

Simon Stevens,
Chief Executive
NHS England
NHSE Skipton House
80 London Road
London, SE1 6LH

30 October 2017

Outstanding issues with PCSE

Dear Mr Stevens

I am writing to you to highlight the significant number of ongoing issues due to the poor delivery of services by PCSE (Primary Care Services England) provided by Capita and commissioned by NHS England. GPC has been engaging with NHS England and PCSE regularly for over two years to resolve the significant issues that are causing much distress to practices and putting patients at risk. We are disappointed with the lack of progress that has been made to resolve the fundamental issues.

GPC is contacted daily by LMCs, practices and individuals who are experiencing issues with PCSE and are unable to reach resolution through communicating directly with them. We are still having to escalate cases with NHS England as complaints are not being dealt with in a timely manner. We are hearing of cases where GPs have suffered large financial losses due to systematic failings of the services provided by Capita. Our main concerns are outlined below.

Patient registrations

Significant delays and faulty processes in both registration and patient removals is affecting patient care and practice cash flow. This is in turn causing problems for patients with incorrect vaccination and screening calls/recalls. It has also been reported that these faulty processes are causing delays and problems with appropriate removal of violent patients which is a cause for concern for patient and staff safety alike.

Medical records

We continue to hear reports of significant delays to the movement of medical records for various reasons including labels not being provided. There have also been cases of patients' records

going missing which raises alarming questions about potentially compromising patient safety; this is not acceptable and must be resolved immediately.

Management of the performers list

We have received many reports of GPs not being visible on the performers list which has resulted in GPs being unable to work and a significant loss of earnings. For example, one GP was unable to work for 12 weeks after moving between local area teams which has not only had a huge financial impact on the GP, but has also been very unsettling for their family. In addition, GP trainees are not being added to the performers list within an acceptable timeframe when they have qualified.

Performers List Data and LMC Payments

Despite repeated commitments to resolve issues with provision of performers list data, LMCs are still not receiving data about new entrants to the performers list in their area, which is making it difficult for them to discharge their statutory representative functions to their constituents. Similarly, ongoing problems with LMC levy collections and payments are not only destabilising LMCs, but are also causing significant cash flow issues for them. The incorrect and untimely collections of levies from practices are causing further problems for practices.

Pensions

There have been significant issues with the processing of pension contributions since PCSE took this function over. This could have a serious long-term effect for the doctors concerned and more needs to be done to resolve these issues. Many locum GPs are the most adversely affected, although they may not be aware because of the lack of information provided to them. Following access requests, a number of locum GPs have discovered that the pension data held by PCSE is incorrect and in some cases PCSE did not hold a record of their contributions at all. This is very worrying and completely unacceptable.

Practices have also reported a series of issues with the processing of pension payments, such as no receipts received, pension contributions being taken for doctors that have long since left the practice, GP trainees not being added to the scheme in a timely manner and superannuation certificates not being shared. These have resulted in practices wasting a lot of time and money chasing for rectification of these problems.

GP payments

Some GP training practices have not yet received their training grants, and are having to fund the shortfall from elsewhere. Where the practices are directly employing the trainees, often they have not received the reimbursement of these salaries, which means they are having to pay trainees directly out of already overstretched practice budgets or trainees are now going months without getting paid (if the practice cannot cover the shortfall).

Practices are also not being properly paid/reimbursed for other elements of the services provided, for example enhanced services and when they are, there is uncertainty over what they have been paid for as there is no clear breakdown of payments.

General communications

We are aware from LMCs, practices and individuals that queries are not being dealt with in a timely manner, if at all, and the complaints process is not fit for purpose. This is extremely frustrating as often the initial issues were due to a failing of PCSE. Practices are having to spend a lot of time repeatedly seeking a response and often send evidence on numerous occasions and still fail to see any resolution.

Survey of services

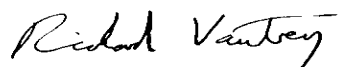
GPC undertook a survey of practices last year to assess the issues with PCSE, and we were approached several months ago by NHS England to undertake a joint survey so that we can have clear evidence of how each service line is operating. NHS England seem to be having significant delays in procuring this, and we have made no progress for months. Can I ask that this be expedited urgently, as we must have evidence of the problem areas to be capable of improving the service.

As these significant number of outstanding issues are having an adverse effect on practices' finances and workload as well as on their patients, we would like to know as a matter of urgency, what interim support is in place for immediately resolving these systematic failings.

Looking forward, we understand that new systems for both cervical screening and GP payments and pensions are due to go live in July of next year. We are very concerned that preparations are not sufficiently advanced at this stage of the projects to guarantee a seamless transfer to the new service. We have no confidence in Capita's ability to deliver this service, the consequences of failings will be very serious for practices, potentially affecting their viability.

My team are meeting with Jill Matthews and Gus Williamson on 9 November, when we must receive a comprehensive update on all above-mentioned issues. These issues have been ongoing since NHS England commissioned Capita to deliver the PCSE service and it is unacceptable that more progress has not been made to getting these resolved. All of us who work in general practice, and who depend on this service, expect to see a much more robust stance taken by NHS England to resolving these many problems.

Yours sincerely



Richard Vautrey
Chair, General practitioners committee England