

PRIMARY CARE CONTRACEPTION SERVICE UPDATE

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| Relevant Board Member(s) | Councillor Philip Corthorne |
| Organisation | London Borough of Hillingdon |
| Report author | Sharon Daye, Interim Director of Public Health. |
| Papers with report | None |

1. HEADLINE INFORMATION

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| Summary | <p>This report details the temporary measures to date to address errors made by the former Hillingdon PCT and the North West London Commissioning Support Unit, relating to the contractual and financial handover for the provision of primary care contraception services from Hillingdon PCT to Hillingdon Council on 1 April 2013. Whilst NHS England continued to fund the disputed services in 2013/14, in the absence of further support, funding for 2014/15 will be provided by the Council to ensure continuity of services.</p> <p>The Council currently commissions reproductive health / contraceptive services through open access family planning clinics in the Borough. However, it is not stipulated that the Council must commission any services through GP's surgeries.</p> <p>To allow time for a review of the need to provide the services through GPs surgeries, further funding to cover the cost for the services is requested for 2015/16.</p> |
| Contribution to plans and strategies | This report contributes to the delivery of the Health & Wellbeing Strategy. |
| Financial Cost | 17 General Practices currently provide the disputed primary care contraception services (Intra Uterine Contraceptive Devices, IUCD or Intra Uterine Systems, IUS). The total projected annual cost of these services across the Borough is £28,930 p.a. If services were to continue, this spend would need to be met on an annual basis, but may be subject to variation, dependent on demand. (long acting sub dermal contraceptives and injections are not included, and these continue to be commissioned and funded by NHS England). |
| Ward(s) affected | All |

2. RECOMMENDATIONS

The Health and Wellbeing Board:

- 1. notes the information in this report;**
- 2. notes the interim funding measure put in place for 2014/15 to ensure that services to Hillingdon residents were not disrupted by the failure to transfer adequate funding to the Council in April 2013 for primary care contraception services provided through GP's surgeries.**
- 3. approves further temporary funding in 2015/16, pending a final review and analysis of the need to provide these services through General Practices, with the potential option of limiting provision to existing family planning clinics only, as there is no specific requirement for the Council to commission the services from General Practices.**
- 4. instructs officers to further challenge the failure of NHS England to transfer funding for the disputed services to the Council.**

3. INFORMATION

Supporting Information

- 3.1** Since October 2013, there has been a lack of clarity regarding commissioning responsibility for the provision of some Long Acting Reversible Contraception (LARC) provided in primary care settings by General Practitioners. Services were formerly commissioned by Hillingdon Primary Care Trust, as part of the National Enhanced Scheme (NES) for GP services.
 - 3.2** In October 2013, the Council was informed by NHS England North West London (NHSE NWL) that responsibility would be transferred to the Council for the commissioning of primary care contraception services (specifically intrauterine devices or systems - IUCD or IUS) to the Council, as responsibility for these services should theoretically have been taken up by the Council on 1 April 2013. A dispute arose around who had ultimate responsibility for commissioning and thereby funding the provision of these services provided by GPs to Hillingdon residents.
 - 3.3** There are two main providers of contraceptive services in England – family planning clinics and general practices. Although staff (i.e., GPs and Practice Nurses) in general practice routinely prescribe oral contraceptives, not all are qualified or choose to provide IUCDs or other forms of LARC. In these circumstances, guidelines recommend that mechanisms are in put place to refer women to other practices or services that can provide LARC.
 - 3.4** The Council has a mandated responsibility for the provision of reproductive and sexual health services. At present, reproductive health / contraceptive services are commissioned by the Council from the Central & North West London NHS Foundation Trust (CNWL). This contract includes the provision of the full range of LARC services – including intrauterine devices / systems.
 - 3.5** The services provided by CNWL are available to all women of reproductive age (i.e., women aged 15 – 49), from a range of open access family planning clinics across the
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Borough. Although mandated to provide reproductive sexual health services, the Council is not obliged to procure the disputed LARC services through GPs surgeries.

- 3.6 There have been protracted discussions regarding the 'disputed' services provided through GP practices with both NHS England NWL and Hillingdon Clinical Commissioning Group's (HCCG) finance and commissioning teams. Both organisations have stated that the funds for the services were transferred to the Council at the time of transition in April 2013. There remains however, no audit trail evidence to support this.
- 3.7 It has become evident that, with the exception of North West London, PCTs in other sectors across London had made provision for the transfer to local authorities of LARC services provided by GPs. This provision was made prior to transition on 1 April 2013. In addition, further investigation has revealed that some North West London local authorities had received either some or all of the funding for this service. Hillingdon Council was one of those who did not receive the funding for this primary care service.
- 3.8 Public Health has been in receipt of formal communication from NHS England NWL Area Team stating that, although it had paid for the provision of the service by general practices in Hillingdon in 2013/14, it would not be able to do so for 2014/15 onwards and that responsibility for commissioning and funding the service was to rest with the Council.
- 3.9 In the 2014/15 financial year, there were a number of requests from Hillingdon GPs asking who they should invoice for the provision of the services. In addition the Local Medical Committee has also requested clarification – initially from NHS England and latterly from the Council's Public Health Team.

Financial Implications

- 3.10 NHS England's finance team has submitted details of the number of GP practices in Hillingdon that provide the disputed LARC services to Hillingdon residents. In addition, detail of the actual spend for 2013/14 has been provided.
- 3.11 There are a total of 17 GP practices which currently provide this service, at a projected average total cost of £28,930 per year across the Borough. If the services were to continue as before, this spend would need to be met on an annual basis, and could vary depending on demand. Initial estimates provided by NHS England indicated that, on average, London boroughs could face a financial 'risk' of up to £50,000 per year each for the provision of LARC services in General Practice.
- 3.12 Primary care providers (i.e., GPs and practice nurses) will need to comply with standards as set out by the Faculty for Reproductive Sexual Health (FRSH).
- 3.13 Although not obliged to do so, if the Council were to decide to continue to commission these services from General Practices in Hillingdon, it would need to ensure proper governance and evidence of the above 'fitness to practice'. However, the Council would not fund such training as this is a personal responsibility of the health care professional.
- 3.14 It is possible that additional GPs practices, beyond the original 17, may seek to start providing the services, going forward.

THE CURRENT POSITION

- 3.15** The Council has been placed in a difficult position due to this oversight by the former Hillingdon Primary Care Trust and the NWL Commissioning Support Unit as funding did not transfer for the provision of LARC (i.e., the fitting of intrauterine devices / systems) services by GPs to the Council.
- 3.16** In November 2014, an interim solution for 2014/15 was agreed in order to maintain the provision of services to residents. This was to:
- (a) fund the provision of IUCD and IUS by the 17 GP practices who are currently providing this service, but only on a temporary basis.
 - (b) procure this service on a temporary basis within the overarching 'Local Authority Primary Care Contracts' arrangements.
 - (c) not fund IUCDs provided for non-contraceptive purposes.
 - (d) not extend the commissioning of this service from other GP practices.
- 3.17** In December 2014, Public Health wrote to each of the 17 GP practices involved to inform them of the decision, and to confirm that the Council was unable to honour previous / historical National Enhanced Scheme (NES) agreements, as these were contractual agreements between either Hillingdon PCT and individual practices - pre- transition, or with NHS England, for the period 2013/14.
- 3.18** However, for the period 2014/15, it was stated that the Council would issue modified versions of its new 'Local Authority Public Health Contracts' to enable payment for the provision of an IUCD service for contraceptive purposes, only. In terms of payment, it was confirmed that the pricing structure would remain the same as the previous contract.

Conclusion

- 3.19** The temporary measures detailed in this report are the response, to date, to addressing the errors made by the PCT and the North West London Commissioning Support Unit relating to contractual and financial handover of the provision of primary care contraception services from Hillingdon PCT to Hillingdon Council on 1 April 2013.
- 3.20** A further update on actual expenditure for the year 2014/15 and suggested proposals for the future commissioning of the services will be provided to a future meeting of the Health and Wellbeing Board.

4. EFFECT ON RESIDENTS, SERVICE USERS & COMMUNITIES

- 4.1** Pending the proposed review, residents will continue to have access to primary care contraception services via 17 GP practices that provided the services in 2013/14.

Consultation Carried Out or Required

- 4.2** No consultation required.

5.0 BACKGROUND PAPERS

- 5.1** None.