

## Message from your GPs committee chair

Co-commissioning: make sure you have your say

As we rapidly approach the festive season, it is vital that all GP practices in England are fully aware that they could be working under very different commissioning and contractual arrangements from April 2015, following last month's publication of NHS England's *Next Steps Towards Primary Care Co-commissioning* policy document.

**If your CCG (clinical commissioning group) has not already commenced discussing co-commissioning options with you, please contact the CCG board as well as your LMC (local medical committee) for advice.**

To give you some context, co-commissioning gives CCGs the opportunity to take on greater powers: to directly commission primary medical services as well as performance-manage practices and GP contracts. These powers do not extend to the performance management of individual GPs.

There are three levels of co-commissioning:

- **Greater involvement:** this option invites CCGs to create greater collaborative arrangements with area teams. There is no formal approval process or any change of governance required; it builds on current arrangements
- **Joint commissioning:** this model enables one or more CCGs to assume responsibility for jointly commissioning primary medical services with their area team
- **Delegated commissioning:** this offers an opportunity for CCGs to assume full responsibility for commissioning general practice services.

**One key point is that there is no obligation to go down any of these routes: the status quo is also an option.**

The BMA GPs committee has produced guidance for practices, outlining the benefits and risks of each option and including some FAQs. I urge you to **read this co-commissioning guidance** alongside NHS England's *Next Steps* document.

As statutory members of CCGs, all GP practices in England could be affected by these changes. The deadlines for CCGs to apply for these options are in January 2015, and it is vital that all GP practices understand the implications and discuss these within their CCGs **now**. That said, the January deadline is not a 'one-off'; CCGs will have the opportunity to begin co-commissioning in subsequent years.

Remember, as a CCG member, your practice has a legitimate voice in your CCG's decision on co-commissioning. You need to make your views known as the decision will directly affect your practice.

## Far-reaching powers

For the joint and delegated commissioning models, CCGs will for the first time have powers to commission primary care services, including:

- GMS, PMS and APMS (general, personal and alternative provider medical services) contracts, from the design and monitoring of contracts to taking contractual action, such as issuing branch/remedial notices, and removing contracts
- Newly designed enhanced services, as an alternative to current LES and DES (local or directed enhanced services)
- Local incentive schemes as an alternative to the QOF (quality and outcomes framework)

They will also have the power to:

- Establish new GP practices in an area
- Approve practice mergers
- Make decisions on 'discretionary' payments (eg, returner/retainer schemes).

As you can see, this means CCGs will have far-reaching new powers that will affect GP practices. The ability to support investment in general practice could allow CCGs to improve the working environment for GPs and the care and services we can provide patients.

However, the GPC has consistently expressed serious concerns regarding the inherent conflict of interest that arises with GPs on CCG boards performance-managing local GP contracts or making investment decisions about member practices. This could be mitigated by removing GP board members from decisions of this kind, and changes to CCG constitutions may be needed. Practices should seek advice from LMCs about any concerns.

GPs must have trust and confidence that any decisions affecting their practices and contracts are made fairly without bias or patronage. We are producing conflicts of interest guidance, which should be available shortly.

Remember that your CCG must not apply for co-commissioning status without the expressed democratic support of its member practices, which should take place via a vote or ballot. I urge you to engage in local conversations and seek the advice of your LMC as well as reading our GPC **co-commissioning guidance**. You really can influence your practice's future and the future of commissioning in your locality.

With best wishes for the festive season,

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