

# **Securing Excellence in GP IT Services**

**2016-18 Operating Model**

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## **Equality and Diversity Statement**

Promoting equality and addressing health inequalities are at the heart of NHS England's values. Throughout the development of the policies and processes cited in this document, we have:

- Given due regard to the need to eliminate discrimination, harassment and victimisation and other conduct prohibited by the Equality Act 2010, to advance equality of opportunity, and to foster good relations between people who share a relevant protected characteristic (as cited under the Equality Act 2010) and those who do not share it; and;
- Given regard to the need to reduce inequalities between patients in access to, and outcomes from healthcare services and to ensure services are provided in an integrated way where this might reduce health inequalities

This document supports a number of national programmes aimed at improving patient care through the introduction of digital technology. For all the national digital programmes equalities and health inequalities have been considered. For more information, please refer to the documentation provided by each individual programme.

Please note attached new guidelines on [accessible information standards](#)

## 1. Foreword

### High quality care for all, now and in the future

General practice is a fundamental part of the NHS, playing a pivotal role in coordinating patient care and seeing millions of patient interactions every week. The challenge of achieving high quality care in the face of growing demand, changing patient needs and rising expectations can only be met if we harness the power of innovative digital technology, as highlighted in the General Practice Forward View<sup>1</sup>. To operate within known financial constraints, we must ensure that every pound spent on IT improves patient care, reduces bureaucracy for practitioners and drives efficiencies across the health and care system.

The 2016 operating model sets out how we will achieve world class digital primary care systems that provide flexible, responsive and integrated services for patients, giving them greater control over their health and care. This model describes the financial operating arrangements, assurance process and leadership required to support the effective delivery of GP IT services.

NHS England is accountable for the delivery of GP IT services, delegating responsibility for delivering key elements of GP IT services to clinical commissioning groups (CCGs). These arrangements promote equity and ensure a consistent core offer in all parts of the country. They give general practices the flexibility to meet local needs within a nationally agreed framework, adhering to national information governance and security standards, and are underpinned by a centrally managed assurance process.

In support of the ambitions outlined within the General Practice Forward View (GPFV) and recognising GP IT as fundamental in underpinning delivery of these, the revised operating model includes expanded **core and mandated GP IT** requirements – making it clear what general practice should be able to expect from IT service delivery arrangements, together with driving digital adoption through maturity assurance, providing a new maturity assurance framework to assess progress towards digital adoption – the **Digital Primary Care Maturity Assurance** model.

In response to the developing primary care landscape as outlined in the Five Year Forward View (FYFV), **enhanced** and **transformational** service categories have been introduced that would support seven day and extended hours working and ‘at scale’ models, together with supporting new and innovative healthcare models, where multiple organisations across care settings are working with general practice to share patient care.

This operating model aims to support the case for change set out by the Five Year Forward View, and moves us closer towards the National Information Board’s vision

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<sup>1</sup> [General Practice Forward View](#)

of an integrated, paper-free health and care economy. The arrangements will continue to give general practices a choice of world class clinical IT systems, tailored to local requirements that meet the changing needs of the service

**Beverley Bryant**

Director of Digital Technology



## 2. Key messages

This document sets out the revised operating model for the provision of a high quality general practice IT (GP IT) support services, building upon [‘Securing Excellence in GP IT Services’](#), first published in December 2012 and the subsequent 2<sup>nd</sup> edition<sup>2</sup>, published in April 2014.

It also articulates clear accountability and commissioning responsibilities for NHS England to support IT services in relation to registration authority (RA) (administration of access to clinical and business systems); information governance (IG) support services; clinical safety assurance relating to the deployment, use and production of healthcare software; and NHSmail administration for all contractors providing primary care essential services to a registered list.

This revised operating model contains a number of updates:

- An updated description of roles and responsibilities;
- A re-designed maturity assurance model for measuring GP IT provision, supported by effective governance and accountability, by demonstrating improvements in digital maturity;
- A re-categorised service schedule, including comprehensive service descriptions;
- A re-structured finance model, with increased funding provision delegated to local commissioner level, to support effective commissioning and delivery of digital services for general practice, to meet local needs;
- A continued focus on local leadership and collaborative working, closely aligned with Local Digital Roadmaps (LDRs) and associated digital strategies across the local health and care economy.

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<sup>2</sup> [Securing Excellence in GP IT Services: Operating Model 2<sup>nd</sup> Edition 2014-16](#)

The main aims of these updates are:

- To provide increased 'local' flexibility and ownership, to enable commissioners to effectively respond to a rapidly changing Primary Care landscape,
- To protect and improve 'core' GP IT service provision, whilst providing mechanisms to enable local investment in enhanced and transformational services, and
- To provide a readily accessible tool to understand levels of digital primary care maturity and demonstrate value for money in GP IT investment.

It is expected that a significant proportion of CCGs will re-procure their GP IT services through the Lead Provider Framework. CCGs should ensure prospective providers of these services are familiar with the current GP IT Operating Model and the underpinning drivers affecting its development.

NHS England will retain responsibility for commissioning Primary Care IT Enabling Services for primary care contractors providing primary care essential services to a registered list.

### 3. Introduction

In the context of this document general practice or GP services are defined as those operating under a General Medical Services (GMS), Personal Medical Services (PMS) or Alternative Provider Medical Services (APMS) contract offering primary care essential services to a registered patient list.

#### 3.1 What does this document do?

This document provides a description of the specific arrangements that NHS England will put in place for GP IT services to:

- Inform general practice of what to expect in terms of the provision of GP IT services;
- Provide a framework which ensures digital technology fully supports and enables new models of care, service integration, extended working and new forms of primary care organisations;
- Underpin the IT provision required to build on local accountabilities for digital primary care and for Local Digital Roadmaps (LDRs) and strategies ensuring these become embedded within local commissioning responsibilities and plans;
- Define the role of NHS England and its arm's length bodies in supporting this operating framework;
- Provide assurance that quality and value are being maintained and delivered consistently across primary care services within the NHS.

This document sets out the following key elements that will be necessary to support the effective delivery of GP IT:

- The operating arrangements including financial procedures and associated controls;
- Governance arrangements, including roles and responsibilities;
- The leadership required to achieve excellence;
- The responsibilities that NHS England will carry out directly in relation to Primary Care Enabling Services which includes: registration authority (RA) (administration of access to clinical and business systems); information governance (IG) support; clinical safety assurance and secure e-mail (NHSmail) administration for primary care contractors providing primary care essential services to a registered list .

NHS England is responsible for funding the digital services, systems and technology that are essential to general practice, including the infrastructure within which practice-held patient records are created and accessed.

This infrastructure must be capable of supporting national commissioning intentions for general practice services and CCG aspirations to deliver more integrated care.

The operating model for GP IT services is designed to support innovation and service transformation, with a particular focus on joining up care across care settings to improve quality and efficiency.

### 3.2 Where do we want to get to? What does the future hold?

By April 2016 there should be in place:

- Strong **local leadership** to drive the implementation of Local Digital Roadmaps supported by local digital strategy moving towards services which are paper free at the point of care;
- An **effective financial model** for the delivery of GP IT and associated support services, reducing bureaucracy and providing local flexibility and responsiveness;
- A **universal core digital capability** evidenced via a **Digital Primary Care Maturity Assurance** model across the general practice estate;
- The **effective procurement, delivery and exploitation** of GP IT capability, across the whole of England;
- **Collaborative partnership working** that has the freedom to innovate and redesign services effectively;
- **Value for money** and efficiency, delivered through the combination of all of the above.

NHS England wants digital systems to perform to the highest possible standards to allow the NHS to meet the needs and expectations of patients and carers.

The [CCG Assurance Framework 2015/16](#)<sup>3</sup> recognised CCGs as uniquely placed to achieve safe, digital record keeping and the digital transfer of patient information across care settings within their health economies. The [CCG Improvement and Assessment Framework for 2016/17](#)<sup>4</sup>, outlined in The [Government's mandate to NHSE for 2016/17](#)<sup>5</sup>, will build on this ambition, by assessing progress towards the [Paper Free at the Point of Care, 2020 Vision](#)<sup>6</sup> and health and care integration, as part of sustainability requirements.

A **digital primary care maturity assurance** model will help to facilitate improved commissioning of digital services for general practice. It will underpin the

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3 [CCG Assurance Framework](#)

4 [CCG Improvement and Assessment Framework for 2016/17](#)

5 [The Government's Mandate to NHS England for 2016/17](#)

6 [Personalised Health and Care 2020](#)

transformation taking place in service design by embedding world class IT across the NHS.

An important element of this revised approach is that CCGs, working with their member GPs, have greater responsibility and capability to select and prioritise systems and solutions needed locally.

By **March 2018**, there should be in place:

A national single **Digital Primary Care Operating Model** supporting and aligned to primary care commissioning, in order to provide a framework which ensures digital technology fully supports and enables new models of care, including new forms of primary care organisations and service integration.

Key objectives of the operating model will be:

- To ensure digital primary care services can respond to service and organisational change and can enable innovation in new models of care;
- To define clear responsibilities for the national commissioner and local commissioners. To build on CCG accountabilities for digital primary care and local digital strategy and roadmaps ensuring these become embedded within local commissioning functions;
- To retain the high quality, safety and security of GP digital clinical record systems extending these standards across all digital primary care services and to patient facing digital services where these are part of a virtual primary care service.

Commissioner driven digital strategy is expected to support the local delivery of Local Digital Roadmaps (LDRs) and Sustainability and Transformation Plans (STPs).

### **3.3 General Practice Systems of Choice (GPSoC) Framework**

GP IT is intrinsically linked with the general practice Systems of Choice (GPSoC) Framework. Full details on the [GPSoC Framework](#)<sup>7</sup> are available online. The following changes are relevant to this updated operating model:

#### **3.3.1 Supporting business continuity**

An addendum business case has been approved for the funding of GPSoC for two years beyond the contract breakpoint of December 2016.

This will ensure continuity of services and enable ongoing development work. For example interoperability to continue, whilst the future operating framework is developed.

#### **3.3.2 Eligibility for centrally funded GPSoC solutions**

general practice Contractors (GMS, PMS and APMS contract holders) continue to be eligible for centrally funded GPSoC principal clinical systems providing (i) they are contracted to provide Primary Care Essential Services to a registered patient list (ii) they have signed the [CCG Practice Agreement](#).

#### **3.3.3 Local access to GPSoC Framework**

Work is underway to allow primary care organisations not eligible for centrally funded GPSoC (Lot 1) systems to directly procure (call down) GPSoC solutions from suppliers through the GPSoC framework contract.

#### **3.3.4 Access to subsidiary systems under Lot 1 of GPSoC**

Accredited subsidiary clinical systems are available through Lot 1 of GPSoC. Central funds to support these are limited and will be assigned against each CCG. Where there are insufficient central funds available to meet local demands, CCGs will be able to place orders through GPSoC to locally purchase these systems.

Further details on GPSoC subsidiary systems and the supporting processes is available on the [NHS Digital \(HSCIC\) website](#)<sup>8</sup>.

### **3.4 N3/Health and Social Care Network (HSCN) – transition arrangements**

The HSCN programme has been put in place to manage the exit from the existing N3 network arrangements and the move to provision successor network services capable of supporting the health and social care system. The outline business case

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<sup>7</sup> [GPSoC Framework](#)

<sup>8</sup> [GPSoC How to Order Services](#)

for the HSCN programme was approved by the Secretary of State for Health in December 2015.

The [HSCN programme<sup>9</sup>](#) will provide a reliable, efficient and flexible way for health and care organisations to access and exchange electronic information. By reducing cost and complexity, standardising networks, enabling service sharing and extending the parameters of collaborative working, it will save money, enable information to be reliably shared and help staff work together more effectively and efficiently.

Provided by multiple suppliers, the HSCN will act like a single network enabling health and social care service providers to deliver, share and consume services from anywhere on the HSCN and with anyone else on the HSCN regardless of their location or network supplier.

It is vitally important for existing N3 customers to engage with the HSCN programme via [HSCN@hscic.gov.uk](mailto:HSCN@hscic.gov.uk) to ensure they are able to migrate to HSCN connectivity successfully.

### 3.5 The CCG Practice Agreement

The CCG Practice Agreement, which replaces the previous PCT Practice Agreement, outlines the terms governing the provision and receipt of GPSoC and GP IT services.

This nationally developed agreement sets out the basis on which a CCG will provide the services to practices, and each practice's responsibilities in respect of the receipt of these services, as outlined within this document.

CCGs are required to sign a CCG Practice Agreement with each GP practice (GMS, PMS or APMS contractors offering Primary Care Essential Services to a registered patient list) within their area. Work is required locally to customise the appendices to the national template agreement, as outlined below. These need to be agreed locally with GP practices:

- Appendix 1 - Summary of services
- Appendix 2 - Support and maintenance service levels
- Appendix 3 - Escalation procedure

A signed agreement between the CCG and each practice is a pre-requisite for the provision of GPSoC services to GPs. Sign off arrangements for both GPSoC and current Local Service Provider (LSP) systems should have been completed by **31 March 2016**. An escalation must be raised with NHS England regional teams for any CCG practice agreements not signed.

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<sup>9</sup> [HSCN Programme](#)

## 4. Clinically-led change

The transformational change agenda for the NHS in coming years will not be realised without the right leadership and the effective use of digital enablers. In November 2014 the National Information Board (NIB) agreed a number of strategic priorities for digital health and care in their Framework for Action – Personalised Health and Care 2020, including ensuring that all health and care professionals will be ‘paper free at the point of care’, using integrated digital care records by 2020.

The NIB identifies it as vital that leaders of health and care organisations champion information and digital capability as core enablers of effective decision-making, service quality, safety, effectiveness and efficiency, whilst also identifying the barriers that have previously been created by taking insufficient account of the way clinicians work in practice.

CCGs will lead the implementation of GP IT services in partnership with their practices and local health and care providers. Local digital strategies and leadership should ensure that general practice uses digital technologies to support the integration of care across local health communities and to deliver local commissioning priorities. To achieve these objectives, CCGs will need to have access to high quality, strategic and operational digital skills and knowledge.

In support of this, CCGs are encouraged to appoint a Chief Clinical Information Officer (CCIO) or equivalent accountable officer who will provide leadership for the development of local digital strategy. The CCIO will ensure effective provision of GP IT services, an essential element in the delivery of LDRs and the wider Sustainability Transformation Plans (STPs) that will accelerate implementation of the [Five Year Forward View \(FYFV\)](#)<sup>10</sup>.

The [NHS Planning Guidance for 2016/17 – 2020/21, Delivering the Forward View](#)<sup>11</sup> means local health system STPs will increasingly be planning by ‘place’ for local populations. There is therefore an increasing need to locally harness the energies of clinicians, patients, carers, citizens and local community partners including independent and voluntary sectors, and local government through local Health and Wellbeing Boards. The CCIO role will be critical in providing clinical leadership in the development of local digital strategy that will support the integration of health and care, ensuring that digital strategy is closely aligned with and can enable effective delivery of STPs.

An understanding of national digital strategy is critical, including insight into how this can be developed locally to support the integration and transformation of care. Knowledge and understanding of information governance, consent and data security

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<sup>10</sup> [Five Year Forward View](#)

<sup>11</sup> [Delivering the Forward View: NHS Planning Guidance 2016/17 – 2020/21](#)



are also key aspects of this role, together with leadership skills. These are essential in bringing together local health economies in terms of sharing detailed care records.

The CCIO role may vary across organisations. It is usually suitable for a clinician with an interest in digital technology, with an understanding of the challenges around capturing clinical information at the point of care and sharing that information throughout the care process.

CCIOs should champion the development, deployment, use and optimisation of digital systems.

CCGs may want to consider whether the role could be shared across a local health economy where several CCGs are working together.

In response, the [CCIO Leaders Network](#)<sup>12</sup> has been established to promote and develop CCIOs across the NHS. Clinicians have come together from across the UK to help support the sharing of ideas, best practice and career development. The CCIO Leaders Network is currently hosted by Digital Health.

It is also important that commissioners responsible for GP IT investment understand why they are investing and what they are investing in through an effective “informed customer” capability. The role of an “informed customer” is described in more detail in Appendix A.

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<sup>12</sup> [CCIO Network](#)

## 5. Excellence in GP IT services and the services needed to secure excellence in GP IT – GP IT Operating Model:

There is a responsibility to deliver local IT support services for general practice contractors as set out in local service level agreements, plus implementation and support for national strategic and clinical systems. There are also local obligations under the GPSoC and legacy Local Service Provider (LSP) contracts which need to be met in the deployment and support of GP clinical systems.

Although there is national funding to develop and deliver GPSoC national infrastructure and application solutions, there are still significant local costs in deploying and supporting these systems and the infrastructure on which they operate locally.

The 3rd edition of the GP IT Operating Model aims to provide the framework and the flexibility that will enable commissioners to work locally with and support the development of emerging primary care delivery models and services, and ensure appropriate 'at scale' digital solutions that support the delivery of the NIB framework and FYFV ambitions.

The associated schedule of services has been reviewed in recognition of the significant progress that has been made in the development and provision of digital services for general practice. This is reflected in the expanded 'business as usual' support provision outlined in 'core and mandated GP IT'.

Enhanced and transformational categories have been added in response to the changing primary care landscape as outlined in the FYFV. Further detail is provided within the detailed service schedule outlined in the appendices.

CCGs should ensure that locally commissioned services and SLAs reflect the updated 'core and mandated' requirements outlined within the schedule of services.

Within the updated operating model and at a high level, we consider "excellent GP IT" to look like this;

- High quality **core and mandated** GP IT services - a universal support service for every general practice in England, including implementation and support for all national digital systems such as the Summary Care Record, Patient Online and GP2GP services to meet contractual requirements.
- Locally Targeted investment in:
  - **Enhanced** primary care IT-focused on improving efficiency and effectiveness by optimising existing systems and infrastructure. Innovative and effective approaches that will better support changes in the delivery of primary care services, including seven day and extended hours working and 'at scale' models.
  - **Transformational** primary care IT - new or additional systems, services or infrastructure that will enable integration of health and care and delivery of new and innovative healthcare models, where multiple

organisations across care settings are working with general practice to share patient care.

CCGs will commission high quality core and mandated GP IT services. In addition, as part of Sustainability and Transformation Plans (STPs), CCGs need to consider the steps required to deliver a fully interoperable health and care system by 2020 that is paper free at the point of care and better able to meet the needs of patients and citizens, clinicians and commissioners.

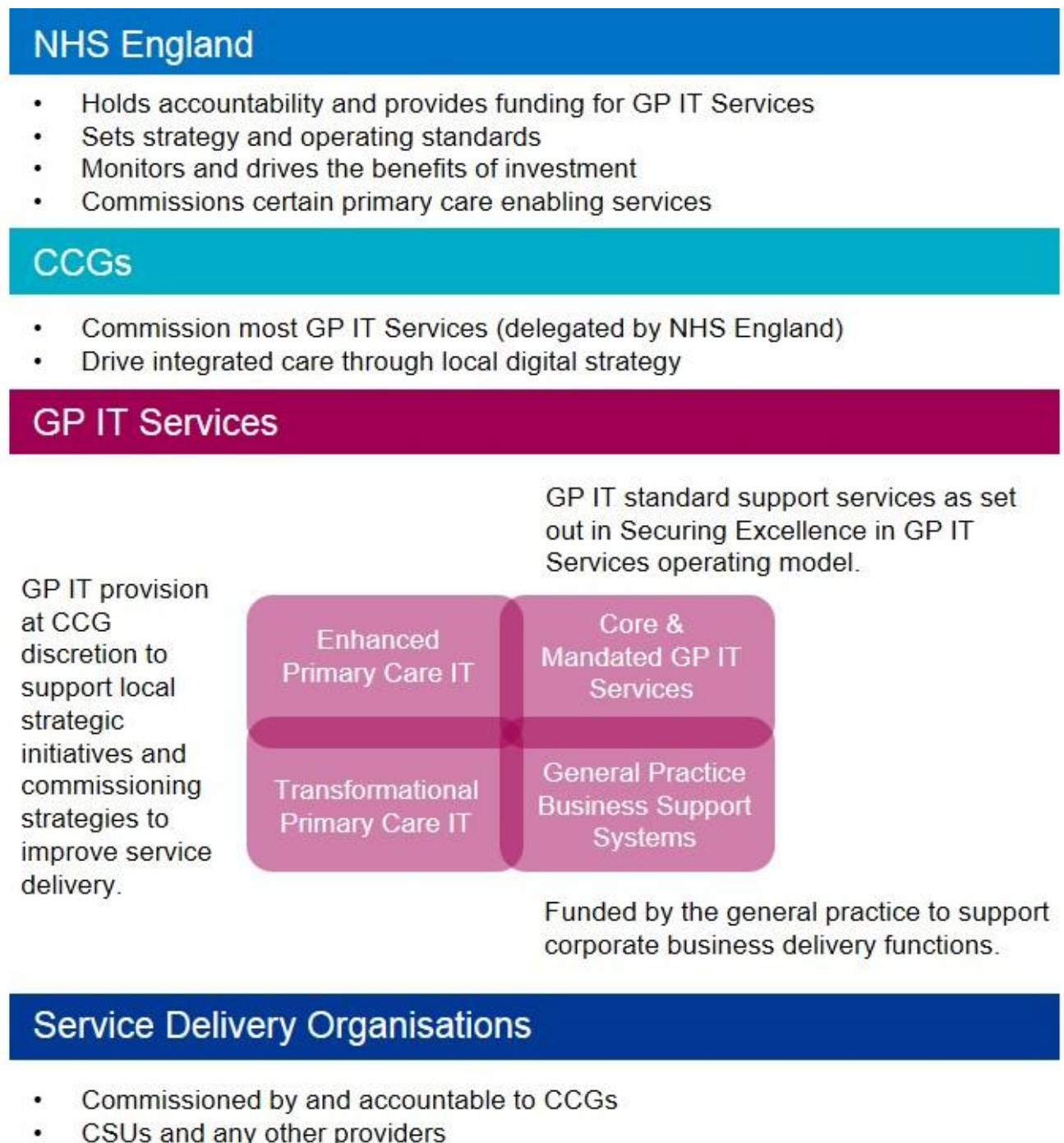
Enhanced and transformational primary care IT services, whilst discretionary, are to be commissioned locally by CCGs to complement core and mandated GP IT services. They should align with and support the delivery of CCG strategic objectives, service improvement initiatives, Local Digital Roadmaps and local STPs, to help improve the delivery of services across the local care community.

NHS England will be directly responsible for ensuring that all primary care contractors have arrangements in place for certain IT services such as Registration Authority (RA) (administration of access to clinical and business systems); Information Governance (IG) support; Clinical Safety Assurance, and NHSmail administration and support.

For primary care contractors delivering primary care essential services to a registered list under GMS, PMS and APMS contractual arrangements, NHS England, is responsible for directly commissioning these support services.

For other primary care contractors that have access to and use of national clinical information systems NHS England is responsible for assuring that appropriate support arrangements are in place, as part of local commissioning arrangements.

**Figure 1: GP IT Services – The Operating Model**



The following sections provide a high level summary of the updated schedule of services. A more detailed view is included within the appendices, which provides CCGs with the scope, category and description of what is to be commissioned and delivered locally. There is also a reference to the associated digital primary care maturity assurance indicator(s) that will help to demonstrate progress towards digital capability and maturity.

## 5.1 Core and mandated' GP IT services (available to all general practices)

These are technologies, systems and support services required to deliver Primary Care Essential Services. These are the fundamental services to be commissioned by CCGs, for GP practices, to enable the effective delivery of health and care.

A detailed service schedule of core service provision at a local level is to be included within the appendices of the nationally agreed CCG Practice Agreement, to ensure GPs are aware of local service provision arrangements.

Core and mandated GP IT services will be the first call on GP IT revenue funding that will be provided as part of annual CCG baseline allocations.

There are two main principles supporting the definition of core GP IT services:

### 6.1.1 Getting the basics right

A poor IT system creates frustration, whereas a system which is fit for purpose is greatly valued. Every member of general practice staff must have reliable, responsive and efficient IT systems, associated support services and equipment. GP IT delivery partners will be contracted to deliver a robust and effective service, with the capability to minimise problems from the outset and rapidly deal with issues as they emerge. CCGs will base the quality of IT services on clearly defined service level agreements which in turn have a robust set of key performance indicators (KPIs) that are managed through effective service management processes.

### 6.1.2 Making the most of what we have already

NHS England needs to ensure it gets the full benefit from the systems currently used, to realise their full potential. Local organisations will be encouraged and supported to fully optimise their GP clinical systems for example through delivery of the GP2GP system and [Patient Online](#). We must achieve full roll out and use of national strategic systems, such as the Summary Care Record, e-Referral system, GP2GP and the Electronic Prescription Service, to enhance patient care, enable integrated care across all care settings and achieve operational benefits to both the general practice and patients.

From 2018, there will be a core requirement for CCGs to commission Wi-Fi services in general practice, with access for staff and patients. National funding will be made available to cover the initial hardware, implementation and service costs.

## **5.2 Enhanced primary care IT services**

Technologies, systems and support services which enable and improve efficiency and effectiveness of general practice.

These are discretionary primary care IT services that are developed and agreed locally to support local strategic priorities and commissioning strategies to improve service delivery.

Investments in enhanced primary care IT should support the CCG(s) local digital strategy and Roadmap and where possible strategic rather than tactical solutions should be developed.

Funding for enhanced primary care IT may come from a variety of sources, including but not limited to GP IT monies/CCG allocations, once core and mandated GP IT services are provisioned, transformation or GP Access Funds, local business case development and/or direct CCG/GP practice funding.

It is important to note that these services may be provided to facilitate confederated working, in support of general practice efficiency and effectiveness, working 'at scale' and extended hours.

### 5.3 Transformational primary care IT services

Technologies, systems and support services which enable new models of care, service integration, wider GP functions, Multi-speciality Care Providers (MCPs) and Primary and Community Care Services (PACS) organisational models.

These are discretionary primary care IT services that are developed and agreed locally to support local strategic initiatives and commissioning strategies to improve service delivery.

Investments in transformational primary care IT should support the CCG(s) local digital strategy and Roadmap and where possible strategic rather than tactical solutions should be developed.

Funding for Transformational Primary Care IT may come from a variety of sources, including but not limited to GP IT monies/CCG allocations, once 'Core and Mandated' GP IT services are provisioned, Transformation or GP Access Funds, local business case development and/or direct CCG/GP practice funding.

It is important to note that these services may be provided to facilitate broader service integration and inter-organisational sustainability and transformation initiatives.



## 5.4 General practice business support systems

These are the systems which are associated with the running of the Practice business and are not directly connected to patient care. general practice Business Support Systems are funded by the Practices concerned and should generally be regarded as out of scope, where they are:

- Services already funded elsewhere
- Business running costs, for example consumables
- Internal business support systems, not part of clinical service delivery for example. payroll, HR, estate management.

### **General practice business support systems:**

These are systems and services which a practice may utilise for business purposes, which are not directly related to patient care.

N.B. The 'Global Sum' within the General Medical Services (GMS) contract (and PMS/APMS equivalent) makes provision for practice expenses including staff costs and general running costs of the practice (stationery, telephone, heating and lighting, repairs and maintenance).

With evolving primary care delivery models, local service/support arrangements may develop that incorporate aspects of service provision that would traditionally have been considered GP business support functions to be directly funded by the Practice under GMS (and PMS/APMS equivalent) contractual arrangements.

Where there is demonstrable benefit of incorporating elements of GP business support services for example telephony/VOIP as part of broader efficiency release and improved patient care initiatives, GP contributions are to be considered as part of local funding provision/business case arrangements.

## 5.5 Primary Care IT Enabling Services (PCES)

NHS England remains directly responsible, through its regional DCO teams, for commissioning some IT services. These are fundamental IT services which every general practice must receive. These services should be commissioned from appropriately qualified IT delivery partners based on a service level agreement.

### Primary Care IT Enabling Services

These are fundamental support services provided to general practice that are directly funded and commissioned by NHS England regional DCO teams.

Service provision includes:

- Registration Authority support services
- Information Governance support services
- Clinical Safety Officer support
- NHSmail administration support

For other primary care contractors, NHS England regional DCO teams will assure that arrangements for these IT support services are in place for those contractors who have access to and use of national clinical information systems, as part of local commissioning arrangements. This includes community pharmacies, appliance contractors, dental practices, primary ophthalmic providers and primary care provided within prisons.

Regional teams may wish to consider devolving commissioning responsibilities for PCES services for general practice, to align with broader primary care commissioning responsibilities under co-commissioning arrangements, where appropriate. This should however, be reviewed against 'at scale' service efficiencies that can be realised by the regional commissioning of PCES for the broader primary care contractor community.

## 6. Accountability and commissioning responsibilities: system overview

NHS England is accountable for the provision of GP IT services. NHS England also retains responsibility for, and ownership of, all NHS GP IT capital assets (inclusive of legacy IT transferred from primary care Trusts). However, NHS England has delegated to CCGs the responsibility for delivering most GP IT services, as outlined in [NHS Commissioning Board directions under the NHS Act 2006](#) as amended<sup>13</sup>.

CCGs may deliver these services themselves or choose to commission these services locally (including the management of the associated assets) from appropriate IT provider(s), for example Commissioning Support Units (CSUs) or other IT delivery partners, including private sector partners.

NHS England supports CCGs by establishing national standards and maintaining overall budgetary oversight. This includes developing the supplier market and commissioning NHS Digital (HSCIC) to maintain the national IT infrastructure and provide GP Practices with a choice of GP clinical systems via the GPSoC framework. NHS England will also ensure the appropriate handling of support for legacy Local Service Provider (LSP) systems.

CCGs are responsible for developing local digital strategy and delivery plans, to ensure that digital technology is being used to optimal effect for the benefit of patient care.

NHS England leads a number of national programmes such as the Summary Care Record, Electronic Prescription Service, GP2GP and Patient Online. All promote and support the greater use of digital technologies in primary care and underpin local strategies for integrated care.

NHS England, working with the national delivery partner, NHS Digital (HSCIC), will ensure general practice has up to date applications to support the future use of digital transactions and information exchanges. This will allow CCGs to attain trajectories for the development of digital services and achieve better value for money for the NHS. CCGs will plan and manage the replacement of older general practice applications in conjunction with their local IT delivery partners.

We encourage CCGs to work in partnership with primary care stakeholders to set priorities and local direction for digital support services. This includes NHS England Regional Teams, general practices, patients and carers, and professional bodies such as local medical committees and local pharmaceutical committees. At a national level, we work in partnership with the British Medical Association and the Royal College of General Practitioners regarding, for instance, the provision of best

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<sup>13</sup> [NHS Commissioning Board Directions to Clinical Commissioning Groups \(CCGs\)](#)

practice guidance for patient access to services and patient records through digital technology.

Whilst primary care services are the responsibility of NHS England, the revenue funding for GP IT is delegated to CCGs as part of baseline allocations, and they are responsible for determining local arrangements for the deployment of this funding and for organising delivery of the associated services and infrastructure. NHS England will continue to manage associated capital funding as set out in the operational [Planning Guidance](#)<sup>14</sup>. Any queries should be directed to regional finance teams.

NHS England will provide leadership and work in partnership with CCGs as they develop local GP IT commissioning arrangements and 'informed customer' capabilities.

CCGs will be accountable to their local governing bodies and will be responsible for reporting the development of digital plans for GP IT to ensure that they meet local needs.

The introduction of a 'Digital Primary Care Maturity Assurance' model will provide a robust and coherent approach for assurance, that will demonstrate to NHS England as national commissioner (and its regional offices) and CCGs as local commissioners with responsibilities for GP IT services, the effective use of NHS investment in GP IT services to deliver high quality GP IT services.

NHS England through its regional teams will continue to monitor progress of the delivery of GP IT through appropriate clinical commissioning assurance frameworks.

NHS England has a statutory duty to conduct an annual assessment of every CCG. For 2016/17 a new CCG Improvement and Assessment Framework (IAF) is being introduced, which will align with priorities outlined within the NHS Mandate and Planning Guidance and will replace both the existing CCG Assurance Framework and CCG Performance Dashboard. The new Framework is expected to support improvement through the introduction of an aggregated Ofsted style assessment of performance which allows CCGs to benchmark against other CCGs and informs whether NHS England intervention is needed. The CCG IAF is expected to align closely with STPs and include integration and technology metrics.

It is anticipated that CCGs (or their nominated management function) will require expertise to monitor the performance of local GP IT delivery partners and general practices as they use IT services in accordance with local agreements. Where a dispute between a general practice and a CCG arises concerning the provision of

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<sup>14</sup> [Delivering the Forward View: NHS Planning Guidance 2016/17 – 2020/21 Annex 3 to the Technical Guidance: Financial planning templates guidance for commissioners](#)

GP IT, that cannot be resolved locally, either party may escalate the matter through NHS England regional teams for contractual action.

NHS England retains responsibility for commissioning services to support all primary care GMS, PMS and APMS contractors offering Primary Care Essential Services to a registered patient list to fulfil their statutory responsibilities relating to information governance and to support compliance with the Information Governance Toolkit (IGT). NHS England will commission local services to support adherence to IG policies and procedures and provide support for the completion of general practice IGT submissions.

NHS England also retains responsibility for commissioning Registration Authority (RA) (administration of access to clinical and business systems), clinical safety assurance and NHSmail support and administration for general practice as well as assuring that arrangements are in place for other primary care contractors who have access to and are using national clinical IT systems. Regional DCO teams will directly commission these services for general practice, from IT delivery partners.

## 7. Commissioning of IT Services: Operational Management Responsibilities

The operational management of GP IT requires clear definition of accountabilities and responsibilities across commissioners and IT delivery partners. This section makes clear those responsibilities and the associated aspects of the processes involved.

In this document the following terms have the following meanings:

- **Accountable** means the party has the obligation to report, explain and be answerable for resulting consequences of the relevant activity
- **Responsible** means the party has the obligation to carry out the relevant activity.

### 7.1 Financial arrangements

GP IT funding arrangements have been reviewed as part of the strategic review of the GP IT Operating Model, in response to the changing primary care landscape as outlined in the Five Year Forward View (FYFV) underpinned by [Personalised Health and Care 2020](#)<sup>6</sup>.

Historically, GP IT investment has been highly variable and inequitable across England. NHS England's intent, outlined in the 2014-16 Operating Model, was for all areas of England to achieve an equitable level of GP IT revenue investment by April 2016, sufficient to achieve high quality GP IT services for all.

The NHS Mandate 2016/17 outlines the need for an increase in devolved power and control, enabling the development of new models of care, tailored to local needs. The revision of GP IT funding arrangements outlined within the 2016-18 operating model, aims to ensure that CCGs have sufficient funding flexibility to commission effective GP IT services that meet local need, support the development of new models of care, whilst also ensuring:

- Standardised high quality IT services
- Alignment of GP IT operating arrangements with the strategic direction of NHS England's vision and values for primary care and the broader digital services delivery agenda
- A platform to support service transformation.

#### Key principles:

- NHS England will continue to provide national funding as part of CCG baseline allocations to support the delivery of GP IT services

- Core and mandated GP IT is the first priority for local investment
- Investment in local enhanced and transformational services should be commissioner led, in consultation with general practice and will align closely with Local Digital Roadmaps and Sustainability and Transformation Plans that will underpin the integration and transformation of care locally.
- Investment for GP IT should be maintained and enhanced to support local plans to address the sustainability and quality of general practice, as outlined in the NHS Planning Guidance and reflected in the uplift to GP IT revenue within CCG baseline allocations for 2016/17.
- CCG are accountable for any financial risks associated with over-spending as part of their overall resource limit
- Clear Standing Financial Instructions (SFI) must be established between commissioners and delivery organisations
- CCGs and their GP IT delivery partners must follow all necessary financial guidance in relation to provision of GP IT services, including the NHS England [Standing Financial Instructions](#)<sup>15</sup> and [NHS England Financial Guidance](#)<sup>16</sup>.

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<sup>15</sup> [Standing Financial Instructions](#)

<sup>16</sup> [NHS England Financial Guidance](#) (Available only on the NHS England Intranet)

**Figure 2: Key financial accountabilities and responsibilities**

GP IT Service Area	Accountable	Responsible
<b>Financial arrangements</b>	<ul style="list-style-type: none"> <li>NHS England is accountable for investment in primary care and GP IT services.</li> <li>The CCG has financial accountability for the local budgetary management of GP IT funding.</li> </ul>	<ul style="list-style-type: none"> <li>The CCG is responsible for the establishment of local governance and accountability arrangements to ensure effective and appropriate use of delegated funds.</li> <li>The CCG is responsible for ensuring that: <ul style="list-style-type: none"> <li>local arrangements comply with established public sector procurement rules,</li> <li>appropriate quality and value for money are secured through collaborative procurements with other CCGs where possible, and</li> <li>investment appraisals consider the full cost and sustainability of any service transition for example where Transfer of Undertakings (Protection of Employment) (TUPE) costs may have an impact or ongoing maintenance costs.</li> </ul> </li> <li>NHS England Direct Commissioning Operations teams are responsible for financial oversight and assurance through the clinical commissioning and direct commissioning assurance frameworks and assessment methodology.</li> </ul>



## **7.2 Detailed financial management responsibilities**

As in previous years, the first priority for CCGs investment of GP IT monies should be in commissioning the provision of essential core and mandated GP IT services. In addition, it is essential that CCGs ensure local investment in enhanced and transformational primary care IT services is closely aligned with Local Digital Roadmaps (LDRs) and Sustainability and Transformation Plans, to support the integration and transformation of health and care.

The Government expects the NHS to make year on year improvements in efficiency and productivity, to ensure a secure and sustainable financial footing, as outlined in the Mandate to the NHS. Local commissioners should therefore, ensure effective locally commissioned GP IT services that provide both value for money and sustainable services.

## **7.3 Revenue provision**

### **7.3.1 GP IT revenue funding**

Whilst the overall budget for GP IT remains static for 2016/17, the release of GP IT Transition monies has enabled uplift on CCG GP IT revenue allocations from £146 million to £173 million. Which in real terms provides an uplift from the 2015/16 allocation of £2.56/head of population, to a 2016/17 allocation of average £3.03/head of population.

From 2016/17, GP IT revenue monies will be included in CCG baseline allocations, calculated on the CCG 'fair share' allocation formula, which is being phased in over a period of years, to bring CCGs to a fair share/equity position.

The GP IT Operating Model outlines CCG responsibilities in terms of GP IT delivery arrangements. The first call on GP IT revenue funding, is the provision of core and mandated GP IT services, as outlined in the schedule of services which have expanded for 2016/17.

GP IT revenue monies will be distributed directly to CCGs to manage locally, through CCG baseline allocations. CCGs should ensure continued investment in GP IT to maintain and develop existing infrastructure, whilst ensuring effective delivery against the requirements outlined within the GP IT Operating Model for 2016-18.

NHS England retains the Senior Responsible Owner role for the GP IT Operating Model.

### **7.3.2 Transition funding**

Following the introduction of equitable financial shares within the 2014/16 Operating Model, a time limited two year transition fund was established, for which CCGs could

apply to access where they were able to demonstrate a genuine need for additional funding, to ensure safe business continuity during this period of transition.

This was a time limited funding provision with the intent to achieve parity within two financial years, from April 2014. This funding stream is therefore, no longer available from April 2016 onwards. The release of transition monies, has allowed for an increase in revenue allocation across all CCGs.

### **7.3.3 Funding for Primary Care IT Enabling Services (PCES)**

To commission Primary Care IT Enabling Services, that underpin the use of national strategic systems within primary care as outlined in Appendix C. These include Registration Authority support services, NHSmail administration, Clinical Safety Officer support and IG support for general practice.

Funding provision for PCES has been increased from the previous allocation of £8.64 million to £11 million in 2016/17, with the enhanced funding specifically targeted at enhancing IG support arrangements.

Revenue funding for the continued commissioning of PCES will be distributed to NHS England's regional DCO teams as part of baseline primary care commissioning allocations.

A commissioning specification: '[Information Governance Support for Primary Care Providers](#)'<sup>17</sup> has been developed to inform NHS England's Regions about the IG support that they must commission for primary care providers and deliver an outline structure for contracting purposes.

## **7.4 Capital provision**

Within current GP IT funding arrangements, capital funding is available on application, to fund necessary hardware and software replacement and investment programmes.

In recognition of the increased challenges that the current capital management arrangements pose as IT operating arrangements continue to develop and evolve and to provide increased flexibility for local commissioners (CCGs), discussions are underway to enable capital to revenue transfer for future funding arrangements.

As this may not have been achievable by 1<sup>st</sup> April 2016, CCGs and local regional offices were asked to consider and include GP IT infrastructure requirements for 2016/17 and the Five Year Indicative Requirements as part of the broader capital

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<sup>17</sup> [Commissioning Specification: Information Governance Support for Primary Care Providers](#)

planning process for 2016/17. This will help to inform the ongoing GP IT financial review whilst ensuring that local ambitions can be fully realised.

As in previous years, NHS England will make capital expenditure available for schemes which are deemed a priority and which meet the necessary criteria.

- In accordance with the NHS Planning Guidance and associated Technical Guidance, CCGs must outline their capital funding requirements including capital for GP IT.
- All capital asset purchases must be made through nationally agreed purchasing frameworks whenever possible; where not possible, NHS England Standing Financial Instructions and procurement rules must be applied.
- Capital funding will be managed in accordance with the [NHS England Business Case Assurance and Approval Process](#)<sup>18</sup>.

Any capital financial queries should be directed to regional finance teams in the first instance.

As part of sustainability requirements CCGs need to maintain financial balance to be able to deliver against their objectives, which include GP IT Operating Model arrangements. This will be assessed as part of sustainability review under the proposed CCG Improvement and Assessment Framework.

#### **7.4.1 Capital depreciation**

Capital depreciation for NHS England owned assets, will continue to be managed through NHS England financial processes and will not be funded from within the delegated revenue budget to CCGs for GP IT.

N.B. This includes depreciation charges for legacy assets transferred from PCTs to NHS England on 1 April 2013.

#### **7.4.2 Value for money**

Investment of NHS England resources must offer good value for money. Value for money in GP IT expenditure will be ensured through the extensive use of approved purchasing frameworks including, but not restricted to, the Lead Provider Framework (LPF) for GP IT service delivery. CCGs should ensure that service specifications for procurement of GP IT services reference the GP IT Operating Model, including but not limited to, schedule of services requirements in relation to core and mandated GP IT. Enhanced and transformational service requirements that will enable

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<sup>18</sup> [NHS England Business Case Approvals Process: Capital Investment, Property, Equipment and ICT](#)

extended hours/seven day working, primary care at scale, sustainability and transformation that will accelerate implementation of the Five Year Forward View and support delivery of the General Practice Forward View<sup>1</sup>, should also be considered as part of procurement activities.

Further assurance will be provided through the Digital Primary Care Maturity Assurance arrangements, described within this document, which will be available to NHS England, regional DCO, CCGs and GPs.

Efficiencies associated with the delivery of core and mandated GP IT services will enable increased investment in enhanced and transformational GP IT services. CCGs are required to follow their SFIs to ensure value for money in their GP IT expenditure.

#### **7.4.3 Inventory and asset management**

CCGs need to ensure they maintain adequate inventories of all GP IT assets (capital and revenue funded) in order to support the operational management of the assets and also to inform the NHS England asset register requirements as detailed in the NHS England financial guidance.

CCGs are responsible for ensuring a full and up to date audit trail of all GP IT assets in their area and the removal and secure disposal of GP IT assets where appropriate, as outlined in the SFIs.

#### **7.4.4 Insurance**

All NHS owned GP IT equipment does not need to be individually insured under practice policies (i.e. contents policies), however the practice should ensure that it has taken reasonable precautions to ensure that NHS England and supplier owned equipment is protected from theft and malicious damage. Practices should be aware that they have a responsibility to inform their insurance companies that IT equipment will be on their premises. Practices are advised to insure practice-owned IT equipment and ensure cover for the consequences of any loss.

Practices must at all times ensure that adequate security arrangements are in place in the practice premises in order to protect NHS-owned equipment.

### **7.5 Implications of GPSoC Framework**

Subject to [eligibility criteria](#), general practices will have access to an accredited computer system where the contractor may store patient records.

Certain deployment and local support costs will not be centrally funded. Details on the current GPSoC Framework including funding arrangements is available at [GP Systems of Choice \(GPSoC\)](#).

## 7.6 Alternative Funding Sources

### 7.6.1 Sustainability and Transformation Fund

The NHS Spending Review provided additional dedicated funding streams for transformational change, which will build over the next five years and will support the spread of new care models, primary care access and infrastructure, technology roll out, together with key clinical priorities.

As part of the Planning Guidance for 2016/17, CCGs are expected to develop Sustainability and Transformation Plans (STPs) that will help return the system to aggregate financial balance. STPs are expected to become the single application and approval process for being accepted onto programmes with transformational funding from 2017/18 onwards.

In future years, many of these protected transformation funds, will form part of a new wider Sustainability Transformation Fund (STF), though for 2016/17, as outlined in Planning Guidance, limited available transformation funding will continue to be available through separate processes i.e. the Primary Care Transformation Fund (PCTF).

### 7.6.2 Primary Care Transformation Funds (PCTF)

Local STPs should consider sustainable general practice and wider primary care, including how to improve primary care infrastructure. CCGs should consider how transformation funds could be invested in digital technology to enable enhanced evening and weekend access to primary care, support patient activation and self-care and the adoption of new models of care including MCPs or PACs.

Capital for Prime Minister's Challenge Funds (PMCF), now known as GP Access Fund (GPAF), was funded from Primary Care Transformation Funds (PCTF) capital in 2015/16. There are not expected to be any capital funding requirements for GP Access Fund schemes from 2016/17. Where there are capital requirements, bids should be submitted for PCTF capital or included within GP IT capital requirements.

### 7.6.3 Better Care Fund

The NHS Mandate 2016/17 highlighted the Government's aim that health and social care are integrated across the country by 2020, including through the [Better Care Fund](#)<sup>19</sup>, which will provide financial support for councils and NHS organisations to

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<sup>19</sup> [Better Care Fund Planning](#)

jointly plan and deliver local services. This will be supported through the sharing of electronic health records, key to enabling integrated care.

**Figure 3: Detailed Financial Management Responsibilities**

Process	NHS England (Patients and Information Directorate)	NHS England regional DCO teams	CCGs
<b>Revenue Funding</b>	NHS England is responsible for allocating the budgets for commissioning NHS services.  Responsible for issuing funding allocations to commissioners including GP IT.		Accountable for the management of devolved revenue allocations to ensure effective delivery of 'core' GP IT services, together with local agreement and funding prioritisation of enhanced and transformational service provision, in response to local need.
<b>Transition Funding</b>	Ceased April 2016	Ceased April 2016	Ceased April 2016
<b>Capital Funding</b>	Determine capital operating budget, oversight and assurance of the capital approvals process to ensure fairness and consistency nationally.	Coordinate financial planning, oversight and assurance of CCG GP IT capital bids.  Manage capital budgets for commissioning.	Apply to NHS England for capital funding as per NHS England capital guidance released annually.
<b>Asset Management</b>	Provide specific guidance and processes relating to GP IT asset management in	Accountable for the financial processes associated with the management of capital assets and	Responsible for the asset management and secure disposal processes.

Process	NHS England (Patients and Information Directorate)	NHS England regional DCO teams	CCGs
	support of NHS England Standing Financial Instructions.	oversight of the delivery of the asset management process.	

## 7.7 What are the Contractual Arrangements?

A number of agreements and contracts ensure that all levels of the system are linked in terms of their mutual rights and responsibilities. There needs to be clear accountability and agreement of service specifications so that every general practice understands the level of GP IT services to expect.

### Key principles:

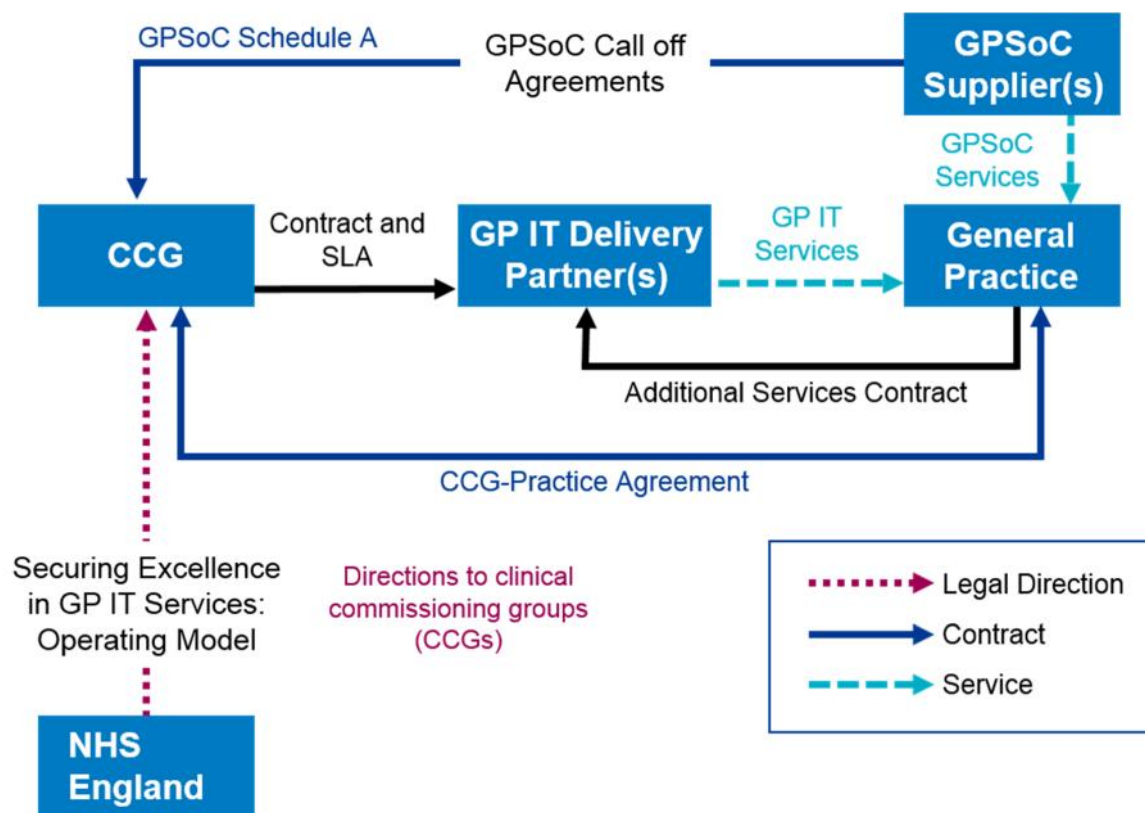
- Effective service management arrangements must be in place to oversee achievement of Service Level Agreement (SLA) performance and delivery; holding GP IT delivery partners to account as is appropriate
- There is a clear escalation process reflected in contractual agreements
- The authorisation of contractual agreements for the delivery and management of GP IT services can only be made by a CCG
- Any delegated responsibility of management arrangements must have clear assurance and accountability

**Figure 4: Key contractual accountabilities and responsibilities**

GP IT Service Area	Accountable	Responsible
<p><b>Contractual Arrangements</b></p>	<p>NHS England is accountable for contracts relating to national strategic/clinical systems and infrastructure as per the NHS Mandate.</p> <p>NHS England is accountable for ensuring that CCGs comply with the CCG directions relating to the NHS Act 2006 (as amended), as per “Securing Excellence in GP IT Services: Operating Model”.</p> <p>The CCG is accountable for ensuring a CCG-Practice agreement is in place with each of its constituent practices and monitoring compliance with that agreement, escalating to NHS England regional DCO teams where an issue cannot be resolved.</p> <p>The CCG is accountable for the commissioning, agreement and management of contracts and SLAs with GP IT service providers for the provision of GP IT services to its constituent GP practices, as laid out in this document.</p>	<p>The CCG is responsible for fulfilling its responsibilities as laid out in the CCG Practice Agreement.</p> <p>The CCG is responsible for authorising signature against national infrastructure items such as the N3 network, and national frameworks such as GPSoC on behalf of its constituent practices.</p> <p>The general practice is responsible for fulfilling its responsibilities as laid out in the CCG Practice agreement.</p>



**Figure 5: High level contractual arrangements**



### 7.7.1 Between NHS England and CCGs

NHS England is accountable for the delivery of GP IT services, but responsibility for the commissioning of GP IT services has been delegated to CCGs. This is in line with directions issued to CCGs by NHS England under the NHS Act 2006 (as amended); therefore no contract is needed between NHS England and CCGs in relation to these directions.

### 7.7.2 Between NHS England and national applications and infrastructure providers

NHS England will ensure that national applications and infrastructure are commissioned for use by local NHS organisations as appropriate, in keeping with national digital strategy.

### **7.7.3 Between CCGs and their GP practices (The CCG Practice Agreement)**

CCGs are responsible for the provision of core, enhanced and transformational GP IT services for their constituent practices in line with the requirements outlined within this document. The details of the provision of these services, as well as the rights and responsibilities of both parties must be recorded in a CCG Practice Agreement, which every practice must sign with its CCG. This is an essential document which not only ensures the practice understands what GP IT services to expect, and the related responsibilities of both parties, but also ensures that the practice's role in supporting the CCG's obligations under GPSoC and other national contracts is bound by a contractual agreement between the two parties.

Where a change of GPSoC or LSP clinical system has been agreed the CCG and GP practice shall jointly undertake the selection process and subsequent migration with the relevant supplier.

### **7.7.4 Between CCGs and their GP IT delivery partners**

The provision of any services should be supported by a contract and SLA with each GP IT delivery partner. SLAs are an important component, which will be reflected or replicated within the appendices in the CCG Practice Agreement, ensuring the practice has visibility of the key components of the service which it is to receive. Effective service management arrangements must exist to support this process.

### **7.7.5 By CCGs on behalf of their constituent GP practices**

CCGs must act as signatory for the provision of certain national infrastructure items and systems to their constituent practices, for example this applies to the N3 network (N3 Access Agreement) and GPSoC Framework (for example. GPSoC call off aAgreements and Schedule A). It is important to note that this responsibility cannot be delegated by the CCG, although aspects of its management may be delegated.

**Figure 6: Detailed contractual management responsibilities**

Process	CCGs	NHS Digital (HSCIC)	GP Practice	GP IT Delivery Partner
<b>GPSoC Framework / Core GP Clinical Systems</b>	<p>Commissions GP IT delivery partners to manage the delivery plan and ensure all GP practices are supplied with appropriate clinical systems using these contracts, including any system migration, implementation and operational support.</p> <p>The CCG is responsible for signing off on GPSoC usage on behalf of its practices and maintaining the Tracking Database (TDB) accordingly. Note that the signature of such agreements cannot be delegated by CCG to another body, but the day-to-day maintenance and management of the agreements may be delegated.</p> <p>Signatory to CCG Practice and local GPSoC call off agreements and ongoing maintenance and</p>	<p>Procures and contractually manages framework contracts for GPSoC and LSP Systems.</p> <p>Puts in place contract management and advice arrangements to inform CCGs of local contract arrangements.</p>	<p>Signatory to the CCG Practice Agreement.</p> <p>Complies with CCG Practice Agreement and LSP terms and conditions (where appropriate).</p>	<p>Commissioned to implement, provide support, service management and monitor that GP practices comply with their responsibilities around the use of GPSoC and LSP Services.</p>

Process	CCGs	NHS Digital (HSCIC)	GP Practice	GP IT Delivery Partner
	management of these agreements (for GPSoC and Lead Service Provider (LSP)).			
<b>National Infrastructure</b>	The CCG is responsible for signing national infrastructure agreements (for example. N3 access agreement) on behalf of its practices where necessary. Note that the signature of such agreements cannot be delegated by the CCG to another body, but the day-to-day maintenance and management of the agreements may be delegated.	NHS Digital (HSCIC) procures national infrastructure and puts in place contract management advice arrangements and informs CCGs of contracts and these arrangements.	Compliance with any terms and conditions for national infrastructure that applies to end users.	Compliance with any terms and conditions for national infrastructure that applies.
<b>Contracting core, enhanced and transformational GP IT services</b>	Commission GP IT delivery partners to deliver core, enhanced and transformational GP IT services. Services must be procured under appropriate Service Level Agreements/ contracts which are based on national guidance, where available		Signatories and accept compliance to CCG Practice Agreements.	Delivery of commissioned services in line with Service Level Agreement and Key Performance Indicators.

Process	CCGs	NHS Digital (HSCIC)	GP Practice	GP IT Delivery Partner
	<p>and include detailed service definitions and associated KPIs.</p> <p>Routine service reviews must be conducted with GP Practices and GP IT delivery partner(s) to assure delivery outcomes, service performance and plan future service development.</p> <p>Services must be routinely assessed to ensure continued value for money, for example using industry standard benchmarking.</p> <p>Signatories to CCG Practice Agreements and ongoing maintenance and management of these agreements.</p>			

Process	CCGs	NHS Digital (HSCIC)	GP Practice	GP IT Delivery Partner
<b>National Strategic Systems and Services</b>	Commission a service to manage the delivery plan and implementation of national strategic systems and services to support local strategy in conjunction with GP practices.	NHS Digital (HSCIC) procures systems (and some support services) on behalf of NHS England's Patients and Information Directorate and puts in place contract management, advice arrangements and provides oversight and advice on the discharge of these arrangements.	Adopt and implement national initiatives and comply with any terms and conditions for use of national systems that apply to end users.	Compliance with any terms and conditions for national systems that apply.

## 7.8 Information Governance

Information governance (IG) is a personal responsibility for all. IG requirements for general practices include, amongst other requirements, compliance with common law, the Data Protection Act 1998 and Human Rights Act 1998, policy requirements and conformance to professional obligations. These include meeting the commitments given by the Department of Health to the Caldicott Review 2013. The Health and Social Care (Safety and Quality) Act 2015 calls for the use of a 'consistent identifier', that is '(a) likely to facilitate the provision to the individual of health services or adult social care in England, and (b) in the individual's best interests', and sets out the 'Duty to share information', with similar provisos. The Information Governance Alliance has published several documents on both of these changes. See [Information Governance Publications from NHS Digital \(HSCIC\)](#). The latter is the legal framework arising from the Caldicott Review 2013. General practices have a commitment to complete the NHS GP Information Governance Toolkit (GP IGT) to level 2.

How these requirements are supported should be set out in local service agreements.

NHS England through its regional teams will commission high quality localised advice regarding IG to support primary care contractors providing primary care essential services a registered list.

CCGs and their GP IT service delivery partners also have certain responsibilities, as described below.

### **Key principles:**

- NHS England will collaborate with the Information Governance Alliance to set national IG policy
- NHS England will ensure the provision of a local IG support service for primary care contractors providing primary care essential services to a registered list, including appropriate support for the management of IG and Information Security incidents.
- All parties are accountable for their compliance with all necessary IG laws and standards.

**Figure 7: Key Information Governance accountabilities and responsibilities**

GP IT Service Area	Accountable	Responsible
<b>Information Governance</b>	<p>NHS England is accountable as a Commissioner to seek assurance that patient information is handled appropriately and legitimately.</p> <p>GP practices are accountable for their compliance with all necessary laws and IG standards. In part, this can be demonstrated through attaining level 2 of the IG toolkit.</p>	<p>NHS England is responsible as the commissioner of GP services to ensure GP Practices handle patient records in an appropriate manner by adhering to standards and specifications and that GPs investigate and take appropriate action relating to all serious incidents.</p> <p>NHS England regional teams are responsible for commissioning a local IG support service as outlined in the <a href="#">Commissioning Specification: Information Governance Support for Primary Care Providers</a></p> <p>CCGs, when commissioning GP IT services, are responsible for ensuring that their GP IT delivery partner is IG Toolkit Level 2 compliant as a minimum and meets the other obligations below.</p> <p>GP IT delivery partners are responsible for maintaining compliance with the Any Qualified Provider (AQP) view of the IG Toolkit with Level 2 compliance as a minimum, including conforming to the rules around offshoring.</p> <p>GP IT delivery partners are responsible for ensuring their systems conform to information standards.</p> <p>GP IT delivery partners are responsible for enabling GPs, CCGs and NHS England to comply with their statutory obligations for example complying with subject access requests and Freedom of Information requests.</p>



GP IT Service Area	Accountable	Responsible
		<p>GP practices are responsible for completion of the IG Toolkit and attainment of Level 2 compliance with support from their IG Support Service.</p> <p>GP practices are responsible for the production, approval and maintenance of (and adherence to) their IG and IT security policies in terms of their own staff and their use of IT equipment, software and infrastructure in line with national requirements and guidance but adapted to local circumstances. The systems will need to comply with policies set by NHS England for the health service.</p> <p>GPs are responsible for reporting SIRIs to both the Strategic Executive Information System (STEIS) and via the IG toolkit SIRI reporting tool.</p>

**Figure 8: Detailed IG Responsibilities**

Process	NHS England IG Teams in Policy and Patients and Information Directorates working together	NHS England Regional DCO Teams	CCGs	GP Practice
<b>Reporting IG Serious Incidents Requiring Investigation (SIRIs)</b>	Will set operational policies and procedures relating to SIRIs, develop SRI reporting requirements in the IG toolkit and STEIS and governance of SIRIs.	Will support GP investigation into SIRIs with advice and guidance from NHS England (IG Toolkit).	Reporting any misuse of clinical systems in breach of local or national policy via STEIS and the IG team.	Must report any IG breaches, via STEIS and the IG Toolkit.
<b>IG Toolkit</b>	Will set requirements to be included within the IG Toolkit which is delivered by NHS Digital (HSCIC).	Contribute to IG Toolkit requirements and monitor compliance in their area.		Complete the GP view of the IG Toolkit and attain, as a minimum, Level 2 compliance.
<b>IG support services</b>	Will scope the IG support services that GP practices require.	Commission IG support services for general practice.		Uses the IG support service commissioned for them appropriately and follows its advice.

## 7.9 Data Security

A review of standards of data security for patients' confidential data across the NHS is underway. The National Data Guardian for health and care will contribute to this review by developing clear guidelines for the protection of personal data against which every NHS and care organisation will be held to account. Recommendations are anticipated on how the new guidelines can be assured through CQC inspections and NHS England commissioning processes.

## 7.10 Clinical Safety

Clinical safety is the responsibility of all, but fundamentally the responsibility for the safe use of health IT systems lies with GP practices. All those involved in the deployment and use of health IT systems must ensure adherence to the relevant national information standards, namely [SCCI0160](#)<sup>20</sup> (formerly ISB 0160) Clinical Risk Management: Its Application in the Deployment and Use of Health IT Systems, and [SCCI0129](#)<sup>21</sup> (formerly ISB 0129) Clinical Risk Management: its Application in the Manufacture of Health IT Systems.

A clinical safety assurance service will be commissioned by NHS England through its regional DCO teams to assure compliance with national standards.

CCGs and their GP IT service delivery partners also have certain responsibilities, as described below.

### Key principles:

- The safe use of health IT systems is a general responsibility of all involved in their use
- GP practices must ensure compliance with the relevant national standards with respect to the safe use of health IT systems. Note that it is not intended for every practice to employ a dedicated clinical safety officer, but where necessary practices should request the services of clinical safety assurance specialists commissioned by the regional DCO team within that locality
- GP IT delivery partners must ensure compliance with the relevant national standards with respect to the safe use of health IT systems

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<sup>20</sup> [SCCI0160 Clinical Risk Management: Its application in the deployment and use of health IT systems](#)

<sup>21</sup> [SCCI0129 Clinical Risk Management: Its application in the manufacture of health software](#)

- Suppliers must ensure compliance with the relevant national standards with respect to the manufacture of health IT systems.
- There is an expectation that local Clinical Safety services must include appropriate support for the management of Clinical Safety incidents (Information system related) within general practice.

**Figure 9: Key Clinical Safety accountabilities and responsibilities**

GP IT Service Area	Accountable	Responsible
<b>Clinical Safety</b>	GP practices are accountable for the safety of health IT systems in use by them.	All those involved in the deployment and use of health IT systems.

## 7.11 Primary Care IT Enabling Services

NHS England regional DCO teams are responsible for commissioning and managing the IT support services that support general practice as outlined in the Schedule of Services within Appendix C and will be funded accordingly from primary care IT funds.

### Key principles:

- Regional DCO teams will commission the necessary services, which support critical business functions, ensuring that coverage is sufficient and of high quality, across their entire geographic area for all primary care contractors
- Regional DCO teams will carry out regular review through the regional team assurance process to ensure continued appropriate levels of service have been commissioned. Recognising the importance of technology, NHS England is appointing additional Digital Technology resource within regional DCO teams.
- From time to time local projects may require special resource considerations, for example an increased demand for Registration Authority experts during the local rollout of national systems. The business as usual level of service commissioned by the regional DCO team should be able to cope with a certain demand for this type of activity (as decided by the regional DCO team during the commissioning process), but additional resource may be needed in some circumstances. For those programmes commissioned by CCGs, this resource will need to be factored into local plans with associated funding provided from GP IT funds.

**Figure 10: Key PCES accountabilities and responsibilities**

GP IT Service Area	Accountable	Responsible
<p><b>Primary Care IT Enabling Services</b></p>	<p>NHS England is accountable for the provision of Primary Care IT Enabling Services as outlined in the GP IT Operating Model.</p>	<p>NHS England regional DCO teams are responsible for commissioning appropriate Primary Care IT Enabling Services as outlined in the GP IT Operating Model.</p> <p>NHS England Patients and Information Directorate through its central and regional support, is responsible for ensuring that regional DCO teams have the relevant support to assist with the commissioning of Primary Care IT Enabling Services.</p> <p>CCGs are responsible for identifying, where appropriate, where there is insufficient resource to meet local needs in the delivery of Primary Care IT Enabling Services. This must be raised with the appropriate regional DCO team.</p>

**Figure 11: Detailed responsibilities for Primary Care IT Enabling Services**

Process	NHS England Patients and Information Directorate	NHS England regional DCO teams	NHS Digital (HSCIC)	GP Practices	GP IT Delivery Partner
Registration Authorities (RA) service	Provides strategic leadership for the local operating model and service level agreement to ensure NHS England is achieving best value for money.	<p>Commissions the service in line with national standards and sets service level agreements for an RA service for all primary care contractors providing primary care essential services to a registered patient list.</p> <p>Assures that arrangements are in place for other primary care contractors who have access to and are using national clinical IT systems.</p>	<p>Sets standards for suppliers, including the RA service schedule.</p> <p>Maintains and publishes RA policy and process guidance.</p> <p>Maintains and publishes the National Role Based Access Control Database (NRD).</p>	<p>Adherence to NHS Digital (HSCIC) RA policies and process guidance.</p> <p>GP practices approve the issue, revocation and management of smartcards for any access by individuals working in their practice to the clinical system.</p>	<p>Delivery of service including configuration, issuing and management of smartcards.</p> <p>Adherence to NHS Digital (HSCIC) RA policy.</p> <p>Maintain local RA policy and processes aligned to NHS Digital (HSCIC) RA policy and process guidance.</p> <p>Assurance of GP practices' adherence to RA Policy and processes. If assurance cannot be obtained, then the</p>

Process	NHS England Patients and Information Directorate	NHS England regional DCO teams	NHS Digital (HSCIC)	GP Practices	GP IT Delivery Partner
					issue is passed to the NHS England to resolve.
NHSmile administration and support service	As above	<p>Commissions the service in line with national standards and service level agreements for primary care contractors providing primary care essential services to a registered patient list.</p> <p>Authorises IT delivery partner to manage on its behalf.</p> <p>Assures that arrangements are in place for other primary care contractors who have access to and are using national clinical IT systems.</p>	Sets standards for suppliers.	Use of NHSmile service in line with IT security policies.	Delivery of service in accordance with national standards and service level agreements.

Process	NHS England Patients and Information Directorate	NHS England regional DCO teams	NHS Digital (HSCIC)	GP Practices	GP IT Delivery Partner
IG support services	The Data Sharing and Privacy Unit is responsible for developing IG guidance in collaboration with the Information Governance Alliance.	<p>Commissions the service in line with operating guidance and standards for primary care contractors providing primary care essential services to a registered patient list.</p> <p>Assures that arrangements are in place for other primary care contractors who have access to and are using national clinical IT systems.</p>	Maintains the Information Governance Toolkit.	Completion of GP Information Governance Toolkit with NHS IG requirements.	Delivery of service and support for general practice in compliance with IG requirements and completion of appropriate returns.
Clinical safety assurance service	Sets the standards and the assurance process for local commissioners.	Commissions the clinical safety and assurance service required to comply with SCCI0160 (formerly ISB 0160) for the deployment	Responsible for ensuring clinical system supplier compliance with SCCI0129 (formerly ISB 0129) for	Responsible for compliance with SCCI0160 (formerly ISB0160) governing implementation and safe use of health IT	Delivery of clinical safety assurance service. If assurance cannot be obtained, then the issue is passed to NHS England to resolve.



Process	NHS England Patients and Information Directorate	NHS England regional DCO teams	NHS Digital (HSCIC)	GP Practices	GP IT Delivery Partner
		<p>and use of health IT systems for primary care contractors providing primary care essential services to a registered patient list.</p> <p>Assures that arrangements are in place for other primary care contractors who have access to and are using national clinical IT systems.</p>	manufacturing of health IT systems.	systems for core and add-on services.	<p>Compliance with SCCI0160 (formerly ISB0160) governing implementation and safe use of health IT systems for core and mandated GP IT, enhanced and transformational primary care IT services.</p>

## 7.12 Other responsibilities

The following table covers various other accountabilities and responsibilities which are not covered elsewhere.

**Figure 12: Other responsibilities**

Process	NHS England	CCG	GP Practice	GP IT Delivery Partner
Digital Strategy	Set national vision and operational arrangements for the delivery of GP IT in consultation with other directorates across NHS England.	Appoint a designated accountable officer or CCIO to lead and develop local strategy and provide oversight of transformation of information and infrastructure for local health community.	<p>Support delivery of strategic initiatives to improve patient services as reinforced in the CCG Practice Agreement and supported by GP IT delivery partner and NHS Digital (HSCIC) as appropriate.</p> <p>Work with the CCG to support the NHS' strategic objectives and policies for information management and technology.</p> <p>Involve the Local Medical Committee in IT matters, as appropriate.</p>	May be commissioned to assist in the production and co-ordination of local digital strategy governed by the CCG.

Process	NHS England	CCG	GP Practice	GP IT Delivery Partner
Hardware Management	Will commission the development of standards setting, warranted environment and recommended hardware specifications for strategic and clinical systems.	Determine local strategy for hardware management.	Provision of suitable environment including physical security, air-conditioning and fire suppression, power supplies, PAT testing, funding local consumables (for example. printer ink and paper).	Coordinate agreed specifications where these are provided to more than one CCG in order to secure maximum value for money.
Local Data Backups	To recommend as part of hardware specifications for strategic and clinical systems.	Commission as specified in core and mandatory GP IT services.	Taking data backups (where applicable) is the responsibility of the practice unless otherwise agreed.	Provide services as commissioned.
Disaster Recovery and Business Continuity	No direct responsibility.	Commission a Disaster Recovery (DR) and Business Continuity (BC) support service as specified in core and mandatory GP IT services, ensuring that adequate review of	It is the responsibility of each practice to develop and maintain disaster recovery and business continuity plans.	Provide services as commissioned.

Process	NHS England	CCG	GP Practice	GP IT Delivery Partner
		<p>practice DR and BC plans takes place.</p> <p>The CCG shall also confirm its agreement to general practice DR and BC plans on behalf of NHS England, amended as agreed by the parties.</p>		
Systems to support individual general practices and which are not funded nationally or by the CCG.	No direct responsibility.	Authorise practice-based software and systems to operate on and interface with GP IT infrastructure.	<p>Must seek approval from CCG to install practice-based software on GP IT networks and infrastructure.</p> <p>Must commission systems and services from suppliers that comply with security and technical requirements of GP IT delivery partner.</p> <p>Fund additional infrastructure and support needed to support these systems if not already in</p>	<p>Enable general practice corporate systems to operate in the managed IT infrastructure subject to security and performance limitations and capacity of infrastructure.</p> <p>If required contract with GP practices to provide additional IT services to support general practice corporate systems.</p>

Process	NHS England	CCG	GP Practice	GP IT Delivery Partner
			place under core and add-on GP IT services.	
Changes to practice premises/property management	Any increase in the IT supported estate will require agreement between the commissioners of primary care (NHS England/CCG) and GP IT services (CCG), GP and the IT delivery partner.	The CCG must be involved where there are implications for the local provision of GP IT, supporting development of associated business case for individual estates projects, including consideration of resource and funding requirements in relation to GP IT.	<p>It is the responsibility of the general practice to seek authorisation from NHS England for funding to support new, expansion, mergers and any changes to premises including closures.</p> <p>This should include consideration of associated GP IT requirements.</p>	<p>Any IT related changes to premises must ensure the GP IT delivery partner is fully involved to ensure compliance with appropriate specifications.</p> <p>The CCG must be involved where there are implications for the local provision of GP IT.</p>

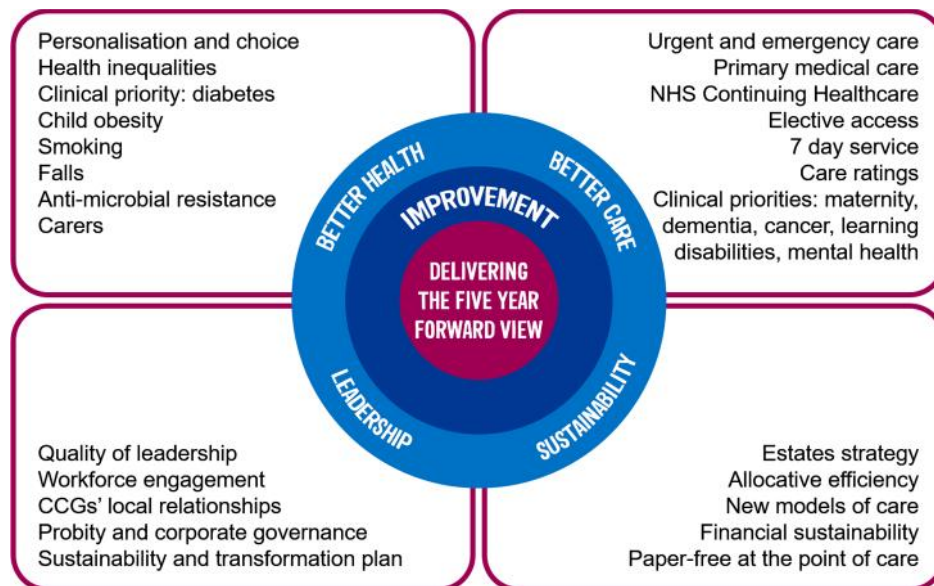
## 8. Improvement, assessment and assurance: CCG

### Improvement and Assessment Framework

For 2016/17 NHS England has introduced a new [CCG Improvement and Assessment Framework](#)<sup>22</sup> to replace both the existing CCG assurance framework and CCG performance dashboard. This new framework provides a greater focus on assisting improvement alongside NHS England's statutory assessment function. It aligns with The Five Year Forward View and planning guidance, with the aim of unlocking change and improvement in a number of key areas. This approach aims to reach beyond CCGs, enabling local health systems and communities to assess their own progress from ratings published online.

The Framework is intended as a focal point for joint work and support between NHS England and CCGs, and was developed with input from NHS Clinical Commissioners, CCGs, patient groups and charities. It draws together the NHS Constitution, performance and finance metrics and transformational challenges and will play an important part in the delivery of the Five Year Forward View and is summarised in the diagram below;

**Figure 13: Delivering the Five Year Forward View**



<sup>22</sup> [CCG Improvement and Assessment Framework](#)

## 8.1 Support and ways of working

A critical factor in the success of the new framework will be the quality of the relationships between the NHS England local teams and CCGs. We are in it together, with joint responsibility for helping each other transform and sustain the NHS. The purpose of engendering mutual assistance and taking timely action where needed, should be as valuable as the formal act of annual assessment.

A different way of working is also required between NHS England's local and regional teams and the national expert teams. This will take into account how national teams might be involved in local conversations and how local teams co-ordinate identified support requirements. As part of this process operational support tools will be developed to support CCGs and NHS England's local teams throughout the year to identify trends, outliers and enable drill-down into the CCG IAF indicators. The potential use of online tools will be explored to bring greater transparency to the process and to provide a common understanding of the data.

A discussion of current and future CCG support requirements will be initiated in the early part of 2016/17, using existing data and the year-end assessment of 2015/16. This will be refined as reporting on the indicators becomes available

The CCG IAF aligns with the "triple aim" driven by the Five Year Forward View, NHS Planning Guidance, and the Sustainability and Transformation Plans (STPs), of: (i) improving the health and wellbeing of the whole population; (ii) better quality for all patients, through care redesign; and (iii) better value for taxpayers in a financially sustainable system.

The CCG IAF has been designed to supply indicators for adoption in STPs as markers of success. Performance against these high level indicators is likely to stimulate CCG interest in gaining additional insight. The indicators, which are not expected to remain static, are grouped into four domains, including **sustainability**, under which the following digital indicators are placed:

**Figure 14: Digital Indicators**

Area:	Indicator Name:
<b>Paper-free at the point of care</b>	Local digital roadmap in place
	Digital interactions between primary and secondary care

## 8.2 Sustainability and Transformation Planning

It is anticipated that further insight will continue to be drawn from a range of alternative sources and supplementary indicators, where needed. NHS England's regions and commissioning operations will increasingly be responsible for supporting and catalysing local system transformation through the [Sustainability and Transformation Planning](#) process<sup>23</sup>.

Local Sustainability and Transformation Plans (STPs) are expected to provide key information on how CCGs will work towards delivering the transformation challenges set out in the Five Year Forward View, including the use of digital systems and technology to enable service transformation.

## 8.3 Digital Primary Care Maturity Assurance Model

The NHS Mandate highlights a number of technology goals for 2020 including:

- 95 percent of GP patients to be offered e-consultation and other digital services
- 95 percent of tests to be digitally transferred between organisations
- Support the delivery of NIB PHC2020, including Local Digital Roadmaps, improvements in digital maturity and achievement of a paper-free at the point of care NHS.

The Digital Primary Care Maturity Assurance Model will support CCGs to provide assurance against GP IT delivery arrangements as well as review local digital maturity within Primary Care IT. This will assure CCGs of their progress towards transformation in primary care as well as help identify areas requiring future investment and/or improvement to support the delivery of their local digital ambitions as outlined in Figure 15.

The tool provides an overview of a wide range of indicators, provided through the Digital Primary Care Maturity Assurance portal within the [Primary Care Web Tool](#)<sup>24</sup> and will provide local intelligence across the local primary care estate as well as supporting CCGs in their responsibilities relating to the local digital strategy, local digital roadmaps and Sustainable Transformational Plans.

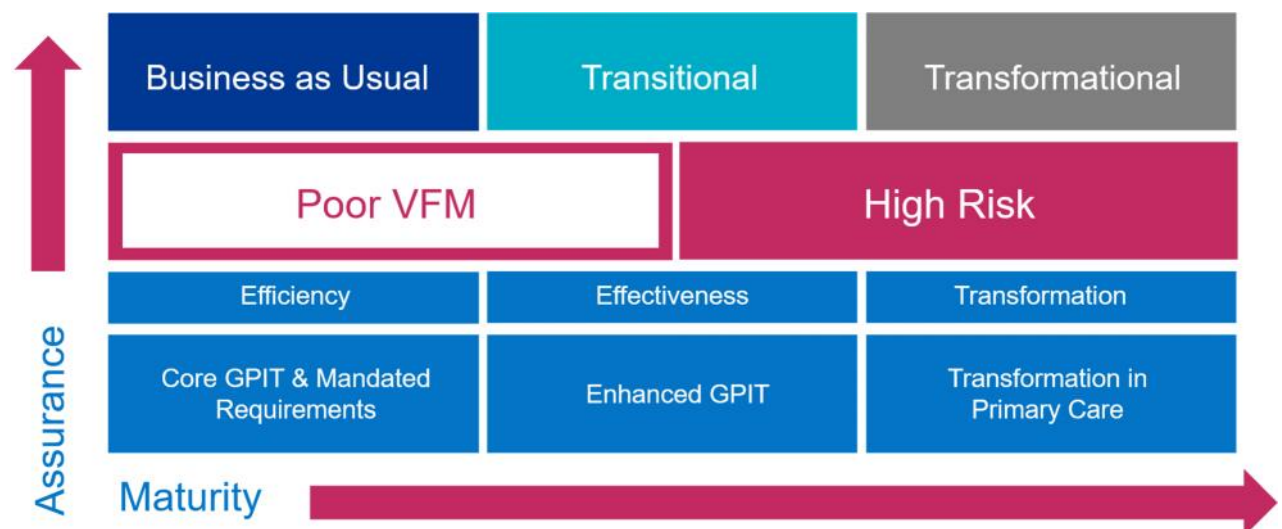
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<sup>23</sup> [Delivering the Forward View: NHS Planning Guidance 2016/17 – 2020/21](#)

<sup>24</sup> [Primary Care Web Tool](#)



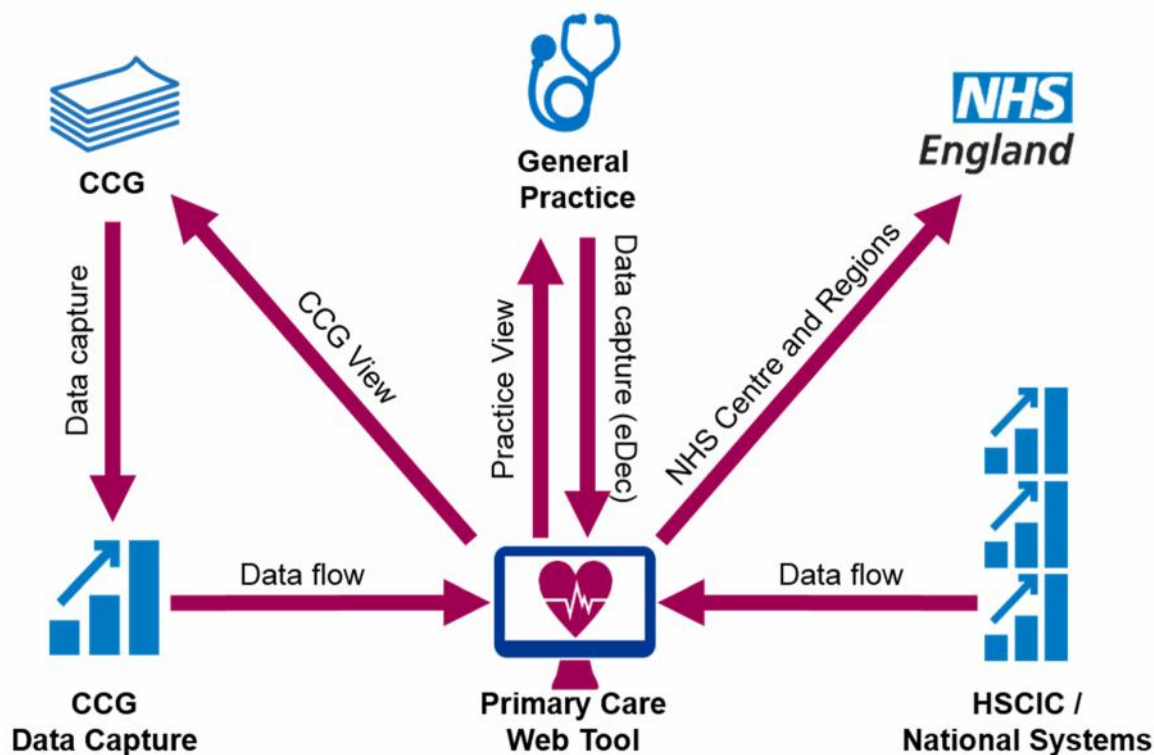
**Figure 15: The Digital Primary Care Maturity Assurance Model**



Data will be collected via a number of mechanisms in order to inform this view:

- GP Data – collected through the annual e-dec data collection
- National data collection/reporting – data will be drawn from a range of existing national data reporting routes, including HSCIC national programme monitoring, Tracking Database
- CCG Data – collected through CCGs on an annual basis

**Figure 16: Assurance Process**



The digital maturity indicators are listed in the appendices, and have, wherever possible, been mapped to appropriate contractual requirements, standards and/or good practice guidance.

The assessment criteria are aligned with the NHS Digital Maturity Index (for secondary care supporting Paper Free at Point of Access) and therefore could support a community wide digital maturity view over time.

Future transformation and innovation funding initiatives would have a digital maturity reference point to support any award assessment criteria.

## **8.4 Ongoing Development**

The metrics within the maturity assurance model will not remain static. The initial focus within the Digital Primary Care Maturity Assurance model, will be towards core and mandatory GP IT, with indicators focussed on capability rather than utilisation. This ensures that the necessary core building blocks are in place within general practice, on which to develop and sustain transformational change.

Over time a number of core and mandatory indicators will be retired and replaced with indicators for enhanced and transformation support and meaningful use.

All practices and all CCGs will have access to the data outputs. Simple drill down from national level to CCG and to individual practice level is available. Data is aggregated and presented through a number of classifications including national programmes, five high impact areas and Digital Maturity Index.

## 8.5 Benefits for stakeholders:

Figure 17: Benefits for stakeholders

Stakeholder	Investment in GP IT, GP clinical systems and national digital assets	Mandatory(contractual) obligations for GP IT	Improving primary care efficiency and effectiveness (incl. access)	Transformed primary care
<b>NHS England (national and regions)</b>	Assurance on use of central and delegated funds	Assurance on NHS obligations	Tracking strategic delivery and managing levers and incentives	Tracking strategic delivery and managing levers and incentives
<b>CCGs</b>	Supports local accountability for use of GP IT funds	Supports discharge of local accountability for GP IT	... and supports CCG responsibility for GP service quality	... and support planning and delivery tracking of local digital roadmaps
<b>General practice (individual and federations)</b>	Visibility and engagement in how GP IT funds are supporting general practices	Assurance and clarification of expectations and delivery	Supports practice development including primary care at scale and access trends	Supports new care model development and engagement in local digital investments

## 9. Where do I receive support?

NHS England's central GP IT team will work with CCGs and regional DCO teams to operationalise GP IT.

NHS England's regional Digital Technology teams are available to offer support with GP IT. Contact your regional head directly.

Associated supporting materials and guidance will be available through the [Digital Primary Care](#) website.

If you have any questions about these arrangements please contact:

[england.digitalprimarycare@nhs.net](mailto:england.digitalprimarycare@nhs.net)

## 10. References

1. General Practice Forward View
2. Securing Excellence in GP IT Services', 2nd Edition, published in April 2014
3. CCG Assurance Framework
4. CCG Improvement and Assessment Framework for 2016/17
5. The Government's Mandate to NHS England for 2016/17
6. Personalised Health and Care 2020. Using Data and Technology to Transform Outcomes for Patients and Citizens
7. GPSoC Framework
8. GPSoC How to Order Services
9. HSCN Programme
10. Five Year Forward View
11. Delivering the Forward View: NHS Planning Guidance 2016/17 – 2020/21
12. CCIO Network
13. NHS Commissioning Board Directions to Clinical Commissioning Groups (CCGs)
14. Delivering the Forward View: NHS Planning Guidance 2016/17 – 2020/21 Annex 3 to the Technical Guidance: Financial planning templates guidance for commissioners
15. Standing Financial Instructions
16. GP IT Capital Approval Process - Guidance and Expectations – 2015/16 (Only available on the NHS England Sharepoint site)
17. Commissioning Specification: Information Governance Support for Primary Care Providers
18. NHS England Business Case Approvals Process: Capital Investment, Property, Equipment and ICT
19. Better Care Fund Planning
20. SCCI0160 Clinical Risk Management: Its application in the deployment and use of health IT systems

21. SCCC1029 Clinical Risk Management: Its application in the manufacture of health software
22. CCG Improvement and Assessment Framework 2016/17
23. Delivering the Forward View: NHS Planning Guidance 2016/17 – 2020/21
24. Primary Care Web Tool

## 11. Glossary

Acronym where applicable	Term	Definition
<b>A&amp;E</b>	Accident and Emergency	A medical treatment facility specialising in acute care of patients who present without prior appointment
<b>APMS</b>	Alternative Provider Medical Services	This allows NHS England to contract with ‘any person’ under local commissioning arrangements.
<b>DCO</b>	Director of Commissioning Operations	Regional teams deliver commissioning responsibilities at a local level. The DCO is their leader and part of the regional Senior Management Team.
<b>BAU</b>	Business as usual	Refers to the level of IT products and services which are required to just maintain practice services at the current status quo.
<b>BC</b>	Business Continuity	The activity that ensures critical business functions will continue to operate despite serious incidents or disasters that might otherwise have interrupted them.
<b>BCF</b>	Better Care Fund	A single pooled budget for health and social care services to work more closely together in local areas, based on a plan agreed between the NHS and local authorities.
	Caldicott Standards	The Caldicott Standards are based on the Data Protection Act 1998 principles and set out in the form of Principles and relate to the use of patient identifiable data.
	Caldicott Guardian	The Caldicott Guardian is responsible for ensuring implementation of the Caldicott Principles with respect to patient-identifiable information.
<b>CAF</b>	CCG Assessment Framework	The framework focuses on a CCG’s performance in delivering improvements for patients, as well as



Acronym where applicable	Term	Definition
		assessment of its capability to deliver core and additional delegated responsibilities. This will be published by the end of March 2016.
<b>CCG</b>	Clinical Commissioning Group	Clinical commissioning groups will cover the whole of England and will be responsible for commissioning the majority of healthcare for their local population. They will work with partners including NHS England and local authorities, who have responsibility for commissioning areas such as specialised services, primary care and public health, to commission integrated care for patients.
<b>CCG IAF</b>	CCG Improvement and Assessment Framework	NHS England has a statutory duty to conduct an annual assessment of every CCG and is introducing a new Improvement and Assessment Framework for CCGs from 2016/17 onwards, to replace both the existing CCG Assurance Framework and separate CCG performance dashboard.
<b>CCIO</b>	Chief Clinical Information Officer	The CCIO role may vary across organisations and is normally suitable for a clinician with an interest in digital, with an understanding of the challenges around capturing clinical information at the point of care and sharing that information during the care process. CCIOs should champion the development, deployment, use and optimisation of digital systems.
<b>CESG</b>	Communications-Electronics Security Group	CESG is the National Technical Authority for Information Assurance within the UK providing a trusted, expert, independent, research and intelligence-based service on Information Security on behalf of UK government.
<b>COIN</b>	Community Of Interest Network	A network which may be of a logical, physical or a hybrid nature which connects a number of LANs and local end points together for the purposes data sharing. These networks are often within one or more Primary Care Trusts or Strategic Health Authorities. CoINs are synonymous with Metropolitan Area Networks (MAN)

Acronym where applicable	Term	Definition
<b>CSU</b>	Commissioning Support Unit	Commissioning Support Units provide services and products which help clinical commissioners achieve better outcomes. Commissioning Support Units have the expertise to support transformational change initiatives,
	Cyber Security	Refers to protection to systems from vulnerabilities, mitigating risks, and reacting to cyber security threats and attacks.
<b>DMI</b>	Digital Maturity Index	The aggregation of individual Digital maturity Self-Assessments into a Digital Maturity Index to enable a clear picture of the relative progress of one organisation against peers both regionally and nationally.
<b>DPA</b>	Data Protection Act 1998	The Data Protection Act 1998 (DPA) is the law that regulates the processing of information relating to individuals, including the obtaining, holding, use or disclosure of that information. Personal data is part of NHS England's records and requires management in the same way as other types of records created or held. As NHS England is a public authority, we are subject to the Code of Practice on Records Management issued under section 46 of the Freedom of Information Act 2000.
<b>DPC MA</b>	Digital Primary Care Maturity Assurance	A Digital Primary Care Maturity Assurance model is available to review digital maturity assurance within Primary Care IT. An outputs based view, which is derived from a wide range of indicators, is provided through a Digital Primary Care Maturity Assurance portal available within the Primary Care Web Tool.
<b>DR</b>	Disaster Recovery	Disaster Recovery (DR) is the process, policies and procedures that are related to preparing for recovery or continuation of technology infrastructure that are vital to an organisation after a natural or human-induced disaster. Disaster recovery focuses on the IT or technology systems that support business functions, as opposed to business continuity, which involves planning

Acronym where applicable	Term	Definition
		for keeping all aspects of a business functioning in the midst of disruptive events.
<b>DTS</b>	Data Transfer Service	DTS is a secure application-to-application messaging service used throughout the NHS.
<b>EPS</b>	Electronic Prescription Services	The Electronic Prescription Service is an NHS service that allows a GP to send prescriptions directly to a patient's chosen pharmacy. This means that patients can choose to have a paper-free prescription.
<b>FYFV</b>	Five Year Forward View	The NHS Five Year Forward View was published on 23 October 2014 and sets out a new shared vision for the future of the NHS based around the new models of care. It has been developed by the partner organisations that deliver and oversee health and care services including Care Quality Commission, Public Health England and NHS Improvement (previously Monitor and National Trust Development Authority).
<b>NHS e-RS (C&amp;B)</b>	NHS e-Referral Service (formally Choose and Book)	NHS e-Referral Service replaced Choose and Book in 2015. This service is used to manage all appointments referred to secondary care from primary care.
<b>GMS</b>	General Medical Services	The range of healthcare that is provided by General Practitioners. This is a local contract agreed between NHS England and the practice, together with its funding arrangements. This is a nationally directed contract between NHS England and a practice.
<b>GP</b>	general practice	General practice (GP) General practitioners (GPs) treat all common medical conditions and refer patients to hospitals and other medical services for urgent and specialist treatment. They focus on the health of the whole person combining physical, psychological and social aspects of care.

Acronym where applicable	Term	Definition
<b>GPES</b>	general practice Extraction Service	A centrally managed service that extracts information from general practice IT clinical systems for a wide range of purposes. It also forms part of the new process for providing payments to GPs and clinical commissioning groups (CCGs).
<b>GP IT</b>	general practice Information Technology	The digital systems and services accessible to, and used by practices to deliver services to patients.
<b>GPSoC</b>	GP Systems of Choice	GP Systems of Choice is a programme through which the NHS funds the provision of GP clinical IT systems in England.
<b>GP2GP</b>	GP2GP	GP2GP is a project that enables the Electronic Health Record (EHR) of a patient to be transferred securely and directly to a new practice when the patient registers at that practice.
	Hardware refresh	Computer hardware ages over time and needs to be replaced; this is the term used for the refresh process.
<b>NHS Digital (HSCIC)</b>	Health and Social Care Information Centre	<p>The national provider of information, data and IT systems for commissioners, analysts and clinicians in health and social care.</p> <p>NHS Digital (HSCIC) is an executive non-departmental public body, sponsored by the Department of Health.</p>
<b>HSCN</b>	Health and Social Care Network	<p>The Health and Social Care Network provides a reliable, efficient and flexible way for health and care organisations to access and exchange electronic information.</p> <p>The programme was established in July 2014 to manage the exit from the existing N3 contract (which expires in March 2017) and to provision successor network services capable of supporting the health and social care system.</p>

Acronym where applicable	Term	Definition
<b>IG</b>	Information Governance	The set of multi-disciplinary structures, policies, procedures, processes and controls implemented to manage information.
	Informed customer	Informed customer for IT, ensuring that local decision-making about procuring new systems delivers value for money for patients.
<b>IP telephony</b>	Internet Protocol telephony	IP telephony is a general term for the technologies that use the Internet Protocol's packet-switched connections to exchange voice, fax, and other forms of information that traditionally have been carried over the dedicated circuit-switched connections of the public switched telephone network.
	IT Delivery Partner	IT delivery partners are contracted organisations procured by CCGs and/or CSUs to deliver IT services for GP Practices against clearly defined service level agreements and KPIs.
<b>KPI</b>	Key Performance Indicator	A set of quantifiable measures used to gauge or compare performance in terms of meeting their strategic and operational goals
<b>ISB</b>	Information Standards Board (no longer in existence)	No longer in existence, the Information Standards Board for Health and Social Care (ISB) previously approved information standards for implementation in English health and care. Responsibility for the recommendation for approval of information standards has now transferred to the Standardisation Committee for Care Information (SCCI).
<b>LDR</b>	Local Digital Roadmap	Local health economies are required to produce Local Digital Roadmaps detailing the actions they will take to deliver the ambition of being paper-free at the point of care by 2020. Local Digital Roadmaps will generate momentum and drive transformation across local health economies, inform local investment priorities and support local benefit realisation strategies.

Acronym where applicable	Term	Definition
<b>LHC</b>	Local Health Community	Local Health Communities are New Models of Care wrapped around local people, spanning across all health and social care services. They are often made up of a number of service providers from health and social care and third sector organisations to deliver service to residents in the area.
<b>LPF</b>	Lead Provider Framework	The Lead Provider Framework (LPF) enables Clinical Commissioning Groups (CCGs), NHS England and other customers to source some or all of their commissioning support needs, ranging from transactional back office support services to more bespoke services that support local and large scale transformational change projects.
<b>LSP</b>	Local Service Provider	The LSP contracts deliver critical systems and services to the NHS.
<b>MCP</b>	Multispecialty Care Providers	MCPs are made up of different health professionals including GPs, nurses, community health services and hospital specialists. Following a rigorous selection process, a number of Multispecialty Care Providers have been designated as vanguards and will move specialist care out of hospital and into the community.
<b>MIU</b>	Minor Injuries Unit	Minor Injury Units treat patients whose injuries are not critical and do not need to go directly to A&E
<b>N3</b>	National Network for the NHS (N3)	N3 is the national broadband network for the English NHS, connecting all NHS locations and 1.3 million employees across England.
<b>NIB</b>	National Information Board	The role of the National Information Board is to put data and technology safely to work for patients, service users, citizens and the professionals who serve them. The NIB brings together national health and care organisations from the NHS, public health, clinical science, social care and local government, along with

Acronym where applicable	Term	Definition
		appointed independent representatives to develop the strategic priorities for data and technology.
	Order Communications	Electronic requesting and viewing of pathology and radiology tests and diagnostics.
<b>PACS</b>	Primary and Acute Care Systems	Primary and Acute Care Systems join up GP, hospital, community and mental health services to break down barriers and free up the redesign of care around the needs of different patient groups.
<b>PCES</b>	Primary Care IT Enabling Services	These are fundamental services provided to Primary Care contractors providing primary care essential services to a registered patient list, which are directly funded and commissioned by NHS England Regional DCO teams. Service provision includes Registration Authority Support Services, IG Support, Services, Clinical Safety Officer Support, NHS Mail Administration Support.
<b>PCTF</b>	Primary Care Transformation Fund	The Primary Care Transformation (formerly Infrastructure) Fund is a multi-year £1billion investment programme to help general practice make improvements, including in premises and technology
<b>PF@POC</b>	Paper Free at the Point of Care	Paper free at the point of care means that all authorised care givers can access a patient's relevant digital records when and where they need them.
<b>PMS</b>	Personal Medical Services	PMS is a locally agreed alternative to General Medical Service (GMS) for providers of general practice. This is a local contract agreed between NHS England and the practice, together with its funding arrangements.
<b>PT</b>	Penetration Testing	PT is a planned and 'friendly' (non-destructive) attack on a computer system with the intention of identifying security weaknesses.

Acronym where applicable	Term	Definition
<b>RA</b>	Registration Authority	The roles and responsibilities of Registration Authorities are defined by NHS policy. In Public Key Infrastructure (PKI) terms there is a single Registration Authority (NHS Digital (HSCIC)). All organisations which run a local Registration Authority do so, on a delegated authority basis from NHS Digital. The RA within the local governance structure must ensure that all aspects of Registration Authority services and operations are performed in accordance with the NHS Digital (HSCIC) RA policy. The local Registration Authority ensures that individuals providing healthcare services to the NHS directly, or indirectly, have access to the Spine enabled applications and information in accordance with their role.
<b>RBAC</b>	Role Based Access Control	RBAC is the process through which a national set of job roles, activities and workgroups can be applied to grant users access to functionality and indirectly to data within NHS national (Spine) services.
<b>SCCI</b>	Standardisation Committee for Care Information	The Standardisation Committee for Care Information oversees the development, assurance and approval of information standards, data collections and data extractions. Membership is drawn from a wide range of national bodies and organisations involved in the provision and management of health and care services in England. This ensures a system-wide, joined up approach to decision making. SCCI meets on a monthly basis and all its meeting papers are made available online.
<b>SCR</b>	Summary Care Record	The Summary Care Record is an electronic record used to support patient care. The SCR is a copy of key information from a patient's GP record, such as medication, allergies and adverse reactions. It provides authorised healthcare staff with faster, more secure access to essential patient information.



Acronym where applicable	Term	Definition
<b>SFI</b>	Standing Financial Instructions	These identify the financial responsibilities that apply to everyone working for the Authority. The user of Standing Financial Instructions must take into account relevant prevailing Department of Health and/or Treasury instructions. The Director of Finance must approve all financial procedures.
<b>SLA</b>	Service Level Agreement	Contract between a service provider and a customer. It details the nature, quality, and scope of the service to be provided. Also called service level contract.
	Spirometry	Spirometry is the most common of the pulmonary function tests, a complete evaluation of the respiratory system including patient history, physical examinations, chest x-ray examinations, arterial blood gas analysis, and tests of pulmonary function.
<b>STF</b>	Sustainability and Transformation Fund	The NHS Spending Review provided dedicated funding streams for transformational change, which will form part of a new wider national Sustainability and Transformation Fund. This will support initiatives including the spread of new care models, primary care access and infrastructure, technology roll-out, and clinical priorities.
<b>STP</b>	Sustainability and Transformation Plans	Local health and care blueprints for accelerating implementation of the Forward View.
<b>UPS</b>	Uninterruptible Power Supply	A power supply with battery backup, that incorporates safe automatic power-down in the event of power loss
<b>VDI</b>	Virtual Desktop Interface / Infrastructure	The practice of hosting a desktop operating system within a virtual machine (VM) to access from a variety of devices.
<b>VPN</b>	Virtual Private Network	Data traffic that is "tunnelled" through a less secure physical network (often a wide area network). Data on a VPN is encrypted to ensure end-to-end security.

## 12. Appendix A – Developing the Informed Customer

### Function

It is important that those responsible for general practice IT investment clearly understand why they are investing and what they are investing in. A CCG which has effective “informed customer” capability will:

- **Take ownership of the strategic IT direction** relevant to primary care delivery across their locality
- Ensure local business strategies and service redesign programmes are **aligned** with NHS England IT strategies to ensure that GP IT is an effective enabler for service improvement which allows CCGs to achieve business objectives. This will include aligning stakeholder partners and facilitating collaboration where appropriate
- Set clear service expectations (through specifications) for strategic partners by clearly **specifying local requirements** in the form of a specification and supporting Service Level Agreements to ensure local delivery partners are clear on service needs
- **Ensure value for money** through the negotiation and contracting of services with effective use of national frameworks and procurement mechanisms in accordance with NHS England procurement rules
- Establish effective governance and accountability arrangements which **effectively engage strategic partners** and hold delivery partners to account for their services, which will be measured against well-defined and agreed Key Performance Indicators (KPIs)
- Manage risks effectively and issues in accordance with system-wide procedures to help **ensure the safe and successful delivery of outcomes** associated with IT investment.

### 13. Appendix B – Schedule of Services Category Definition

Service Category	Definition of Service Category	Supporting Notes
Core and Mandatory GP IT services	<p>Technologies, systems and support services required to deliver Primary Care Essential Services (i.e. registered list based) and (contractually) mandated services and compliance. Also enablement of mandated requirements beyond general practice where general practice is an essential component of mandated solution.</p> <p>These are the fundamental services to be commissioned by CCGs, for GP practices, to enable the effective delivery of health and care. A detailed service schedule of 'core' service provision at a local level is to be included within the appendices of the nationally agreed CCG-Practice Agreement, to ensure GPs are aware of local service provision arrangements.</p> <p>Core and mandated GP IT services will be the first call on GP IT revenue funding that will be provided as part of annual CCG baseline allocations.</p>	<p>Includes:</p> <p>GP IT enabling requirements, including clinical systems, support services/functions and associated infrastructure needed to support the delivery of primary care essential services (registered list based) under GMS, PMS and APMS contractual arrangements.</p> <p>GP IT accountability requirements including mandated utilisation of and integration with national systems for example spine, DTS, GP2GP, SCR, Patient Online.</p> <p>Mandated digital services where GP services form an essential component of delivery for example. e-Discharge.</p> <p>GP Practices should be able to quickly and easily to determine which core and mandated services have been commissioned on their behalf.</p>

Service Category	Definition of Service Category	Supporting Notes
Enhanced Primary Care IT	<p>Technologies, systems and support services which enable and improve efficiency and effectiveness of general practice including primary care at scale.</p> <p>These are discretionary primary care IT services that are developed and agreed locally to support local strategic initiatives and commissioning strategies to improve service delivery.</p> <p>Investments in enhanced primary care IT should support the CCG(s) local digital strategy and Local Digital Roadmap and where possible, strategic rather than tactical solutions should be developed.</p> <p>Funding for enhanced primary care IT may come from a variety of sources, including but not limited to GP IT monies/CCG allocations, once core and mandated GP IT services are provisioned, transformation or GP Access Funds, local business case development and/or direct CCG/GP practice funding.</p>	<p>Broadened from GP IT to primary care IT - to take account of primary care at scale.</p> <p>Focussed on improving efficiency and effectiveness:</p> <p>Optimising existing systems and/or infrastructure, including interoperability opportunities, efficiency release</p> <p>Innovative and effective approaches that will better support changes in delivery of primary care services</p> <p>Supporting 7 day week and extended hours working</p> <p>Supporting practice collaborative/at scale models for example. Confederated working, GMS Plus/medical home models, as these develop.</p> <p>N.B. Excludes full shared care models across care settings (Transformation)</p>
Transformational Primary Care IT	Technologies, systems and support services which enable new models of care, service integration,	Primary care IT that involves significant business change/channel shift.

Service Category	Definition of Service Category	Supporting Notes
	<p>wider GP functions, MCP and PACS organisational models.</p> <p>These are discretionary primary care IT services that are developed and agreed locally to support local strategic initiatives and commissioning strategies to improve service delivery.</p> <p>Investments in transformational primary care IT should support the CCG(s) local digital strategy and Local Digital Roadmap and where possible, strategic rather than tactical solutions should be developed.</p> <p>Funding for transformational primary care IT may come from a variety of sources, including but not limited to GP IT monies/CCG allocations, once Core and Mandated GP IT services are provisioned, transformation or GP Access Funds, local business case development and/or direct CCG/GP practice funding.</p>	<p>New or additional systems, services or infrastructure, that will enable integration of health and care and delivery of new and innovative healthcare models, where multiple organisations across care settings are working with general practice to share patient care, including:</p> <ul style="list-style-type: none"> <li>• Primary and acute care delivery models (PACs)</li> <li>• Multispecialty Care Providers (MCPs)</li> <li>• Integrated health and care models</li> </ul> <p>Patient active contribution to their record and electronic care planning.</p>
Primary Care IT Enabling Services (Commissioned by NHS England)	<p>These are fundamental support services provided to primary care contractors providing primary care essential services to a registered patient list, under GMS, PMS or APMS contractual arrangements that are directly funded and commissioned by NHS England regional teams.</p>	<p>NHS England regional DCO teams are responsible for commissioning primary care IT enabling services as outlined within this operating model.</p>

Service Category	Definition of Service Category	Supporting Notes
	<p>Service provision includes:</p> <ul style="list-style-type: none"> <li>• Registration Authority Support services</li> <li>• IG support services</li> <li>• Clinical Safety Officer support</li> <li>• NHS Mail administration support</li> </ul>	
General practice business support systems	<p>Systems and services which a practice may utilise for business purposes, which are not directly related to patient care.</p> <p>N.B. The 'Global Sum' within the General Medical Services (GMS) contract (and PMS/APMS equivalent) makes provision for practice expenses including staff costs and general running costs of the practice (stationery, telephone, heating and lighting, repairs and maintenance).</p> <p>With evolving primary care delivery models, local service/support arrangements may develop that incorporate aspects of service provision that would traditionally have been considered GP business support functions to be directly funded by the practice under GMS (and PMS/APMS equivalent) contractual arrangements.</p>	<p>The majority of GP business support systems should be considered out of scope where they are:</p> <ul style="list-style-type: none"> <li>• Services already funded elsewhere</li> <li>• Business running costs eg consumables</li> <li>• Internal business support systems, not part of clinical service delivery eg payroll, HR, estate management.</li> </ul> <p>These services should routinely be assumed to be out of scope, unless local business cases can demonstrate patient benefit, in which case, when considering funding any of these services, CCGs should take account of whether this service is already funded via alternative routes eg global sum (GMS, PMS or APMS) contract.</p>

Service Category	Definition of Service Category	Supporting Notes
	<p>Where there is demonstrable benefit of incorporating elements of GP business support services eg telephony/Voice Over IP as part of broader efficiency release and improved patient care initiatives, GP contributions are to be considered as part of local funding provision/business case arrangements.</p>	

## 14. Appendix C – Schedule of Services GP IT

Service name	Service summary (scope)	Digital Maturity Assessment reference	Service category	Service description (What does the commissioner have to do? How is this delivered?)
GP IT Support Service Desk	<p>GP IT support service desk for all users which provides:</p> <ul style="list-style-type: none"> <li>• Triage</li> <li>• Incident management</li> <li>• Problem management</li> <li>• Request management</li> <li>• SLA reporting</li> <li>• Business continuity and critical incident management</li> </ul>	26, 28	Core and mandated GP IT services	<p>The local SLA is based upon an agreed supported IT device volume.</p> <p>An ITIL aligned or equivalent, management process for:</p> <ul style="list-style-type: none"> <li>• Incidents</li> <li>• Problems</li> <li>• Requests</li> </ul> <p>Service specification and performance standards documented and agreed. The following industry standards are applicable and where relevant, should be incorporated when agreeing the SLA:</p> <ul style="list-style-type: none"> <li>• ISO 20000 – IT Service Management Standard (previously BS 15000)</li> <li>• ISO 9000 series – Quality Management Systems (previously BS 5750)</li> </ul> <p>Consistent service availability for core GMS contracted hours, as detailed in the GMS contract (08:00 - 18:30, Monday to Friday, excluding Bank Holidays)</p> <p>Access channels - there must be:</p>



Service name	Service summary (scope)	Digital Maturity Assessment reference	Service category	Service description (What does the commissioner have to do? How is this delivered?)
				<ul style="list-style-type: none"> <li>• A single telephone number for logging calls</li> <li>• A single email address for logging calls</li> <li>• A web portal for logging and managing calls.</li> </ul> <p>It must be possible to log a call using at least one of these methods 24 hours a day, 7 days a week.</p> <p>The service must have clear and agreed priority incident categories, with minimum response and target fix times to ensure the safe and effective operation of GP digital services.</p> <ul style="list-style-type: none"> <li>• All calls are prioritised to the agreed standard, in conjunction with the person reporting the incident.</li> <li>• A minimum standard should be agreed for percentage of incidents resolved on first contact or within an agreed timeframe from call logging.</li> <li>• Where 3rd party support is required for incident or problem management, there is a robust and effective resolution plan in place with agreed responsibilities.</li> </ul>
IT Support for 7 Day and Extended Hours Services	GP IT support service, supporting general practices provides, when	91	Enhanced primary care IT	<p>Service provision should be agreed at an appropriate level within the SLA, for safe and effective delivery of these GP services.</p> <p>Options for service delivery could include:</p>

Service name	Service summary (scope)	Digital Maturity Assessment reference	Service category	Service description (What does the commissioner have to do? How is this delivered?)
	<p>offered, the following services:</p> <ul style="list-style-type: none"> <li>Extended hours (DES) services to patients</li> <li>7 day week services to patients</li> </ul>			<ul style="list-style-type: none"> <li>An urgent business critical break-fix only service is available outside GMS core hours to support practices</li> <li>A restricted service is available outside GMS core hours to support practices</li> <li>A full service is available outside GMS core hours to support practices</li> </ul> <p>The commissioner should ensure, with the support of their IT provider, that where 3rd party support outside GMS core hours is required for incident or problem management, there is a robust and effective resolution plan in place.</p>
IT Security Service	IT security management and oversight, including configuration support, audit, investigation and routine monitoring, relevant to the infrastructure and services provided	29	Core and mandated GP IT services	<p>Service provision should be agreed at an appropriate level and capacity within the SLA, to include the following:</p> <ul style="list-style-type: none"> <li>Adherence to the appropriate security guidance, including principles of information security and the 'Information Security Management: NHS Code of Practice':</li> </ul> <p><a href="#">NHS Digital Principles of Information Security</a></p> <p><a href="#">NHS Codes of Practice and Legal Obligations</a></p> <ul style="list-style-type: none"> <li>All necessary IT security evidence to support IGT requirements for general practice</li> </ul>

Service name	Service summary (scope)	Digital Maturity Assessment reference	Service category	Service description (What does the commissioner have to do? How is this delivered?)
	through this schedule.			<ul style="list-style-type: none"> <li>• Audit and investigative services</li> <li>• Specialist consultancy</li> </ul> <p><b>Cyber security:</b></p> <ul style="list-style-type: none"> <li>• Demonstrate alignment with industry best practice ie the Cyber Essentials scheme which provides independent assessment of the security controls in place. The scheme forms part of the UK's cyber security strategy, with suppliers tested on whether they can mitigate risks from internet-borne threats on end-user devices including PCs, laptops, tablets and smartphones, as well as from email, web and application servers.</li> <li>• Review local cyber security measures as a minimum annually.</li> </ul> <p>The following industry standards are applicable and where relevant, should be incorporated when agreeing the SLA:</p> <ul style="list-style-type: none"> <li>• ISO 270001 for Information Security Management (previously BS 7799)</li> <li>• NHS Information Governance Toolkit (level 2)</li> </ul> <p>All shared infrastructure should have CESG CHECK approved penetration testing carried out at least once every 12 months.</p>

Service name	Service summary (scope)	Digital Maturity Assessment reference	Service category	Service description (What does the commissioner have to do? How is this delivered?)
				<p>Service provision arrangements will need to reflect future NHS recommendations.</p> <p>N.B. A review of standards of data security for patients' confidential data across the NHS is underway, with recommendations anticipated on how the new guidelines can be assured through CQC inspections and NHS England commissioning processes.</p>
Core Infrastructure Service	<p>Should include:</p> <ul style="list-style-type: none"> <li>Networking services, including Health and Social Care Network (HSCN) connectivity once available and N3 connectivity prior to that, as well as network supporting</li> </ul>		Core and mandated GP IT services	<p>Provision, maintenance and technical support of the necessary infrastructure to deliver core GP IT Services, to include:</p> <p>Network connectivity and access to core GP IT services at point of care.</p> <p>Networking services:</p> <ul style="list-style-type: none"> <li>Management and support for provision of HSCN (Health and Social Care Network) connectivity, once available, and N3 connectivity prior to that, including connections to main and branch practice sites as per national entitlement.</li> <li>Local network services, including equipment, cabling and support.</li> </ul>

Service name	Service summary (scope)	Digital Maturity Assessment reference	Service category	Service description (What does the commissioner have to do? How is this delivered?)
	<p>infrastructure eg equipment and cabling</p> <ul style="list-style-type: none"> <li>File management, data storage and hosting services</li> </ul>			<p>File management, data storage and hosting services for core services:</p> <ul style="list-style-type: none"> <li>Provide access to a secure, resilient off site data storage facility for all practice data required for delivery of clinical services, other than that held in externally hosted applications such as GPSoC clinical systems and NHS Mail, to a standard not less than tier 3 data centre. Examples include clinical documents eg multi-disciplinary Team discussions/clinical case reviews/referral management reviews, clinical protocols etc.</li> </ul> <p>The GP IT delivery partner and any subsidiary service and infrastructure provided will operate to any prevailing NHS security standards, including Information Governance Toolkit or equivalent industry standard.</p> <p>Maximum use should be made of best practice to reduce costs and increase efficiency such as server virtualisation and storage area networks.</p>
Enhanced Infrastructure	<p>May include:</p> <ul style="list-style-type: none"> <li>Networking services,</li> </ul>	31	Enhanced Primary Care IT	Networking Services:

Service name	Service summary (scope)	Digital Maturity Assessment reference	Service category	Service description (What does the commissioner have to do? How is this delivered?)
	<p>including additional HSCN services or top up N3 services prior to the introduction of HSCN services and local Community Of Interest Network (COIN)</p> <ul style="list-style-type: none"> <li>• Network supporting infrastructure eg equipment and cabling</li> <li>• Enhanced or alternative architectures</li> </ul>			<ul style="list-style-type: none"> <li>• Management and support for provision of additional HSCN services or top up N3 services prior to the introduction of HSCN services</li> </ul> <p>Where COINs are a feature of local digital primary care infrastructure, the use of GP IT allocated funds, to support these, needs to consider the following:</p> <ul style="list-style-type: none"> <li>• Where the COIN is used to support GP IT there is a clear requirement for this in addition to centrally funded N3 services or successor HSCN connectivity</li> <li>• Where the COIN is shared between providers, the costs need to be appropriately proportioned</li> <li>• Where the COIN is used to support GP IT, the network must have sufficient bandwidth, low latency and low contention ratio to support the necessary services</li> </ul> <p>N.B. The cost of COINs which are cross care settings should be shared with those care settings.</p> <ul style="list-style-type: none"> <li>• Local network services, including equipment, cabling and support associated with top up of N3 and local COIN</li> </ul> <p>Enhanced or alternative architectures including:</p> <ul style="list-style-type: none"> <li>• Virtual Desktop Interface (VDI)</li> </ul>

Service name	Service summary (scope)	Digital Maturity Assessment reference	Service category	Service description (What does the commissioner have to do? How is this delivered?)
				<ul style="list-style-type: none"> <li>• Citrix Access Gateway (CAG)</li> <li>• Smartcard/Remote Secure Access Token authentication</li> <li>• Single sign on</li> <li>• Bring Your Own Device (BYOD)</li> </ul>
Estates Strategy Service	Provision of advice and guidance to support the development of GP IT estate relevant to the provision of IT services and systems		Core and Mandated GP IT Services	<p>Service provision should be agreed at an appropriate level and capacity within the SLA, to include the following:</p> <ul style="list-style-type: none"> <li>• Advice on IT infrastructure requirements and standards</li> <li>• Identify, as required, suppliers for IT infrastructure and external services (for example. HSCN connectivity or N3 connectivity prior to the introduction of HSCN services)</li> <li>• Support development of associated business case for individual estates projects, including consideration of resource and funding requirements</li> <li>• Advice and guidance should include consideration of transformation opportunities, enhanced GP IT services and local digital strategy</li> </ul> <p>Any increase in the IT supported estate will require agreement between the commissioners of primary care (NHS England/CCG) and GP IT services (CCG), GP and the IT delivery partner.</p>

Service name	Service summary (scope)	Digital Maturity Assessment reference	Service category	Service description (What does the commissioner have to do? How is this delivered?)
				The resourcing and funding for individual estate development projects should be incorporated into the overall business case for that development.
Local Device Maintenance and Support Service including Clinical Server Support	<p>A comprehensive desktop device support service, which includes provision and maintenance of the supported desktop estate.</p> <p>Provision and technical support of any necessary local clinical servers.</p>	14, 15, 58	Core and mandated GP IT services	<p>The local SLA is based upon an agreed desktop estate volume.</p> <p><b>IT Equipment:</b></p> <ul style="list-style-type: none"> <li>• The GP IT infrastructure estate supporting core GP IT includes desktop, server equipment, as appropriate to meet GPSoC and GP IT Operating Framework requirements</li> <li>• There should be an agreed desktop Warranted Environment Specification (WES) which as a minimum, meets the national WES and the relevant GPSoC clinical system WES</li> <li>• User workstations must be locked down and well managed, with advanced tools, processes and policies in place to support diagnosis, repair and updates. Users must not be able to install unlicensed and unauthorised software or change critical settings. Unsupported (by software supplier) browsers, Operating Systems and business or clinical critical software must not be used on managed equipment</li> </ul>



Service name	Service summary (scope)	Digital Maturity Assessment reference	Service category	Service description (What does the commissioner have to do? How is this delivered?)
				<p><b>Computers/Workstations:</b></p> <ul style="list-style-type: none"> <li>• Installation and support of all computers and peripheral equipment related to core GP IT services</li> <li>• Installation and support of all approved standard software and applications</li> <li>• Anti-virus and malware protection, access management and port control on all active desktop devices</li> <li>• Encryption to NHS standards on all mobile/portable devices as outlined in guidance on the implementation of encryption within NHS organisations (NHS Digital (HSCIC)):</li> </ul> <p><a href="#">Guidance on the implementation of encryption within NHS organisations</a></p> <p><a href="#">Principles of Information Security</a></p> <ul style="list-style-type: none"> <li>• Defined and documented standardised desktop image(s), with a formal change control management system</li> <li>• Remote desktop support management available to 100% of workstations</li> <li>• Compliance testing and installation of standard software products</li> </ul>

Service name	Service summary (scope)	Digital Maturity Assessment reference	Service category	Service description (What does the commissioner have to do? How is this delivered?)
				<ul style="list-style-type: none"> <li>Compliance testing of software upgrades with NHS national systems/products</li> </ul> <p><b>Local servers:</b></p> <p>Where local clinical servers are required as part of the GPSoC principal clinical solution, these will be secure, maintained and in line with clinical system vendor(s) Warranted Environment Specification (WES). These will be physically and technically secured, backed up where persistent clinical data is held and have a protected power supply. Where there are local back up media, this is the responsibility of the practice. Backup media must be stored in an appropriate environment and tested periodically to ensure that data is recoverable. An appropriate storage environment for backup media will comprise a fire proof safe, preferably at an offsite location, but certainly somewhere other than the server room if the backup must be stored in the same building. Backup media from the previous evening should be removed and placed into safe storage the following morning. The integrity of backup media for local GPSoC principal clinical systems must be regularly validated (quarterly) and media should be replaced when faulty and not less often than every three years. This cost of</p>

Service name	Service summary (scope)	Digital Maturity Assessment reference	Service category	Service description (What does the commissioner have to do? How is this delivered?)
				<p>backup media for core GPSoC clinical systems is included within this service.</p> <p><b>Refresh Programme:</b></p> <p>The CCG will have a budgeted plan for core GP IT equipment refresh which includes: desktop PCs, monitors, scanners, smartcard readers, barcode readers, printers including dual bin feed printers for consulting rooms where necessary.</p> <ul style="list-style-type: none"> <li>• The CCG will ensure a continual refresh programme which identifies and replaces hardware where it has reached its service life</li> <li>• A local IT refresh and replacement plan will define equipment standards, availability for practices (where appropriate by practice type, size, clinical system etc) and target service life by equipment category</li> <li>• The refresh service will include assessment, procurement, rollout, asset tracking and secure disposal (see "Asset Management and Software Licencing Service")</li> </ul> <p><b>N.B. The practice is responsible for:</b></p> <ul style="list-style-type: none"> <li>• Consumables</li> </ul>

Service name	Service summary (scope)	Digital Maturity Assessment reference	Service category	Service description (What does the commissioner have to do? How is this delivered?)
				<ul style="list-style-type: none"> <li>Physical security and environmental requirements (eg air-conditioning and fire suppression) and power supply for GP IT equipment on GP practice premises</li> </ul>
Remote access to the clinical system at the point of care	<p>GPs have secure access to the clinical system outside the practice to support clinical consultation.</p> <p>Provision, maintenance and support of necessary mobile infrastructure to support clinical system access at the point of care.</p> <p>Mobile devices under NHS ownership or managed by the CCG</p>	15, 33	Core and mandated GP IT services	<p>The local SLA is based upon an agreed mobile estate volume.</p> <p>Provision, maintenance and technical support of the necessary technology and supporting infrastructure to deliver remote access to the GP IT clinical system for consultation purposes.</p> <p>The use of mobile computing systems is controlled, monitored and audited to ensure their correct operation and to prevent unauthorised access, supporting IGT requirements for general practice.</p> <p>Mobile devices must be locked down and well managed, with advanced tools, processes and policies in place to support diagnosis, repair and updates. Users must not be able to install unlicensed or unauthorised software or change critical settings.</p> <ul style="list-style-type: none"> <li>Encryption to NHS standards on all mobile/portable devices as outlined in guidance on the implementation of encryption within NHS organisations (NHS Digital (HSCIC)):</li> </ul>

Service name	Service summary (scope)	Digital Maturity Assessment reference	Service category	Service description (What does the commissioner have to do? How is this delivered?)
	commissioned GP IT support service.			<p><a href="#">Principles of Information Security</a></p> <p><a href="#">Guidance on the Implementation of Encryption within NHS Organisations</a></p> <p><b>Refresh Programme:</b></p> <ul style="list-style-type: none"> <li>• The CCG will have budgeted plan for mobile GP IT equipment refresh</li> <li>• The CCG will ensure a continual refresh programme which identifies and replaces mobile hardware where it has reached its service life</li> <li>• A local IT refresh and replacement plan will define mobile equipment standards, availability for practices (where appropriate by practice type, size, clinical system etc) and target service life by equipment category</li> <li>• The refresh service will include assessment, procurement, rollout, asset tracking and secure disposal (see "Asset Management and Software Licencing Service")</li> </ul>
Remote access to the clinical systems for		33	Enhanced primary care IT	The local SLA is based upon an agreed mobile estate volume.

Service name	Service summary (scope)	Digital Maturity Assessment reference	Service category	Service description (What does the commissioner have to do? How is this delivered?)
administrative purposes				<p>Provision, maintenance and technical support of the necessary technology and supporting infrastructure to deliver remote access to the clinical system for administrative purposes.</p> <p>The use of mobile computing systems is controlled, monitored and audited to ensure their correct operation and to prevent unauthorised access, supporting IGT requirements for general practice.</p> <p>NHS owned or managed devices must be locked down and well managed, with advanced tools, processes and policies in place to support diagnosis, repair and updates. Users must not be able to install unlicensed or unauthorised software or change critical settings.</p> <ul style="list-style-type: none"> <li>• Encryption to NHS standards on all mobile/portable devices as outlined in guidance on the implementation of encryption within NHS Organisations (NHS Digital (HSCIC)):</li> </ul> <p><a href="#">Guidance on the Implementation of Encryption within NHS Organisations</a></p> <p><a href="#">Principles of Information Security</a></p>

Service name	Service summary (scope)	Digital Maturity Assessment reference	Service category	Service description (What does the commissioner have to do? How is this delivered?)
				<p>Refresh Programme:</p> <ul style="list-style-type: none"> <li>• CCG budgeted plan for mobile GP IT equipment refresh. Availability of these will be defined in the agreed IT refresh plan</li> <li>• The CCG will commission a continual refresh programme that will identify and replace hardware where it has reached its service life change date, including assessment, procurement and rollout</li> </ul>
Disaster Recovery and Business Continuity Support Service (part 1)	Advice on the development of GP business continuity plans and disaster recovery arrangements.	60	Core and mandated GP IT services	<p>Each practice will maintain a disaster recovery (DR) and business continuity (BC) plan. Assurance will be provided through the general practice Information Governance Toolkit.</p> <p>The CCG will ensure advice/guidance to support the development of practice DR and BC plans, is available to practices when required.</p> <p>In the event of a local DR or BC plan being invoked the CCG will ensure technical support is available as necessary.</p>
Disaster Recovery and Business Continuity	CCG commissioned GP IT service provider will	2	Core and mandated GP IT services	The CCG requires its GP IT delivery partner, as part of service specification/SLA arrangements, to maintain a disaster recovery and business continuity plan.

Service name	Service summary (scope)	Digital Maturity Assessment reference	Service category	Service description (What does the commissioner have to do? How is this delivered?)
Support Service (part 2)	develop, test and maintain DR and BC plans, relevant to GP IT services.			The CCG commissioned service provider for GP IT services will have an annually reviewed, tested business continuity plan and validated IT disaster recovery plan for services critical to GP service continuity.
Asset Management and Software Licencing Service	<p>All NHS owned GP IT equipment and software operated on supported GP IT equipment</p> <p>Asset and license management</p> <p>Asset disposal</p>	34, 36, 37	Core and mandated GP IT services	<p>GP IT equipment (supported and/or NHS owned):</p> <ul style="list-style-type: none"> <li>• Is recorded in an accurate asset register</li> <li>• Is subject to an approved IT reuse and disposal policy and procedure - using authorised contractors - this should be compliant with European Community directive 2002/96/EC, The Waste Electrical and Electronic Equipment Directive (WEEE Directive). Certificates of destruction of assets are required on disposal of data processing IT equipment</li> </ul> <p>Software:</p> <ul style="list-style-type: none"> <li>• All software (including operating systems) used on NHS owned GP IT infrastructure by the practice must be approved and recorded on a software licence register which must confirm that the software is appropriately and legally licenced for such use.</li> <li>• Ensure that software meets the agreed WES requirements (to support national and GPSoc clinical applications)</li> </ul>



Service name	Service summary (scope)	Digital Maturity Assessment reference	Service category	Service description (What does the commissioner have to do? How is this delivered?)
				<ul style="list-style-type: none"> <li>Ensure there is effective patch and upgrade management for operating systems and software in place</li> </ul>
GPSoC system support	<p>GP clinical systems and centrally funded subsidiary systems accessed through the GPSoC framework.</p> <p>Support for core general practice clinical systems on behalf of the GP practices.</p>	166	Core and mandated GP IT services	<p><b>Supplier Management and Liaison for GP Systems of Choice (GPSoC) including:</b></p> <ul style="list-style-type: none"> <li>Local management of service support contracts/supplier liaison</li> <li>Ensure local GPSoC call-off contracts are current and accurate (i.e. Schedule A)</li> <li>Manage local payments ensuring that all charges incurred are current and accurate, including payments for additional software to enhance the functionality of the clinical system</li> <li>Inform clinical system suppliers of any changes to existing contracts, for example. terminations due to GP practices exercising their contractual right to choice of system</li> <li>Maintain the Tracking Database (TDB) to ensure the integrity of GPSoC contracts</li> <li>Liaising with GPSoC suppliers re: future requirements and developments</li> <li>In the event of any unresolved issues, escalate to suppliers on behalf of GP practices to facilitate a satisfactory resolution</li> </ul>

Service name	Service summary (scope)	Digital Maturity Assessment reference	Service category	Service description (What does the commissioner have to do? How is this delivered?)
				<ul style="list-style-type: none"> <li>To support CCG to meet their requirement to monitor and escalate to NHS England general practice and clinical systems performance in relation to the use of GP IT services and systems provided under the GP IT operating model</li> </ul> <p><b>General:</b></p> <ul style="list-style-type: none"> <li>Ongoing technical support for GP clinical systems including technical liaison with GPSoC supplier and clinical application support where not provided by GP system supplier</li> <li>In the event of any unresolved issues, escalate to suppliers on behalf of GP practices to facilitate a satisfactory resolution</li> <li>To meet CCG responsibilities to monitor and escalate to NHS England clinical systems performance issues in relation to the use of GP IT services and/or systems provided under the GP IT operating model and/or GPSoC</li> </ul> <p><b>Migrations and mergers:</b></p> <p>Subject to local business case approval, core service provision would include deployment costs such as data migration, essential infrastructure upgrade requirements,</p>

Service name	Service summary (scope)	Digital Maturity Assessment reference	Service category	Service description (What does the commissioner have to do? How is this delivered?)
				project management, training, technical support, retention of legacy system and/or data and audit retrieval requirements.
GPSoC (Lot 2)	GPSoC Lot 1 and 2 related costs not centrally funded		Enhanced primary care IT	GPSoC Lot 2 services  GPSoC Lot 1 Subsidiary Services where not centrally funded.
GPSoC (Lot 3)	GPSoC Lot 3 costs not centrally funded		Transformational primary care IT	GPSoC Lot 3 services
IT Procurement and Support Service	Facilitating CCG GP IT delivery with procurement support through to contract and supplier management and technical support, where these are not sourced through GPSoC framework.	34	Core and mandated GP IT services	<b>Procurement Service:</b> <ul style="list-style-type: none"> <li>• Provide strategic procurement advice, recommending collaboration and standard specifications to optimise efficiency and support costs</li> <li>• Advice and assistance in the development of outputs based specifications to support GP IT procurement projects</li> <li>• Procure GP IT using national frameworks as appropriate</li> <li>• CCGs need to ensure that any procurement activity in support of GP IT, delegated to IT delivery partner(s), does not create conflicts of interest or potential procurement challenge</li> </ul>

Service name	Service summary (scope)	Digital Maturity Assessment reference	Service category	Service description (What does the commissioner have to do? How is this delivered?)
				<b>General practice clinical systems:</b> <ul style="list-style-type: none"> <li>• Ongoing technical support for general practice clinical systems including technical liaison with system supplier and clinical application support where these are not provided by system supplier</li> <li>• Management of ongoing system updates as necessary where these are not provided by system supplier</li> <li>• In the event of any unresolved issues, escalate to suppliers on behalf of GP practices to facilitate a satisfactory resolution</li> </ul>
Effective Commissioning of GP IT Services	The commissioned GP IT services	22, 24, 157	Core and mandated GP IT services	<p>Where GP IT services are commissioned and contracted, there will be:</p> <ul style="list-style-type: none"> <li>• Robust and clear service specifications demonstrating alignment with this schedule of services</li> <li>• Formal SLAs in place</li> <li>• Identified and agreed KPIs</li> <li>• Regular performance reviews</li> <li>• An individual annual practice service review</li> <li>• Issue management and escalation arrangements agreed and clearly documented</li> <li>• Formal complaints management procedure</li> </ul>

Service name	Service summary (scope)	Digital Maturity Assessment reference	Service category	Service description (What does the commissioner have to do? How is this delivered?)
				<ul style="list-style-type: none"> <li>A communication plan regarding GP IT for all general practices</li> </ul>
CCG Practice Agreement	CCG Practice Agreement: Terms governing the provision and receipt of GPSoC services and GP IT services	22	Core and mandated GP IT services	<p>The CCG Practice Agreement is agreed locally, with all associated documentation included within the appendices.</p> <p>The CCG Practice Agreement is signed by both the CCG and all individual GP practices, as a core contractual requirement.</p> <p>The CCG will ensure that it has the necessary support available to enable compliance with CCG Practice Agreement, to meet both national and local requirements.</p>
Training and Systems Optimisation	Training service supporting the safe and effective use of core clinical systems and their optimisation.	7	Core and mandated GP IT services	<p>The Practice and CCG responsibilities for training are described within the CCG Practice Agreement</p> <p>The local SLA should quantify training resources based on either the number of practice staff or the number of practices (weighted by population where appropriate).</p> <p>The service should include training for:</p> <ul style="list-style-type: none"> <li>GPSoC core clinical systems</li> <li>National digital systems eg SCR, EPS2, ERS</li> </ul> <p>And will include training requirements arising from:</p>

Service name	Service summary (scope)	Digital Maturity Assessment reference	Service category	Service description (What does the commissioner have to do? How is this delivered?)
				<ul style="list-style-type: none"> <li>• Staff turnover</li> <li>• Refresher training</li> <li>• New system functionality</li> </ul> <p>System Optimisation:</p> <ul style="list-style-type: none"> <li>• Support practice optimisation of principle GP clinical systems and national digital systems, by providing support, guidance and advice, including User Group facilitation to enable sharing of best practice</li> </ul> <p>Training delivery should reflect:</p> <ul style="list-style-type: none"> <li>• Practice training plans and staff training needs analysis</li> <li>• Environment and estate accommodation and facilities</li> <li>• Virtual and online delivery channels</li> <li>• Resource availability</li> <li>• User satisfaction and customer feedback</li> </ul> <p>N.B. Training for business administration and office systems is the responsibility of the practice.</p>
National Strategic System	Promotion, deployment/implementation and support of	165	Core and mandated GP IT services	Advise practices on current and planned national developments and solutions.

Service name	Service summary (scope)	Digital Maturity Assessment reference	Service category	Service description (What does the commissioner have to do? How is this delivered?)
Implementation Service	national digital systems, including SCR, EPS2, e-RS, Patient Online and GP2GP services.			<p>Maintain national tracking database with local status of system deployments, changes and updates as required nationally.</p> <p>Local deployment programme for national systems implementation within general practices, including benefits realisation, stakeholder engagement, business change support.</p>
Project and Change Management Service	GP IT services include formal P3M (Project, Programme and Portfolio Management) methodologies which are recognised and used in the deployment of GP clinical systems, local implementation of national solutions and major	32	Core and mandated GP IT services	<p>The CCG will ensure skilled project and programme management resources are available, to deliver the planned programme of work, both nationally and locally driven. This may be provisioned within current SLA support arrangements, or could be procured on an 'as required' basis.</p> <p>The CCG needs to ensure that there is access to a sustainable skilled resource, whilst securing best value for money.</p> <p>The service should include:</p> <ul style="list-style-type: none"> <li>• Programme management</li> <li>• Project management</li> <li>• Technical support</li> <li>• Change management</li> </ul>

Service name	Service summary (scope)	Digital Maturity Assessment reference	Service category	Service description (What does the commissioner have to do? How is this delivered?)
	primary care IT infrastructure changes or upgrades.			<ul style="list-style-type: none"> <li>Benefit realisation support</li> </ul>
Electronic messaging for direct patient communication	Electronic messaging (SMS or equivalent) for direct individual patient clinical communication.	9	Core and mandated GP IT services	<p>Provision of electronic messaging functionality ie SMS messaging, for direct unidirectional individual patient communication, to be utilised for clinical and associated administrative purposes.</p> <p>The functionality should only be used for communicating short messages to patients, to a locally agreed standard/format, for example:</p> <ul style="list-style-type: none"> <li>Reminders of forthcoming appointments</li> <li>Requests for patients to make an appointment for example: immunisations, routine reviews, blood test</li> <li>Notifications of 'missed' appointments (DNA's)</li> <li>Notifications of 'normal' test results</li> </ul> <p>Reference: <a href="#">GP IT Operating model NHS England letter to CCGs 19/06/15 Gateway Reference 03635</a></p> <p>All practices have access to SMS (or equivalent messaging system) integrated with the practice principal clinical system to support communications with patients.</p>



Service name	Service summary (scope)	Digital Maturity Assessment reference	Service category	Service description (What does the commissioner have to do? How is this delivered?)
Local Digital Strategy	Strong local leadership to develop and deliver local digital strategy, including GP IT.	86, 12, 151, 152, 153, 156	Core and mandated GP IT services	<p>The CCGs should:</p> <ul style="list-style-type: none"> <li>• Have access to horizon scanning and advice on best practice and digital innovation</li> <li>• Appoint a Chief Clinical Information Officer (CCIO) or equivalent accountable officer (dedicated or shared) who will provide (clinical) leadership for the development of local digital strategy including the development of GP IT services</li> <li>• Develop a commissioning-led digital strategy, supporting innovation, service improvement and transformation, with GP IT as a key component. This will support the development of Local Digital Roadmaps</li> <li>• Ensure CCG and GP requirements are represented in any relevant local, regional or national forum</li> </ul>
GP Data Quality Service	Data quality training, advice and guidance	30	Core and mandated GP IT services	<p>Comprehensive data quality advice and guidance service is available to all GPs, including training in data quality, clinical coding and information management skills.</p> <p>Development and delivery of a general practice data quality improvement plan, where necessary.</p> <p>The service should include support for:</p>

Service name	Service summary (scope)	Digital Maturity Assessment reference	Service category	Service description (What does the commissioner have to do? How is this delivered?)
				<ul style="list-style-type: none"> <li>• National data audits/extracts/reporting eg National Diabetes Audit</li> <li>• General reporting</li> <li>• Template development/QA</li> <li>• Spreading best practice</li> <li>• Data migrations as part of system deployments</li> <li>• National system deployments for example. GP2GP, SCR, CAB/e-RS, EPS</li> <li>• Clinical/medical terminology</li> </ul>
GP Data Quality Accreditation Service	A structured data quality accreditation programme is available for GPs to ensure continuous review and improvement	167	Enhanced primary care IT	<p>Formal data accreditation support programme that includes:</p> <ul style="list-style-type: none"> <li>• Data quality baseline/audit review</li> <li>• Development and delivery of a GP data quality improvement plan with practice(s)</li> <li>• A formal rolling data accreditation programme for GP practices that will underpin key work streams to support paper free / 2020 vision.</li> </ul>
CQRS / GPES Support	CQRS/GPES training, advice and guidance	168	Enhanced primary care IT	<p>Comprehensive CQRS/GPES advice and guidance service is available to all GPs, to include review, report management and remedial action planning, particularly around exception reporting, to ensure appropriate data quality within GP sites to enable effective Quality and Outcomes (QOF) reporting.</p>

Service name	Service summary (scope)	Digital Maturity Assessment reference	Service category	Service description (What does the commissioner have to do? How is this delivered?)
Wi-Fi for Clinicians	Wi-Fi access in GP premises for primary care delivery staff	61	Enhanced primary care IT	Access to secure Wi-Fi in primary care locations for GPs, clinical primary care and other local clinical provider staff.
Primary Care At Scale	Digital enablement to support primary care at scale	57	Enhanced primary care IT	Practices working collaboratively eg in federations may require clinical systems and IT infrastructure which support collaborative working including: <ul style="list-style-type: none"> <li>• Access to clinical records between practices</li> <li>• Shared patient administration, appointment management and transactions between practices</li> <li>• Reporting capabilities across practice federations eg central reporting</li> <li>• Shared infrastructure capabilities eg Active Directory, file management, intranet etc</li> <li>• Digital solutions that support 7 day working</li> <li>• E-consultation</li> <li>• E-triage</li> </ul>
Clinical Decision Support	Where not centrally funded / provisioned		Enhanced primary care IT	<ul style="list-style-type: none"> <li>• Drug formulary and advice systems</li> <li>• Clinical decision support systems</li> </ul>

Service name	Service summary (scope)	Digital Maturity Assessment reference	Service category	Service description (What does the commissioner have to do? How is this delivered?)
Digital Enablement / Practice Efficiency / Service Quality	Internal practice efficiency		Enhanced primary care IT	<p>Example List - not exhaustive:</p> <ul style="list-style-type: none"> <li>• Patient arrival and kiosk systems, patient touch screens</li> <li>• Display screens (for example. 40 inch TV screens and or Jayex Boards), projectors, multi-function devices, webcams</li> <li>• Blood pressure monitoring, spirometry, 24 ECG hardware and software</li> <li>• Digital cameras</li> <li>• Telehealth and monitoring</li> <li>• Telemedicine</li> <li>• Software for chronic disease management, drug monitoring, anticoagulation management software, dispensary software, dictation software</li> <li>• Digital order communications and results reporting for laboratory, imaging and diagnostic tests.</li> <li>• Practice intranet</li> <li>• Advanced appointment management</li> <li>• Advanced document management</li> <li>• Workflow and task management</li> <li>• Data entry e-forms</li> </ul>

Service name	Service summary (scope)	Digital Maturity Assessment reference	Service category	Service description (What does the commissioner have to do? How is this delivered?)
Additional Locally Commissioned Services	Additional to GMS primary care services		Enhanced primary care IT	<p>Example List - not exhaustive:</p> <ul style="list-style-type: none"> <li>Local enhanced services and GP specialist interest schemes</li> <li>Specialist service clinical software/IT infrastructure</li> </ul>
Secondary Usage	Secondary data use	57	Enhanced primary care IT	<ul style="list-style-type: none"> <li>Risk stratification</li> <li>Hospital admissions monitoring</li> <li>Data extraction tools, where not centrally funded</li> <li>Data extract, transfer and analysis (in support of public health, child health and contracting monitoring)</li> </ul>
Patient Facing Digital Services	Where not centrally funded		Transformational primary care IT	<p>Example List - not exhaustive:</p> <ul style="list-style-type: none"> <li>Patient access portals</li> <li>Patient held records and/or devices</li> <li>Public facing Wi-Fi in GP - (managed and secured separately from any clinical Wi-Fi services and N3)</li> <li>Data entry e-forms</li> </ul>
Advanced Telephony	Digital enablement of transformed primary care	57	Transformational primary care IT	<p>Telephony solutions where they are:</p> <ul style="list-style-type: none"> <li>Community/inter-practice footprint; and</li> <li>Integrated with other digital services; and</li> <li>Enable transformed primary care</li> </ul>

Service name	Service summary (scope)	Digital Maturity Assessment reference	Service category	Service description (What does the commissioner have to do? How is this delivered?)
Interoperability	Interoperability solutions where not centrally funded		Transformational primary care IT	Interoperability solutions supporting: <ul style="list-style-type: none"> <li>• Transactional services eg appointment management</li> <li>• Access to shared records</li> <li>• Clinical document sharing</li> <li>• Notifications and tasks</li> <li>• Care coordination including End of Life (EoL)</li> </ul>
Integrated Health and Care	Integrated health and care		Transformational primary care IT	<ul style="list-style-type: none"> <li>• Record sharing initiatives and support for service/commissioning re-design</li> <li>• Clinical record portals</li> <li>• A&amp;E, MIU, 111, WIC links</li> </ul>
general practice Business Support Systems	Systems and services which a practice may utilise for business purposes, which are not directly related to patient care and which NHS England funds via GMS (and PMS		General practice business support systems	<p>With evolving primary care delivery models, local service/support arrangements may develop that incorporate aspects of service provision that would traditionally have been considered GP business support functions to be directly funded by the practice under GMS or PMS equivalent, contractual arrangements.</p> <p>Where there is demonstrable benefit of incorporating elements of GP business support services eg telephony/VOIP as part of broader efficiency release and improved patient care initiatives, GP contributions are to be</p>

Service name	Service summary (scope)	Digital Maturity Assessment reference	Service category	Service description (What does the commissioner have to do? How is this delivered?)
	<p>equivalent) contractual arrangements</p> <p>N.B. The 'Global Sum' within the General Medical Services (GMS) contract (and PMS/APMS equivalent) makes provision for practice expenses including staff costs and general running costs of the practice (stationery, telephone, heating and lighting, repairs and maintenance)</p>			<p>considered as part of local funding provision/business case arrangements.</p> <p>GP IT money must not be spent purchasing or supporting the following:</p> <ul style="list-style-type: none"> <li>• Email systems other than NHSmail</li> <li>• Provision of suitable environment including local physical security and supply of power within practices</li> <li>• Funding local consumables (for example. printer ink and paper)</li> <li>• PAT Testing for all IT equipment used on practice premises (estates management responsibility)</li> <li>• Payroll and accounting software licences</li> <li>• Production of staff ID cards for new employees and changes to existing employees (name, role etc.)</li> <li>• Practice-hosted provider services, operating outside Primary Care essential services under GMS, PMS, APMS contracts for example. provision of sexual health services</li> <li>• Managing and maintaining systems that only support the practice as a business for example. payroll, HR systems, photocopiers, faxes</li> </ul>

Service name	Service summary (scope)	Digital Maturity Assessment reference	Service category	Service description (What does the commissioner have to do? How is this delivered?)
Information Governance Service	To provide a full range of information governance services and advice to support GP Practice compliance with common-law duty of confidence, Data Protection Act and Caldicott standards and to ensure all devices and systems are managed and used in a secure and confidential way		Primary care IT support services (Commissioned by NHS England)	<p>Core IG support services:</p> <p><b>IG policy support</b> Support for the production and maintenance of local information governance policies and procedures. Provision of advice and support to GP practice on approval, ratification and adoption of the policies for their organisation. N.B. GP practices are responsible for the production, approval and maintenance of (and adherence to) their IG and IT security policies but support will be provided.</p> <p><b>IG incident management</b> Provision of advice and/or support to practices on the investigation of possible information security breaches and incidents. Advising on incident assessment and reporting via the SIRI reporting tool within the IG Toolkit to NHS England (dependent upon severity of incident). Advice on post-incident reviews and actions for customer implementation.</p> <p><b>IG toolkit compliance support</b> Provide advice and guidance on how to complete the IGT, including the collection and collation of evidence in support of IG toolkit submissions.</p>



Service name	Service summary (scope)	Digital Maturity Assessment reference	Service category	Service description (What does the commissioner have to do? How is this delivered?)
				<p>N.B. GP practices must submit a toolkit return annually and responsibility for this lies solely with the GP practice.</p> <p><b>IG consultancy and support</b>  Provision of advice, guidance and support on IG related issues, including existing operational processes and procedures or new business initiatives. Advice and guidance around access and laws (including access to legal advice). Provision of guidance on implementing the recommendations of the Information Governance Review ("Caldicott2").</p> <p><b>IG Training</b>  Training in relation to Information Governance, including the development and provision of training materials to support IG, as required, and delivery of ad-hoc IG training that is not covered by the mandatory online IG training module.</p> <p>N.B. A commissioning specification: '<a href="#">Information Governance Support for Primary Care Providers</a>' has been developed to inform NHS England's regions about the information governance support that they must commission for primary care providers and provide an outline structure for contracting purposes.</p>

Service name	Service summary (scope)	Digital Maturity Assessment reference	Service category	Service description (What does the commissioner have to do? How is this delivered?)
				<p><b>Developmental IG support services. As outlined within the commissioning specification: ‘Information Governance Support for Primary Care Providers’, including:</b></p> <ul style="list-style-type: none"> <li>• Wider IG-related compliance support</li> <li>• IG Audits</li> <li>• Subject Access and Freedom of Information (FOI) requests</li> <li>• Queries from MPs and Parliamentary Questions</li> </ul> <p><b>Citizen identity</b> Provide support to ensure practices are able to develop and maintain best practice processes that comply with national guidance on citizen identity verification that underpins the delivery of patient facing services, and assurance requirements as these are developed.</p>
Registration Authority	A comprehensive Registration Authority service		Primary care IT support services (commissioned by NHS England)	<p>Regional DCO teams to commission a comprehensive RA service as laid out in the <a href="#">Registration Authorities Operational and Process Guidelines</a></p> <p>Registration Authority service including policing ‘Access Policy’ and the delivery and management of role-based or</p>

Service name	Service summary (scope)	Digital Maturity Assessment reference	Service category	Service description (What does the commissioner have to do? How is this delivered?)
				<p>position-based access control and issuing of smartcards. training of RA sponsors.</p> <p>Support of software to support national systems for example.) Identity Agent, CMS.</p> <p>Ensure adherence to access security policy.</p> <p>Issuing of smartcards (including ID checks / printing etc).</p> <p>Advise customer RA managers and RA sponsors of configuration of business functions, completion of documentation and use of RA systems (for example. reset PINs).</p> <p>Involvement in national project roll out such as attendance at project boards to support project delivery.</p>
NHSmial Administration	A comprehensive service to cover the administration of NHSmial accounts		Primary care IT support services (commissioned by NHS England)	<p>Core administrative services (outside national services desks): Providing local organisation administrator support for example access and support for NHSmial, support for migration from local email services to NHSmial.</p> <p>Creation, deletion of user and email accounts.</p> <p>Password resets, account unlocking etc.</p>

Service name	Service summary (scope)	Digital Maturity Assessment reference	Service category	Service description (What does the commissioner have to do? How is this delivered?)
Clinical Safety Assurance	A comprehensive clinical safety assurance service	11	Primary care IT support services (commissioned by NHS England)	<p>Clinical assurance and safety: Ensuring that the necessary national requirements are met for management of clinical risk in relation to the deployment and use of health software within the area team's geographical area.</p> <p>Assure adherence to:</p> <ul style="list-style-type: none"> <li>• Clinical Risk Management: Its application in the manufacture of health software SCCI0129 (formerly ISB 129 and DSCN 18/2009)</li> <li>• Clinical Risk Management: Its application in the deployment and use of health IT systems SCCI0160 (formerly ISB 0160 and DSCN 14/2009) (where required).</li> </ul> <p>Local clinical safety services for must include appropriate support for the management of clinical safety incidents (information system related) within general practice.</p>

## 15. Appendix D – Digital Primary Care Maturity Assurance Indicators

DMA Ref	Digital Primary Care Maturity Assurance Indicator:	Digital Primary Care Maturity Assurance Level:	Reference (where appropriate)
1	Consent is appropriately sought before personal information is used in ways that do not directly contribute to the delivery of care services and objections to the disclosure of confidential personal information are appropriately respected.	Core GP IT and centrally mandated requirements	GP ITK
2	The CCG commissioned service provider for GP IT services will have an annually reviewed tested Business Continuity plan and validated IT Disaster Recovery plan for services critical to GP service continuity.	Core GP IT and centrally mandated requirements	GP IT Operating Model CCG Practice Agreement
3	The practice enriches Summary Care Records with additional information, for appropriate patients and subject to patient consent. <a href="#">Enriching SCRs with Additional Information</a>	Enhanced primary care IT	

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5	The practice use only a computer system upon which the Contractor proposes to keep patient clinical records which has been accredited by the Secretary of State or another person on his behalf in accordance with general practice Systems of Choice Level 2.	Core GP IT and centrally mandated requirements	GP IT Operating Model CCG Practice Agreement GMS contract
6	The practice has arrangements in place to ensure a validated NHS number is used in all NHS clinical correspondence, including referrals, generated by the practice, except in exceptional circumstances where the number cannot be ascertained.	Core GP IT and centrally mandated requirements	GMS Contract NHS number guidance for GP practices V1.1 – June 2011
7	There is a comprehensive ongoing training and clinical system optimisation service to support GP Principal clinical systems and national clinical services available to all practices.	Core GP IT and centrally mandated requirements	GP IT Operating Model CCG Practice Agreement
8	All practices complete IGT to at least level 2 in each of the appropriate	Core GP IT and centrally	GP IT Operating Model

DMA Ref	Digital Primary Care Maturity Assurance Indicator:	Digital Primary Care Maturity Assurance Level:	Reference (where appropriate)
	requirements each year. (For 2015/16 this is 13 indicators).	Mandated requirements	Department of Health / British Medical Association good practice guidelines  GP IGTK CCG N3 Access Agreement  GP IT Infrastructure specification guidance  GMS contract 2015/16 review letter
9	All practices have access to SMS (or equivalent messaging system) integrated with the practice principal clinical system to support direct communications with patients. (GP IT Operating model - NHS England letter to CCGs 19/06/15 Gateway Reference 03635).	Core GP IT and centrally mandated requirements	GP IT Operating Model  <a href="#">NHS England letter to CCGs 19/06/15 Gateway Reference 03635</a>
10	All contracts (staff, contractor and third party) contain clauses that clearly identify information governance responsibilities.	Core GP IT and centrally mandated requirements	GP IGTK GP Infrastructure specification guidance
11	The practices have access to a formal Clinical Safety System (SCCI0160	Core GP IT and centrally	SCCI0160 (formerly ISB 160)

DMA Ref	Digital Primary Care Maturity Assurance Indicator:	Digital Primary Care Maturity Assurance Level:	Reference (where appropriate)
	formerly ISB 160) and qualified clinical safety officer.	mandated requirements	
12	There is a local GP IT strategy and programme with roadmap annually reviewed and aligned with local commissioning priorities.	Core GP IT and centrally mandated requirements	CCG Practice Agreement
13	<p>The practice uses NHS Mail in the following ways:</p> <p>Tick all that apply</p> <ul style="list-style-type: none"> <li>• NHS Mail is the primary email system used by the general practice (GP IT Operating Model)</li> <li>• The practice has at least one securely managed and daily monitored NHS Mail account to receive clinical documentation</li> <li>• None or N/A</li> </ul>	Core GP IT and centrally mandated requirements	<p>GP IT Operating Model</p> <p>Primary Care Contractor IT Operating Model</p>
14	There is an agreed local strategy and approach for core GP IT infrastructure and software investment to meet the needs of:	Core GP IT and centrally mandated requirements	GP IT Operating Model



DMA Ref	Digital Primary Care Maturity Assurance Indicator:	Digital Primary Care Maturity Assurance Level:	Reference (where appropriate)
	<ul style="list-style-type: none"> <li>• Maintaining existing IT estate required for core GP IT needs</li> <li>• Practice organic/incremental growth</li> <li>• Practice developments eg mergers</li> <li>• Significant primary care developments eg new builds</li> </ul>		
15	There is a clear agreed local (CCG) budgeted plan for the full funding of all core GP IT requirements.	Core GP IT and centrally mandated requirements	GP IT Operating Model
16	The practice system is EPS2 enabled and live (2015/16 GMS Contract Review letter).	Core GP IT and centrally mandated requirements	GMS Contract 2015/16 GMS Contract Review letter
17	The practice is using GP2GP to transfer patient records between practices (GMS Contract).	Core GP IT and centrally mandated requirements	GMS contract

DMA Ref	Digital Primary Care Maturity Assurance Indicator:	Digital Primary Care Maturity Assurance Level:	Reference (where appropriate)
18	The practice integrates all electronic health records received via GP2GP within 3 working days of receipt.	Core GP IT and centrally mandated requirements	GPSoc contract
19	The practice has enabled automated uploads to the Summary Care Record (GMS Contract).	Core GP IT and centrally mandated requirements	GMS Contract
20	GP IT services are commissioned and contracted with robust and clear service specifications.	Core GP IT and centrally mandated requirements	GP IT Operating Model CCG Practice Agreement
21	All practices sign the CCG Practice Agreement.	Core GP IT and centrally mandated requirements	GP IT Operating Model CCG Practice Agreement
22	All CCG commissioned GP IT support services are supported with KPI reports (at least 4/year) and there are annual service performance and contract review meetings.	Core GP IT and centrally mandated requirements	CCG Practice Agreement

DMA Ref	Digital Primary Care Maturity Assurance Indicator:	Digital Primary Care Maturity Assurance Level:	Reference (where appropriate)
23	Patients registered at practice can view their test results electronically online.	Enhanced primary care IT	
24	The CCG completes a formal review of the IT Services with each Practice at least once a year.	Core GP IT and centrally mandated requirements	CCG Practice Agreement
26	CCG Commissioned GP IT support provides consistent support for core GMS contracted hours (0800 - 1830 Mon - Fri excl Bank holidays) (GMS Contract).	Core GP IT and centrally mandated requirements	GMS Contract
27	Patients at this practice can view their GP Letters electronically online.	Enhanced primary care IT	
28	The GP IT support service desk has current formal accreditation through a recognised (industry or NHS) scheme or meets the requirements for GP IT service desk in the GP IT Schedule of Services (GP IT Operating model revised 2016).	Core GP IT and centrally mandated requirements	GP IT Operating Model
29	GP IT services available include IT Security advice and oversight, including	Core GP IT and centrally	

DMA Ref	Digital Primary Care Maturity Assurance Indicator:	Digital Primary Care Maturity Assurance Level:	Reference (where appropriate)
	configuration support, audit, investigation and routine monitoring.	mandated requirements	
30	There is a comprehensive data quality advice and guidance service is available to all GPs, including training in data quality, clinical coding and information management skills.	Core GP IT and centrally mandated requirements	GP IT Operating Model
31	Where there is a local community network wholly or part funded through GPIT and used in addition to, or in place of, N3 by general practices AND other locations and care settings the costs are shared between these organisations.	Enhanced primary care IT	GP IT Operating Model
2	The commissioned GP IT services include formal P3M (Project, Programme and Portfolio Management) methodologies which are recognised and used in the deployment of GP Clinical systems, local implementation of national solutions and major primary care IT infrastructure changes or upgrades.	Core GP IT and centrally mandated requirements	CCG Practice Agreement

DMA Ref	Digital Primary Care Maturity Assurance Indicator:	Digital Primary Care Maturity Assurance Level:	Reference (where appropriate)
33	<p>The practice principal clinical system is accessible outside the practice for the following purposes:</p> <p>Tick all that apply</p> <ul style="list-style-type: none"> <li>• Access at all routine locations for GP service point of care delivery (eg out of surgery locations such as hospitals, nursing homes and community using mobile technologies ie point of care)</li> <li>• Access remotely eg home for administrative and maintenance purposes</li> <li>• None or N/A</li> </ul>	Core GP IT and centrally mandated requirements	
34	The GP IT infrastructure estate supporting core GP IT (includes desktop, mobile, server and network equipment) has a fully documented plan for refresh and replacement.	Core GP IT and centrally mandated requirements	GP IT Operating Model CCG Practice Agreement

DMA Ref	Digital Primary Care Maturity Assurance Indicator:	Digital Primary Care Maturity Assurance Level:	Reference (where appropriate)
35	All transfers of personal and sensitive information are conducted in a secure and confidential manner.	Core GP IT and centrally mandated requirements	GP ITK
36	All NHS owned GP IT equipment is recorded in an accurate asset register.	Core GP IT and centrally mandated requirements	GP IT Operating Model CCG Practice Agreement
37	All software (including Operating Systems) used on NHS owned GP IT infrastructure by the practice must be approved and recorded on an software asset and licence register which must confirm the software is appropriately and legally licenced for such use.	Core GP IT and centrally mandated requirements	CCG Practice agreement GP IGTK
38	All NHS owned GP IT equipment is subjected to an approved IT reuse and disposal policy and procedures - using authorised contractors. All disposals are recorded in the asset management system (36).	Core GP IT and centrally mandated requirements	

DMA Ref	Digital Primary Care Maturity Assurance Indicator:	Digital Primary Care Maturity Assurance Level:	Reference (where appropriate)
39	All general practices have secure data storage services available for any electronic patient identifiable and clinical data other than that stored in their GPSoC clinical systems and NHS Mail to a standard not less than Tier 3 data centre.	Core GP IT and centrally mandated requirements	
40	The principal GP clinical system is externally hosted to NHS Digital Standards.	Core GP IT and centrally mandated requirements	
41	Monitoring and enforcement processes are in place to ensure NHS national application Smartcard users comply with the terms and conditions of use.	Core GP IT and centrally mandated requirements	GP ITK
43	The practice has a protocol to allow patients access to their records on request in accordance with current legislation.	Core GP IT and centrally mandated requirements	Data Protection Act 1998 GMS schedule 6 Part 9, PMS schedule 5 part 9

DMA Ref	Digital Primary Care Maturity Assurance Indicator:	Digital Primary Care Maturity Assurance Level:	Reference (where appropriate)
44	The practice has a designated individual responsible for confidentiality of personal data held by it.	Core GP IT and centrally mandated requirements	GMS schedule 6 Part 5, PMS schedule 5 part 5
45	All practice patients are offered access to view online or print the detailed (coded) information from their medical record.	Core GP IT and centrally mandated requirements	GMS Contract
46	<p>The practice routinely electronically orders or receives the following diagnostics tests with their main acute provider:</p> <p>Tick all that apply</p> <ul style="list-style-type: none"> <li>• Place orders for common laboratory diagnostic tests</li> <li>• Place orders for common imaging and diagnostic tests</li> <li>• Receive diagnostic reports for common imaging and diagnostic tests</li> <li>• None or N/A</li> </ul>	Enhanced primary care IT	



DMA Ref	Digital Primary Care Maturity Assurance Indicator:	Digital Primary Care Maturity Assurance Level:	Reference (where appropriate)
48	<p>Local acute trust discharge letters/summaries are received by the practice electronically in the following ways:</p> <p>Tick all that apply</p> <ul style="list-style-type: none"> <li>• All local acute discharge summaries/letters are received electronically</li> <li>• All local A&amp;E discharge summaries are received electronically</li> <li>• None or N/A</li> </ul>	Core GP IT and centrally mandated requirements	<p>NHS standard provider contract</p> <p>Everyone Counts: Planning for Patients 2014/15 to 2018/19</p>
50	There is an Information Governance policy that addresses the overall requirements of information governance	Core GP IT and centrally mandated requirements	GP ITK
52	Patients at this practice can book, view, amend, cancel and print appointments online	Core GP IT and centrally mandated requirements	<p>GMS Contract</p> <p>GMS schedule 6, part 5, new paragraph 74C, PMS schedule 5, part 5, paragraph 70D</p>

DMA Ref	Digital Primary Care Maturity Assurance Indicator:	Digital Primary Care Maturity Assurance Level:	Reference (where appropriate)
53	Responsibility for Information Governance has been assigned to an appropriate member, or members, of staff	Core GP IT and centrally mandated requirements	GP ITK GMS schedule 6 part 9,PMS schedule 5 part 9
54	All staff members are provided with appropriate training on information governance requirements	Core GP IT and centrally mandated requirements	GP ITK
55	The use of mobile computing systems is controlled, monitored and audited to ensure their correct operation and to prevent unauthorised access	Core GP IT and centrally mandated requirements	GP ITK
56	80% of elective referrals are made using the NHS E-referral system	Core GP IT and centrally mandated requirements	GMS contract 2015/16 review letter
57	Where the practice works within a federation it is able to use its principal clinical system and its IT infrastructure to support shared working between practices in the following ways:	Enhanced primary care IT	

DMA Ref	Digital Primary Care Maturity Assurance Indicator:	Digital Primary Care Maturity Assurance Level:	Reference (where appropriate)
	<p>Tick all that apply</p> <ul style="list-style-type: none"> <li>• Clinical system (records)</li> <li>• Appointment booking and management</li> <li>• Integrated telephony systems across practices</li> <li>• Reporting on activity and coded clinical data</li> <li>• Morbidity registers across aggregated (federation) populations</li> <li>• None or N/A</li> </ul>		
58	There is a locally agreed WES (Warranted Environment Specification) for GP IT equipment which enables practices to effectively operate concurrently applications necessary to delivery both core and enhanced GP IT.	Enhanced primary care IT	
59	Unauthorised access to the premises, equipment, records and other assets is prevented	Core GP IT and centrally	GP ITK

DMA Ref	Digital Primary Care Maturity Assurance Indicator:	Digital Primary Care Maturity Assurance Level:	Reference (where appropriate)
		mandated requirements	
60	There are documented plans and procedures to support business continuity in the event of power failures, system failures, natural disasters and other disruptions	Core GP IT and centrally mandated requirements	GP ITK
61	Wi-Fi access will be available to GPs and primary care delivery staff in all general practice locations.	Enhanced primary care IT	
62	There are documented incident management and reporting procedures	Core GP IT and centrally mandated requirements	GP ITK
65	The practice is registered under the Data Protection Act	Core GP IT and centrally mandated requirements	GMS schedule 6 Part 9,PMS schedule 5 part 9
66	The practice has a procedure for electronic transmission of patient data in line with national policy including	Core GP IT and centrally	Data Protection Act 1998 GMS schedule 6 Part 9,PMS schedule 5 part 9

DMA Ref	Digital Primary Care Maturity Assurance Indicator:	Digital Primary Care Maturity Assurance Level:	Reference (where appropriate)
	mechanisms to ensure that computerised medical records/data are transferred to a new practice when a patient leaves.	mandated requirements	
67	There is an information asset register that includes all key information, software, hardware and services	Core GP IT and centrally mandated requirements	GP ITK
68	Use of SNOMED CT in GP principal clinical systems	Transformation in primary care	NIB Framework
72	All local GPs and providers of health and social care sharing patient digital information agree to a consistent information sharing model (including common consent protocols)	Transformation in primary care	Department of Health / British Medical Association Good Practice Guidelines
73	All locally commissioned providers of health care sharing patient digital information have systems which maintain a full automated audit of read and write access to individual patient records	Transformation in primary care	Data Protection Act Compliance NHS Care Record Guarantee

DMA Ref	Digital Primary Care Maturity Assurance Indicator:	Digital Primary Care Maturity Assurance Level:	Reference (where appropriate)
79	A local Electronic Palliative Care Co-ordination System (EPaCCS) supporting the recording and sharing of people's care preferences and key details about their care at the end of life which is integrated with principal primary care clinical systems and meets the requirements of ISB 1580 (End of Life Care Coordination: Core Content) is available.	Transformation in primary care	National End of Life Care Strategy ISB 1580 (End of Life Care Coordination: Core Content)
84	All locally commissioned health and care organisations (including GPs) can access their principal record systems from all local commissioned provider locations.	Enhanced primary care IT	
85	Access to Wi-Fi services is available to general practice clinical staff across local commissioned provider locations.	Transformation in primary care	
86	The CCG has appointed a Chief Clinical Information Officer (CCIO) or equivalent accountable officer (dedicated or shared) who will provide (clinical) leadership for the development of local IT strategy	Core GP IT and centrally mandated requirements	GP IT Operating Model CCG Practice Agreement

DMA Ref	Digital Primary Care Maturity Assurance Indicator:	Digital Primary Care Maturity Assurance Level:	Reference (where appropriate)
	including the development of primary care IT services.		
88	<p>The practice promotes and offers the facility for patients (GMS contract 2015/16 review letter) and care homes and nursing homes to receive consultations electronically, either by email, video consultation or other electronic means. Tick all that apply</p> <ul style="list-style-type: none"> <li>• Patients</li> <li>• Nursing homes</li> <li>• Care homes</li> <li>• None or N/A</li> </ul>	Enhanced Primary Care IT	
90	<p>CCG Commissioned GP IT support Service supports general practice to provide extended hours (DES) services</p> <p>Select One:</p> <ul style="list-style-type: none"> <li>• An urgent business critical break-fix only service is available outside GMS core hours to support</li> </ul>	Enhanced primary care IT	

DMA Ref	Digital Primary Care Maturity Assurance Indicator:	Digital Primary Care Maturity Assurance Level:	Reference (where appropriate)
	<p>practices providing extended hours (DES) services</p> <ul style="list-style-type: none"> <li>• A restricted service is available outside GMS core hours to support practices providing extended hours (DES) services</li> <li>• A full service is available outside GMS core hours to support practices providing extended hours (DES) services</li> </ul>		
91	<p>CCG commissioned GP IT support service supports general practice to provide seven day week services to patients where these are offered.</p> <p>Select One:</p> <ul style="list-style-type: none"> <li>• An urgent business critical break-fix only service is available outside GMS core hours to support practices providing seven day services</li> </ul>	Enhanced primary care IT	



DMA Ref	Digital Primary Care Maturity Assurance Indicator:	Digital Primary Care Maturity Assurance Level:	Reference (where appropriate)
	<ul style="list-style-type: none"> <li>• A restricted service is available to support practices providing seven day services</li> <li>• A full service is available outside GMS core hours to support practices providing seven day services</li> </ul>		
92	All practice patients are offered access to order, view and print repeat prescriptions for drugs, medicines and appliances online.	Core GP IT and centrally mandated requirements	GMS Contract
93	<p>Where there is legitimate access and consent the practice and other local health and social care providers are able to share electronic patient data by view access to records in the following ways:</p> <p>Tick all that apply</p> <ul style="list-style-type: none"> <li>• Other local health providers can access practice records</li> <li>• Local social care providers can access practice records</li> </ul>	Transformation in primary care	NIB Framework

DMA Ref	Digital Primary Care Maturity Assurance Indicator:	Digital Primary Care Maturity Assurance Level:	Reference (where appropriate)
	<ul style="list-style-type: none"> <li>Practice can access records from other local health providers</li> <li>Practice can access records from local social care providers</li> <li>None or N/A</li> </ul>		
100	<p>The practice and its registered patients have access to a shared online system which allows patients to engage with their GP by:</p> <p>Tick all that apply</p> <ul style="list-style-type: none"> <li>Patients can record their personal health data which is accessible online by the GP</li> <li>Patients and GPs can online, collaboratively set goals and care outcomes and track progress against these</li> <li>None or N/A</li> </ul>	Transformation in primary care	
101	There is a publicly available and easy to understand information leaflet that informs patients/service users how their	Core GP IT and centrally	GP ITK

DMA Ref	Digital Primary Care Maturity Assurance Indicator:	Digital Primary Care Maturity Assurance Level:	Reference (where appropriate)
	information is used, who may have access to that information, and their own rights to see and obtain copies of their records.	mandated requirements	
150	Clear standing financial instructions must be established between commissioners and delivery organisations. Clear reporting, monitoring and review arrangements established to ensure CCG oversight of GP IT funding and expenditure, with clear escalation points agreed.	Core GP IT and centrally mandated requirements	
151	There is clearly defined executive leadership (CCG) to ensure that digital technology maturity is recognised as a key enabler to achievement of core objectives in the effective commissioning and delivery of quality health and care and future service transformation.	Core GP IT and centrally mandated requirements	
152	Formal governance and accountability arrangements clearly articulated and embedded, which effectively engage strategic partners, with terms of reference	Core GP IT and centrally mandated requirements	

DMA Ref	Digital Primary Care Maturity Assurance Indicator:	Digital Primary Care Maturity Assurance Level:	Reference (where appropriate)
	<p>and reporting responsibilities clearly defined, including the following forums/structures:</p> <ul style="list-style-type: none"> <li>• Health and care (cross community stakeholders)</li> <li>• CCG/primary care strategic level</li> <li>• GP IT / operational delivery including clinical/LMC representation</li> </ul>		
153	The commissioner (CCG) owns the strategic digital direction and ensures that this is driven by local commissioning objectives. It recognises and exercises its responsibility for innovation and technology enabled change, with a clear vision for health and care articulated, with an associated digital strategy in place.	Core GP IT and centrally mandated requirements	
154	Commissioning of clinical services, routinely includes clinical (CCIO) consideration of digital technologies/systems, together with associated benefits.	Core GP IT and centrally mandated requirements	

DMA Ref	Digital Primary Care Maturity Assurance Indicator:	Digital Primary Care Maturity Assurance Level:	Reference (where appropriate)
155	Service specifications for commissioning of clinical services, encompass core digital requirements, including, but not limited to; data management and reporting, data security, data sharing, systems access, digital technology requirements.	Core GP IT and centrally mandated requirements	
156	Formal governance arrangements are established which ensure the effective mapping and provision of digital enablers that will support delivery of locally identified health and care priorities. Business cases (where necessary) are shared with, and agreed with relevant partners in the local area. Business cases where required for Informatics-enabled programmes with cross-community impact are approved by a relevant cross-community Board.	Core GP IT and centrally mandated requirements	
157	Negotiate and contract for Information Management and Technology services ensuring value for money through effective use of national framework	Core GP IT and centrally mandated requirements	

DMA Ref	Digital Primary Care Maturity Assurance Indicator:	Digital Primary Care Maturity Assurance Level:	Reference (where appropriate)
	contract (eg Lead Provider Framework - LPF) or other robust procurement in adherence with NHS England procurement rules.		
158	The CCG ensures that appropriate IG and information standards/requirements are clearly specified within any local IM&T service specification and associated service level agreement (SLA) and contractual arrangements with IM&T delivery partners. Able to evidence level 2 compliance for commissioned GP IT delivery partners.	Core GP IT and centrally mandated requirements	
159	Information Governance Toolkit compliance is assured through the standard contractual routes with wider health economy providers.	Core GP IT and centrally mandated requirements	
160	Currently NHS England are responsible for commissioning a local IG support service as described in Section 5 - GP IT Operating Model. GP Practice IGT compliance is being monitored <u>locally</u> to	Core GP IT and centrally mandated requirements	

DMA Ref	Digital Primary Care Maturity Assurance Indicator:	Digital Primary Care Maturity Assurance Level:	Reference (where appropriate)
	ensure effective delivery of GP IGT support services.		
161	The CCG as local commissioner, through formal local governance arrangements, is responsible for ensuring benefit realisation from local investment in digital technology.	Core GP IT and centrally mandated requirements	
162	Benefits are explicitly defined, tracked and captured within individual projects.	Core GP IT and centrally mandated requirements	
163	CCG has secured a service that meets or exceeds the core standards outlined in the GP IT operating model/framework with clearly define local IM&T requirements in the form of a detailed service specification that will ensure local IM&T delivery partners are clear on service needs.	Core GP IT and centrally mandated requirements	
164	CCGs have appropriate mechanisms in place to effectively manage risks and issues in accordance with system wide	Core GP IT and centrally	

DMA Ref	Digital Primary Care Maturity Assurance Indicator:	Digital Primary Care Maturity Assurance Level:	Reference (where appropriate)
	procedures to help ensure the safe and successful delivery of outcomes associated with digital investment.	mandated requirements	
165	CCGs actively promote take up and utilisation of national strategic systems, such as SCR, e-Referrals, GP2GP, EPS2, Patient Online, to enable more integrated care across all care settings and achieve operational benefits for patients and clinicians.	Core GP IT and centrally mandated requirements	
166	There is support available to all practices for deployment, training, technical issues, tracking database maintenance and supplier liaison and escalation for GPSoC (lot 1) clinical systems.	Core GP IT and centrally mandated requirements	
167	A formal and structured data quality accreditation programme is commissioned by the CCG and available for GP sites to ensure continuous review and improvement of data quality within general practice. This will incorporate a baseline assessment, reporting and remedial	Enhanced primary care IT	



DMA Ref	Digital Primary Care Maturity Assurance Indicator:	Digital Primary Care Maturity Assurance Level:	Reference (where appropriate)
	action planning, together with ongoing data quality advice, guidance and training in data quality and information management techniques and practice.		
168	<p>Calculating Quality Reporting Service (CQRS)</p> <p>General Practice Extraction Service (GPES)</p> <p>A proactive support service is in place locally to support Quality and Outcomes (QOF) data collection and reporting, which includes review, report management and remedial action planning, particularly around exception reporting, to ensure appropriate data quality within GP sites to enable effective QOF reporting.</p>	Enhanced primary care IT	