

Liverpool PCT, with nearly half a million patients spanning 97 GP practices, is one of the first PCTs in England to put the GPsOC PCT-Practice Agreement in place

“NHS Connecting for Health, who were a key part of the overall process, provided us with detailed guidance”



Sam McPartland, Liverpool PCT

### What is the Local Medical Committee (LMC)?

The LMC is a statutory body representing all local general practitioners working within the NHS. Its boundaries must correspond with one or more Primary Care Trusts (PCTs). As the local representative committee of NHS GPs, it is recognised in the NHS Acts & Regulations as the body with whom PCTs must consult on issues affecting the administration of GPs' contracts and remuneration. The LMC is the professional voice for GPs and their practice teams and provides representation, guidance and support to GPs and practice teams in their local area.

Liverpool PCT's achievement in completing the signing of the PCT-Practice Agreement is the result of careful planning, effective communication with the GP practices and strong working relationships with key organisations.

Liverpool PCT currently uses three system suppliers who offer four different systems. Prior to the GPsOC PCT-Practice Agreement there were no local Service Level Agreements (SLAs) in place; this meant that there was no agreement to use as guidance.

Sam McPartland from Liverpool PCT, who has been heavily involved in this process, notes the importance of close working relationships:

“From the outset the PCT liaised closely with the Local Medical Committee (LMC) which helped the practices to see that we have been working in their best interests. A joint letter was sent out to GP practices from the PCT and LMC to advise them about the GPsOC project in general. This outlined what the development of a practice agreement would mean for practices and highlighted the process that would be followed.

“NHS Connecting for Health, who were a key part of the overall process, provided us with detailed guidance which we downloaded from the NHS CFH website. This included a generic agreement which highlighted areas which we could tailor locally. This enabled us to include local information and processes.

“Liverpool PCT has a valuable relationship with the Local Medical Committee (LMC) and as a result we were able to work proactively with them throughout the process. Some issues were discussed which were wider than the GPsOC PCT-Practice Agreement, such as extended hours, and the fact that operating times of the service desk conflicted with practice opening hours.”

Liverpool PCT and North Mersey HIS are in the process of negotiating this and discussions are underway to move to extended or 24/7 service desk support.

One element of the GPsOC PCT-Practice Agreement is the practices' responsibility to comply with software licence requirements. Within this there are certain applications which are prohibited from being downloaded onto the GP system and these include MSN Messenger and Limewire.

### What is a PCT-Practice Agreement?

A PCT-Practice Agreement gives practices greater clarity about what a PCT is required to deliver in respect of information management and technology (IM&T) and the service levels they can expect the PCT to adhere to. The agreement, once signed, introduces a formal dispute resolution procedure which either party can call on to resolve disputes relating to the IM&T matters set out in the PCT-Practice Agreement.

**The North Mersey Health Informatics Service (HIS)** is an NHS shared service, providing some information, management and technology services to the PCT.



**Dr Robert N Barnett GP Chair of Liverpool LMC states:**

“The PCT-Practice Agreement takes nothing away from the relationship between the practice and system provider; but at a local level in particular, with there being so many practices on EMIS, it makes sense for the PCT to have this agreement in place to ensure a more co-ordinated effort.

“I see the PCT-Practice Agreement helping the working relationship with the clinical system providers.”

PCT-Practice Agreements are a key element of GP Systems of Choice (GPSoC). More detail on GPSoC can be found at **[www.connectingforhealth.nhs.uk/gpsoc](http://www.connectingforhealth.nhs.uk/gpsoc)**

For further information on implementing the GPSoC agreements visit: **[www.connectingforhealth.nhs.uk/gpsoc/signing](http://www.connectingforhealth.nhs.uk/gpsoc/signing)**

Sam explains, “A key milestone was met when the LMC agreed with the details of prohibiting software; they fully recognised the PCT’s view that disallowing such software would help ensure good bandwidth. Bandwidth is key in terms of response times for GP systems and we were delighted to see that the LMC responded positively to this suggestion.”

“When the time came to cascade the GPSoC PCT-Practice Agreements to the 97 practices, for confirmation that they were happy with the terms, we faced the issue of printing 194 copies of the agreement. One for the practice to keep and one for a signature and retention by the PCT. Instead, each practice was emailed a PDF copy of their own agreement, and we kept a copy. We have asked each practice to sign the declaration and return to us for our records. We have established an escalation route to the IM&T Programme Board, for cases where practices are not happy signing the declaration. To date this hasn’t been required.”

Sam recommends using a common sense approach to the whole GPSoC PCT-Practice Agreement process: “By identifying key stakeholders you can involve the right people at the right time. I also endeavoured to consult and get assistance from the LMC to support the process across Liverpool.

“Using NHS CFH guidance was also a crucial part of the process; by utilising the resources already available you can ensure that you are communicating the right messages, at the right time, to the right people.”

**Liverpool PCT process flow**

1. Arranged a meeting with the Health Informatics Service (HIS) Relationship Manager to explain the GPSoC PCT- Practice Agreement process and to discuss the local elements.
2. Using the service level agreement (SLA) the PCT pulled together information relevant to the local elements of the first version of the GPSoC PCT- Practice Agreement.
3. The Health Informatics Service (HIS) approval process included further meetings to review the first draft of the document to ensure it suited primary care. An amendment and review process took place until approval from the HIS was issued.
4. The GPSoC PCT-Practice Agreement was sent to the Local Medical Committee (LMC) for review and approval: it was important for both the LMC and the PCT to recognise that this was a national agreement and to pay specific attention to the local elements, understanding the SLA between the PCT and the HIS.
5. There was then a review process which included the HIS after comments/queries from the LMC relating to the SLA.
6. A further draft was sent to the LMC with narrative around the changes made and rationale for amends. The LMC agreed in principle, with some queries around service desk hours. The document was rolled out on the condition that the extended hours issue was escalated to the IM&T Programme Manager and the Head of IM&T. Liverpool PCT and North Mersey HIS are in the process of negotiating and discussions are underway to move to extended or 24/7 service desk support.