



## **Update on Practices Operated by SSP Health in Sefton**

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The National Health Service Commissioning Board was established on 1 October 2012 as an executive non-departmental public body. Since 1 April 2013, the National Health Service Commissioning Board has used the name NHS England for operational purposes.

## **Contents**

1) Purpose of Paper	4
2) Background Information	4
3) Term Of Contract	5
4) Suitability of SSP Health as interim provider	5
5) Appointment of Interim Providers	7
6) Maghull Practice	8
7) Communications	9
8) Complaints Process	9
9) Procurement of Substantive Services	11
Appendix 1	13
Appendix 2	17

## 1) Purpose of Paper

The purpose of this paper is to provide Sefton Adult Health and Social Care Overview and Scrutiny Committee with an update on the general practices currently operated by SSP Healthcare, the transition to interim provider and information about the complaints process.

NHS England retains legal accountability for GP contracts, but responsibility for these is formally discharged by NHS England and Southport and Formby CCG (as joint commissioner – level 2 co-commissioning) jointly for that area and through collaborative working arrangements for South Sefton CCG (greater collaboration – level 1 co-commissioning).

## 2) Background Information

- a) SSP Healthcare was appointed as the provider for the 20 GP practices across Merseyside following an open, competitive procurement process undertaken by NHS Merseyside. Nine of these practices are located in Sefton (Table 1).
- b) SSP Healthcare commenced providing services in February 2013.
- c) The transition from the former providers to SSP Healthcare provided several challenges and a number of difficulties have arisen, particularly around human resource issues. SSP Healthcare had difficulties recruiting GPs and, as a result, received some complaints from patients regarding continuity of their care in the affected practices and, in light of the recruitment difficulties, an over reliance on locums. Difficulties in obtaining an appointment have occurred in a number of the Sefton practices.
- d) Inspections by the Care Quality Commission (CQC) rated two of the practices as inadequate and they were placed into special measures (Hightown and Seaforth). Since then NHS England and the CCGs have been working very closely to provide the required support for these practices.
- e) SSP Health and the practices fully engaged in the process. NHS England was satisfied that all appropriate remedial action had taken place.

f) Both practices have been revisited by the CQC. Seaforth Village surgery was rated as "Good" overall and "Good" in all domains. The report for Hightown Surgery has yet to be published by the CQC.

**Table 1: SSP Health Operated Practices in Sefton** 

Practice Code	Practice name
N84036	FRESHFIELD SURGERY
N84026	CROSBY VILLAGE SURGERY
N84043	SEAFORTH VILLAGE PRACTICE
N84605	LITHERLAND TOWN HALL HEALTH CENTRE
N84621	THORNTON PRACTICE
N84626	HIGHTOWN VILLAGE SURGERY
N84627	CROSSWAYS PCT PRACTICE
N84630	NETHERTON PCT PRACTICE
Y00446	MAGHULL PRACTICE

## 3) Term of Contract

- a) The contract awarded to SSP Healthcare was a 3 year Alternative Provider of Medical Services (APMS) contract with an option to extend for up to a further 2 years.
- b) If SSP Healthcare wished to apply for the extension then it must have done so not less than 12 months prior to expiry of the contract.
- c) An application for extension was made by SSP Health but this was submitted approximately one month after the deadline had passed. Therefore, NHS England was unable to offer an extension to the contract and needed to procure new providers for the services.

## 4) Suitability of SSP Health as Interim provider

a) In order to appoint substantive providers to the practices (currently operated by SSP Health) a formal tendering process is required. This would have been achievable within the usual timescales if the service to be procured was under similar terms as the existing contract. This was not deemed appropriate as the

current arrangements have now been shown not to fully meet the needs of the local population. In addition to this, commissioners now need to recognise the importance of the NHS Five Year Forward View which describes the forward position for health care. It is important that any newly procured services align with the key vision for local services and therefore it is necessary to allow sufficient time for NHS England and the CCGs to develop an updated service specification which better reflects the needs of patients.

- b) In light of this and the operational challenges with the current contracts, it was determined that interim contracts would be required.
- c) In order to determine if it was appropriate to offer SSP Health a contract as interim provider, a robust assessment of each practice was undertaken by NHS England and the CCGs. The assessment examined a large number of data sources including patient complaints, CQC Reports, Quality Outcomes Framework scores, findings from governance visits, and breach or remedial notices etc.
- d) As a consequence of those assessments, NHS England offered SSP Health an interim contract to act as a caretaker for four of the Sefton Practices (Table 2). It was determined that an alternative interim provider should be identified for a further four practices.
- e) SSP Health declined the offer to operate as interim provider for all practices located in Sefton. Therefore an interim provider for all practices is required.

## 5) Maghull Practice

- a) The Maghull Practice (currently located in a property belonging to Park Haven Trust) has been served notice by the landlord that they wish to take possession of the building as soon as possible, although they have no desire to evict the practice until alternative premises are available.
- b) NHS England has identified suitable alternative premises at Maghull Health Centre.

- c) A review of existing services hosted at the premises is currently being undertaken to ensure any decision taken regarding the relocation of the practice is fully informed.
- d) Early findings from the review indicate no patient facing services located at the health centre will need to vacate the premises in order for the practice to relocate.
- e) One service, the Speech and Language Therapy Service (SALT) will need to relocate to Litherland Town Hall. However this is an outreach service. Relocation will not affect patient care.
- f) Other possible sites for the practice were examined e.g. Bryant House. However the cost of conversion is prohibitive. The lead time for such a project would most likely be extensive and would include purchase or the property, obtaining planning permission, conversion of the premises, registration with the CQC, etc. have effectively ruled out other possible venues.

**Table 2: Interim Contract Offer** 

Practice Code	Practice name	SSP Health Offered interim provider status
N84036	FRESHFIELD SURGERY	Yes
N84026	CROSBY VILLAGE SURGERY	No
N84043	SEAFORTH VILLAGE PRACTICE	No
N84605	LITHERLAND TOWN HALL HEALTH CENTRE	No
N84621	THORNTON PRACTICE	Yes
N84626	HIGHTOWN VILLAGE SURGERY	No
N84627	CROSSWAYS PCT PRACTICE	Yes
N84630	NETHERTON PCT PRACTICE	Yes
Y00446	MAGHULL PRACTICE	N/A*

<sup>\*</sup>No offer was made to SSP Health as all other offers were rejected

## 6) Appointment of Interim Providers

- a) NHS England developed a process to identify and evaluate interim providers for each of the practices. Once completed, expressions of interest were sought from providers and invitations to apply (accompanied with all relevant documentation) were issued.
- b) Applications from potential interim providers were evaluated against predetermined criteria. The evaluation process assisted in identifying the most appropriate providers for each practice.
- c) The successful interim providers continue to liaise with NHS England, SSP Health, the CCGs and the practice to facilitate transition.
- d) A communications plan was developed to allay concerns of patients and also staff at the practices concerned as well as wider stakeholders. It is particularly important that staff members and patients are made aware of developments.
- e) The interim providers appointed to operate the practices from 29 February 2016 are shown in table 3.
- f) In order to facilitate transition from SSP Health to the new interim provider, regular meetings have been established between SSP Health, NHS England and the Sefton CCGs. The purpose of these meetings is to identify equipment, software licences, maintenance arrangements, staffing issues etc., and facilitate information sharing from the current provider to the interim provider. As issues are identified or information is finalised, they are shared with the interim provider.
- g) A separate meeting between SSP Health and each of the interim providers took place on 10 February. This was a formal handover meeting between providers in which all of the information gathered above will be formally shared.

Table 3: Interim providers

Surgery	Interim provider 29 February 2016 - 31st march 2017	Current Practice	Organisation
Netherton	Dr Hegde and Jude	Riverside Centre for Health	Riverside Centre for Health
Hightown	Dr Reddington	Village Surgery , Formby	Ashurst Health Care Ltd
Freshfield	Dr Jackson and partners	Chapel Lane Surgery	Chapel Lane Surgery
Thornton	Dr Reddington	Village Surgery , Formby	Ashurst Health Care Ltd
Crossways	Dr Maassarani	Tower Hill, Kirkby	Crossways Practice Limited
Crosby Village	Dr Maassarani	Tower Hill, Kirkby	Crosby Village Surgery Ltd
Seaforth	Dr Maassaran	Tower Hill, Kirkby	Seaforth Village Surgery Ltd
Litherland	Dr Maassarani	Tower Hill, Kirkby	Litherland Practice Ltd
Parkhaven	Dr Maassarani	Tower Hill, Kirkby	Maghull (Parkhaven) Surgery Limited

## 7) Communications

- a) A communications plan was developed and shared with all stakeholders. As part of the plan, NHS England would keep patients, staff and stakeholders informed of developments.
- b) Such notifications took place at regular intervals and at appropriate times although information regarding the identity of preferred interim providers became public prior to the final agreement of interim contracts. At that stage, NHS England was unable to identify the interim providers as formalities had not been concluded.
- c) Regrettably, this resulted in the circulation of some information that was not quite correct and caused anxiety amongst some patients and staff.
- d) As soon as each interim contract was finalised and signed, a formal announcement was made to stakeholders by NHS England.

## 8) Complaints Process

a) In line with national guidance on NHS complaints procedures, patients who wish to make a complaint should do so to the practice or healthcare provider concerned in the first instance. If they feel unable to do so then they may

complain directly to NHS England or the commissioner of the service. These procedures apply to all providers of healthcare.

- b) If the patient is not satisfied with the outcome of the complaint, they may escalate the issue to the Parliamentary and Health Service Ombudsmen.
- c) As a consequence, commissioners of GP services are not fully aware of the level of complaints within any given practice on an ongoing basis since complainants can choose to direct complaints to the healthcare provider/practice directly.
- d) Any complaints made directly to NHS England as a commissioner of services are dealt with in accordance with national NHS complaints procedures. Summary tables of complaints made regarding SSP Practices and non SSP Practices can be found in Appendix 1.
- e) Between 1 April 2013 and 31 March 2015 there were 40 complaints in respect of the general practices operated by SSP Health in Sefton (Appendix1 Table 1).
- f) There were 11 complaints between 1 April 2015 and 1 February 2016 (Appendix 1 Table 2).
- g) In the rest of Sefton there were 57 complaints against all practices (excluding SSP Health) between 1 April 2013 to 31 March 2015 (Appendix 1 Table 3)
- h) There were 12 complaints against all practices (excluding SSP Health) between 1 April 2015 and 1 February 2016 (Appendix 1 Table 4)
- i) Whilst NHS England may not be aware of those complaints made directly to individual GP practices, general practice providers are required to submit an annual summary of complaints to the Health and Social Care Information Centre but that data is aggregated at CCG level. It is not possible under the current system to identify individual practices from such data.
- j) NHS England will not be aware of complaints:

- (1) that are resolved by the practice to the satisfaction of the patient/complainant;
- (2) where the patient may not be satisfied with the practice's response, but decides to take no further and does not inform NHS England;
- (3) referred to the Parliamentary and Health Service Ombudsman in the first instance.
- k) Details of the complaints process can be found in Appendix 2.

## 9) Procurement of Substantive Services

- a) In terms of identifying substantive providers for the general practice contracts, NHS England and the CCGs will work together to undertake options appraisal for future service provision and develop a service specification prior to the commencement of the procurement process. These processes will be undertaken simultaneously and will reflect local needs together with the aims set out in NHS Five Year Forward View.
- b) An options appraisal will be undertaken for each practice. A number of possible options need to be considered before a formal procurement can be undertaken.
- c) Options to be considered include
  - (1) procure a new provider for the practice as is;
  - (2) merge/align the practice with another;
  - (3) disperse the list i.e. close the practice;
  - (4) other innovative solutions yet to be identified.
- d) The service specification will determine what services each practice will offer, how they will be delivered, key performance indicators and other quality measures, etc. The service specification forms the basis of the contract.
- e) The procurement process presents an opportunity to develop a service which is better suited to the needs of the patients of the local area. NHS England and the CCGs will work together to determine the service specification and the options appraisal.

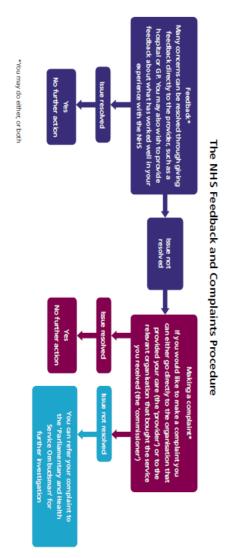
f) Alongside this work, patients, Local Medical Committee, Healthwatch, and other key stakeholders will also be involved in the process.

g) Once it is determined what type of services are to be procured and in which locations, then a formal competitive procurement process will be undertaken to identify substantive providers for each practice.

Alan Cummings 16 February 2016

## Appendix 1:

#### **Appendix 2: NHS Feedback and Complaints Procedure**



Parliamentary and Health Service Ombudsman Millbank Tower Millbank London, SW1P 4QP. Phone: 0345 015 4033

Website: www.ombudsman.org.uk

For public health services complaints, contact the Local Government Ombudsman

Website: www.lgo.org.uk

The NHS Constitution sets out your rights as a patient, and explains the commitments the NHS has made to providing you with a high-quality service. Organisations providing NHS care must take account of the NHS Constitution when treating you, so you may find it helpful to refer to it if you are thinking about making a complaint. Go to

https://www.gov.uk/government/publications/the-nhs-constitution-for-england for details.

#### Useful contact details

## Primary care complaints (for example, GPs, dentists)

NHS England PO Box 16738 Redditch, B97 9PT. Email: england.contactus@nhs.net Phone: 0300 311 22 33

## Secondary care complaints (for example, hospitals)

NHS Choices

To find information about your local clinical commissioning group, visit www.nhs.uk

Healthwatch England Phone: 03000 683 000 Email: enquiries@healthwatch.co.uk

Citizens Advice Phone: 03444 111 444

Website: www.citizensadvice.org.uk



# How do I give feedback or make a complaint about an NHS service?





Most NHS care and treatment goes well but sometimes things can go wrong. If you are unhappy with your care or the services you have received, it is important to let us know so that we can improve.

There are two ways to tell the NHS what you think:

- Give feedback
- Make a complaint

#### Giving feedback

Feedback helps us improve the quality of your care.

You can give good or bad feedback by telling the NHS organisation or service about it. For example, you can do this through the 'Friends and Family Test'. Or, you can speak to a member of staff. Other ways to give feedback should be clearly displayed at the service you visit.

If you are unhappy with an NHS service, it is worthwhile discussing your concerns early on with the provider of the service, as they may be able to sort the issue out quickly. Most problems can be dealt with at this stage but, in some cases, you may feel more comfortable speaking to someone not directly involved in your care.

#### How to complain

When making a complaint, you can choose to complain to either of the following.

The healthcare provider. This is the organisation where you received the NHS service, for example your hospital, GP surgery or dental surgery.

Or

The commissioner. This is the organisation that paid for the service or care you received. This will vary depending on the NHS service you are complaining about.

- If your complaint is about primary care services such as GPs, dentists, opticians or pharmacy services, contact NHS England.
- If your complaint is about services such as hospital care, mental health services, out-of-hours services and community services such as district nursing, contact your local clinical commissioning group.
- If your complaint is about public health organisations (those who provide services which prevent disease, promote health and prolong life), contact your local authority.

Complaining to the commissioner may be the right option if you are not comfortable complaining direct to your healthcare provider, or you feel this is not appropriate.

#### Making your complaint

You can complain in writing, by email or by speaking to someone in the organisation. You should make your complaint within 12 months of the incident, or within 12 months of the matter coming to your attention. This time limit can sometimes be extended as long as it is still possible to investigate your complaint.

Anyone can complain, including young people. A family member, carer, friend, or your local MP, can complain on your behalf with your permission.

#### What can I expect if I complain?

#### You should:

- have your complaint acknowledged and properly looked into;
- be kept informed of progress and told the outcome:
- · be treated fairly, politely and with respect;

- be sure that your care and treatment will not be affected as a result of making a complaint;
- be offered the opportunity to discuss the complaint with a complaints manager; and
- expect appropriate action to be taken following your complaint.

## I would like support to make my complaint

Making a complaint can seem difficult, but support is available. Below are some of the services that can help you.

- Contact your local council or local Healthwatch to find out about independent NHS complaints advocacy services in your area.
- Contact your local citizens advice bureau for support with complaints about the NHS, social services or local authorities.
- Most hospitals have a Patient Advice and Liaison Service (PALS), who provide confidential advice, support and information to patients, their families and carers. Contact the hospital or visit their website for more details.

## Unhappy with the outcome of your complaint?

If you are still not happy with the response provided, you can ask the independent Parliamentary and Health Service Ombudsman to look at your complaint.