

Title of Meeting:	Primary Care Commissioning Committee	Agenda Item: 8.1	
Date of Meeting:	28 May 2020		
Paper Title:	Contract Variation Approval Process	Session (Tick)	
		Public	X
		Private	
		Development Session	
Responsible PCCC Member Lead Wendy Balmain Director of Strategy and Integration		Report Author and Job Title Andrew Dangerfield Head of Primary Care Transformation	
Purpose (this paper if for)	Decision	Discussion	Assurance
			X
Has the report (or variation of it) been presented to another Committee / Meeting? If yes, state the Committee / Meeting: No			
Executive Summary This paper describes the process for approval of contract variations for General Practice (GP) primary care contracts. All changes to GP contracts must be approved by the CCG as a fully delegated co-commissioner of primary care. There has been a recent change to the process as a result of the Covid pandemic. PCCC is asked to approve this change.			
Recommendations The Primary Care Commissioning Committee is being asking to: Approve the change to the contract approval process.			
Monitoring On-going monitoring is through the process described in the paper.			
Any statutory / regulatory / legal / NHS Constitution implications		The paper describes the contract approval process.	
Management of Conflicts of Interest		No conflicts of interest have been identified prior to the meeting.	
Communication / Public & Patient Engagement		N/A	
Financial / resource implications		None	
Outcome of Impact Assessments completed		N/A	

Contract Variation Approval Process

All GP contracts – General Medical Services (GMS), Personal Medical Services (PMS) or Alternative Medical Services (APMS) – are underpinned by the Primary Medical Care Policy and Guidance manual, and the contract which the commissioner has with each individual practice.

The link to the policy manual can be found at:

<https://www.england.nhs.uk/wp-content/uploads/2019/08/pgm-primary-medical-care-policy-guidance-manual-v3.docx>

On an annual basis there are national changes made to the GMS contract (also reflected in PMS and APMS versions) which require the contracts for all practices to be amended to reflect these changes. Examples include:

- Partnership changes (partners added / removed)
- Changes to the contracting party (mergers / splits)
- Other legislative / regulatory changes
- Directed Enhanced Services (DES) changes (eg. PCN DES sign up forms – separate from GMS contract)

There are other examples but the changes listed above are the most common. Partnership constitution changes are by far the most prominent of those. The policy manual sets out the processes which much be undertaken for each example, and supplies optional supporting templates.

The CCG, as fully delegated co-commissioner of Primary Care, is responsible for the sign off of these contracts, and contract changes.

The majority of these changes are procedural and cannot be prevented by the CCG. For example, if a practice wishes to add a person who is fit to hold a GMS contract (fitness criteria is specified in the policy guidance) to their contract, then the commissioner is extremely limited in what it could do to prevent this happening. There are always exceptions, but this is broadly the rule.

In the previous individual CCGs (HRW, HaRD, SR) the process for approval of contract variations was managed slightly differently in each locality with different routes for ensuring contract changes were noted, managed (if required) and signed.

The NHSE/I local Primary Care team produces the contract paper work, and the expectation is that this team would notify and liaise with the CCG for any non-standard or usual circumstances around a contract variation.

Previously, NHSE/I local team requested 'wet' signatures on documents, however this changed in response to the COVID escalation – electronic signatures are now permitted.

The process that has been embedded in NY CCG for the management of contract sign off is as follows:

- NHSE is notified by a practice that it wishes to make a change (for the purpose of this example, partnership change)

- NHSE liaises with the practice to obtain details of the change (parties involved, commencement date of the variation)
- NHSE prepares and circulates the paperwork to the practice and the CCG's designated contact (currently Catherine Gibson for NY CCG)
- The CCGs designated contact will circulate the documentation to the Chief Finance Officer (CFO), Jane Hawcard, for approval
- Once the CFO has approved, signatures of both the CFO and Chief Officer (CO), Amanda Bloor, will be added to the documentation
- The CCG will return the documentation to the NHSE Primary Care from which it originated
- A project support officer (currently Jasmine Blackburn) keeps a log of the contracts/variations

The PCCC is asked to approve these changes.