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**CQRS FAQs for Section 7A Public Health Enhanced Services**

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| **Why can’t I see the services on CQRS?** |
| Once services are available Nationally, we will offer them out to practices via CQRS. Therefore, prior to contacting us with an issue, please check you have accepted the offer that was sent. |
| **Can I claim for vaccinations cumulatively (i.e. quarterly)?** |
| **NO,** Public Health claims should be made as identified within the Service Specifications on a monthly basis via CQRS for all reporting and data collection achievements. Any declarations which appear to be cumulative will be reverted back to the practice with a note attached asking for the figures to be reviewed and will only be approved once the practice can evidence the figures within the reporting month are accurate. Evidence is deemed as a screenshot of your clinical system for the vaccinations in question, in addition to the completion of the reconciliation claim form that we send out to you in response to your reconciliation claim. |
| **Why is the payment for PCV Hib/Men C now made via CQRS?** |
| This was added as an alternative payment route for practices as it is considered an easier option to enter data on a quarterly basis rather than various Regions using different payment mechanisms. |
| **Services which require a manual entry** |
| As of 1st April 2016 it is no longer possible to manually enter data for a month until that month has ended. This is to prevent GP practices incorrectly submitting data against future dates. For example it is not possible to enter data for March until the 1st April.For vaccinations & immunisation services, CQRS will generate a task/message notification where manual entry is required for each achievement date. The notification to manually enter data will appear in CQRS on the 1st day of the month, relating to the previous month’s data. For example the notification to enter May data for the MMR vaccination programme, will appear on the 1st June.If there is an error in the data entered, providing the achievement has not been declared,practices are able to amend the figures at this point.For practices that are not set up for automatic extraction, data cannot be added to a regime until the automatic extraction has completed. Once the automatic extraction has completed a task/message notification will be sent highlighting that the manual entry is required. |
| **What should I do if there are no figures to declare within an achievement date?** |
| Practices should declare all achievement dates, including a zero return for manual entries. |
| **Services which have an automated extraction** |
| If an automated collection was not received for a GP practice where an automated collection should have been received, a notification to manually enter data will appear the day after the automated extract was scheduled to complete. (If CQRS receives all the required data from the automated collection, manual entry will not be required and a notification will not be sent).**For example:** the childhood seasonal influenza collection for October completes on the 13th November and practices A, B and C received data whilst GP practices D and E did not receive data. CQRS will notify practices D and E on the 14th November that they need to manually enter data. GP practices A, B and C will not receive a notification to manually enter data. |
| **What do I do if an automated extraction has not run?** |
| NHS Digital will notify NHS England of a failed extraction providing a date as to when and if a re-run will take place, we will then relay this message to practices. Practices are not expected to do anything at this stage unless notified by NHS England to do so.***If practices have declared their figures for the achievement date in question, we will not approve until after the rerun is complete for all clinical system providers.*** |
| **What do I do if the extracted data is incorrect?** |
| 99% of incorrect achievements are due to the inaccurate Read Codes being entered into GP clinical systems for extracted services. Check the GMS Technical Guidelines to ensure that correct Read Codes are being used.If the figures are incorrect, **do not** declare achievements on CQRS as this can lead to inaccurate payments being financial approved by NHS England. The practice should then complete a claim form and send it to england.londonimms@nhs.net for an amendment to be made. A screen shot from the clinical system will also need to be sent as evidence of the correct figures. |
| **Why is there a delay in approving my automated extraction declarations?** |
| We approve all declared payments from 25th of the month. Practices need to ensure that all extractions are checked and declared by 24th of the month to ensure that they are included in the payment run for that month. Items declared after financial approvals have been made are late claims. These items need to be manually added individually to our master payment spreadsheets. Therefore, whilst we will strive to approve items declared later than 24th of the month we cannot guarantee this. These items will be processed in due course and will be included in the next payment run. |
| **What happens if previous achievements have incorrect data?** |
| If retrospective amendments are required, you will need to complete the claim form and send it to the email address shown on the form. A screen shot from the clinical system will also need to be sent as evidence of the correct figures.If the declaration has not been financially approved by the Payment Team, the amendment will be made on CQRS and practices will receive a notification for checking and re declaring.If the declaration has been financially approved (Sent to SSD), a manual payment will be arranged outside of CQRS. Data should only be declared once it has been checked and confirmed as correct. This will ensure that the monthly data on CQRS is correct and also limit the need for a manual claim to be processed outside of the system. |
| **Why has my declaration been reverted back to the practice?** |
| CQRS have created a ‘revert to previous action’ facility. This means that should we find an anomaly with a declaration; we are able to return it back to the practice with a notation advising of the action required. This is also helpful for when practices make a declaration adding their own note. We can then send a message back to the practice advising of the action they need to take.For example: A practice declares an achievement which has an automated extraction and adds a note advising the figures are incorrect. Whilst we appreciate the note, we are not able to amend the data without having received a claim form and supporting evidence.Therefore, If you find a declaration has been reverted back to the practice, please ensure you read the notes attached and action where relevant.***There are quite a few practices that are not reading the notation on a reverted declaration and sending it back through again. Should this happen more than once on a single declaration, we will put it ‘on hold’ until the action has taken place and this will delay payment.*** |
| **Why has my declaration been placed ‘on hold’ in CQRS?** |
| If you receive a task/notification regarding a declaration which has been moved to this status, it is because the practice has not responded to our notes and to avoid accidental approval for payment we change the status for monitoring. Once the declaration with the query has been resolved, we can easily re instate it.***Again this will delay payment*** |
| **How can I find out which services have outstanding claims?** |
| Practices can run an Annual Activity Summary by financial year on CQRS, for all services they are signed up to provide. This will show a colour coding status for each achievement period for these services. This is found under Reports (achievement tab). There is also a Payment Declaration report that will show annual activity or a Provider Payment Declaration Report that will show annual activity for a single regime. Both of these are found under the Reports (Declarations tab).Practices are encouraged to run reports and check data prior to raising a query.  |
| **What Read Codes does a practice need to enter, in order for this data to be collected by** **GPES and calculate correct achievements?** |
| The Read Codes for Public Health DES are detailed in the 2017-18 Technical requirements for GMS contract changes, which is available to view on NHS Employers (see links below). Practices must code the activity in line with the technical requirements or payment will be delayed. Further details are also in the Business Rules with can be found on the NHS Digital website. |
| **Where a practice has been using Read codes not included in the guidance and audit requirements, Business Rules or technical requirements document, are practices expected to re-code patients?** |
| Yes, all services being supported by CQRS require that practices who intend to participate in these services record their achievement in the clinical systems before automatic extracts are scheduled to take place. This should be recorded using the relevant Read Codes in the guidance and audit requirements, technical requirements document or Business Rules from the date those services commence. As such, practices would need to re-code using the relevant codes. |
| **Who do I contact regarding unpaid declarations?** |
| If the status of your declaration is showing as ‘Sent to SSD’ on the CQRS System, you will need to contact the payment agency directly as once we have financially approved the declarations we are unable to access further details. Capita now have an online query form. This can be accessed from their contact us page on the main website:[www.pcse.england.nhs.uk/contact-us](http://www.pcse.england.nhs.uk/contact-us) |
| **What happens if I give a vaccination outside of the Service Specification time scales, (e.g. Rotavirus – 2nd jab)?** |
| Currently National Guidance has advised payment cannot be made if a vaccination has been given outside of the criteria. However, dependant on the criteria the Regional Team will make a decision as to whether a practice will receive payment. |
| **Can we give a vaccination to a patient outside of a cohort as stated in the Service Specification?** |
| It is the responsibility of the named Clinical Lead within your practice to determine whether the vaccination is required, however, payment will not be made for these patients. |
| **How do I receive further information?** |
| Information can be accessed via the NHS England and NHS Employers websites, where Service Specifications and Technical guidance(s) can be found.<https://www.england.nhs.uk/commissioning/pub-hlth-res/><http://www.nhsemployers.org/your-workforce/primary-care-contacts/general-medical-services/vaccination-and-immunisation/2017-18-vaccinations-and-immunisations> |
| **How do I find out about GPES extraction and manual entry dates?** |
| The GP Collections Timetable is available on CQRS. It is a working document which shows all the dates for GPES extractions and manual submissions via CQRS. Practices should view this regularly as the dates can sometimes change.  |

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| **Why is there a delay in receiving a response to my email?** |
| Here are some reasons for a delay in receiving a response from the London Team:* Emails being sent to the incorrect address; the correct email to send it to is:

Imms Team – england.londonimms@nhs.net * Emails are not prioritised if a practice is asking for information which is readily available on NHS websites, NHS Digital, CQRS or has already been sent to practices. Therefore, it is important to save all information sent to you.
* We receive a high volume of emails and these are prioritised by date of receipt.

We aim to deal with general queries within 2 working days of receipt and process claims within 5 working days of receipt. Please include your practice code within the subject header. |
| **GP Practice distribution list** |
| The Primary Care Team hold and maintain the GP distribution list. NHS England and Public Health Immunisation Commissioners ask the Primary Care Team to forward information on their behalf. Therefore when information comes to your practice you will need to disseminate to the relevant colleague within your practice. Any queries that arise from these communications should be directed to the Immunisation Team’s generic e-mail address: england.londonimms@nhs.net It is the responsibility of the practice to advise NHS England’s Primary Care Teams of any changes to their contact details. The NHS England GP distribution list will then be updated to include these changes. Here are the emails for the Primary Care regional teams:North East: england.nel-primarycare@nhs.net North West: england.lon-nw-pcc@nhs.net North Central: england.lon-nc-pcc@nhs.net South West: england.swlprimarycare@nhs.net South East: england.selprimarycarequeries@nhs.net |
| **Is there training available for the CQRS system?** |
| Yes. You can access the CQRS Learning Centre on the system where online courses are available. We do not provide practice training on CQRS. |
| **How do I contact CQRS for technical support?** |
| For any technical queries about the CQRS system please contact:CQRS technical support -support@cqrs.co.ukCQRS service desk - CQRSServiceDesk@GDIT.com Tel: 0800 440 2777 (Mon-Fri 8am to 6pm)Information about General Practice (GP) Collections can be found on the NHS Digital website: <https://digital.nhs.uk/GP-Collections> Training guides: <https://training.cqrs.nhs.uk/user-guides> GP Practice Bulletin: <https://digital.nhs.uk/bulletins>  |