PRACTICE INCOME DURING COVID-19



GUIDANCE FOR SHEFFIELD GPS

May 2020

SOURCE OF INCOME	SLMC QUERY / COMMENTS	SHEFFIELD CCG RESPONSE
GMS/PMS income	Income stream maintained. Uplifted by how much?	Draft guidance indicated an uplift of £3.58 to Global sum. An uplift was actioned in April to GMS practices, but we are awaiting confirmation of the amount as this is actioned centrally. PMS uplift will be calculated once we have the amount confirmed. Expect to pay an uplift to PMS practices in May (even if just a provisional amount).
Quality & Outcomes Framework (QoF)	Income will be maintained in 2020/21 at 2019/20 level, but NHS England and NHS Improvement (NHSE/I) stated some further "analysis" will be done.	There was a communication sent from NHS Digital (NHSD) and NHSE/I on 2/4/20. It said that analysis work would be undertaken by NHSD to compare 2019/20 and 2018/19 achievement and identify practices with significant differences in performance to be flagged to commissioners. This was scheduled to happen on 22 April, but we have not yet received any information regarding whether any practices have significant differences. This is being chased with NHSE/I. 2019/20 achievement will be paid in May rather than in June like previous years.
Locally Commissioned Services (LCSs) including Quality Contract	Are all services continuing to be paid, eg Homeless, Hep B.	All LCS payments are continuing in Quarter 1 in line with 2019/20 with the exception of diabetes specification which ended on 31 March 2020. Some large payments including Equitable Funding and Quality Contract were made on 1 April to help with cashflow. Payments for Care Homes were made on 23 April. The calculation for the activity driven LCS is currently underway and payments will be made asap in line with what we wrote in our previous letter: • Quarter 4 payments due mid-April 2020 - practices will receive the higher (by LCS) of either the payment already made for Quarter 3 2019/20 or their reported actual for January and February 2020 plus one month at the average of October, November and December 2019. • Quarter 1 payments (April to June 2020) due mid July 2020 - whatever was agreed as the payment for Quarter 4 2019/20 (by LCS) will be paid again for this period for the LCSs that are due to continue into 2020/21. This will include the LCS specifications covering ring pessaries, Mirena and endometrial biopsy that were transitioning to the new Sexual Health and Gynaecology contract held by Primary Care Sheffield (PCS). As part of post covid planning transition

		We are now considering what arrangements are likely to be in place for Quarter 2 onwards, in light of the guidance issued on 29-4-20: https://www.england.nhs.uk/coronavirus/wp-content/uploads/sites/52/2020/04/second-phase-of-nhs-response-to-covid-19-letter-to-chief-execs-29-april-2020.pdf We are awaiting further information on possible financial arrangements post June and we will discuss this with the LMC in the near future.
National Direct Enhanced Services (DES) eg minor surgery (See below for PCN DES)	Are these being paid quarterly based on previous quarter activity and, if so, for how long?	We have agreed with NHSE/I that for Quarter 1 2020/21 Minor Surgery and Learning Disabilities DESs will be paid on activity in the previous quarter. We would welcome further discussion on how to ensure that the important care plans commissioned through the Learning Disabilities DES are delivered during the course of the year so that patients continue to be supported.
NHS Health Checks	What is happening with income?	PCS have confirmed that a moratorium has been agreed until August 2020, when the contract will be reviewed with the Local Authority.
Sexual Health Services	What is happening with income?	See update under LCSs.
ECGs / 24- hour ECGs	What is happening with income?	In line with the LCS arrangements we will pay Quarter 1 payments based on the previous quarter's activity.
Practice excess COVID costs, eg PPE, cleaning, postage, telephones	National COVID fund to be announced.	Sheffield CCG had agreed to reimburse the cost of additional PPE requirements (masks, gloves, aprons, visors and scrubs) together with the cost of additional hand sanitizer and cleaning products. A claim form has been issued to practices. The CCG also continues to supply practices with PPE and cleaning products (Chlorclean) directly to support where there are supply issues. The CCG made a payment of £1,000 to every practice to recognise additional COVID costs including business continuity and IT related admin. Practices and PCNs have also received additional IT equipment to support remote working and capital funding is available to support PCN hot hub development if required. An exercise is being carried out, led by locality managers, to review claims for other exceptional items.
Primary Care Network (PCN) related excess COVID costs, eg hot hubs, extra staffing, cleaning	The Impact and Investment Fund (IIF) will be paid upfront to PCNs on a monthly basis. Other drawdown funds available to PCNs April - June. Claims to be submitted on a monthly basis to locality managers, including for the IIF funds. Are IIF funds not a national funding allocation agreed to be paid to PCNs? If so, why is there any submission to locality managers / CCGs?	Yes the IIF funds are agreed to be paid to PCNs to create a 'PCN support funding stream' for COVID management but we still need to understand how PCNs are utilising this funding in order to be able to establish what additional funding may be required to support PCNs in responding to the current crisis. The CCG has set aside £300k, in addition to the IIF funding, that PCNs can draw down if required. PCNs have been asked to agree a plan for use of this funding and then submit monthly claims. We are trying to be as light touch as possible, and the funding is provided on a high-trust basis, but records of agreed plans are understandably required for financial governance.
Care Quality Commission (CQC) payments to cover costs of regulation	Will these fees continue to be reimbursable monthly / annually as agreed by the practice?	Yes, practices should continue with the normal process which is to submit a copy of the invoice that they have paid and this will be reimbursed.

Bank Holiday costs (Good Friday / Easter Monday)	Practices can claim: 1.£289 per session for a GP (£578 maximum per GP) 2.£250 per session for a locum 3. The expense of their employed staff, including NI and pension contributions, working as normally on these days What about overheads for these days when practices are normally shut?	Whilst we acknowledge the point, the CCG, under its delegation agreement with NHSE/I, must comply with national guidance in relation to payment for core contracts. Therefore, we are only able to make reimbursements for the Bank Holiday in line with the national guidance. We are currently processing the claims received.
	What about extra PPE for these days?	We have not differentiated PPE for Bank Holidays from other PPE and so all additional PPE costs are being reimbursed as confirmed above.
	What about the gap between locum re-imbursement and actual costs?	We are only able to make reimbursements for the Bank Holiday in line with the national guidance.
	Claims need to be at practice level because this was a change to GMS regulations.	Payments are being made at practice level.

Primary Care Network (PCN) Directed Enhanced Service (DES) Income

- For practices who have signed up to the PCN DES the money available will continue to be paid. There is a moratorium on reporting PCN activity for 6 months, to be reviewed again in October 2020.
- 100% Additional Roles Reimbursement Scheme (ARRS) funding is still available for the prescribed roles, but the requirement to inform Sheffield CCG of expected recruitment activity during 2020/21 has been delayed.
- IIF money has been re-invested in COVID management (see table above) and the requirements of the IIF have been postponed and will also be reviewed in October.