

NHS North Cumbria CCG Primary Care Commissioning Committee	Agenda Item 6
20 September 2018	

Re-procurement of Copeland APMS Contract

Purpose of the Report								
The purpose of the report is to update the Committee on progress in procuring GP services for the population of Copeland.								
Outcome Required:	Approve		Ratify		For Discussion		For Information	X
<p>Assurance Framework Reference:</p> <p>1, Better Health – There is a need to ensure that Cumbria’s children & young people (including children looked after are kept safe and transition into health adulthood.</p> <p>2, Better Care – Commission services that ensure the delivery of high quality and safe care patients.</p> <p>3, Sustainability – Commission services that ensure the delivery of high quality and safe care for patients in a manner that is sustainable for the whole health economy.</p> <p>4, Leadership - The CCG needs to develop and implement robust governance and management arrangements to operate in a safe and sound manner.</p>								

Recommendation(s):
The Committee is asked to note the content of the report.

Executive Summary:
<p>Key Issues:</p> <p>At its meeting on 12th July the Primary Care Commissioning Committee agreed to terminate the existing Fell View procurement process, ask the existing provider to extend their current contract whilst a revised specification and contract value is developed and then offer the contract on the open market for commencement in October 2019.</p>

Key Risks:
 The proposed approach is intended to reduce the risk to Copeland patients by providing a long term sustainable model for the whole area although there is a risk that covering short term clinical capacity may be an issue with this approach. However, the advice taken by the CCG would indicate that the approved approach will minimise the opportunity for challenge and the long term benefits out-weigh the need to undertake a new procurement process.

Implications/Actions for Public and Patient Engagement:
 The CCG will need to communicate the approach effectively with patients.

Financial Impact on the CCG:
 The existing practice APMS contract amounted to £3.7m million per annum and a GMS contract for the equivalent population would amount to £2.9 million.

Strategic Objective(s) supported by this paper:	Please select (X)
Support continuous quality improvement within existing services including General Practice	
Commission a range of health services, including an increasing range of integrated services, appropriate to our population's needs	X
Develop our system leadership role (in the context of an integrated health and care system) and our effectiveness as a partner	
Continuously improve our organisation and support our staff to excel	

Impact assessment: (Including Health, Equality, Diversity and Human Rights)	
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Conflicts of Interest Describe any possible Conflicts of interest associated with this paper, and how they will be managed	There are no identified potential conflicts of interest
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1. Introduction

1.1 At its meeting on 8th March the Committee agreed to enter into a procurement process for the Fell View APMS Contract. The process commenced based upon essentially an “as is procurement” for existing services (reflected in the specification) with a reduction in funding to equivalent rates to the GMS contract for the service. The specification was issued inviting bids for the service due to conclude in July.

1.2 However, during the tender process for Fell View two significant issues arose:

a) Extended Access

The CCG was required to undertake a local procurement exercise for GP extended access in accordance with the 5 year GP Forward View. The CCG allocated the process into a number of lots based around the Integrated Care Community network, with two covering the Copeland locality (weekday working and weekend working).

As previously reported to the Committee, if these “lots” had been incorporated in the Fell View procurement then the on-going contract value would have been increased by £431,000 (circa 15% of the recurring contract value).

b) Whitehaven Medical Centre Closure

The closure of Whitehaven Medical Centre has resulted in the dispersal of 4,304 patients across practices at a time when primary care provision in Copeland remains extremely fragile.

As a consequence of the latter issue the CCG in conjunction with NHS England agreed to consider whether the existing procurement of GP services for Copeland would deliver the best long-term primary care solution for Copeland. The CCG’s team’s view was that there would be a clear benefit in developing a longer-term strategic approach for Copeland.

The CCG Primary Care team (and CFO) considered that the best medium to long-term benefit for patients would be to stop the existing process and re-specify the specification for Fell View including the following key changes (in addition to providing on-going personal medical services for the 22,700 existing patients):

- Any dispersed patients allocated from the terminated contract (and potentially reviewing the impact on other practices and whether further expansion to manage capacity would be viable).
- Provision of extended access for the two Copeland lots.
- Making it explicit in the specification that given the relative size and strategic importance of the Fell View practice in Copeland (i.e. nearly 40% of patients) that part of the contract would be to provide wider support and development to the residual practices in Copeland should they wish.

In addition, such an approach would allow opportunities linked to the North Cumbria ICS pilot status to be included in the specification, although this was seen as secondary to the longer-term sustainability issues flagged above.

At its meeting on July 12th the Primary Care Commissioning Committee agreed to implement the following revised approach:

- Terminate the existing Fell View procurement process.
- Request that the current provider at the Fell View practice extend their current contract for 12 months.
- Let the Copeland extended access lots for 12 months to be then incorporated in the wider APMS contract.
- Develop and re-advertise a revised specification and contract value on the open market for commencement in October 2019.

2. Awarding of Emergency Contract

Following the agreed termination of the Fell View procurement process the CCG has been in discussion with the practice who have indicated their support for the suggested way forward and a willingness to extend their current contract for a further 12 month period.

Since the Committee meeting on July 12th the CCG has been working alongside the practice and NHS England in developing a contract for the 12 month extension. The contract variation is to be pared back to a GMS equivalent in terms of services provided.

3. Revised Procurement Plan

Since the Committee meeting on July 12th the CCG has also been working with NHS England in developing a planned procurement process and timeline.

The intention is that an important first step will be the specification development and a related period of market engagement. Within this process the CCG will be looking to develop the specification by working closely with all stakeholders including local general practice and potential providers.

The intention is that this work will be completed by 31 December with a market engagement report being brought to the Primary Care Commissioning Committee for approval on January 17, 2019.

4. Recommendation

The Committee is asked to note the contents of the report.