England

Primary Care Support Services Transformation Programme

Update from Ann Sutton, Director of Commissioning (Corporate)

UPDATE 2

5 March 2014   Publications Gateway Reference Number: 01232

This is an update for people and groups who are interested in proposed changes to primary care support services. If you want to have names added to or taken off the distribution list please email england.pcsinfo@nhs.net

Background

NHS England is changing the way primary care support (PCS) services (also known as family health services) are provided across England. A general overview of the PCS transformation project is available here

What services are affected? "Core" and "non-core" categorisation

PCS services cover similar but not identical roles in different parts of the country. We have developed a national standard for those services that will be considered "core" and will be delivered in future by every PCS service. We have also listed services that are "non-core" that may have been delivered in some places by PCS services and either provider arrangements need to be identified for the future or, in some cases, they will stop. A project is underway to decide the future arrangements.

So, there are three categorisations of services:

List 1: Core Services. These will be funded by NHS England and provided through PCS services.

List 2 a) Non-core services that may continue to be provided by PCS services but future arrangements need to be decided.

List 2 b): Non-core services that will stop.

The content of the three lists is summarised below.

Core (list 1)	Non-core (list 2a – continuing)
Registration of patients at a GP practice	
• Assigning patients unable to gain voluntary registration with a GP practice to the list. • Processing registrations received and notification in writing to confirm registration and notify NHS number. • Removal of patients following request	• Adding a patient's registration for organ and blood donation to their electronic record. • Management of the violent patient scheme contract. • Administrative activities when a GP practice closes such as informing

from the practice due to violent behaviour in accordance with the Violent Patient Scheme. • Deletion of patients from practice lists following notification of deaths, removals etc.	patients, and moving records.

Population Database

Maintenance of the population database ensuring accuracy of the data held. This data is used in patient registration, NHS screening programmes and contractor payments. It includes: • ensuring notifications of changes to patient details are recorded • handling Subject Access Requests and requests for disclosure of patient identifiable data • routine tasks to tackle potential list inflation, eg dealing with returned mail (suggesting that the patient has moved) • reconciling NHAIS data with that held on GP practice systems on request • maintain the accuracy of addresses and in particular the post codes.	• Checks to ensure that the population database is correct including targeted project work to tackle list inflation such as letters to multiple occupancy addresses or checking registrants over 100.
Routine list reconciliation	• Non-routine list reconciliation

Medical records

Medical records – all processes including: • forwarding records to practice following patient registration • undertaking urgent transfers of records when required • recall and secure storage of medical records of patients no longer registered with a GP practice • processing applications for access to medical records • bulk transfer of records following GP resignations and retirement.	• Redirection of non-GP clinical notes (misdirected mail sent incorrectly to practices from clinics, to be returned by practices directly to those clinics). • GP courier services (charging practices for the collection of records as per the regulations).

Performer and contractor list administration

• Processing applications, ensuring all checks are carried out including face-to-face identity checks, receiving and validating required. • Notifying Area Team of any identified issues or concerns and undertaking annual performers list reviews. • Processing notification of change of area being worked in, including transfer of records in accordance with the agreed protocol. • Processing of all change of status to the performers including removals by prior agreement with the Area Team. • Maintaining Primary Care Information System (PCIS) to reflect performer list changes.	• Updating performer and contractor information on the NHS Choices website. • Administration for DBS (Disclosure and Barring Service) checks for performers wanting to join the approved list • Administration for ophthalmic contractor applications, contract preparation and variation, panels and appraisals • Attending monthly panels governing contractor activity decisions • Performance appraisals of contractors • Retaining professional advisers • DBS and ID checks for practice staff

Screening	
• Cervical and breast screening administration to the specification of the relevant national screening programmes	• Administration of screening programmes other than breast and cervical call and recall, including Abdominal Aortic Aneurysm *(AAA)* cancer screening, the Heart Screening Programme, TB screening and diabetic retinopathy.
Finance 1	
• Payment of practitioners on the Exeter system. • Maintaining GP practice details on the Exeter system (National Health Authority Information. System – NHAIS) in relation to the payment process for medical contractors i.e. correct vendor numbers identified for contractors. • Maintaining ophthalmic contractors details on the Open Exeter system in relation to the Vendor Site Reference (VSR) number for payment purposes. • Ensuring the payment files generated from NHAIS are uploaded to the Integrated Single Financial Environment (ISFE) in order for payment to be made.	• The following administrative processes for GPs: - administration of the tri-annual rent reviews - updating Open Exeter following rent review appeals - some administration around changing of bank account details, specifically processing of contractor bank mandates to facilitate payment. • Payments that are the responsibility of other bodies, including local authority / CCG-responsible payments (eg collaborative fees)
Finance 2	

•   Ensuring the validation of bank details for Medical and Ophthalmic Contractors and submitting changes to SBS for update on ISFE.
•   Receiving and banking income including:
- income for medical records requests
- income in respect of GP solo work
- income from pharmacy applications.
•   Ensuring the income is receipted on ISFE and processed accordingly.
•   Administration of the NHS Pension Scheme
•   Processing of contract-related payments (including NHS England enhanced services payments) to primary care contractors
•   Refunding patients for optical charges
	The following additional uses of the Ophthalmic Payments system:
	    • processing claims for additional services / enhanced services
	    • validating and processing claims for cataract referral, diabetic retinopathy screening, low visual aids and any other enhanced additional service claims
	    • processing no- tolerance applications
	    • updating Glaucoma Management Scheme records or processing claims
	    • production of information for routine analysis during Post Payment Verification visits
	    • requests and referrals to NHS Protect.
	    • Sampling ophthalmic claims to ensure entitlement to exemption of fees.
	Reimbursement of hospital transport costs for patients and refunds for dental treatment.

General administration 1	
• Pharmacy administration. Processing applications for new pharmacy businesses made under the pharmaceutical regulations in accordance with current regulations including fitness to practise checks.	Pharmacy: • administering pharmacy rotas for Bank Holidays • providing expert advice to panels • arranging and administering meetings • administering payments to pharmacists

• Contractor supplies – delivery of forms, drug tariffs to pharmacy, needles and syringes.	who audit medication at a nursing home • Provision of supplies for contractors including: needles / syringes for needle exchange and phlebotomy and cytology vials and brushes. • Registering people to use the Open Exeter system and issuing their smart card. • The data controller function for Open Exeter, policing access to Open Exeter for GP practice staff, secondary care and screening labs.
General administration 2	
	• Provision / administration (including payment activities) of liquid nitrogen and home oxygen • support to CCGs in providing local financial modelling for GP IT funding. • Counter-fraud measures to check the validity of patient exemptions on pharmacy prescriptions. • Production of information by the medicines management team. • Dental payments made through the Dental Payments Online system • Annual and monthly finance reporting • Sending NHS health check invitations • Distributing urgent Central Alerting System alerts (eg. drug alerts) and national messages to contractors and communication of lost/stolen prescriptions and patient alerts. • Probity and counter-fraud functions for ophthalmic contractors who deliver services and patients who claim eligibility for NHS funded eye care (sight tests and optical vouchers) under the General Ophthalmic Services (GOS) contract. including PPV checks on contractor performance, visits to contractor premises and patient eligibility checks to ensure entitlement to exemption of ophthalmic fees. Also probity and counter-fraud functions for GPs 5% QOF visit outcome checks and ad hoc GP visits. • Administering interpreting service on behalf of the South London CCGs • Administering payroll and recruitment service for South London CCGs • Maintaining the Child Health Information System database. • Ad hoc information and data extraction services.

Non-core (list 2b – stopping)
1. Providing a helpline for finding an NHS dentist
2. Providing a hard-copy of the drug tariff for GPs
3. Training practice staff to use Open Exeter

The project to identify how the services in list 2a (non-core continuing) are provided in future is underway and we will update you as the work develops.

Further information: england.pcsinfo@nhs.net

Primary Care Support Services Transformation Programme

Update from Ann Sutton, Director of Commissioning (Corporate)

UPDATE 3

18 March 2014   Publications Gateway Reference Number: 01327

This is an update for people and groups who are interested in proposed changes to primary care support services. General information on the programme and previous updates are available here . If you want to have names added to or taken off the distribution list please email england.pcsinfo@nhs.net

NHS England Board meeting
The NHS England Board met on March 6 and was given an update on the PCS project. The item was in the private session of the meeting because of the commercial sensitivities.

The Board discussed progress on the options for change that are being developed regionally, and acknowledged the impact that the extended timetable was having on staff, the significant commitment that they have shown to the consultation and to continuing to provide a good service during this period of uncertainty.

The Board was given information on the process to undertake due diligence on the proposal from SSCL (see details in Update 1 via the link above). They recognised that more work is needed to enable them to make their decision and asked for further information to be brought to their next meeting in May. This item will also need to be on the private agenda.

The Board also acknowledged that information about the final regional preferred in-house options and the SSCL proposal would need to be shared with staff and stakeholders as soon as possible to allow sufficient time for consultation to be meaningful.

Work continues on the due diligence of both the regional options and the SSCL proposal so that the business case can be produced.

We are happy to meet with national stakeholders to discuss any issues these changes raise with you. Local area teams and regions are also happy to deal with local enquiries. Please email: england.pcsinfo@nhs.net