

Newsletter



Sefton Local Medical Committee

29th March 2017

To: All GPs and Practice & Business Managers in Sefton

Dear Colleague

Re: Local Quality Contract Schemes 2017/18

Practices have received from each of the CCGs, a draft version of the Phase 3, Local Quality Contract (LQC) schemes 2017/18, for South Sefton and Southport & Formby practices.

The proposed LQC schemes for 2017/18, are the result of considerable discussion between the CCGs and the LMC. They represent a lower level of financial investment in Practices for 2017/18 from that expected at the outset of the negotiations.

It is important that practices understand why this is the case. The original proposed specifications have been severely pared back to equate to the level of investment, which the CCGs can make, but they secure a fair balance between income and activity for practices.

The LMC was invited to be involved in the construction of the Phase 3 LQC – to avoid the problems that beset the Phase 2 scheme, which required a midterm review to secure a reasonable level of achievement.

In approaching the construction of the LQC for 2017/18, it was proposed by the CCGs that the framework approved by Liverpool CCG, should be explored for adoption both for South Sefton and Southport & Formby LQCs. This, it was noted, would comply with undertakings given (without prior consultation) during discussions within the Sustainability and Transformation Plan - that the North Mersey CCGs would adopt the Liverpool LQC as a common specification for all. The Liverpool Scheme was circulated to practices at CCG Wider Team meetings

Discussion commenced with the aim of matching the high level of investment received by practices in Liverpool for the same activity, but modifying the activity demanded to recognise that practices in the Sefton district would be engaging with the framework at different level of historical resourcing. At a fairly late stage in the negotiation, the CCGs revealed they could not produce neither the funding to match the level of investment in £5 per patient, which would be injected by Liverpool CCG, nor the working assumptions regarding level of investment that had underpinned the negotiations up to that point.

The LMC's surprise and disappointment at the shortfall in expected funding was genuinely shared by the CCG leads. At this point, the discussion of the Phase 3 LQC was reoriented to produce a framework of activity, which:

- matched the available investment funding,
- would enable all practices to realistically aim to achieve 100 percent of the CCG LQC investment available (£18.50 approx per patient), and
- captures the £3 per patient extra funding available in the General Practice Forward View.

The draft of the proposed LQC you have received is the result of our discussions – which, by and large achieves a reasonable balance between activity and income. The number of KPIs included have been significantly reduced and those which remain have been set at a level, which practices have a realistic chance of achieving. It is by no means perfect and final touches are required.

It is important that you review the content of the LCQ to evaluate the work/investment balance it contains. Please feedback your views to both to Officers & Governing Body Members of the CCGs and to Sefton Local Medical Committee on seftonlmc@seftonlmc.co.uk

It has been agreed that should additional investment funding become available, from changes in the outturn of expenditure commitments during 2017/18, that increasing investment in the LQC will be a priority. It is a dismaying fact that investment funding in General Practice in the Sefton district remains substantially lower than the national £ per patient average.

Best wishes

Yours faithfully



Mr Joe Chattin
Hon. Secretary
Sefton Local Medical Committee



Dr Brian Fraser
Chair
Sefton Local Medical Committee