NHS
Cornwall and
Isles of Scilly

General practice contract review framework

Date approved: 20 October 2022

NHS Cornwall and Isles of Scilly Integrated Care Board

Call us on 01726 627 800
Email us at ciosicb.contactus@nhs.net
Visit our website: cios.icb.nhs.uk

Part 2S, Chy Trevail,
Beacon Technology Park,
Dunmere Road,
Bodmin, PL31 2FR
Chair: John Govett
Chief executive officer: Kate Shields

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V1.1	29/06/2022	Fiona Scott Primary care programme manager	Expanded first draft
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V3.0	01/08/2022	Fiona Scott Primary care programme manager	Revised draft
V4.0	19/09/2022	Fiona Scott Primary care programme manager	Final draft
V4.1	20/10/2022	Fiona Scott Primary care programme manager	Ratified PCCC
V4.1	30/02/2023	Corporate governance team	Final accessibility checks completed

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1. Introduction

Commissioners of Primary Medical Care are responsible for the quality, safety and performance of services delivered by providers, within their area of responsibility. Integrated care boards (ICBs) must have due regard to their obligations as set out within the delegation agreement which includes adherence with policies and guidance issued by NHS England, including the primary medical care policy and guidance manual.

Whilst it is recognised that most health care professionals and providers of Primary Medical Care operate to a very high standard, it is essential that commissioners have robust monitoring arrangements in place.

Monitoring arrangements should create a balance of support, oversight and intervention where necessary. Furthermore, it should create a culture of openness and transparency and a vehicle to promote peer to peer improvement.

2. Purpose

This policy outlines the NHS Cornwall and Isles of Scilly integrated care board (ICB) approach to monitoring general practice contracts to ensure compliance with service requirements, quality and safety standards.

3. Responsibilities

The primary care commissioning committee (PCCC) is responsible for policy ratification.

The primary care organisational group (PCOG) is a sub group of the PCCC and is responsible for the ongoing review and application of this policy.

The GP access and assurance programme (GAAP) will be responsible for overseeing the implementation of this policy.

4. General practice contract reviews

NHS England introduced a requirement on commissioners to undertake a risk-based approach to reviewing contracts. There are 3 types of GP contract assurance reviews that align with the primary medical care policy and guidance manual (version 4).

1. Routine annual eDec review (all practices)
2. Contract review (rolling 3-year programme - prioritised by risk assessment)
3. Deep dive contract review (commissioned in response to concerns raised)

4.1 Annual eDec review

Commissioners have a statutory duty to conduct an annual review of every primary medical care contract it holds.

This oversight is provided through the General Practice annual electronic practice self-declaration form (eDec) established by NHS England that GP practices complete once a year. The data provides a snapshot in time of what each practice is delivering against the CQC registration requirements and enables the ICB to identify practices which may require further support or improvement. The eDec covers questions in the following categories:

1. Practice details
2. Practice staff numbers and suitability, training, support
3. Practice premises and equipment
4. Practice services
5. Information about the practice and its procedures
6. Information and clinical governance
7. Compliance with CQC
8. GP IT
9. Practice Boundaries

NHS Digital provides an eDec summary report and NHS England produces further analysis to support identification of variation or matters of declared non-compliance. An NHS England eDec outlier report is usually made available to ICBs 6-8 weeks following eDec closure.

Each year the ICB will review annual eDec submissions, provide a summary report and action plan to address issues identified.

4.2 Contract reviews

The policy guidance manual defines a risk-based approach to reviewing contracts. The ICB aims to review all GP contracts within a rolling 3-year programme. Each year, the schedule of visits will be prioritised by the primary care commissioning team through risk assessment.

The contract reviews can be carried out remotely or through a practice visit. They will be conducted in line with the primary medical care policy and guidance manual.

Each contract review will be supported with:

- A data pack
- An assigned contract review team
- An assurance assessment template

The data pack will include:

- CQC report (if available)
- Primary care indicators dashboard
- QOF scores
- Complaint history
- Any local profiling tools or dashboards

- National survey results
- Website review report
- GP Dashboard data
- GPAD data

The first level of contract assurance for all GP practices is delivered through the eDEC self-declaration process. Practices identified for further contract review will be selected through a risk assessed priority assessment that will take account of the following:

- Period since last contract review
- Contract compliance issues identified through the eDEC self-assessment
- Practices identified as having resilience concerns
- Service quality issues identified through the clinical quality assurance function

The contract reviews will be conducted using a set of templates drawn from the primary medical care policy and guidance manual:

- Contract review notification letter
- Contract review plan template
- Contract review assessment template

4.3 Deep dive contract review

More detailed deep dive contract reviews will be undertaken when serious or ongoing concerns have been raised in relation to a primary medical care contract to ensure compliance with quality and safety standards.

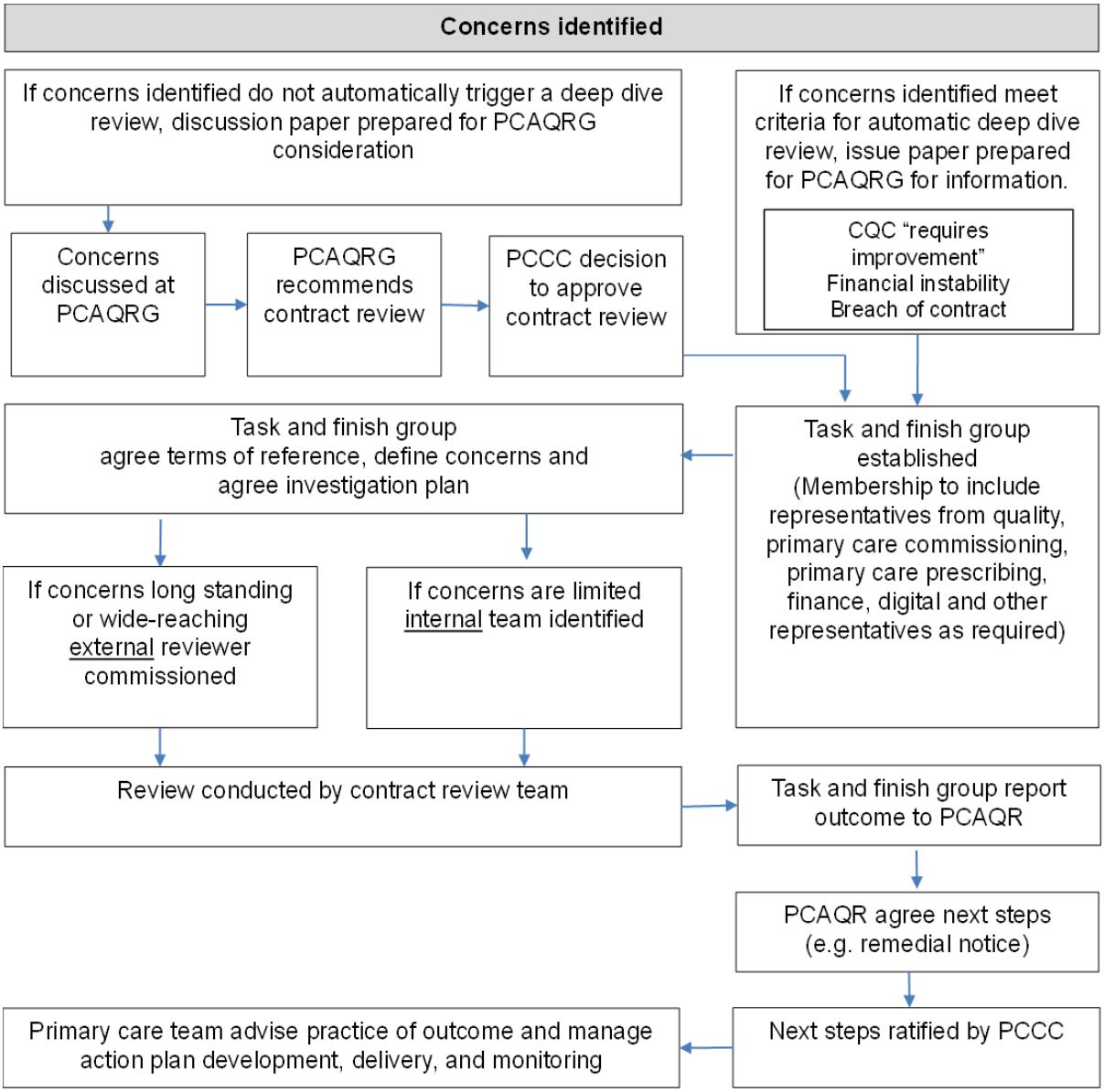
A deep dive review will automatically be undertaken for all practices in the following circumstances:

- QCQ rating of “requires improvement”
- Breach of contract
- Financial instability

Other deep dive reviews may also be recommended when other concerns have been raised. In these cases, the review will be recommended by PCOG and approved by PCCC.

Deep dive reviews will be conducted in line with the following process:

- Concerns raised and discussed
- Decision to undertake deep dive contract review
- Task and finish group established
- Terms of reference and review team agreed
- Deep dive contract review
- Report and recommendations
- Action plan



The deep dive contract reviews will be conducted using a set of templates drawn from the primary medical care policy and guidance manual:

- Deep dive contract review - visit notification letter
- Deep dive contract review - task and finish group terms of reference
- Deep dive contract review - investigation plan
- Deep dive contract review - assessment template

5. Implementation plans and monitoring effectiveness

This policy will be made available to all practices as part of an information pack describing the GP contract assurance process to be managed by primary medical service commissioner.

The process described in this policy will ensure a robust and consistent approach is taken to undertake contractor deep dive reviews when required. Learning from the

reviews undertaken and reported will inform review and adjustment of the policy for future iterations.

6. Update and review

This policy will be updated as necessary and reviewed annually. The equality impact assessment is provided in appendix 1.

7. Policies referred to in this document

Primary medical care policy and guidance manual (version 4).

8. Consultation on this policy

The primary care commissioning team has drafted the policy. It is being presented to the primary care assurance, quality and resilience group for review and approval.

9. Appendices

Appendix 1: Policy impact assessment

Appendix 1: Impact assessment

Name of policy or service to be assessed: General practice contract review framework
Department or section: Primary Care
Date of assessment: 29 June 2022
Person(s) responsible for the assessment: Fiona Scott
Is this a new or existing policy? New

Aims, objectives and purpose of the policy

Describe the aims, objectives, and purpose of the policy.
The purpose of this policy is to describe a standardised approach for contract reviews to be undertaken by commissioners to ensure compliance with quality and safety standards.

Who is intended to benefit from this policy, and in what way?
General practice contractors

What outcomes are wanted from this policy?
A consistent application and decision-making process for undertaking contract reviews.

What factors or forces could contribute or detract from the outcomes?
Reduced management resource in the ICB to support GP contract reviews could detract from the outcomes of this policy.

Who are the main stakeholders in relation to the policy?

- NHS Cornwall and Isles of Scilly integrated care board (ICB) primary care commissioning team
- GP practices in Cornwall and Isles of Scilly

Who implements the policy, and who is responsible for the policy?
The ICB primary care commissioning committee (PCCC) is responsible for policy ratification.

Differential impacts

Does this have a positive or negative impact on people who have a black, Asian and minority ethnic (BAME) background? How will any negative impact be mitigated?
We do not anticipate there will be a disproportionate impact on people on the basis of their ethnic background.

Does this have a positive or negative impact on people who identify as male, female or intersex? How will any negative impact be mitigated?
We do not anticipate there will be a disproportionate impact on people who identify as male, female or intersex.

What is the positive or negative differential impact on people from the perspective of disability? How will any negative impact be mitigated?
We do not anticipate there will be a disproportionate impact on people who have a disability.

Does this have a positive or negative impact on people who identify as heterosexual, lesbian, gay, bisexual, pansexual or asexual? How will any negative impact be mitigated?
We do not anticipate there will be a disproportionate impact on people on people who identify as heterosexual, lesbian, gay, bisexual, pansexual or asexual.

What is the positive or negative differential impact on people from the perspective of age? How will any negative impact be mitigated?
We do not anticipate there will be a disproportionate impact on people on the basis of their age.

What is the positive or negative differential impact on people from the perspective of religion or belief? How will any negative impact be mitigated?
We do not anticipate there will be a disproportionate impact on people on the basis of their religion or belief.

What is the positive or negative differential impact on people from the perspective of marriage and civil partnership? This is particularly relevant for employment policies. How will any negative impact be mitigated?
We do not anticipate there will be a disproportionate impact on people on the basis of their marital or civil partnership status.

Does this have a positive or negative impact on people who identify as trans or transgender, non-binary, or gender fluid? How will any negative impact be mitigated?
We do not anticipate a disproportionate impact on people who identify as trans, transgender, non-binary or gender fluid.

Does this have a positive or negative impact on people who are pregnant, breast-feeding mothers, or those on maternity leave? How will any negative impact be mitigated?
We do not anticipate a disproportionate impact on people who are pregnant, breast-feeding mothers or those on maternity leave.

Are they any other identified groups? How will any negative impact be mitigated?
We do not anticipate there will be a disproportionate impact on any other identified groups.

Human rights values

How have the core human rights values of fairness, respect, equality, dignity, and autonomy been considered in the formulation of this policy, service, or strategy?

The policy aims to support a fair and consistent approach to undertaking GP practice contract reviews. Equality, dignity and autonomy of GP practices and their staff have been considered in the formulation of this policy.

Which of the human rights articles does this document impact?

☐ To life
☐ Not to be tortured or treated in an inhuman or degrading way
☐ To liberty and security
☐ To a fair trial
☐ To respect for home and family life, and correspondence
☐ To freedom of thought, conscience, and religion
☐ To freedom of expression
☐ To freedom of assembly and association
☐ To marry and found a family
☐ Not to be discriminated against in relation to the enjoyment of any of the rights contained in the European Convention
☐ To peaceful enjoyment of possessions
☒ This policy does not impact any of the human rights articles listed above.

What existing evidence (either presumed or otherwise) do you have for this?
Not applicable/relevant

How will you ensure that those responsible for implementing the policy are aware of the human rights implications and equipped to deal with them?
Not applicable/relevant

Public Sector Value Act 2020

The ICB is committed and obliged to fulfil the requirements of the Public Sector Social Value Act 2012. This Act requires the organisations to consider how services commissioned or procured might improve the economic, social, and environmental wellbeing of an area.

Please describe how this will support and contribute to the local system, wider system, and community.
This policy will enable ICBs general practice contract assurance function to be delivered in a consistent and fair way. Supporting GP practices to be resilient and deliver optimal access to services will contribute to the quality of services for patients in Cornwall and the Isles of Scilly. It will also contribute to the resilience of the local system, wider system and community.

Describe how the policy contributes towards eliminating discrimination, harassment, and victimisation.
Not applicable/relevant

Describe how the policy contributes towards advancing equality of opportunity.

The policy will support GP practices to strengthen their resilience as healthcare providers, advancing equality of opportunity for their workforce and their registered patients.

Describe how the policy contributes towards promoting good relations between people with protected characteristics.
Not applicable/relevant – impact is neutral

If the differential impacts identified are positive, explain how this policy is legitimate positive action and will improve outcomes, services and or the working environment for that group of people.
Not applicable/relevant – impact is neutral

Explain what amendments have been made to the policy or mitigating actions have been taken, and when they were made.
Not applicable/relevant – impact is neutral

If the negative impacts identified have been unable to be mitigated through amendment to the policy or other mitigating actions, explain what your next steps are using the following equality impact assessment action plan.
Not applicable/relevant – impact is neutral

Equality impact assessment action plan

Issue to be addressed	Action required	Responsible person	Timescale for completion	Action taken
N/A	N/A	N/A	N/A	N/A

Comments on action plan:
N/A

Signed (completing officer): Fiona Scott

Date: 29 June 2022

Signed (head of department or section): Kirsty Lewis

Date: 29 June 2022

Please ensure that a signed copy of this form is sent to both the corporate governance team with the policy and the equality and diversity lead.