

5 December 2016

Submission of GPFV plans by CCGs to NHS England

Dear LMC,

By the 23rd December 2016 each CCG will need to submit a GPFV plan to NHS England setting out how they will translate the aims and key local elements of the GPFV into their more detailed local operational plans.

Many LMCs are already working with CCGs to help them prepare these plans for submission.

These plans will need to reflect local circumstances, but must – at a minimum – set out:

- How access to general practice will be improved
- How funds for practice transformational support will be created and deployed to support general practice
- How ring-fenced funding being devolved to CCGs to support the training of care navigators and medical assistants, and stimulate the use of online consultations, will be deployed.

The guidance in this letter about CCGs proposed plans is for all LMCs. The table attached to this letter is a checklist which LMC's may find useful to check their respective CCG's plans.

It highlights key elements to look out for in your CCG's plans and we would encourage you to engage with your CCG as they draw up their plans to ensure their GPFV plan and wider operational plan reflects the pressures on and challenges for general practice in your local area.

For further information on what CCGs have been asked to consider please also see Annex 6 of the NHS Operational Planning and Contracting Guidance for 2017/19, which can be accessed [here](#).

If you have any further questions about the GPFV or feedback about how it is being implemented on the ground then please do email Chandra Kanneganti (Chandra.Kanneganti@northstaffs.nhs.uk), who will be leading on LMC engagement for the GPC.

Kind Regards,



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Chair, BMA GPs Committee



	Funding	Scheme	Detail	Check list
1	£171 million non-recurrent	Transformational support 2017/18 and 2018/19 from CCG allocations. The investment is designed to be used to stimulate development of at scale providers for improved access, stimulate implementation of the 10 high impact actions to free up GP time, and secure sustainability of general practice. CCGs will need to find this funding from within NHS England allocations for CCG core services.	CCGs should plan to spend £3 per head as a one-off non-recurrent investment commencing in 2017/18. This could be £3 split between 2017/18 and 2018/19 (e.g. £1.50 in 2017/18 and £1.50 in 2018/19) or £3 in one of these years (i.e. either £3 in 2017/18 or £3 in 2018/19).	
2	£45 million over 3 years	A fund to contribute towards the costs of purchasing online consultation systems, improving access and making best use of clinicians' time. Examples of types of schemes NHS England is looking for is here .	CCGs to get a share of £15 million available nationally in 2017/18 and £20 million in 2018/19 (£10 million will be available in 2019/20, but this financial year is beyond the two year planning horizon of CCGs two year plans). For detail on your CCGs's exact allocation please see page 50 of the NHS planning guidance .	
3	£45 million over 5 years	Training for care navigators and medical assistants for all practices	£10 million available nationally in 2017/18 and £10 million in 2018/19. Funding will be devolved to NHS local teams or delegated CCGs based on their share of registered patients as a percentage of the England total. Further detail on your CCGs allocation can be found on page 51 of the NHS planning guidance .	
4	£40 million over 4 years	General practice resilience programme	Funding in 2017/18 at a national level is £8 million, with a further £8 million in 2018/19. This funding is delegated to NHS local teams, and NHSE local area teams should already have identified the practices they have decided to support.	

5	£138 million – in recurrent funding in 2017/18 and £258 million in 2018/19	Funding to improve access to general practice services	CCGs should plan to receive £6 per weighted patient for each of the Prime Minister’s Challenge Fund or General Practice Access CCGs with GP Access Fund sites will receive £6 per weighted patient in 2017/18 and 2018/19. In addition to this 18 transformation areas will receive £6 per head in 2017/18. All other CCGs will receive £3.34 per head of population from 2018/19. Appendix 1 explains this in further detail. There are a number of requirements to access this additional recurrent funding which CCGs will need to demonstrate, around the timing of appointments, capacity measurement, advertising and ease of access, digital, inequalities and affective access to the wider whole system services. More detail about these is set out in pages 53 and 54 of the NHS planning guidance . CCGs GPFV plan should set out their approach to providing improved access.	
6	£900 million over five years	Estates and Transformation Fund (formerly the Primary Care Transformation Fund)	If your CCG’s bid for money from the Estates and Transformation Fund has been successful this money should be included in its GPFV plan.	
7		Increase in CCG funding to general practice. In 2015/16 overall investment by CCGs into general practice was £1.8 billion.	CCGs have been asked to increase CCG funding to general practice at least in line with increases in CCG core allocations which are 2.14% in 2017/18 and 2.15% in 2018/19. It is important that you understand and monitor your CCG’s the level of investment into general practice.	
8		Care redesign	Plans should include a clearly articulated vision by the CCG’s of care redesign. This should include setting out how it will deliver: <ul style="list-style-type: none"> • Sustainable services today 	

			<ul style="list-style-type: none"> Transformed services tomorrow (e.g. new care models) Fit with the STP vision (and its primary care strategy) Includes self care, technology, wider workforce actions to address capacity and capability Implementation plan co-produced with primary care providers 	
9		Time for Care Programme	CCGs GPFV to identify a senior person to lead local work to release staff capacity in general practice. These leads will be an important part of championing the 10 High Impact Actions to release time for care, support the planning of care redesign schemes and act as a lead with NHSE development leads. They should also support local practices in submitting expressions of interest for the £30 million Time for Care (link to expressions of interest form) and 300 free places per year on the General Practice Improvement Leaders programme (link to expressions of interest form) programmes. In addition to this CCGs should have clear plans for how they will support the planning and delivery of a local Time for Care development programme.	
10		Deployment of funding for reception and clerical staff training, and online consultation systems	This funding will be allocated equally between all CCGs on a capitated basis at the start of each financial year. CCGs will be required to report on their use of this funding on a regular basis. NHSE has asked CCGs to consider pooling this funding across their STP area and set out as part of their plan how these two new funds will be used for member practices. Your CCG's plan should	

			provide evidence of consultation with practices in the area and assurance that this funding is ring-fenced.	
11		Workforce	CCGs have been asked to include a workforce strategy plan for their local health system that links to their service redesign plans. This should include information about the current position, areas of stress, examples of innovative practices and the planned future model and how to get there. Further detail can be found on pages 55 and 56 of the NHS Planning Guidance .	
12		Workload	CCGs have been asked to work in partnership with NHS England local teams and STPs to ensure funding made available through the General Practice Resilience Programme is made available to support areas of greatest need. NHSE local teams will be looking to CCGs to ensure agreed action plans for delivery of support to these practices are in place. CCGs should also work with other bodies as part of the STP on a single care plan to ensure for people living with long-term conditions self-care is usual care. Care pathways set out in the GPFV plan should also integrate with community pharmacy.	
13		Practice infrastructure	CCGs have been asked to have clear local estates and digital roadmaps which lay out plans to create the infrastructure to support new models of care. Digital Roadmaps should set out priorities and deliverables for each year, including interoperability, the pursuit of innovative technologies, changes to how triage and consultation is delivered to alleviate workload pressures. LMCs should be	

			engaging with this, as it is an opportunity to have your say about what funding is needed to deliver care redesign.	
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Appendix 1: Further detail about the GP Access Fund (GPAF)

The £138 million recurrent funding in 2017/18 and £258 million recurrent funding in 2018/19 will be distributed as follows:

- CCGs with GPAF sites will receive £6 per weighted patient in 2017/18 and 2018-19 (e.g. New Forest and Southampton City)
- The 18 transformation areas (see below) that have been asked to accelerate extended access will receive £6 per head in 2017/18 (e.g. North East Hants and Farnham; Fareham and Gosport, South Eastern Hampshire; Isle of Wight). *Note: In 2016/17 they should already have received £1.50 per head of support.*
- All other CCGs will start with £3.34 per head in 2018/19. From 2019/20 they should then receive £6 per head (note: the latter will not be part of CCG's current plans as it is outside CCGs current planning period).

The 18 transformation areas

