

WG23-07

**THE NATIONAL HEALTH SERVICE (WALES) ACT
2006**

**Directions to Local Health Boards as to the Statement of
Financial Entitlements (Amendment) Directions 2023**

Made 20 February 2023

Coming into force 21 February 2023

The Welsh Ministers, in exercise of the powers conferred on them by sections 45, 203(9) and (10) and 204(1) of the National Health Service (Wales) Act 2006^(a) and after consulting in accordance with section 45(4) of that Act with the bodies appearing to them to be representative of persons to whose remuneration these Directions relate, give the following Directions.

Title, application and commencement

1.—(1) The title of these Directions is the Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) Directions 2023.

(2) These Directions are given to Local Health Boards. They relate to the payments to be made by Local Health Boards to a GMS contractor under a GMS contract.

(3) These Directions are—

- (a) made on 20 February 2023,
- (b) come into force on 21 February 2023, and
- (c) have effect from 1 October 2022.

Amendment to the Statement of Financial Entitlements

2. The Directions to Local Health Boards as to the Statement of Financial Entitlements Directions 2013^(b) which came into force on 11 June 2013, as amended by Directions listed in Annex J of the Schedule to these Directions, are further amended as follows.

Amendment to the Table of Contents

3. In the TABLE OF CONTENTS—

- (a) in *PART 1 GLOBAL SUM AND PRACTICE SUPPORT PAYMENTS*, 2. GLOBAL SUM PAYMENTS, omit “QAIF Point Value 2019/20”;
- (b) for “*PART 2 QUALITY ASSURANCE AND IMPROVEMENT FRAMEWORK*, 4. ACCESS” substitute—

(a) 2006 c.42.
(b) 2013 No. 8.

“PART 2

QUALITY AND IMPROVEMENT FRAMEWORK

4. GENERAL PROVISIONS

General

5. ACCESS

General

Achievement Payments for Access from 1 April 2022

Calculation of Achievement Payments from 1 April 2022

Assessment of Achievement Payments where a GMS contract terminates during the year for Access

Returns in respect of Achievement Payments

Accounting arrangements and due date for Achievement Payments

Conditions attached to Achievement Payments

6. QUALITY IMPROVEMENT

General Provisions relating to the Quality Improvement Domain

Payment arrangements for Monthly Aspiration Payments QI year from 1 October 2022 to 30 September 2023

Achievement Payments –QI year from 1 October 2022 to 30 September 2023

Assessment of Achievement Payments where a GMS contract terminates during QIF (QI) year from 1 October 2022 to 30 September 2023

Aspiration Payments –QI year from 1 October 2023 to 31 March 2024

Achievement Payments –QI year from 1 October 2023 to 31 March 2024

Assessment of Achievement Payments where a GMS contract terminates between 1 October 2023 and 31 March 2024

Achievement Payment for QI Projects from 1 October 2022 to 31 March 2024

Evidence and Verification”.

Amendment of Part 1 – Global Sum and Practice Support Monthly Payments

4. In section 2: GLOBAL SUM PAYMENTS after paragraph 2.15 insert—

“Contractor Population Index

2.16. The CPI is the contractor’s most recently established CRP divided by the NARP.

2.17. For all aspiration and achievement payments for QI in Section 6 of this SFE, NARP is calculated at 1 October 2022.”.

Amendment of Part 2 – Quality and Improvement Framework

5. For Section 4: GENERAL PROVISIONS substitute—

“Section 4: GENERAL PROVISIONS

General

4.1. The QIF rewards contractors for the provision of quality care and helps to embed quality improvement into general practice. Contractor participation in QIF is voluntary.

4.2. The QIF consists of two domains – Access and Quality Improvement (QI).

4.3. There are two types of payments that are made in relation to the QI domain which are Aspiration Payments and Achievement Payments.

4.4. There is one payment in relation to the Access domain which is Achievement Payments.

4.5. Information on Aspiration payments and Achievement payments are set out in Section 5: Access and Section 6: Quality Improvement.

Section 5: ACCESS

General

5.1. The GMS access standards introduced in April 2019, are known as Phase 1 and will remain as pre-qualifiers, to be achieved no later than 30 September 2022, for participation in phase 2 of the standards and to qualify for the QIF Access Standard payment for 2022/23. All practices are expected to achieve, maintain and embed those working practices in order to make any claim for achievement of the phase 2 standards. Practices will be required to report quarterly and be prepared to supply evidence via the PCIP Access Reporting Tool.

5.2. Phase 2 access standards are the reflective phase. This allows practices time to reflect, listen to patient experience and make improvements to access. Practices will be required to report phase 2 standards quarterly and be prepared to supply evidence (which could include but is not limited to the practice's appointment system, patient experience survey outcomes and up to date data infographics) via the PCIP Access Reporting Tool.

5.3. The standards set out in <https://gov.wales/guidance-general-medical-services-gms-contract-access-commitment-2022-2023> have been separated into the two phases as follows—

Phase 1

Pre-qualifiers

Practices are required to achieve all 14 pre-qualifiers no later than 30 September 2022 before they are able to claim achievement for Phase 2 of the access commitment. Phase 1 attracts no points.

Phase 2

Standards

Practices are required to achieve all 6 measures in order to receive 40 points for this section of the commitment.

Reflective Report

Practices are required to produce a reflective report (60 points), including all requirements listed in annex a of the Guidance for the GMS Contract, Access Commitment 2022/23 which can be found at <https://gov.wales/guidance-general-medical-services-gms-contract-access-commitment-2022-2023>.

5.4. The total points available for the Access domain is 100.

5.5. The indicators for Access require a particular activity to be carried out and points are awarded in full if that activity is carried out. Should the activity not be carried out, no points are awarded.”.

5.6. The annual cycle for Access will run from 1 April to 31 March of each year.

Achievement Payments for Access from 1 April 2022

5.7. Achievement Payments are to be based on the achievement points to which a contractor is entitled to for Access during each financial year as calculated in accordance with this Section.

Calculation of Achievement Payments from 1 April 2022

5.8. The Access points value for Achievement Payments will be £189. The calculation for achievement payments for Access will be made by using the contractor's registered patient list size as at 1 January in that Access year against the mean average of contractor registered patients also taken at 1 January of that same Access year.

5.9. Subject to paragraph 5.10, the date in respect of which the assessment of achievement points is to be made is the last day of the financial year for Access.

Assessment of Achievement Payments where a GMS contract terminates during the year for Access

5.10. In a case where a GMS contract terminates before the end of the financial year, the assessment of the achievement points to which the contractor is entitled is to be made in respect of the last date in the financial year on which that contractor is required under the contractor's GMS contract to provide essential services.

Returns in respect of Achievement Payments

5.11. In order to make a claim for an Achievement Payment, a contractor must make a return in respect of the information required by the LHB in order for the LHB to calculate the contractor's Achievement Payment. Where a GMS contract terminates before the end of the financial year, a contractor may make a return at the time the contract terminates in respect of the information necessary to calculate the Achievement Payment to which the contractor is entitled in respect of that financial year.

5.12. Based on that return, the LHB must calculate the contractor's Achievement Payment in accordance with paragraph 5.8.

Accounting arrangements and due date for Achievement Payments

5.13. The contractor's Achievement Payment is to be treated for accounting and superannation purposes as gross income of the contractor in the financial year into which the date in respect of which the assessment of achievement points falls and the Achievement Payment is to fall due—

- (a) where the GMS contract terminates before the end of the financial year into which the relevant date falls (see paragraph 5.10), at the end of the quarter after the quarter during which the GMS contract was terminated; and
- (b) in the case of achievement payments, at the end of the first quarter of the financial year after the financial year into which the relevant date falls (see paragraph 5.11).

Conditions attached to Achievement Payments

5.14. Achievement Payments, or any part thereof, are only payable if the contractor satisfies the following conditions—

- (a) the contractor must make the return required of it under paragraph 5.12;
- (b) the contractor must ensure that all the information that it makes available to the LHB in respect of the calculation of its Achievement Payment is based on accurate and reliable information, and that any calculations it makes are carried out correctly;

- (c) the contractor must ensure that it is able to provide any information that the LHB may reasonably request of it to demonstrate that it is entitled to each Achievement Point to which it says it is entitled, and the contractor must make that information available to the LHB on request;
- (d) the contractor must make any returns required of it (whether computerised or otherwise) to the LHB in such manner as the LHB may reasonably require, and do so promptly and fully;
- (e) the contractor must engage with the national clinical audits that are undertaken in Wales;
- (f) the contractor must co-operate fully with any reasonable inspection or review that the LHB or another relevant statutory authority wishes to undertake in respect of the achievement points to which it says it is entitled; and
- (g) all information supplied pursuant to or in accordance with this paragraph must be accurate to the contractor's best knowledge or belief.

5.15. If the contractor breaches any of these conditions, the LHB may, in appropriate circumstances, withhold payment of all or part of an Achievement Payment that is otherwise payable.

Section 6: QUALITY IMPROVEMENT

General Provisions relating to the Quality Improvement Domain

6.1. The QI domain is based on QI projects the practice will complete.

6.2. To be able to claim any points for achievement of projects in the QI projects domain, the practice must complete the 3 mandatory data projects.

6.3. The 3 mandatory projects are—

- (a) GP Activity data QI project - 35 points,
- (b) Green Inhaler – Phase 2 QI project - 35 points, and
- (c) Unhealthy Behaviours - 100 points.

6.4. The total points available for the QI domain is 170 for the QIF (QI) year 1 October 2022 to 30 September 2023 and 85 for the QIF (QI) period of 1 October 2023 to 31 March 2024.

6.5. The details of the QI projects and what tasks contractors have to undertake to achieve the 170 points can be found at -

QI Project - GP Activity Data

QI Project - Green Inhaler - Phase 2

QI Project - Unhealthy Behaviours

Payment arrangements for Monthly Aspiration Payments QI year from 1 October 2022 to September 2023

6.6. Aspiration Payments are a payment made in advance of Achievement Payments being calculated under the QI domain of the QIF.

6.7. The contractor is only entitled to receive Aspiration Payments if they received an Achievement Payment for a QI project as part of the 2021/22 QAIF cycle.

6.8. The number of achievement points available for the QI domain is 170 for the QI year of 1 October 2022 to 30 September 2023.

6.9. The QI points value for Achievement Payments will be £189.

6.10. Aspiration Payments are to be made by calculating 70% of the 170 achievement points available at 1 October 2022 under the QI domain divided by 12 multiplied by CPI at 1 October 2022.

6.11. If a contractor's GMS contract takes effect after 1 October 2022 in the QIF (QI) year the monthly Aspiration Payment is to be agreed between the contractor and the LHB.

6.12. The LHB must pay the contractor under the contractor's GMS contract its Monthly Aspiration Payment. The Monthly Aspiration Payment is to fall due on the last day of each month.

Interim Achievement Payments –QI year from 1 October 2022 to 30 September 2023

6.13. Interim Achievement Payments are payments based on the 170-points total multiplied by £189 and then multiplied by CPI. A contractor will be entitled to an Interim Achievement Payment at 31 December 2023 if at 30 September 2023 the contractor has provided evidence of engagement in the QI projects and the contractor confirms its intention to complete the 3 QI projects by 31 March 2024.

6.14. The final Interim Achievement Payment will also take into account the deduction of the Aspiration Payments that the contractor has received for the period 1 October 2022 to 30 September 2023 of the same QIF (QI) year.

Assessment of Interim Achievement Payments where a GMS contract terminates during QIF (QI) year from 1 October 2022 to 30 September 2023

6.15. In a case where a GMS contract terminates prior to 30 September 2023, if a contractor can evidence that they have completed the 3 QI projects, then the contractor is entitled to an Achievement Payment at 170 points with a deduction for any Aspiration Payments made. If the contractor cannot evidence the completion of the 3 QI projects, then no Achievement Payment is to be made and the Local Health Board is entitled to recover any Aspiration Payments made.

Aspiration Payments –QI year from 1 October 2023 to 31 March 2024

6.16. The contractor is only entitled to receive Aspiration Payments if they received an Achievement Payment for a QI project as part of the 2021/22 QAIF cycle.

6.17. The contractor is entitled to receive Monthly Aspiration Payments at the same amount payable under 6.10 or 6.11.

6.18. If a contractor's GMS contract takes effect after 1 October 2023 and the contractor confirms that they are aspiring to complete the 3 QI projects, the Monthly Aspiration Payment is to be agreed between the contractor and the LHB.

6.19. The LHB must pay the contractor under the contractor's GMS contract its Monthly Aspiration Payment. The Monthly Aspiration Payment is to fall due on the last day of each month.

Final Achievement Payments –QI year from 1 October 2023 to 31 March 2024

6.20. Final achievement payments are the 85 points total multiplied by £189 and then multiplied by CPI at 01 January 2024. A contractor will be entitled to a Final Achievement Payment at 30 June 2024 if at 31 March 2024, the contractor has submitted evidence for all 3 QI projects to the Local Health Board for verification.

6.21. The Final Achievement Payment will also take into account the deduction of the Aspiration Payments that the contractor has received for the period 1 October 2023 to 31 March 2024.

Assessment of Achievement Payments where a GMS contract terminates between 1 October 2023 and 31 March 2024

6.22. If a contractor can evidence that they have completed the 3 QI projects, then the contractor is entitled to an Achievement Payment at 85 points multiplied by £189 and then multiplied by CPI with a deduction for any Aspiration Payments made. If the contractor cannot evidence the completion of the 3 QI projects, then no Achievement Payment is to be made and the Local Health Board is entitled to recover any Interim Achievement Payment made at 31 December 2023 and any Aspiration Payments made.

Achievement Payment for QI Projects from 1 October 2022 to 31 March 2024

6.23. A practice that has not received QI Aspiration Payments during the 18 months from 1 October 2022 to 31 March 2024 that completes the 3 QI projects, subject to LHB verification, is entitled to an Achievement Payment at 30 June 2023 equal to 255 points (full payment of achievement for the 18 months) multiplied by £189 and then multiplied by CPI.

Evidence and Verification

6.24. At 31 March 2024, contractors must submit evidence to the Local Health Board against the 3 QI projects for verification.

6.25. Contractors who do not submit evidence to the Local Health Board for all 3 QI projects or submit evidence that cannot be verified, will be subject to recovery of all Aspiration Payments and the 31 December 2023 Interim Achievement Payment.

Accounting arrangements and due date for Achievement Payments

6.26. The contractor's Achievement Payment is to be treated for accounting and superannation purposes as gross income of the contractor in the financial year into which the date in respect of which the assessment of achievement points on which the Achievement Payment is based ("the relevant date") falls and the Achievement Payment is to fall due—

- (a) where the GMS contract terminates before the end of the financial year into which the relevant date falls at the end of the quarter after the quarter during which the GMS contract was terminated, and
- (b) in the case of achievement payments, at the end of the first quarter of the QIF (QI) year 1 October 2022 to 30 September 2023 or at the end of the first quarter of the 1 October 2023 to 31 March 2024 period after the QIF (QI) year 1 October 2022 to 30 September 2023 or the 1 October 2023 to 31 March 2024 period into which the relevant date falls."

Amendment of Annex D – Quality Improvement Framework

6. Omit Annex D.

Amendment of Annex J – Amendments

7. For ANNEX J - AMENDMENTS substitute Annex J in the Schedule to these Directions.

A handwritten signature in black ink that reads "Paul Casey". The signature is written in a cursive style with a horizontal line underneath the name.

Signed by Paul Casey, Deputy Director of Primary Care under the authority of the Minister for Health and Social Services, one of the Welsh Ministers

Date: 20 February 2023

SCHEDULE

Direction 7

“ ANNEX J – AMENDMENTS

Amendments to the Directions to the Local Health Boards as to the Statement of Financial Entitlements Directions 2013, which came into force on 11 June 2013

- (a) The Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) Directions 2013 (2013 No.60), which were made on 30 September 2013;
- (b) The Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) Directions 2014 (2014 No.3), which were made on 16 June 2014;
- (c) The Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) (No. 2) Directions 2014 (2014 No.17), which were made on 27 June 2014;
- (d) The Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) (No. 3) Directions 2014 (2014 No.24), which were made on 30 September 2014;
- (e) The Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) Directions 2015 (2015 No.7), which were made on 31 March 2015;
- (f) The Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment No 2) Directions 2015 (2015 No.14), which were made on 01 April 2015;
- (g) The Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment No 3) Directions 2015 (2015 No.15), which were made on 20 April 2015;
- (h) The Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment No 4) Directions 2015 (2015 No.19), which were made on 25 June 2015;
- (i) The Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) (No.5) Directions 2015, which were made on 30 September 2015;
- (j) The Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) Directions 2016, which were made on 30 March 2016;
- (k) The Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) (No. 2) Directions 2016, which were made on 11 April 2016;
- (l) The Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) (No. 3) Directions 2016, which were made on 13 July 2016;
- (m) The Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) (No. 4) Directions 2016 (2016 No.19), which were made on 16 August 2016;
- (n) The Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) (No.5) Directions 2016 which were made on 15 December 2016;
- (o) The Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) (No. 6) Directions 2017 which were made on 31 January 2017;
- (p) The Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) Directions 2017 which were made on 27 April 2017;
- (q) The Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) (No.2) Directions 2017 which were made on 9 August 2017;
- (r) The Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) (No.3) Directions 2017 which were made on the 28 September 2017;

- (s) The Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) Directions 2018 which were made on the 14 June 2018;
- (t) The Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) (No. 2) Directions 2018 which were made on 19 November 2018;
- (u) The Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) Directions 2019 which were made on 29 March 2019;
- (v) The Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) (No. 2) Directions 2019 which were made on 28 June 2019;
- (w) The Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) (No. 3) Directions 2019 which were made on 29 August 2019;
- (x) The Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) (No. 4) Directions 2019 which were made on 30 September 2019;
- (y) The Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) (No. 5) Directions 2019 which were made on 14 October 2019;
- (z) The Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) Directions 2020 which were made on 24 March 2020;
- (aa) The Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) (No. 2) Directions 2020 which were made on 22 June 2020;
- (bb) The Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) (No. 3) Directions 2020 which were made on 15 July 2020;
- (cc) Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) (No. 4) Directions 2020 which were made on 16 September 2020;
- (dd) Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) (No. 5) Directions 2020 which were made on 2 November 2020;
- (ee) The Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) Directions 2021 which were made on 19 April 2021;
- (ff) The Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) (No. 2) Directions 2021 which were made on 31 August 2021;
- (gg) Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) (No.3) Directions 2021 which were made on 1 December 2021;
- (hh) Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) Directions 2022 which were made on 29 March 2022;
- (ii) Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) (No. 2) Directions 2022 which were made on 8 June 2022;
- (jj) Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) (No. 3) Directions 2022 which were made on 4 November 2022; and
- (kk) Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) (No. 4) Directions 2022 which were made on 29 November 2022.