

**REPORT TO ADULTS'
HEALTH AND WELLBEING COMMISSIONING
GROUP**

4th September 2014

**REPORT OF DIRECTOR OF
PUBLIC HEALTH**

The Birchtree Practice Review 2014

1. PURPOSE OF REPORT

- 1.1. To inform the commissioning group of a review being conducted by NHS England of the registered element of the Alternative Provider Medical Services (APMS) Contract relating to The Birchtree Practice, Lawson Street, Stockton on Tees to determine their future commissioning intentions
- 1.2. To inform the commissioning group of the intention of Public Health to carry out a review of the substance misuse provision within that Contract to inform and determine the future of this substance misuse treatment provision in Stockton on Tees
- 1.3. To inform the commissioning group of the intention of Public Health to carry out consultation with a range of stakeholders in conjunction with NHS England to determine our future commissioning intentions regarding possible joint commissioning arrangements with NHS England.
- 1.4. To inform the commissioning group of the timeframe to complete this and receive future updates with recommendations for commissioning action.
- 1.5. To outline to the commissioning group and gain opinion on potential risks if NHS England decide not to enter in similar contractual arrangements with Stockton Borough Council.

2. BACKGROUND

- 2.1. The Birchtree Practice situated at Lawson Street, Stockton on Tees is a GP practice which delivers essential, additional, enhanced and specialist substance misuse services to a registered list of 725 patients as at 01 July 2014 under an APMS contract.
- 2.2. As well as the registered patient and substance misuse elements, the contract also requires the provider to deliver primary medical services to patients who have been removed from their former practice list, for violent or threatening behaviour.
- 2.3. The service was originally commissioned by Stockton on Tees Teaching PCT under a Personal Medical Services (PMS) agreement which was awarded to a single handed practitioner. The service was reviewed in 2011 and a decision was taken to re-commission a contract jointly, between Stockton on Tees PCT and Stockton Borough Council, as part of the wider substance misuse service in the area.
- 2.4. A 3-year APMS contract was awarded to Counted4 a Community Interest Company following an open tender exercise and the contract has been running since 01 April 2012. It is due to terminate on 31 March 2015 but the contract does allow for either party to request an extension of this agreement in respect of the whole or part of the services but this would only be for a maximum of 1.5 years. The contract is currently held by NHS England but is jointly funded and managed with Stockton Borough Council.
- 2.5. NHS England is reviewing the registered element of the contract to determine their future commissioning intentions. Stockton Borough Council will also need to review the substance misuse

provision and will be working closely with NHS England to determine the future model of substance misuse services in the area.

- 2.6. A contract extension has been proposed by the Provider and also Stockton Borough Council to NHS England. If agreed this would extend the contract to 31 March 2016 to afford sufficient time for the review and consultation to be undertaken. A decision by NHS England regarding this proposal is still pending. Regardless of NHS England's decision about the primary medical care services element of the contract Stockton Borough Council will need to commence a procurement exercise in the summer of 2015 to allow for a suitable procurement timeline ensuring any Provider is mobilised by 01 April 2016.

3. FINANCIAL IMPLICATIONS

- 3.1. The Birchtree Practice is paid as a block contract and the funding includes the elements of the primary medical care and the substance misuse services. The financial contribution by Stockton Borough Council equates to £411,399 per annum with an annual uplift. The service supports 665 substance misusers with 149 new treatment episodes in a 12 month period (Q4 2013/14). There will be a continuing need to support this patient cohort beyond the terms of this contract for their substance misuse.
- 3.2. Due to the nature of the service and its patient cohort it is difficult to compare this GP practice to a standard GP practice in terms of value for money, but if NHS England's contribution only is taken into account for the primary element then NHS England report that this practice costs more than what it would cost to deliver the same service under a GMS national contract. This inevitably poses the risk of a discontinuation of service provision by NHS England beyond March 2016 under the current model.
- 3.3. The findings from the review may necessitate a change in a service delivery model which may adjust the funding committed from the Public Health Grant but any options would be appraised on a cost benefit analysis.

4. RISK ASSESSMENT

4.1. Health & wellbeing:

The current joint commissioning arrangements have the advantage of a seamless management of both health and substance misuse needs by a very complex patient cohort who have developed additional health needs as a consequence of their long term substance misuse. Any fragmentation of this may directly affect or delay their recovery from substance misuse and even exacerbate their general health.

4.2. Reputational:

Drug related performance is measured under the Public Health Outcome Framework (PHOF) indicator 2.15 which measures the successful completion of drug treatment. Since this indicator was established Stockton has historically performed below their cluster group average. There has been significant work completed to improve this. As a consequence Stockton is showing gains in this indicator. Any disruption that could affect substance misusers successfully completing treatment would undermine local aspirational rates for recovery.

4.3. Financial:

A proportion of the drug related provision within the Public Health Grant is calculated using a formula that takes into account the numbers who are engaged in drug treatment and the numbers who successfully complete drug treatment as defined by PHOF indicator 2.15. Performance against these may be reflected in future Public Health grants.

5. NEXT STEPS

- 5.1. To complete a comprehensive review by Public Health of the substance misuse element of the Birchtree Practice to determine:

- Quality of the existing service
- Future need and the desired model for service delivery
- Commissioning options

Although NHS England are currently making their own arrangements for review of the registered element and engagement it is agreed that this review will be carried out as far as practicable in collaboration and in tandem with NHS England to minimise patient/service user inconvenience and disruption to service delivery and to better inform future commissioning decisions.

- 5.2. Following review of services to recommend models of delivery, and commissioning options, including procurement options, to this commissioning group.
- 5.3. Consultation, service review findings, national guidance and the evidence base will then feed into service design and development to ensure we have the best possible model of delivery for the substance misusing populations in Stockton-On-Tees.
- 5.4. To implement the decisions of the commissioning group to ensure that a fit for purpose service model that is aligned to the findings of the review is in place from the 1st April 2016.
- 5.5. The indicative timescale is to complete this review between September and December 2014 and to provide a report to this commissioning group outlining models of delivery, and commissioning options, including procurement options, with recommendations on 20th January 2015.
- 5.6. A project group will be developed under the project leadership of Kerry Anderson, Modernisation Manager & Lead Commissioner (Drugs), Stockton-On-Tees Borough Council Public Health to complete this piece of work.

6. RECOMMENDATION

- 6.1. That the commissioning group note the contents of this report.
- 6.2. That the commissioning group provide opinion on potential risks of a discontinuation of joint commissioning arrangements with NHS England.
- 6.3. That the commissioning group accept a recommendation report January 2015 and agree a preferred commissioning approach for the provision of services from April 2016 in Stockton-On-Tees.

REPORT ENDS