5+5 years
Graham Road	Weston & Worle	APMS	12/06/2020	With option to extend by 1 year
Bridge View Medical Special Allocation Scheme	N/A	APMS	30/06/2021	With option to extend by 2 years

c. Other Primary Care Contracts

Provider	Locality	Contract Type	Agreed End date	Notes
Language Empire Ltd	BNSSG	NHS Standard	30/09/2021	With option to extend by 2 years
Action on Hearing Loss	BNSSG	NHS Standard	30/09/2021	No further option to extend

4. Practice mergers

a. Approved mergers

No new applications.

b. New Merger Applications

A formal application to merge New Court Surgery and Longton Grove Surgery has been received on 26 September 2019. The application form requests a merger date with effect from 1 April 2020. The Primary Care contracting team has followed the formal process and submitted a separate report for consideration and approval by PCCC.

5. Closed list Applications

No new applications

6. Approved List Closures

No new applications

7. Partnership Change Requests

The Primary Care Contract team have been asked to prepare contract variations to a group of practices in order to support the formation of a 'Super Partnership'. Following assurance received the contract team are preparing the required variations.

8. Temporary Practice Hour changes

Practices have the ability to submit applications to close for a number of hours to allow them to plan for things such as training sessions and periods of significant IT downtime etc. All applications are considered individually, and the practices are asked to demonstrate the reasons for closure and the contingency for patients during these closures.

The table below details the number of applications received since 1 April 2019.

	N/Somerset	Bristol	S Glos	Totals
Applications	1	2	7	10
Practices	1	2	7	10

Practices are reminded that 4 weeks' notice is required for any proposed closure.

9. Applications to Change Practice Boundaries

No applications received

10. Branch Surgery Closures

No applications received

11. Contract Breach and Remedial Notices

No Contract Breach or Remedial Notices have been issued. There are currently no live notices in place with any practice.

12. Primary Care Performance Management Monitoring

BNSSG CCG currently commission Improved Access from One Care (BNSSG) Ltd. One Care are commissioned to deliver on average an additional 45 minutes / 1000 population (weighted) per week access to general practice. Current performance across BNSSG is as follows:

	Apr	May	June	July	Aug
Av Minutes / week BNSSG	37.0	37.9	42.5	41.7	38.0

The number of average minutes delivered per week in August was 38.0.

The average number of minutes delivered in August was 38.0. Practices delivered 34.4 of these minutes with utilisation levels of 84% and a DNA rate of 7%.

BrisDoc continue to provide appointments on a Sunday with three face to face bases in Knowle, New Court surgery and Cossham hospital. Utilisation of these appointments improved from the July position. 6 patients were seen with 1.33 hours / 27 offered being booked. This equates to a 5% utilisation rate. The improvement in comparison to July is as a result of OneCare actively working with practices geographically located near the bases to encourage sign posting and booking of the Sunday provision. Going forward BrisDoc are working with One Care and local ED departments to try and create a link for Acute trusts to book into these slots.

	North and West Bristol (178,964)	South Bristol (162,954)	Inner City and East (155,891)	Weston, Worle and Villages (117,756)	Woodspring (108,942)	South Glos. (249,059)
Average weekly mins / 1000 population	31.3	45.4	33.0	40.0	39.2	43.5

At locality level, three localities planned to deliver the minimum 30 mins per 1000 population per week across quarter 2 with the remaining three localities choosing to deliver the maximum contracted value of 45 minutes per 1000 per week.

Third party utilisation with PhysioNet has dipped from 92% to 57%. This has been due to the increase in provision to support delivery of extended hours. This is an MSK assessment services provided from four localities.

One Care have committed to support the Alamac system call process. It has been suggested that they will join the call on Monday and Friday. This will ensure primary care is represented and party to the conversations on wider Urgent care performance and delivery. One Care will also contribute to the winter planning process and have agreed to complete a template summarising specific pre-winter preparation that is in place, key initiatives planned for this winter, specific support requested from system partners, key risks anticipated and associated mitigations.

13. Financial resource implications

There are no specific financial resource implications highlighted within this paper. Any contractual change requests will be considered via separate papers and will include any relevant financial implications.

14. Legal implications

There are no specific legal implications highlighted within this paper. Any contractual change requests will be considered via separate papers and will include any relevant legal implications.

15. Risk implications

There are no specific risks highlighted in this paper this month. Any risks associated with contractual changes will be highlighted via separate papers.

16. Implications for health inequalities

Monitoring of Primary Care performance alongside practice demographic information will help to highlight areas of variation of services, which will then be addressed accordingly.

17. Implications for equalities (Black and Other Minority Ethnic/Disability/Age Issues)

Monitoring of Primary Care performance alongside practice demographic information will help to highlight areas of variation of services, which will then be addressed accordingly.

18. Consultation and Communication including Public Involvement

Whilst there has not been consultation and communication with the public in the production of this paper, patient experience and public involvement is recognised as an important factor in reviewing and gaining assurance regarding primary care services.

19. Recommendations

The committee are asked to note the contents of this report for information.

Report Author: Louisa Darlison and Steph Maidment

Report Sponsor: Lisa Manson

Glossary of terms and abbreviations

Please explain all initials, technical terms and abbreviations.

APMS	Alternative Provider of Medical Services - Type of GP contract
GMS	General Medical Services – Type of GP contract
PMS	Personal Medical Services – Type of GP contract