

Select Committee on Health and Adult Social Care - 15th January,2009

Report of the Director of Community Engagement and Primary Care

Primary Care Provision delivered by GPs (General Practitioners)

Purpose of Report

1. This report provides an overview of GP provision in Dudley. This sets out the current provision including details of the contract and performance monitoring.

Background

2. There are 52 General Practices in Dudley (as of October 2008). There are 187 full and part time General Practitioners. The practices vary in size with list sizes ranging from just over 1,000 to large multidisciplinary practices with up to 20,000 patients on their list.
3. There is a national contract template for General Medical Services and also a locally agreed Personal Medical Services Agreement (PMS). The PCT uses these contracts as the base for its contract provisions with general practitioners. Each GP is an individual contractor and provider of services, not an employee, partner or agent as the PCT. The GP contractor agrees to be regarded as a 'health service body' by signing the NHS contract.
4. Within each contract there are provisions for:
 - Essential services
 - Additional services
 - Enhanced services
5. Essential services make up the core services that each GP will deliver. These are broadly termed as follows:

“The contractor must provide services required for the management of the contractor’s registered patients and temporary residents who are, or believe themselves to be:

 - ill with conditions from which recovery is generally expected;
 - terminally ill; or
 - suffering from chronic disease

and these must be ‘delivered in the manner determined by the practice in discussion with the patient’.

This means offering a consultation and where appropriate physical examination to identify the need if any for treatment or further investigation and making this available. This includes referrals and liaison with other health care professionals.

These services must include appropriate ongoing treatment and care taking account of patients specific needs, including

- the provision of advice in connection with the patient's health, including relevant health promotion advice,
- the referral of the patient for other services

These include primary medical services requested in core hours for immediate treatment of a medical emergency where the accident or emergency takes place in the practice area.

6. Additional services means one or more of:

- Cervical screening
- Contraceptive services
- Vaccinations and immunisations
- Child health surveillance services
- Maternity medical services
- Minor surgery

These are required to be provided, however GPs are able to opt out of the provision of one or more of these. In this case patients will be referred to another appropriate provider.

7. Enhanced services are described in the contract as an enhanced level of provision compared to that which it needs generally to provide. There are three types of enhanced service:

- Directed Enhanced Services (DES) – these are a national requirement - a 'must do' for the PCT, to ensure that there is adequate service across the borough. Patients will either access these at their GP practice or via referral to other practices.
- National Enhanced Services (NES) – these are schemes with a national specification and tariff which are optional to include rather than a must do.
- Local Enhanced Services (LES) – these are determined locally according to the needs assessment for the Borough of Dudley.

Enhanced services include:

- Hormone Replacement Therapy (LES)
- Minor Surgery (DES)
- Intra Uterine Contraceptive Services (NES)
- MMR immunisations (Measles, Mumps and Rubella) (LES)
- Care homes service (LES)
- Diabetes (LES)

- Care of homeless (LES)
- Choice and Booking (LES)
- IM & T (DES)
- HPV vaccinations (Human Papillova Virus) (LES)

Enhanced services can be added to a GP contract or the PCT can make arrangements for this service to be provided in Dudley – either via a willing provider or a tender process.

8. Performance and Contract Monitoring

The GP contracts are monitored in two main ways:

- Annual contract monitoring process
- QOF – Quality and Outcomes Framework

9. The annual contract monitoring process is carried out by the PCT. A framework is used to measure key indicators and identify any areas of interest or concern. For example, patient access statistics are monitored and any differences in performance highlighted. The process focuses on ensuring that the practice has the appropriate procedures in place for complying with the contract, including financial arrangements for pre-selected enhanced services.
10. The Quality and Outcomes Framework measures GP performance on a number of key indicator areas. This is an annual process that GPs are required to participate in which provides comparative data across GPs. This can also highlight any areas of interest or concern. Scores vary across practices. In 2006-7, Dudley practices as a whole scored 84.9% of the points available and increased this to 88.5% in 2007-8.
11. Across the Borough, Dudley achieved close to or above the national average in 2006/7 for the Quality and Outcomes Framework and there were further improvements in most categories in 2007/8 however there are some categories that require improvements and these have been reviewed as part of the early stages of development of the Primary Care Strategy.
12. Future developments in GP provision will be explored in the PCT's Primary Care Strategy, out for consultation from early January 2009. This explores the challenges and opportunities for future primary care provision, including putting preventative services at the heart of primary care provision. A paper with more detail about this strategy and the measures proposed will be brought to a later meeting of the Overview and Scrutiny Committee.
13. An update on the new GPs planned for Dudley as part of the 'equitable access to primary care' scheme and an overview of plans to increase extended hours in GPs is attached as Appendix 1.
14. Further information can be provided on any of the above areas – this report has provided a brief overview, focusing on current service provision.

Finance

15. Report for information update – therefore it does not have financial implications.

Law

16. No legal implications.

Equality Impact

17. The PCT is committed to increasing equity of access and service provision for its local communities. The Appendix contains further detail of the equitable access scheme in particular and a report on primary care provision will be brought to a later meeting.

Recommendation

18. It is recommended that:-

- *This report is noted. Comments and feedback are welcome. Further information can be provided on any of the above (a report on the Primary Care Strategy will be produced for a later meeting).*

Director of Community Engagement and Primary Care

Contact Officer: Kimara Sharpe
Telephone: 01384 366261
Email: kimara.sharpe@dudley.nhs.uk