SCHEDULE 2 - THE SERVICES

Commissioning Local Incentive Scheme

Service Specification No.	
Service	Commissioning Local Incentive Scheme
Commissioner Lead	Dr Avanthi Gunasekera, SCE GP
Provider Lead	
Period	1 April 2020 to 31 March 2021
Date of Review	Annually, prior to re-contracting

1. Introduction / Purpose

1.1 Local context and evidence base

Since its introduction, the Commissioning Local Incentive Scheme (LIS) has been fundamental in facilitating clinically-led commissioning and increasing clinical contribution to the quality and efficiency agenda. The success of clinical commissioning in Rotherham depends upon the engagement, participation and ownership of the clinical commissioning agenda by all Rotherham GP practices. We can be confident that use of the incentive scheme ensures that practices contribute to the delivery of better care, quality and value.

During 2020/21, this will be achieved through participation in the following components which are described in more detail within this document:

- GP Completion of Electronic Surveys via Smart Survey and patient engagement exercises via the Rotherham App
- GP Attendance at GP Members' Committee
- · Engagement into the Quality Agenda

Participation in the LIS is an expectation of all 29 constituent practices of the Clinical Commissioning Group.

2. Outcomes

2.1. Clinical Engagement into the Commissioning Agenda.

The main focus of the LIS is for GPs, practice clinicians and practice managers to participate and engage in discussions relating to the strategic priorities of clinical commissioning. This will be achieved in a variety of ways including electronic web-based surveys. The Primary Care Network (PCN) structure, which is funded separately, has replaced the direct engagement function of the localities and therefore has been removed from the specification this year.

GP Members Committee; attendees will receive £375 per committee meeting attended. This will be payable to the nominated deputy if they attend in place of the PCN representative.

£400 for electronic survey component (completion of 80% of the surveys sent).

GP Members' Committee: Each of the PCNs must be represented at all of the GP Members' Committee meetings. The PCN Clinical Director will liaise with relevant members to ensure that they can represent their views. Each member will need to identify a deputy and ensure that if the main representative is unable to attend, that they are represented. If there is no representative at the meeting, then there will be no recourse if a vote is taken.

Payment: GPs will be remunerated at £262.50 per attendance for up to 2 attendees per practice. The PCNs will then refund £112.50 to make this payment up to £375. If there is no representative no payment will be made.

Evidence: Signed attendance sheet from GP Members' Committee.

Electronic Survey / Feedback on Discussion Items: Feedback on 80% of discussion items from at least one GP per practice via electronic survey. This will always be a response required from a GP unless otherwise specified on the survey. Where only one response is required this will be made clear on the survey. Rotherham CCG will send out a maximum of 20 surveys per year.

In addition, the CCG may request that practices facilitate Rotherham wide patient engagement exercises via their access to text messaging via the Rotherham App and the patient list. Rotherham CCG will request a maximum of 4 such exercises per year.

Payment: By the end of the year, if 80% of surveys have been completed, a payment of £400 will be made in Quarter 4.

Evidence: submission of the electronic survey.

2.2. Engagement into the Quality Agenda.

In previous years practices have been required to participate in a clinical audit programme in order to qualify for this element of funding. In order to maintain flexibility and allow for a response to a priority topic, this project will be determined in year.

Payment: 34p per patient on the registered list, per year.

Evidence: Submission of completed project, meeting required criteria, by 31 March 2020

2.3. GP Involvement in CCG Business

This element is a dedicated resource within the LIS for GPs wishing to take part in commissioning meetings and business. This work is likely to consist of time-limited involvement with various work streams. It will be remunerated for the time spent, based on the current agreed rate of £75 per hour.

GPs interested should contact the CCG Chief Officer to discuss further.

3. Important Points to Note

3.1 Returns

No returns are required of the practice; payment for participation in questionnaires / discussions and engagement with the quality agenda will be monitored by the Primary Care Team and paid at year end.

3.2 Payment

Payments are made to practices as specified earlier in this document.

It is the responsibility of the practice to ensure that any changes to contact details for the Practice lead/ practice manager are notified to the GP Commissioning team.

Any suspicions of fraud will be referred to the CCG's Counter Fraud Specialist for further investigation. It is important to recognise that claims that do not fall within the service specification may constitute fraud and will be referred to the CCGs Counter Fraud Specialist for further investigation.

3.3. Extenuating Circumstances

In the event of unforeseen exceptional circumstances e.g. unplanned admission to hospital, there is

scope for the CCG to process a payment without precedent. It is however a practice responsibility to put in place sufficient contingency arrangements to ensure activity is submitted by the date specified.

3.4 Termination

Following the recent publication of the 'Investment and Evolution: A five-year framework for GP contract reform to implement The NHS Long Term Plan' the CCG acknowledges that further guidance may influence the future delivery of Local Enhanced Services. .

All Local Enhanced Services will be subject to regular review in line with the development of Primary Care Networks (PCNs). Three months' notice will be given to Providers if services are to transfer to PCN delivery and/or payment.