

Frequently Asked Questions

NHS England, Essex Area Team has issued a FAQ to answer some of the concerns raised by patients during the recent North East Essex Clinical Commissioning Group's Big Care Debate.

1. What is the role of NHS England?

NHS England commissions many of the primary care services previously commissioned by PCTs. It is responsible for primary care contracts and has a duty to commission primary care services in ways that improve quality, reduce inequalities, promote patient involvement and promote more integrated care. NHS England is a single organisation and takes a consistent approach to managing contracts wherever it is appropriate to do so. There are 27 Area Teams. One Area Team covers the whole of Essex.

2. What is the role of GP partners?

GP partners are signatories to the contract they hold with NHS England to provide primary care medical services to patients. GP partners act like independent businesses. The GP Practice is paid an annual amount (split in to monthly payments) in line with nationally negotiated rates of pay to provide services to patients. The less income the practice receives equates to the partners drawing less. Partner's earnings are not guaranteed in the same way that employees are. As well as being responsible for the provision of medical services, GP partners also will be involved in management responsibilities of the practice. It is a GP partner's responsibility to ensure that services meet the requirements as agreed in the GPs contract.

3. How are GP practices funded?

GP Practices receive money for each patient registered at their practice. The amount per patient is weighted depending on age, gender, if they live in a care home etc.... This is known as the global sum.

GP practices also receive additional income for providing 'enhanced services' to patients. Examples of some of the directed enhanced services that GP practices can sign up to provide in 2014/2015 are:

- Avoiding unplanned admissions
- Childhood immunisations
- Extended hours access scheme
- Facilitating timely diagnosis and support for people with dementia
- Influenza and pneumococcal scheme
- Learning disabilities health check scheme
- Minor surgery scheme
- Shingles vaccination programme

Practices can also participate in the Quality Outcomes Framework (QOF) which was established in 2004 to ensure provision of quality care and to help standardise improvements. Practices participation in QOF is voluntary, but payment is made to practices based on their achievement. All practices in Tendring participate in QOF.

4. Who is responsible for employing staff (GPs, nurses and other primary care professionals) within GP practices?

It is the responsibility of the GP Partners within a practice to employ primary care professionals (GPs, Nurses, Health Care Assistants) to provide clinical services to patients as well as administrative staff to ensure the practice is managed efficiently and professionally.

5. What is the Essex Area Team of NHS England doing to support local GP practices?

There have been a number of actions taken nationally, regionally and locally in Essex in response to this issue including:

- Nationally ensuring that 50% of speciality trainees choose to enter GP speciality training.
- In the East of England there has been an increase in GP specialty training programmes from 272 in 2013 to 292 in 2014 and Health Education East of England (HEEoE) intend to increase recruitment into GP training to 332 in 2015.
- NHS England last year launched a consultation on the future of primary care recognising the challenges.

The Essex Area Team of NHS England is working with the HEEoE, CCGs and the LMC to consider how best we can increase GP numbers in Essex through both increasing recruitment, increasing the retention of doctors both in mid-career and pre-retirement. The group is looking at ways to ensure that primary care workforce will be sustainable. Options being considered are:

- Postgraduate primary care nurse courses. This will provide an accredited qualification for nurses moving from the acute sector in to primary care.
- The development of locum chambers. Locum chambers provide sessional GPs with mentoring and training. They set a standard of what practice can expect from sessional/locum doctors and provide standardisation across the locality they cover.

NHS England has commissioned a project specifically for the Tendring locality which is looking at the current workforce capacity in the area and looking at the options to correct any identified deficiencies in the GP workforce capacity.

The Essex Area Team is supporting practices to look at new ways of working with one another. In conjunction with Anglian Community Enterprise (Community Interest Company) and the LMC are arranging a meeting with practices throughout Tendring to look at how primary care services can support each other throughout the District. The Essex Area Team has facilitated discussions with practices that are looking to merge contracts to ensure the sustainability of services for patients in the future.

6. Why is there a shortage of GPs in Tendring?

The shortage of GPs has been flagged up for some years in various reports. The shortage of GPs is both a national and international problem. Recent figures show that Essex has one of the lowest concentrations of GPs per resident in the country.

Some practices in the Tendring area have highlighted to the Essex Area Team that they have not been successful in recruiting Partners or salaried GPs to replace partners or salaried GPs who have

retired or resigned from the practice. However they have been using locum doctors to ensure that they provide the same amount of appointments for patients.

There has been a change in doctors working preferences. 'Sessional' GPs now make up 40% of the workforce. The term covers all salaried and locum GPs, and therefore those outside of partnerships. The Local Medical Committee recently held an event to look at how sessional doctors can be utilised more to benefit practices and the use of locum chambers was discussed.

7. What is NHS England doing to help improve services and access to GP practice for patients?

The changes introduced in the 2014-15 GP contract aim to support improvements in primary care, including more proactive and personal care for older people and people with more complex health needs and the promotion of more consistently high standards of quality.

The Essex Area Team of NHS England is also meeting with practices in the area to look at access and has offered to fund demand and capacity audits for the practices to enable them to review their appointment systems.

Although some practices in the Tendring area have highlighted that they have not been successful in recruiting Partners or salaried GPs they have provided assurance that they are using locum doctors to cover sessions to ensure that the same amount of appointments are available for patients.

8. What happens if a GP practice closes?

If a GP practice were to close then NHS England has an established process to secure alternative GP services in the short term, and to secure sustainable GP services for the longer term. Patients would not be left without a GP practice.

If you have any queries, please contact Rachel Doherty, Relationship Manager – North East Essex at the Essex Area Team.

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