ENHANCED SERVICE SPECIFICATION

REMOTE CARE MONITORING (PREPARATION) SCHEME

Introduction

1. This enhanced service has been designed by the NHS Commissioning Board (NHS CB) to reward GP practices\(^1\) for undertaking preparatory work in 2013/14 to support the subsequent introduction of remote care monitoring arrangements for patients with long term but relatively stable conditions (in 2014/15).

Aims

2. The aims of this enhanced service in 2013/14 are for GP practices to:
   a) identify and agree the priority clinical area for remote care monitoring to be implemented in 2014/15;
   b) record appropriate patient preferences for receiving and monitoring the required test results;
   c) maintain up to date contact details for relevant patients; and,
   d) plan a system for registering patients for remote care monitoring of the agreed local priority.

3. The intended benefits for patients are that those with a long-term condition can be better supported to monitor their health and potentially improve the management of their clinical condition(s), including a reduced need to visit their GP practice.

4. This enhanced service will be reviewed for 2014/15 to reflect the transition to implementation of agreed remote care monitoring arrangements.

Background

5. Following changes to the GP contract for 2013/14, the Secretary of State for Health has directed the NHS CB to establish plans for a remote care monitoring enhanced service that will better enable patients to manage and monitor their condition in ways that improve their quality of life and do not require them to visit their GP practice as often.

6. Remote care monitoring schemes can support better outcomes for patients and reduce the need for acute care as part of a whole system

\(^1\)Reference to ‘GP practice’ in this specification refers to a provider of essential primary medical services to a registered list of patients under a General Medical Services, Personal Medical Services or Alternative Provider Medical Services contract.
approach to care management and self-care. There are many different types of remote monitoring schemes, which offer different levels of support for patients depending on their needs. For maximum impact, these schemes need to be adapted to reflect local care delivery models. For further information and resources see: information on the Long Term Conditions programme (http://www.improvement.nhs.uk/LongTermConditions.aspx) and 3millionlives (http://3millionlives.co.uk/)

7. Greater use of remote care monitoring for patients with long term but stable conditions agreed as part of a care planning discussion has the potential to improve people’s quality of life and to reduce unnecessary appointments and the need for pre-assessment or patient administration at the GP practice, freeing up valuable GP and practice staff time.

8. The NHS CB will be working with stakeholders to establish standard protocols and procedures that can be used across a number of long-term conditions for the local priorities agreed under this enhanced service.

Process

9. The NHS CB will invite GP practices to indicate by 30 June 2013 if they wish to participate in this enhanced service.

Specification

10. The requirements for GP practices participating in this enhanced service are to:

   a) agree with the clinical commissioning group (CCG) the long term condition that is to be the local priority for remote care monitoring in 2014/15;

   b) identify the ongoing tests or bodily measurements required to support the stable management of the chosen condition and how those tests and measurements will be accessed or fed in by patients with the condition;

   c) identify the options that will be available to participating patients for the monitoring of results from such tests or measurements other than by face to face consultation (eg video call, telephone, text, email or letter) and the governance arrangements to support these including safe and confidential exchange of information;

   d) update patient records to identify the preferences of those with the chosen long-term condition and maintain up to date contact details as appropriate to those preferences;
e) plan a registration system for patients with the chosen long-term condition wishing to participate in the remote care monitoring service.

**Monitoring**

11. GP practices will be required to submit a return to the NHS CB at the end of the financial year providing a summary of local decisions reached on ‘a)’, ‘b)’ and ‘c)’ and to confirm progress against ‘d)’ and ‘e)’. A template will be provided by the NHS CB.

**Payment**

12. Payment available to participating GP practices in the 2013/14 financial year will be £0.21 per registered patient, which represents a payment of £1,478 to an average-sized GP practice (registered population 6,911).

13. This will be payable by the NHS CB in the month following the end of the quarter in which the GP practice enters into agreement with the NHS CB to participate in the remote care monitoring (preparation) enhanced service. This upfront payment is made in recognition of the costs to be incurred in preparing for the implementation of remote care monitoring arrangements in the 2014/15 financial year.

14. Administrative provisions relating to payments under this enhanced service are set out in Annex.
Annex

Administrative provisions relating to payments under the remote care monitoring (preparation) enhanced service

1. Payments under this remote care monitoring (preparation) enhanced service are to be treated for accounting and superannuation purposes as gross income of the GP practice in the financial year.

2. The amount calculated as payment for the financial year falls due on the last day of the month following the end of the quarter in which the GP practice agrees to participate in this enhanced service.

3. Payments under the remote care monitoring (preparation) enhanced service, or any part thereof, will only be made if the GP practice satisfies the following conditions:

   a) the GP practice must make available to the NHS CB (or CCG requesting on behalf of the NHS CB) any information which the NHS CB needs, and the GP practice either has or could be reasonably expected to obtain, in order to establish whether the GP practice has fulfilled its obligation under the enhanced service arrangements;

   b) the GP practice must make any returns required of it (whether computerised or otherwise) to the Exeter Registration System or CQRS, and do so promptly and fully; and,

   c) all information supplied pursuant to or in accordance with this paragraph must be accurate.

4. If the GP practice does not satisfy any of the above conditions, the NHS CB may, in appropriate circumstances, withhold payment of any, or any part of, an amount due under this enhanced service that is otherwise payable.

Provisions relating to GP practices that terminate or withdraw from the enhanced service prior to 31 March 2014 (subject to the provisions below for termination attributable to a GP practice split or merger).

5. Where a GP practice has entered into a remote care monitoring (preparation) enhanced service but its primary medical care contract subsequently terminates or the GP practice withdraws from the enhanced service prior to 31 March 2014, the GP practice is entitled to a payment in respect of its participation if such payment has not already been made, calculated in accordance with the provisions set out below. Any payment calculated will fall due on the last day of the month following the month during which the GP practice provides the information required.
6. In order to qualify for payment in respect of participation under the enhanced service, the GP practice must provide the NHS CB with the information requested under paragraph 11 of the enhanced service specification before payment will be made. This information should be provided within 28 days following the termination of the contract or the withdrawal from the enhanced service agreement.

7. The payment due to GP practices that terminate or who withdraw from the enhanced service agreement prior to 31 March 2014 will be calculated as per the provisions of the enhanced service specification - subject to the provisions of paragraph 8 of this annex.

8. The NHS CB is entitled, if a payment has already been made – or is payable to the GP practice(s) in respect of that financial year – to seek recovery of the payment, or any part thereof, where the information supplied under paragraph 11 of the enhanced service specification, in the reasonable opinion of the NHS CB, suggests the requirements of the enhanced service have not been met. The amount to be recovered by the NHS CB may include a pro-rata adjustment calculated as £0.21 divided by 365 days, multiplied by the number of days the GP practice did not provide the services during the financial year, multiplied by the number of registered patients.

Provisions relating to GP practices who merge or split.

9. Where two or more GP practices merge or are formed following a contractual split of single GP practice and as a result the registered population is combined or divided between new GP practice(s), the new GP practice(s) may enter into a new or varied agreement to provide the remote care monitoring (preparation) enhanced service.

10. The enhanced service agreements of the GP practices that formed a contractual merger, or the GP practice prior to contractual split, will be treated as having terminated and the entitlement of those GP practice(s) to any payment will be assessed on the basis of the provisions in paragraph 5 of this annex.

11. The entitlement to any payment(s) of the GP practice(s) formed following a contractual merger or split entering into the new or varied agreement for the remote care monitoring (preparation) enhanced service will be assessed and any new arrangements that may be agreed in writing with the NHS CB (or CCG acting on behalf of the NHS CB) will commence at the time the GP practice starts to provide such new arrangements.

12. Where that new or varied agreement is entered into and commences within 28 days of the new GP practice(s) being formed, the new arrangements are deemed to have commenced on the date of the new GP practice(s) being formed. Payment will be assessed in line with the
enhanced service specification – subject to the provisions of paragraph 13 of this annex.

13. The NHS CB is not obliged to make a payment, or any part thereof, if payment has been already made or is payable to the previous GP practice(s) for participating in the enhanced service during that financial year.

Provisions relating to non-standard splits and mergers

14. Where the GP practice participating in the enhanced service is subject to a split or a merger and:

   a) the application of the provisions set out above in respect of splits or mergers would, in the reasonable opinion of the NHS CB, lead to an inequitable result; or,

   b) the circumstances of the split or merger are such that the provisions set out in this section cannot be applied,

the NHS CB may, in consultation with the GP practice or GP practices concerned, agree to such payments as in the NHS CB’s opinion are reasonable in all circumstances.

[ENDS]