

1st September 2009

Councillor Garry Peltzer Dunn
Chairman
Brighton and Hove Health Overview & Scrutiny
Committee (HOSC)
PO Box 2500
Kings House
Grand Avenue
Hove
BN3 2SR

NHS Brighton and Hove
Prestamex House
171 – 173 Preston Road
Brighton BN1 6AG

Direct Line: 01273
545327

✉ darren.grayson@bhcpct.nhs.uk

Dear Councillor Peltzer Dunn,

Brighton & Hove GP-Led Health Centre

Thank you for sending me a copy of the Health Overview & Scrutiny Committees ad hoc scrutiny panels report and recommendations into the tendering process of the GP-Led Health Centre. As discussed briefly at the last HOSC, PCT staff were pleased to be involved and to have the opportunity to discuss the tendering process.

The following is the PCTs response to the recommendations detailed in the report:

The Panel recommends that NHS Brighton & Hove pays particular attention to monitoring the GP-Led Health Centre contract, given Care UK's uneven record as a provider of high quality healthcare not going to achieve on a particular indicator.

The Alternative Provider Medical Services (APMS) contract allows stronger contract and performance management. There are more than 40 performance indicators which must be achieved or financial penalties kick in. There is no additional payment for high performance except under the Quality and Outcomes Framework¹.

Care UK is required to notify the PCT if it thinks it is not going to achieve on a particular indicator. Care UK is also required to collate quarterly reports on activity including any issues that arise, such as serious untoward incidents.

The Panel recommends that HOSC should request a report from NHS Brighton & Hove on its strategy to improve the commercial competitiveness of local health care providers.

The PCT is currently revising its procurement strategy and developing a detailed market management strategy. Key to this will be a consideration of how the PCT can support the

¹ Quality and Outcome Framework is a national scheme to reward GP practices that reach the standards laid out in the framework. These cover a range of clinical and organisational standards such as the management of patients with long term health conditions which includes an indicator 'The percentage of patients with diabetes who record a retinal screening in the previous 15 months'

Chairman: Denise Stokoe Chief Executive: Darren Grayson

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General Fax: 01273 295461

www.brightonandhove.nhs.uk



development of all local health care providers, whether those who currently provide services or potential new providers. This will include issues around commercial competitiveness, although the PCT has to balance regard for local provision with compliance with procurement legislation. The market management strategy is intended for completion by October 2009, and the PCT would be more than willing to involve the HOSC.

The Panel recommends that HOSC requests a comprehensive update on the above issues, to be received after the GP-Led Health Centre has been in operation for twelve months or so.

This information can be provided to HOSC when requested. These will be based on the quarterly reports provided by Care UK.

The Panel commends NHS Brighton & Hove for its constructive approach to sharing information in relation to the GP-Led Health Centre. It is to be hoped that the PCT will be similarly open in terms of other procurements, and will endeavour to place as much information about tenders as possible in the public domain.

The PCT takes seriously its role in managing public money, and aims to be open and transparent about all the activities in which it engages. The PCT will continue to make available the fullest possible range of information about procurement activity and outcomes via its website and in response to any queries received.

When it launches future initiatives, NHS Brighton & Hove should give serious consideration to ensuring that there is a method via which members of the public can present their views, even in situations where full public consultation would not be appropriate.

NHS Brighton and Hove will ensure that all significant future initiatives are notified online and comments are invited from the public.

If you require any further information please let me know.

Yours sincerely

Darren Grayson
Chief Executive

cc: Denise Stokoe, Chair, NHS Brighton and Hove