

PRIMARY CARE

INTERIM PROVIDER POLICY

Version	02
Ratified by	Primary Care Commissioning Committee
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1. Purpose

1.1 NHS Liverpool Clinical Commissioning Group (LCCG) is committed to improving Primary Care Medical Services for the benefit of patients and local communities.

1.2 The purpose of this document is to outline NHS Liverpool Clinical Commissioning Group's approach to appointing an interim provider for Primary Care Medical Services in situations where time limits do not allow for a comprehensive procurement exercise to be undertaken.

2. Background

2.1 Within Liverpool there have been a number of situations where a single handed practice has closed and services needed to be maintained. Historically, for example, two single handed GPs have died whilst still in service.

2.2 Liverpool PCT at the time was able to use the services of its community service provider to cover service provision in these practices using PCTMS GPs. However, the separation of provider and commissioning functions, as well as legal requirements imposed by relevant procurement regulations, meant that these contracts had to be issued as APMS. As such the ability to use existing providers in these situations no longer exists.

2.3 Delegated commissioning requirements from 1st April 2015 have meant that NHS Liverpool Clinical Commissioning Group is responsible for the commissioning of Primary Care Medical Services. However, NHS England remains legally responsible for GMS/PMS and APMS core contract requirements. NHS Liverpool Clinical Commissioning Group is still required to work within NHS England policies and procedures for managing these core contract requirements.

2.4 For GMS practices it is a legal requirement that at least one GP is attached to each contract. GPs can hold more than one core contract and they can also have non-clinical partners or healthcare professionals who are not GPs listed into the contract.

3. Requirements for an interim provider

3.1 This policy outlines the approach that will be taken by NHS Liverpool Clinical Commissioning Group should a situation arise that requires the appointment of an interim provider to maintain service delivery on a short term basis. This may include, but is not limited to, the following circumstances:

3.1.1 Single handed GPs die whilst still being the named core contract holder. The contract should be terminated within 7 days of notification of the contractor's death or 28 days after the end of the seven-day period if agreed. NHS Liverpool Clinical Commissioning Group has to provide GP services until a decision is reached to either disperse the list or procurement can be completed to appoint an alternative provider.

3.1.2 Single Handed Practice informs the CCG they wish to terminate their contract.

3.1.3 Commissioner terminates a contract. Commissioner terminations can arise in the following cases (without limitation):

- Breach of core conditions
- Where there is a serious risk to the safety of the contractor's patients or risk of material financial loss to NHS England or NHS Liverpool Clinical Commissioning Group
- For the provision of untrue information
- On fitness grounds
- For unlawful sub-contracting
- Failure to comply with a Remedial Notice or repetition of a breach that has already been the subject of a Remedial Notice or Breach Notice
- Upon agreement of NHS England or NHS Liverpool Clinical Commissioning Group and the Contractor in writing
- On notice from the contractor
- If in its reasonable opinion, NHS England or NHS Liverpool Clinical Commissioning Group considers that a change in membership of the partnership is likely to have a serious adverse impact on the ability of the contractor or NHS England or NHS Liverpool Clinical Commissioning Group to perform its obligations under the contract
- The end of time limited contract periods
- Failure of practices to comply with CQC requirements if they have been placed into special measures

3.1.4 LCCG wishes to procure local Primary Care Medical Services, on short term basis, for example enhanced GP services across localities.

4. Service Provision

4.1 It is essential that LCCG has high quality, consistent Primary Care Medical Services in the city therefore LCCG will need to decide how best to meet patient needs for the population of the practice during any interim

period. Previous interim service procurements experience has suggested that the agreed service requirement is for an Interim Provider to deliver:-

4.1.1. *The Provision of core contract, GP specification, public health initiatives and enhanced services.*

4.2 This is expected to continue for all Interim Provider Service procurements in the foreseeable future.

5. Process

5.1 When a situation arises where an interim provider is required and the period of service provision in respect of a particular practice or practices will not exceed 18 months, NHS Liverpool Clinical Commissioning Group will need to write to all NHS Liverpool Clinical Commissioning Group member practices and any other providers holding GMS, PMS or APMS contracts with NHS Liverpool Clinical Commissioning Group ONLY * inviting expressions of interest, using the following criteria:

- Compliance
- Service Delivery
- Clinical Governance and Quality
- Due Diligence and mobilisation
- Finance

5.2 These criteria will be applied to each expression of interest sought. However the detail requested in respect of each of the above will be tailored to the requirements of the interim arrangements to which the expression of interest applies.

* NOTE - For the avoidance of doubt, only holders of GMS, PMS or APMS contracts with NHS Liverpool Clinical Commissioning Group will be entitled to be invited to submit an expression of interest in respect of such practices, where required.

5.3 Notwithstanding this, an individual practice, partnership, consortium or other legal entity meeting this requirement will be automatically excluded from consideration if the practice they are seeking to apply for is one in respect of which the individual practice, partnership, legal entity or any member of a proposed consortium:

- 5.3.1 has received its most recent CQC report which does not have an overall rating of “good” or “outstanding”, regardless of whether a review of one or more of the ratings has been requested and the outcome of that review may result in a change in rating; or
 - 5.3.2 has had a contract breach or remedial notice served at any time within the previous twelve (12) months; or
 - 5.3.3 have a current remedial action plan in place regarding KPI delivery
- 5.4** For the avoidance of doubt the 12 month period referred to above will start immediately prior to the date the CCG invites expressions of interest.

6. Process for evaluation and selection

6.1 LCCG will invite bids, usually to be received in a written format, with responses required to any identified key service requirements.

6.2 Scoring principles and appropriate weightings will be applied to any criteria identified. These have yet to be determined but will be notified to practices when they are invited to bid.

6.3 An evaluation panel of suitably qualified NHS Liverpool Clinical Commissioning Group staff will independently score each bid submission following which a moderation meeting will be held to agree a final score in respect of each submission. The scores will then be weighted as advised in the published criteria and the highest scoring submission will be the preferred provider to deliver the interim service. This recommendation will be presented to the Finance, Procurement & Contracts Committee for approval.

6.4 LCCG will manage any conflicts of interest and confidentiality issues in line with relevant LCCG policies and procedures.

6.5 For the avoidance of doubt, bidders must score above 50% in order to qualify for consideration as an Interim Provider. If no bidder scores more than 50%, then LCCG will consider the options available.

6.6 This process will be led by the Head of Contracts and Procurement and Business Intelligence.

Ends