

Patient and Public Participation Assessment

NHS Commissioners have a legal duty to 'make arrangements to involve the public in commissioning. This form is a tool to demonstrate whether there is a need for patient and public participation and if so, to evidence what involvement and engagement has taken place.

Completed forms should accompany reports being considered by the Somerset Primary Care Commissioning Committee for decisions where there is a need for patient and public participation.

SECTION 1

Title of the plan/proposal/project/commissioning activity and a brief description (including key objectives where appropriate).

Possible examples – procurement of a new service, proposals for service change, national policy development or an operational commissioning decision which affects services, e.g. closure of a GP practice.

Minehead Medical Centre (MMC) submitted an application to Somerset CCG to Incorporate. Incorporation is a process by which a new or existing business registers as a limited company.

Location: e.g. town, CCG, Area

Minehead, Somerset

Title and brief description of proposed activity

Minehead Medical Centre Incorporation Application. A key driver in the decision by the practice to apply to Incorporate is to protect the ongoing stability and sustainability of the practice. Despite ongoing efforts to recruit staff, GP recruitment is particularly challenging in this geographic location. The change in model of ownership transfers risk from the GPs to the Incorporated company. MMC believe the business model will help attract and retain GPs at the practice. Risk is also acknowledged that Dr Ed Ford is expecting to become a single handed GP and the last person standing in the partnership from September 2022 due to retirements.

Key objectives of the proposed activity

MMC have been explicit in their aspiration to firstly Incorporate, and secondly as part of the same process, to become an Employee-Owned Trust (EOT), often referred to as the 'John Lewis Model'.

As part of the CCGs duty under delegation, we have sought authorisation from NHS England regarding this transfer of ownership model to ensure it is compliant with the NHS Act (2006) and is approved by authorised signatories.

SECTION 2

Is there likely to be an impact on patients and the public?

To assess impact you should consider the overall population and groups/individuals within that population who are likely to be affected. This can be done by completing the equality and health inequalities analysis screening tool and then, if necessary, a full equality and health inequalities analysis.

If the plans, proposals or decisions are implanted, do you think there will be:

(a) An impact on how services are delivered?

Yes No

Please explain your answer and provide further details

In addition to the guidance set out in the Primary Care Policy Guidance Manual, the CCH Quality and Equality Lead is a key member of the evaluation panel as part of the review process of the application to Incorporate, and is of the view that an Equality Impact Assessment would not be necessary as there are no changes in the services or access to services that need to be assessed. Patients will not be impacted by this change in identity of the contractor.

(b) An impact on the range of health service available?

Yes No

Please explain your answer and provide further details:

NHS Standard General Medical Services Contract, and NHS Standard Contract is transferred to the limited company. All services delivered under both contracts remain unchanged.

(c) Any other impact that you can envisage at this point in time?

No

(d) Does the legal duty apply to the activity?

If you have answered yes to (a), (b) or (c), it is highly likely that the legal duty applies. Note: the duty always applies to planning of commissioning arrangements (regardless of impact).

Yes No

Please explain briefly why you have answered yes or no to the above:

The Primary Care Policy Guidance Manual states that ‘the effect of the proposal on the statutory duties of NHS England, particularly the involvement duty under section 13Q of the NHS Act 2006...is not usually triggered by a change solely to the identity of the contractor (7.10.25.2).

Please note that if you have determined that the legal duty does not apply to this particular activity you are still required to retain a copy of the form as a record of your decision making. You must also consider, even if the legal duty does not apply, whether participation would be beneficial in the circumstances and complete section 3, 4 and 5 of this form.

Describe any existing arrangements to involve patients and the public which are relevant to this plan/activity and/or provide relevant sources or patient and public insight.

Examples could include patient and public views by patient and public voice (PPV) partners; surveys; intelligence on patient and public views from partners including CCGs; Healthwatch and voluntary and community organisations.

Please complete each question below.

(a) What arrangements/mechanisms are already in place to involve the public which are relevant to this activity (these may be national/regional or local)

MMC completed substantial engagement and helpfully provided comprehensive evidence as part of their application process. The engagement includes a long-standing item for continued discussion with staff from January 2022, providing regular updates to the team and good opportunities for staff to raise questions.

The practice has an active PPG and frequently consulted with them on ideas for the future. Continued engagement includes regular discussions with their Primary Care Network, County Councillors, Somerset Foundation Trust and Healthwatch.

As a CCG, we have engaged with NHS England authorised signatories and Senior Estates team, legal advisors Bevan Brittan, colleagues from the Northwest of England that have undertaken this Incorporation process, and Primary Care Commissioning (PCC). The CCG have a panel of expertise supporting the review of the application to incorporate including from Clinical, Contracting, Commissioning, Finance, Quality, IP&C and Equality.

(b) How will the insight available to you help to inform your decision?

Using the guidance from the PGM along with the expertise of the panel, it was felt that the application should be approved, but with some agreed mitigations in place regarding Quality Improvement.

Please note that consideration of existing arrangements and patient and public insight will help inform any additional arrangements required under section 4.

SECTION 4

Are additional arrangements for patient and public involvement required for this activity? In particular how will you ensure that 'seldom heard' groups, those with 'protected characteristics' under the Equality Act, and those experiencing health inequalities are involved?

- (a) **If yes, provide a brief outline of your approach and objectives for any additional patient and public participation, including consideration of ‘seldom heard groups, the nine protected characteristics and health inequalities.**

In due course it may be appropriate to develop a full communications and engagement plan.

No. This is a change in name of contractor and does not impact patients.

- (b) **Briefly describe how your proposed participation will be ‘fair and proportionate’ in relation to your commissioning activity.**

The engagement undertaken by the practice with employees, local authority, Healthwatch, patient participation group and their PCN has been fair and proportionate to the change.

SECTION 5

Planning for impact and feedback

- (a) **Provide a brief outline of how the information collected through patient and public participation will be used to influence the plan/activity.**

MMC has an active PPG and they were consulted around the change in contractor name, and agreed with the objective of attempting to stabilise the practice and future proof services for patients.

- (b) **How will the outcomes of participation be reported back to those involved (refer to your communications and engagement plan, if appropriate)?**

MMC has a regular newsletter that is sent out to patients and published on their website.

- (c) **How will you assess the ongoing impact of the change on patients and the public after it has been completed?**

The change will not impact patient services, but the CCG will continue to support the contractor around the Assurance Framework to help drive quality improvement.

Name of person completing the form:

Job Title: Primary Care Contracts Officer

Email address: Christine.young36@nhs.net

Team: Contracting, Directorate of Finance, Performance and Contracting

Date: 20/05/22

Where senior sign off arrangements apply.

Name of person signing off the form:

Job Title:

Email Address:

Team:

Date: