

Subject:	Eastern Pathology Alliance (EPA) Contract and Service Implementation
Presented by:	Kathryn Ellis, Director of Operations / Stephen Wells, System Sustainability Programme (Primary Care) Lead
Submitted to:	NHS West Norfolk CCG Governing Body, 29 January 2015
Purpose of Paper:	This paper provides the Governing Body with an update on the EPA contract, following discussion at the Governing Body on 27 November 2014. The paper provides further information on the EPA contract and an update on the operational service arrangements following transfer of routine GP blood science tests to Norfolk & Norwich University Hospitals NHS Trust (NNUH) in April 2014.
Executive Summary:	
<p>Further to the paper to the Governing Body on 27 November 2014 which provided details of the service transition arrangements for pathology services (blood sciences) from The Queen Elizabeth Hospital King's Lynn NHS Foundation Trust (QEHL) to the Eastern Pathology Alliance Laboratory (EPA), Norfolk & Norwich University Hospitals NHS Foundation Trust (NNUH), this paper provides an update on:</p> <ul style="list-style-type: none"> • EPA and Commissioner contractual arrangements – update regarding the implementation of the new EPA contractual performance arrangements and preparation for 2015/16 (including developing Norfolk CCGs CQUINs (Commissioning for Quality & Innovation) and QIPP (Quality, Innovation, Productivity & Prevention) initiatives) which is led by Great Yarmouth & Waveney CCG (GY&WCCG), as the co-ordinating commissioner; • Summary of Quality Issue Reports reviewed by the West Norfolk CCG Patient Safety & Clinical Quality Committee (PS&CQC) on 20 January 2015; • Update regarding procurement of new logistics provider and UKAS laboratory accreditation. 	
KEY RISKS	
<p>Failure to meet the contractual turnaround times and operational capacity to manage the patient workload from GP practices in West Norfolk. These are reviewed by West Norfolk CCG with the provider and coordinating commissioner (GY&W CCG) at the quarterly contract performance meetings, and the QEHL Local EPA Management Group.</p>	
Clinical: Failure to report timely test results to GP practices that informs both patient diagnosis and treatment and associated referral as part of the patient's care pathway.	
Finance and Performance:	
<p>Financial – The EPA five year contract should represent an improvement in value for money for pathology services for the first three years (2014/15 – 2016/17) and a subsequent review of activity and costs in Years 4 and 5. The EPA contract has been agreed with Commissioners along with the associated CQUIN scheme in 2014/15 to improve the:</p> <ul style="list-style-type: none"> • Management of diabetic patients; • Appropriateness of Microbiology urine testing in GP practices; • Appropriateness of Virology molecular test requests in GP practices. 	
<p>Performance – The contract activity baseline for West Norfolk CCG was initially informed by the test activity undertaken by GP practices in 2011/12 in order to establish the three year contract with an agreed risk sharing agreement with Commissioners.</p>	

The activity undertaken by West Norfolk CCG in Quarter1 - Quarter 3, will be reviewed in February 2015, to inform the indicative activity plan for 2015/16, co-ordinated by GY&W CCG, with Norfolk CCGs.

Impact Assessment (environmental and equalities): N/a

Reputation: Failure to maintain and develop pathology services in accordance with national standards including Clinical Pathology Accreditation (UK) Ltd laboratory standards and Care Quality Commission requirements.

Legal: N/a

Patient focus (if appropriate): Failure to deliver a high quality service including transportation of patient samples from GP practices to the central laboratory at NNUH, within four hours, resulting in a deterioration of sample integrity prior to sample analysis and the resultant impact on test turnaround times and results reported to the referring GP, as informed by the EPA Contractual Key Performance Indicators (KPIs).

Reference to relevant Governing Body Assurance Framework: 2.1; 2.5; 2.6; 2.7; 3.1; 6.3;

RECOMMENDATION:

The Governing Body is asked to note the progress updates related to the:

- Progress to implement the EPA contractual arrangements with Norfolk CCGs and the investigation of the concerns raised by GP practices, regarding the summary of GP Quality Incident Reports and the actions being taken to address these concerns;
- Progress made by EPA to implement transformational plan regarding laboratory accreditation and procurement of a single logistics provider from 1 May 2015;
- Preparation for the EPA contract in 2015/16, including development of identification of new CQUINs for 2015/16.

The Governing Body is asked to note the progress made regarding the implementation of the new contract arrangements and the recommendations in the paper and associated follow-up of Quality Issue Reports by the West Norfolk CCG Patient Safety & Clinical Quality Committee, with appropriate escalation to the West Norfolk CCG Clinical Executive Group or Governing Body.

1. INTRODUCTION

Further to the presentation of the paper to the West Norfolk CCG (WNCCG) Governing Body on 27 November 2014, this paper provides a further update on the progress in moving forward the Eastern Pathology Alliance (EPA) contractual requirements and resolution of the associated operational service issues, identified from the Quality Issue Reports (QIRs) received from GP practices in West Norfolk.

The paper also describes the progress being made by EPA to deliver the transformational service changes including the procurement of a single logistics provider to manage the transportation of pathology samples from all GP practices across Norfolk and preparation for the new regulatory laboratory accreditation requirements in 2015/16.

Finally, the paper provides a summary of the progress made by EPA following the establishment of the network service model for West Norfolk CCG, in particular providing:

- Further assurance informed by agreement of a signed contract between EPA and Commissioners and Norfolk & Norwich University Hospitals NHS Foundation Trust (NNUH), confirmed at the quarterly contract meeting, on 13 January 2015;
- An update made into the investigation of the concerns raised by GP practices, including a summary of the QIRs received since 27 November 2014, and the actions being taken to address these;
- Further feedback on the service improvements being undertaken by EPA, as reported at the last Governing Body meeting.

2. EASTERN PATHOLOGY ALLIANCE CONTRACT 2014/15

2.1 Contract Signature - 2014/15

Following the last meeting of the Norfolk CCGs/EPA/NNUH Quarterly Quality, Performance and Contract monitoring meeting held on 13 January 2015, it was confirmed that the contract had now been signed by NNUH, following confirmation of the EPA test prices, following agreement of the contract CQUINs (diabetes management, microbiology (urine testing) and virology testing) in October 2014.

2.2 Contract Variation Agreement

Great Yarmouth & Waveney CCG (GY&WCCG) also confirmed that a contract variation for 2014/15 was proposed relating to the payment and reconciliation arrangements for all CCGs and EPA. It has been agreed GY&W CCG would arrange a Commissioners' meeting to undertake a Quarter 1 - Quarter 3 (2014/15) reconciliation by the end of February 2015. Once agreed, this reconciled data would be used to inform the indicative plan for WNCCG in 2015/16 and a move to a quarterly reconciliation process from 1 April 2015.

The reconciliation of activity and associated costs will be co-ordinated by GY&W CCG at a meeting of CCGs' Chief Financial Officer and Contract leads in February 2015.

2.3 Contract Quality Issue Reporting: Co-ordinating Commissioner process

It was reported by GY&W CCG at the EPA/CCG/NNUH quarterly contract monitoring on 13 January 2015, that there still appeared to be inconsistencies across Norfolk CCGs regarding the use of the QIR reporting system through GY&W CCG. It was confirmed that all QIRs reported by WNCCG were being received and logged.

Following the circulation of information related to the EPA service issues reported at the last Governing Body on 27 November 2014, further QIRs relating to raised potassium results have been received from a number of GP practices. WNCCG escalated these reports through the PS&CQC and to the coordinating commissioner, GYW CCG, who has confirmed that QIR responses to these QIRs relating to raised potassium results would also be accompanied by a clinical report by Professor Garry John, Consultant Clinical Biochemist, NNUH, where appropriate.

The EPA WNCCG contract lead also attended the QEHL/EPA Local Management Group on 13 January 2015, where these QIRs and service issues were discussed with the EPA Blood Science Manager, EPA QEHL Clinical Lead, and Laboratory Network Manager.

2.4 Summary of QIRs received by West Norfolk CCG

A report on WNCCG QIRs received in November 2014 to January 2015 was reported to the WNCCG PS&CQC on 20 January 2015. These are summarised in the table below:

Table of QIRs reported from GP Practices (27 November 2014 to 8 January 2015)

QIR Report	November 2014	December 2014	January 2015	TOTAL
Raised Potassium Result	1	6	1	8
Communication of INR results to GP (via Community Nurse)	1			2
Sample Labelling	1			1
Delayed report – Histopathology		1		1
Incorrect sample tube	3	1		3
Total	6	8	1	15

WNCCG is working with GY&WCCG to ensure all QIRs are fully addressed and responded to by EPA, in accordance with the contractual requirements. For WNCCG there has been a reduction in the number of QIRs reported following the establishment of the new services arrangements in April 2014. WNCCG continues to ensure QIR responses are received via GY&WCCG as the co-ordinating commissioner and has asked for clarification on the contract timeline to complete QIR responses.

Overall, since the establishment of the new EPA contract in April 2014, the number of QIRs reported by GP practices in WNCCG averages 4 QIRs per month. The number of individual service issues identified has fallen with the main issues reported currently related to incidence of raised potassium results and sample labelling.

These number of issues reported should also be set against the number of tests performed on patients by GP practices in West Norfolk, which has averaged 62,800 tests/ month, since April 2014. These responses will be considered by WNCCG PS&CQC who will provide further assurance and support further actions required and escalation to the Clinical Executive Group or Governing Body, where appropriate.

2.4.1 Incidence of raised Potassium Results reported by GP practices in West Norfolk

Following the reporting of 25 patients with raised potassium results on 27 November 2014, a further 30 patients have been identified through the QIR reporting system, up to 8 January 2015.

EPA reported at both the quarterly contract meeting with CCGs and NNUH, and at the QEHLK Local Management Group on 13 January 2015, that the initial investigation of the WNCCG QIRs was being completed and that additional clinical interpretation would be included in the QIR responses to the GP practices concerned.

Further to the WNCCG discussion at QEHLK, EPA Local Management Group in December 2014 and subsequent discussion with GPs and Richard Pipkin, Blood Science Manager, EPA has proposed that an interim solution to address the local incidence of raised potassium results, prior to the new logistics solution being established from 1 May 2015.

This matter was discussed at the WNCCG PS&CQC on 20 January 2015 where it was agreed that the preferred interim solution for GPs requiring a repeat potassium test should be to refer the patient to the phlebotomy clinic at QEHLK and for the sample to be analysed at the QEHLK laboratory until the new logistics provider is in place (from 1 May 2015).

The PS&CQC asked the WNCCG contract lead to progress this matter with EPA through the QEHLK Local Management Group and with the EPA Blood Sciences Manager. Further information will be circulated to GP practices on this local action being taken.

2.4.2 EPA Sub-Group to investigate Raised Potassium results

Following the last meeting of the PS&CQC concerns are still being raised by GPs in WNCCG. Following the discussion at the EPA Contract performance and QEHLK Local Management Group meeting on 13 January 2015, it has been agreed that a small sub-group would be established to review all raised potassium results, as other CCGs in Norfolk are also experiencing similar issues. WNCCG has agreed to co-ordinate this meeting and the sub-group's membership will include:

- Professor Gary John, Head of Clinical Biochemist, NNUH
- Dr Martin Auger, Clinical Lead, EPA/ NNUH
- Dr Berenice Lopez, Consultant Chemical Pathologist, QEHLK
- Dianne Gibson, EPA Network Manager
- Richard Pipkin, Blood Sciences Manager, EPA (and QEHLK)
- GP representative , WNCCG
- Norfolk CCGs – EPA contract leads
- Keri Dos Anjos, EPA Contract, GY&WCCG (Co-ordinating Commissioner).

The WNCCG contract lead is co-ordinating this meeting and it is anticipated this group will meet by early February 2015 to progress the development of the associated action plan.

3 EPA CONTRACTUAL PERFORMANCE REQUIREMENTS FOR NORFOLK CCGS

The EPA contract with Norfolk CCGs sets out a number of performance standards that includes test turnaround times, sample collection times and other quality measures. This information forms part of the EPA/CCGs' performance reporting requirements. It was reported at the Quarterly Quality, Performance and Contract monitoring meeting held on 13 January 2015 the status of information reporting requirements as per the EPA contract.

It was agreed that the contract performance reporting requirements would be reviewed at the GY&WCCG co-ordinated meeting with Norfolk CCGs in February 2015, in order to ensure the contractual reporting requirements are appropriate to the Commissioners' needs to ensure the contract KPIS for both service delivery and quality performance are delivered.

These requirements will be agreed for 2015/16, with a further update at the next EPA/CCG/ NNUH quarterly contract monitoring meeting on 7 April 2015.

3.1 Development of EPA Contract CQUINS in 2015/16

Further to the EPA contract CQUINS 2014/15 being agreed in November 2014:

- diabetic management;
- microbiology urine testing;
- virology –specialist testing;

EPA has started to progress the development of the CQUINS performance report following the CCGs' agreement in November 2014. The co-ordinating commissioner, GY&WCCG, will ensure this is undertaken with Norfolk CCGs. Following discussion at the EPA/CCG/NNUH quarterly contract monitoring on 13 January 2015, CCGs have been asked to confirm if they wish to continue with these existing CQUINS in 2015/16 or whether they wish to develop additional CQUINS informed by the NHS Planning Guidance for 2015/16.

WNCCG will continue to review the EPA Quality Performance report (for CQUINS and QIRs) at the monthly, WNCCG PS&CQC where all Providers quality performance reports are reviewed and this group will take responsibility for considering and reporting any issues requiring escalation to the Governing Body relating to the EPA contract. EPA has asked Commissioners to identify any additional CQUINS for 2015/16 that should be developed in addition to the current CQUINS agreed in 2014/15, with a further discussion planned at the Norfolk CCGs meeting in February 2015 with updates at the monthly PS&CQC.

3.2 Logistics Procurement

EPA confirmed at the EPA/CCG/NNUH quarterly contract monitoring on 13 January 2015 that the contract award for the new logistics provider was expected to be agreed by end January 2015. The implementation of the new service arrangements (twice daily sample collections from each GP practice) was expected to commence from 1 May 2015. As part of the implementation of these new arrangements, EPA and the transport provider will be engaging with all CCGs and GP practices to agree the associated collection times.

3.2.1 Sample Collection and Storage

Following the EPA contract meeting on 13 January 2015, EPA is to issue a revised sample collection and storage information sheet to GP practices, via CCGs by the end of January 2015.

It was also agreed that as part of the implementation of the new logistics arrangements, sample storage would be reviewed as part of the implementation phase and that EPA would provide further information to GP practices concerning sample storage. Progress with the new logistics arrangements and associated sample storage requirements will be reviewed by the WNCCG PS&CQC.

3.2.2 Sample Labelling

It was reported at the EPA contract meeting that EPA had undertaken a further audit of sample labelling by individual GP practices across all CCGs in Norfolk, in October 2014 and December 2014. The audit had identified that there continued to be issues across all GP practices in Norfolk regarding sample labelling, which included:

- Use of faded printed labels;
- Labels placed upside down;
- Labels wrapped around tubes.

The issue of sample labelling has a significant impact on how samples are managed in the laboratory before samples are analysed and there had been an increase in overall errors reported in December 2014.

It has been agreed that CCGs will share this information from EPA, with their GP practices and identify where there are particular issues in order to undertake a further audit to inform discussion at the EPA contract meeting on 7 April 2015.

3.3 EPA Quality Accreditation – Assessment against UKAS ISO standards

Further to the re-accreditation of EPA pathology services against CPA accreditation standards in 2014, EPA is now commencing the accreditation of services against the new UKAS ISO standards (ISO 15189).

The QEHKL Laboratory has commenced preparation for a pre-assessment against these new standards with a planned pre-assessment in June 2015. A similar pre-assessment is also being undertaken by EPA across the “hub and spoke” service model at NNUH and JPUH.

4. SCOPING THE USE OF POINT OF CARE TECHNOLOGY FOR APPROPRIATE NEAR PATIENT TESTING

Following discussion at the last Governing Body meeting, the opportunity to utilise point of care technology to undertake appropriate analytical tests in general practice, where more immediate test results were required to inform the patient’s care plan.

Initial discussion has taken place with EPA at the QEHKL Local Management Group and WNCCG is also progressing further discussion with stakeholders how this technology could be appropriately utilised as part of the QIPP programme and care pathway work currently underway.

A discussion paper will be progressed with the WNCCG Clinical Executive to inform the future options available, informed by the emerging models of care from the Contingency Planning Team work currently in progress.

5. EPA BLOOD SCIENCES LABORATORY: SITE VISITS FOR STAFF IN GENERAL PRACTICE

Commissioners have continued to develop positive and proactive discussions with EPA following the transition to the new contractual arrangements in April 2014. EPA has also continued to work constructively with individual CCGs to address local issues identified by GP practices.

EPA has agreed to open the laboratory on a number of days in February 2015 to enable staff from general practice to visit the laboratory to gain a further insight to the services provided in an open and positive manner, which will also include further information on:

- Where do the sample go;
- How samples are analysed;
- Sample labelling;
- Sample collection tubes- explanation of different tubes;
- Why some samples take longer to analyse,

The laboratory will be open from 13:00-15:00 on 3, 9, 11, 23 and 24 February 2015. WNCCG has circulated this information to GP practices and the Practice Managers' Forum.

WNCCG welcomes this positive step to engage with local GPs and practice staff and a copy of the EPA flyer regarding the laboratory open day days, is attached (see Appendix 1).

6. HISTOPATHOLOGY LABORATORY SERVICE AT QEHKL (NON-EPA CONTRACT)

EPA confirmed at the Local Management Meeting, at QEHKL on 13 January 2015 that **all** histopathology samples will now be transported directly from GP practices to the Histopathology Department, Addenbrooke's Hospital, Cambridge, from 1 April 2015. EPA confirmed it will not be responsible for handling these samples, including those collected from QEHKL. The new sample collection arrangements will be agreed by CUFT in discussion with QEHKL and WNCCG was advised to speak to the Laboratory Manager, Histopathology Department, Addenbrooke's Hospital to seek further clarification.

This matter was also discussed at the WNCCG PS&CQC on 20 January 2015 and further clarification has been requested from QEHKL regarding the provision of histopathology services for clinicians at QEHKL, including fine needle aspiration and frozen sections for surgical cases.

This will be progressed locally with EPA and a further update will be provided at the QEHKL Local Management Group meeting in February 2015 and at the WNCCG PS&CQC.

7. RECOMMENDATION

The Governing Body is asked to note the progress updates related to the:

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- Progress made by EPA to implement transformational plan regarding laboratory accreditation and procurement of a single logistics provider from 1 May 2015;
- Preparation for the EPA contract in 2015/16, including development of identification of new CQUINs for 2015/16.

The Governing Body is asked to note the progress made regarding the implementation of the new contract arrangements and the recommendations in the paper and associated follow-up of Quality Issue Reports by the West Norfolk CCG Patient Safety & Clinical Quality Committee, with appropriate escalation to the West Norfolk CCG Clinical Executive Group or Governing Body.

Visit the Blood Sciences Laboratory at the Norfolk and Norwich Hospital



Have you ever asked yourself any of the following:

- Where do the samples go?
- How are they assayed?
- Why do I have to place a label on sample certain way?
- Why do I need all these blood tubes?
- Why do some tests take so long?

If you have, now is the opportunity to come and talk to us and have a look at our laboratory.

We are holding open lab sessions in February on the following dates:

3rd Feb 9th Feb 11th Feb 23rd Feb 24th Feb

Sessions will be at 1400 and 1500 on each day.

Numbers will need to be limited on each date so please contact the Laboratory on 01603 286929 with your preferred date and time to book a place. This invitation is open to all Staff that work within Primary Care including midwives and community staff.