



Dear Colleague

## GENERAL MEDICAL SERVICES STATEMENT OF FINANCIAL ENTITLEMENTS FOR 2011/12

### Summary

1. This Circular introduces a revised Statement of Financial Entitlements (SFE) for GMS Contractors and replaces PCA(M)(2010)19 issued on 15 October 2010.
2. The SFE has been agreed with the Scottish General Practitioner's Committee and details of changes to sections of the SFE are detailed at Annex A.
3. An electronic copy of the SFE can be found on the NHS website at:

[http://www.sehd.scot.nhs.uk/pca/PCA2011\(M\)16.pdf](http://www.sehd.scot.nhs.uk/pca/PCA2011(M)16.pdf)

### Action

4. NHS Boards are requested to bring this Circular to the attention of all GP contractors.

Yours sincerely

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25 October 2011

### Addresses

#### For Action

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Amendments made to SFE effective from 1 April 2011 issued 25 October 2011.

### **Amendments to Table of Contents**

In Part 1 Section 2 (Global Sum Payments), remove the heading “Deduction for not achieving 150 points under the Quality and Outcomes Framework” and insert the heading “Contractor Population Index”.

In Part 1 Section 3 (Minimum Practice Income Guarantee), remove the heading “Continuing obligation to pay Correction Factor Monthly Payments”. For the heading “Review and revision of Correction Factor Monthly Payments in respect of the financial year 1 April 2010 to 31 March 2011. Amount of CFMPs and due date for payment” substitute “Review and revision of Correction Factor Monthly Payments in respect of financial year 2011/12 and financial years thereafter”.

In Part 4 (Payments for Specific Purposes), remove Section “8B Administration of Pneumococcal Vaccination As Part Of The Pneumococcal Catch-Up Campaign” and the headings “Payment for administration of PCV vaccinations as part of the Pneumococcal Catch-up campaign”, “Eligibility for payment”, “Claims for payment” and “Conditions attached to payment”.

In Part 4 Section 18 (Dispensing), remove the heading “Dispensing arrangements” and insert the heading “Transitional arrangements”. In the same section also remove the heading “Patient Charges” and insert the heading “Payments for the provision of flu vaccines”.

In Part 5 insert the heading “Premises and IT Expenses”.

### **Amendments to Introduction**

This section has been updated to reflect the current dates and effective date of SFE and the new Scottish Government Directorate title.

### **Amendments to Part 1 Section 2 – Global Sum Payments.**

In paragraph 2.3, remove sub-paragraph (ii) – “Calculation of Initial Global Sum Monthly Payment for 201/11”. Paragraph 2.3 is then amended to read –

“The Scottish Allocation Formula, a summary of which is included in Annex B of this SFE, determines how the total Global Sum amount for Scotland is to be distributed to all practices in Scotland. Once the contractor’s CRP has been established, this number is to be adjusted by the Scottish Allocation Formula. The resulting figure, which is the contractor’s Contractor Weighted Population for the Quarter. It is on the basis of the Contractor Weighted Population for the Quarter, relative to the Scotland-wide Weighted Population for the Quarter, that the practice is allocated its share of the Scotland-wide global sum, not including the sums allocated for Temporary Patients Adjustments. From 1 April **2011** the global sum amount for Scotland is

increased to **£389.0** million reflecting the increase in aggregate contractor registered populations from **1 April 2010 to 1 April 2011**”

Paragraph 2.4 is amended to read –

“For comparative purposes only, this figure should correspond to the Contractors Weighted Population for the Quarter multiplied by approximately **£70**. This figure is calculated by taking the total global sum amount for Scotland (**£389.0m**), subtracting the total sum allocated for Temporary Patients Adjustments and then dividing by the Scotland-wide registered population for the Quarter. The resulting amount is then to be divided by twelve, and the resulting amount from that calculation is the contractor’s first Initial GSMP for the financial year.”

In Footnote 3, remove the reference to “implementation of the Scottish Government agreed 2010/11 uplift “. The Footnote is amended to read –

“The figure of **£389.0m** takes effect with this SFE on 1 April **2011** and includes non-GMS practices. The equivalent figure prior to 1 April **2011** was **£387.7m**. The new figure reflects the change to Scotland’s registered populations for the period 1 April **2010** to 31 March **2011**. “

Paragraph 2.18 Contractor Population Index is amended to read-

“The Contractor Population Index (CPI) of a contractor, mentioned in paragraph 2.16, is the contractor’s most recently established CRP divided by **5188**. Where reference is made in this SFE to a contractor’s CPI, that reference, unless the context otherwise requires, is to the most up-to-date version of the contractor’s CPI at the time that the payment which is being adjusted in accordance with a calculation using the contractor’s CPI falls due.”

Footnote 4 is amended to read –

“The figure of **5188** takes effect with this SFE from 1 April **2011**. The equivalent figure prior to 1 April **2011** was **5170**. The new figure reflects the notional change in the Scotland’s registered population for the period 1 April **2010** to 31 March **2011**.”

### **Amendments to Part 1 Section 3 – Minimum Practice Income Guarantee**

For Paragraph 3.10 headings “Continuing obligation to pay Correction Factor Monthly Payments” and “Review and revision of Correction Factor Monthly Payments in respect of financial years 2009/10, 2010/11 and financial years thereafter” substitute the heading “Review and revision of Correction Factor Monthly Payments in respect of financial year 2011/12 and financial years thereafter”.

Paragraph 3.12 is amended from –

“Once the baseline monthly figure amount of a contractor’s CFMPs has been established, that amount- is to be uprated

(a) for the financial year 2009 to 2010 by 0.68% of the practices’ GSE, This calculation is made in order to implement the DDRB recommendation for 2009/10 and ensure that all practices receive a minimum uplift in their GSE according to the methodology which was jointly agreed. Because GSE is the combined total of the practice’s Global Sum and Correction Factor, the uplift will be applied to the Correction Factor element which will result in the creation of new temporary Correction Factors for those practices which have no existing Correction Factor; and

(b) for the financial year 2010 to 2011, by 0.41 of the practices’ CFMP. This calculation is made in order to implement the Scottish Government agreed uplift for 2010/11, in that the first half of the total uplift is to be applied across global sum, correction factor, quality and outcomes framework, enhanced services and locum payments in proportion to their 2009/10 spend This will result in the creation of new temporary Correction Factors for those practices which have no existing Correction Factor; and

(c) For the financial year 2011 to 2012 and subsequent financial years, by-

(i) the percentage by which the amount specified in paragraph 2.3 is uprated at or for the start of the new financial year (“the Uprating Percentage”), if it is to be uprated, or

(ii) if the first amount specified in paragraph 2.3 is not to be uprated at or for the start of the new financial year, by 0%,”

To –

“Once the baseline monthly figure amount of a contractor’s CFMPs has been established, that amount- is to be uprated

(a) for the financial year 2011 to 2012 by 0%; and

(b) for the financial year 2012 to 2013 and subsequent financial years, by-

(i) the percentage by which the amount specified in paragraph 2.3 is uprated at or for the start of the new financial year (“the Uprating Percentage”), if it is to be uprated, or

(ii) if the first amount specified in paragraph 2.3 is not to be uprated at or for the start of the new financial year, by 0%.”

## **Amendments to Part 2 Section 4 – Quality and Outcomes Framework: General**

In Paragraph 4.10 the reference to “Section 2.2 of the QOF” is changed to “Section 2.3 of the QOF”.

Paragraph 4.13 is amended to read –

“This domain is itself split into **six** further sub-domains: records and information; information for patients; education and training; practice management; medicines management **and quality and productivity**. Section 3 of the QOF contains a number of indicators for each of these sub-domains, which in turn contain standards against which the performance of the contractor will be assessed.”

For Paragraph 4.14, substitute –

“4.14.1 With the exception of-

(a) the indicator “records 23” in the records and information sub-domain (the percentage of patients aged 16 and over whose notes record smoking status in the past 27 months), and

(b) the prescribing indicators in the quality and productivity sub-domain,

the standards set relate to the task to be performed or an outcome to be achieved. The points available in relation to the indicators (other than those mentioned in sub-paragraph (a) and (b)) are only obtainable in full if the task is in fact accomplished or the outcome achieved.

4.14.2 Guidance on what is required to accomplish the task or achieve the outcome is given in Section 3 of the QOF. In particular, the quality and productivity achievement will be measured in accordance with that Section, and in the case of the prescribing indicators, also in accordance with paragraph 4.14B.”

After existing paragraph 4.14A, insert new paragraph –

“4.14B The quality and productivity prescribing indicators-

(a) QP1 and QP2 have designated tasks to be performed and outcomes to be achieved and these are set out in Section 3,

(b) will only result in the availability of points in relation to indicator QP2 where indicator QP1 has been fully accomplished,

(c) will only result in an entitlement to a payment in respect of indicators QP3, QP4 or QP5 if QP1 and QP2 have been achieved, and

(d) in respect of indicators QP3, QP4 and QP5 will be measured in accordance with the methodology set out in Section 3 and Health Boards will calculate the achievements for those indicators using PRISMS data.”

Paragraph 4.15 is amended to read -

“The patient experience domain contains one indicator which is set out in Section 4 of the QOF and relates to the length of patient consultations. The points available for this indicator will only be obtainable (and then in full) if the relevant outcomes recorded are achieved.”

Previous Patient Experience Indicator paragraphs 4.16 – 4.18E are removed.

Previous paragraphs 4.19 to 4.24 are now renumbered as 4.16 to 4.21.

### **Amendments to Part 2 Section 5 – Aspiration Payments**

In paragraph 5.13, for “£127.28”, substitute “£130.38”.

Paragraph 5.19 is removed –

“The additional payment for the period 1 April 2008 to 31 December 2008 which is due as a result of the change in the calculation of the monthly aspiration payment from the 60% method to the 70% method, as set out in section 5.3, will be paid with the monthly aspiration payment in January 2009.”

### **Amendments to Part 2 Section 6 – Achievement Payments**

Paragraph 6.3 is now amended to read –

“In order to make a claim for an Achievement Payment (except in relation to achievement of points relating to QP3, QP4 and QP5 of the prescribing indicators in the quality and productivity sub-domain of the Organisational Domain), a contractor must make a return in respect of the information required of it by the Health Board in order for the Health Board to calculate its Achievement Payment. Where a GMS contract terminates before the end of the financial year, a contractor may make a return at that stage in respect of the information necessary to calculate the Achievement Payment to which it is entitled in respect of that financial year.”

Paragraph 6.4 is now amended to read -

“On the basis of that return but subject to any revision of the Achievement Points totals that the Health Board may reasonably see fit to make—

- (a) to correct the accuracy of any points total; or
- (b) having regard to any guidance issued by SGHD,

the Health Board is to calculate the contractor’s Achievement Payment as follows.”

In paragraph 6.5 (a), for “Annex F” substitute “Annex G” and for “£127.28” substitute “£130.38”.

In paragraph 6.6, for “£127.28” substitute “£130.38”.

Footnote 6 is amended to read –

“The amount specified in paragraph 6.6 in respect of the financial year **2010 to 2011** was **£127.28.**”

### **Amendments to Part 3 Section 8 - Childhood Immunisation Scheme**

In paragraph 8.8, for the number “60”, in the three places it occurs, substitute the number “61”;

In paragraph 8.18, for the number “56”, in the three places it occurs, substitute the number “57”

### **Amendments to Part 4 – Payments for Specific Purposes – Sections 8A and 8B**

Section 8B (Administration of Pneumococcal Vaccination as part of the Pneumococcal Catch-up Campaign) is removed.

In Section 8A (Pneumococcal Vaccination and Hib/MenC Booster Vaccination), paragraph 8A.4 is removed –

“Payments in respect of the administration by a contractor, who is contracted to provide the childhood immunisations and pre-school booster Additional Service, of the pneumococcal conjugate vaccine (PCV) as part of the catch-up programme for children who were aged over two months but under 2 years on 4th September 2006 and who, because they had already started their routine immunisation programme, cannot receive the three pneumococcal vaccinations in accordance with the table set out in paragraph 8A.8, are dealt with separately in Section 8B.”

Previous paragraphs 8A.5 to 8A.22 are now all renumbered as 8A.4 to 8A.21 and paragraph number references throughout Section 8A are amended accordingly.

Paragraphs 8A.8 (previously 8A.9); 8A.12 (previously 8A.13) and 8A.17 (previously 8A.18), are all amended to remove references to payments made as part of the Catch-up campaign and now read –

“8A.8 The Health Board must pay to a contractor who qualifies for the payment, a payment of £15.02 in respect of each child registered with the contractor who has received the PCV vaccination in any of the circumstances set out in paragraphs 8A.10 to 8A.14 and in respect of whom the contractor administered the final completing vaccination.”

“8A.12 Where a child who is over 13 months but under 5 years and who has previously had invasive pneumococcal disease receives a single dose of PCV in accordance with the recommendation contained in paragraph 6 of Annex 1 of the provisions set out at Annex I to this SFE, the Health Board must pay to the contractor administering the final completing vaccination a payment of £15.02 in respect of that child, unless a payment is otherwise payable for that same final completing vaccination under paragraph 8A.11, or 8A.14. The single dose of PCV is considered the final completing vaccination for this purpose.”

“8A.17 The contractor is not entitled to payment of more than £15.02 in respect of any child under this Section, other than where—

- (a) the contractor claims for payment for a final completing vaccination administered under the circumstances set out in paragraph 8A.12, and
- (b) by virtue of that paragraph, the contractor is entitled to a payment under that paragraph, irrespective of any previous payment made in respect of that child under the provisions of this Section.”

#### **Amendments to Part 4 – Payments for Specific Purposes – Section 18 (Dispensing)**

Paragraph 18.5 is amended and replaced by the following new sub paragraphs in accordance with the advance notification provided in NHS Circular (M) 2011 (6) of the withdrawal from 1 July 2011 of the concession concerning reimbursement of VAT costs of dispensing practices not registered with HMRC for VAT.

“18.5 a For the dispensing period 1 April- 30 June 2011 only Unless a dispensing practice is registered with Customs and Excise for Value Added Tax (VAT) purposes (normally when a registered pharmacist is employed for dispensing), a VAT allowance shall be paid to cover the VAT payable on the practice purchases of drugs and appliances and containers. The allowance shall be calculated as a percentage both of the basic price less any discount applicable under schedule 1 and of the container allowance equivalent to the rate of VAT in force on the first day of the quarter in which the items are dispensed.

18.5 b A one off VAT registration support payment of £3000 will be paid to all dispensing practices, who were both dispensing practices and not registered for VAT at 1 April 2011, and who are not subject to the discretionary arrangements detailed in subparagraph 18.6 with their April 2011 dispensing payment.

18.5 c For the dispensing period 1 July 2011 onwards A VAT allowance shall be paid to cover any VAT payable on the purchase of any products listed below for personal administration under a GMS contract:

- vaccines, anaesthetics and injections;
- the following diagnostic reagents: Dick Test; Schick test; Protein Sensitisation Solutions; and Tuberculin Tests (i.e. Koch Test, Mantoux Test, Patch Test and Diagnostic Jelly);
- intrauterine contraceptive devices (including drug- releasing IUCDs, contraceptive caps and diaphragms);
- pessaries which are appliances; and
- sutures (including skin closure sutures).



No allowance will however be paid for any item which is centrally supplied as part of a programme such as the Childhood Immunisation Programme or any programme against a Pandemic Influenza Virus.

18.5 d Where after making any enquiries as it deems necessary and after consulting the GP subcommittee of the Area Medical Committee, the Board anticipates that the requirement on a practice to dispense will be time limited, for example an application has been made before 30 June 2011 to open a pharmacy to serve the patients currently served by the dispensing practice concerned, the Board may agree to temporarily continue to make payments in accordance with sub paragraph 18.5a above until the practice ceases dispensing.”

Paragraph 18.15 - Patient Charges - is deleted as a consequence of the withdrawal of prescription charges with effect from 1 April 2011.

The previous paragraph 18.16 re payments for the provision of flu vaccines is renumbered as 18.15 and to update for the 2011-12 flu season is amended to read -

“The provisions set out in paragraphs 18.1 to 18.5 do not cover remuneration and reimbursement arrangements for dispensing and non dispensing practices in respect of the provision of influenza vaccine. Specific arrangements in relation to the reimbursement costs and fees for provision of vaccines for the 2011-12 influenza season are detailed in NHS Circular PCA(M/P)(2011)1 issued on 5 January 2011.”

### **Amendment to Part 5**

New heading “Premises and IT Expenses” is inserted

### **Amendment to Annex A – Glossary Part 2 Definitions.**

The “DES Directions” definition is amended to read

“DES Directions” means the Primary Medical Services (Directed Enhanced Services) (Scotland) Directions **2011**.

### **Amendment to Annex E - Quality and Outcomes Framework**

Replacement Annex inserted.

### **Amendments to Annex F – Calculation of Additional Services Achievement Points**

In paragraph F.5, for “£127.28”, substitute “£130.38”

In paragraph F.6, for “£127.28”, substitute “£130.38”.

## **Amendment to Annex G - Adjusted Practice Disease Factor Calculations**

Paragraph G.4 (b) is now amended to read –

“once the cut-off has been applied, re-basing the contractor figures around the new national Scottish mean to give the Adjusted Practice Disease Factor (APDF). For example, an APDF of 1.2 indicates a 20% greater prevalence than the mean, in the adjusted distribution. The rebasing ensures that in the period commencing on 1 April **2011** and ending on 31<sup>st</sup> March **2012** the average contractor (i.e. one with an APDF of 1.0) receives **£130.38** per point, after adjustment;”

Paragraph G.4 (c) is now amended to read -

“thus, adjusting via the factor the contractor’s average pounds per point for each disease, rather than the contractor’s points score. For example, a contractor with an APDF of 1.2 for CHD in the period commencing 1<sup>st</sup> April **2011** and ending on 31 March **2012** will receive **£156.46** per point scored on the CHD indicators.”