



North Central London
Clinical Commissioning Group

Written response from North Central London CCG to questions received from the North Central London Joint Health Overview and Scrutiny Committee on 19 March 2021

16 April 2021

- **The technical details in relation to who took the decision about AT Medics/ Centene and how much was paid to the directors of AT Medics.**

The decision was taken by the CCG Primary Care Commissioning Committee. Committee voting membership includes the CCG's Governing Body Lay Member for Patient & Public Engagement (Chair), Chief Finance Officer, Governing Body Registered Nurse, Governing Body Secondary Care Clinician, Governing Lay Member- General Portfolio, Chief Operating Officer, Lay Member for Audit & Governance, and Director of Quality and Chief Nurse, plus an independent GP.

The CCG did not pay any money to the directors of AT Medics regarding the change of control request.

- **Further detail about how the CCG seeks legal advice in general and further detail about the legal advice in relation to this decision.** The agreement between CCGs and NHS England/NHS Improvement (NHSEI) is that contracting legal advice relating to general practice contracts is sought through the approved NHSEI legal process. As the provider holds several contracts across London one request for legal advice was sought for all the CCG areas across London who were impacted by the change request. This allowed an efficiency in costs but also provided consistency of advice and action across London. Generally, for other matters across the CCG external legal advice is obtained through the Corporate Services Directorate.

- **Whether the CCG could have reached an alternative decision or challenged the legal advice based on the quality of the proposed company and whether there were any avenues for the CCG to challenge the decision after it had been made.**

The legal advice received and acted upon by the CCG stated that there were no reasonable grounds on which to refuse the change request. The Provider submitted the same request to other CCGs who also approved the request. If NCL had taken a different approach to other London CCGs this would very likely be subject to legal challenge.

- **Whether there were any avenues for local authorities to challenge the decision, including through referral to the Secretary of State.**

If a local authority wished to challenge a decision taken by a clinical commissioning group they could contact the NHS England complaints team.

- **Additional information in relation to the AT Medics/ Centene contract and performance monitoring, as well as performance monitoring in general.**
All GP Alternative Provider Medical Services (APMS) contracts in NCL have Key Performance Indicators (KPI) attached to the contract. These are locally determined indicators which the contract holder is obliged to meet. Annually the performance against KPI is assessed and where a contract does not meet the required achievement they are required to produce an improvement plan which commissioners monitor. From year 2 of an APMS contract there is a financial sanction applied if a provider does not achieve the KPIs.

In addition to the KPI in the NCL APMS contracts all GP practices in NCL are required to work towards meeting national targets as defined by NHS England / Improvement and local CCG targets. Where a practice is found to not meet a number of these targets the CCG writes to the contractor requiring they produce and work to an improvement plan. Their performance is then assessed against that plan and the national and local targets. If over an agreed time there is insufficient improvement the CCG may choose to take contractual action against a provider as it may for all GP contractors. All practices are also subject to scrutiny from the Care Quality Commission.

- **In relation to future decisions, some assurance that the five local authorities would be informed and, if there were any concerns or issues with the proposals, whether there would be any oversight or opportunity for consultation.**

The CCG has committed to a pre-meeting with representatives from each NCL Council in advance of future Primary Care Commissioning Committees. The CCG will continue to meet its statutory requirements on engagement and as important stakeholders local authorities will have the opportunity to input as required.

- **Details of how local authorities and the public would be better informed about proposals and about how to communicate any issues.**

The CCG has a number of regular meetings and briefings with local authority representatives, and MPs, and will ensure that updates on key proposals and upcoming decisions are brought for discussion. The CCG's Patient and Public Engagement Strategy was approved by the Governing Body in December 2020, available [here](#), which sets out how we will inform and engage residents on our work.