

# **Governing Body**

## **Meeting**

*Held in Public*

# **REPORT**

<b>Subject</b>	Integrated Urgent Care Contract Position Statement
<b>Date</b>	7 September 2017
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### **Executive Summary**

The Bedfordshire and Luton jointly Integrated Urgent Care (IUC) contract was awarded to Herts Urgent Care (HUC) in November 2016 with service commencement on 30<sup>th</sup> March 2017.

### **Background**

**The following challenges have been identified:**

**GP Pay Rates** – HUC informed the CCGs that GPs do not want to work for the rates of pay that HUC are offering. While the rates are comparable to those paid in the Cambridge and Peterborough service, also provided by HUC, they are lower than those paid in the neighbouring Hertfordshire service. HUC are reporting that this has considerable impact on clinical shift fill.

**Out of Hours GP Indemnity** – A national initiative to support GP indemnity costs for working in out-of-hours periods finished at the end of April 2017. GPs are saying the cost of the indemnity is too high and are opting not to work in out-of-hours. This issue has been raised back up to the national team and we are told solutions are being assessed.

**Scrutiny of Clinical Model** – GPs have been reporting to HUC and the CCGs that they feel the model is too lean and this has been cited as a key reason why GPs are not booking shifts.

**BHT A&E Streaming** - HUC, after award of contract, advised that they are unable to meet the requirement for patients presenting at Bedford Hospital Emergency Department who have been clinically assessed to require primary care during the Out of Hours period to be streamed to the on-site Out of Hours service.

### **Position to Date**

### **Recovery Action Plan (RAP)**

As the service continued to encounter challenges in order to deliver against the contractual requirements both Bedfordshire and Luton CCGs agreed to a joint Remedial Action Plan to support full mobilisation. Anne Murray, Director of Nursing is the CCG lead for the weekly RAP meetings held with HUC. This plan includes HUC providing open and

transparent accounting so that the CCGs can review, going forward, the delivery of the service within the financial envelope. Also included are clear trajectories to achieve a full staffing model against plan and actions for HUC to provide assurance of their internal governance.

HUC have now provided two separate proposals to address the following:

- GP pay rates and Improving Clinical Resource into the model (Out of Hours and Clinical Advisory service) - Proposal A
- Additional resource streaming of patients who present at BHT A&E with Urgent Primary care needs to HUC Out of Hours – Proposal B (only relevant to BCCG)

A paper outlining all the issues was presented to the Finance & Performance Committee on 9<sup>th</sup> August 2017 where a number of options were discussed to resolve the situation. The Finance & Performance Committee have submitted a paper with their recommendation to Part 2 of this Governing Body meeting. In due course this will be reported in public at the next Governing Body meeting.

### **Clinical oversight**

In order to get expert clinical oversight of the current service and to advise on future models. The regional clinical lead for East Midlands has been requested to work with the CCG to ensure complete independence and expertise.

The objectives are to;

- Gain assurance in relation to the current clinical model that is in place and to advise on potential changes going forward.
- Advice strategically in response to models of care and ensure alignment with other strategies and programmes of work ie GP Forward View.

This work will imminently in light of the concerns raised.

### **Recommendation**

The purpose of the paper is to inform the Governing Body of the issues that have arisen following the award of an Integrated Urgent Care (IUC) contract to Herts Urgent Care (HUC) from 30/3/17.

The Board is asked to note that the situation to date has not been resolved. On 17<sup>th</sup> July 2017 Herts Urgent Care provided a revised model and associated costs in order for them to fulfil the terms of the contract.

### **Links to the business and risks**

#### **Relevant Strategic Objectives 2016/17 (please mark in bold)**

1. Systematically implementing prevention, early diagnosis and early intervention

2. Commissioning services that deliver evidence-based care, in the right place and at the right time, including promoting self-care and empowering patients to manage their own conditions.

<b>3. Making sure that care is high quality, safe and sustainable, that it improves health outcomes and wellbeing and provides a good patient experience.</b>
<b>4. Using the statutory framework with best practice governance and transparency principles to be fully accountable to our population in commissioning and operating as a part of the wider health system</b>
<b>5. Ensure that the CCG commissions and operates in a financial manner consistent with the regulatory framework, long terms sustainability and best use of public money.</b>
<b>6. We will work in close partnership with all the organisations who commission or provide care for our population, to integrate services where it makes sense and to achieve seamless transitions of care for patients where services remain separate.</b>
<b>7. Embedding member, public, patient, carer, staff and other stakeholders' views through meaningful engagement into decision-making processes and commissioning intentions.</b>

<b>Links to Board Assurance Framework / Corporate Risk Register</b>	On the Corporate Risk Register
<b>Details of additional risks associated with this paper (may include NHS England Assurance Framework / NHS Constitution)</b>	Not applicable for this paper
<b>Financial Implications / impact</b>	Not applicable for this paper
<b>Legal Implications / impact</b>	Not applicable for this paper
<b>Partnership work / public engagement implications / impact</b>	Not applicable for this paper
<b>Committees / groups where this has been discussed before</b>	AO/CEO meetings with HUC, NHSE, Cambridgeshire & Peterborough, East & North Herts and Luton CCGs Escalation meeting between HUC, LCCG and BCCG Finance & Performance Committee
<b>Other options available and their pros and cons</b>	Not applicable for this paper
<b>Background papers</b>	