NHS

CSU Collaborative

Partnership of Commissioning Support Units

PCNs for Commissioning Organisations

User Guide

June 2022

1.An introduction to PCNS using CQRS

This guide is for commissioners creating offers of participation for the Primary Care Networks (PCN) services on CQRS.

Creating offers for PCN services will follow a different process to non-PCN services. There are also changes to how commissioners will view PCN service information in CQRS.

PCN services are offered to GP practices from the lead commissioning organisation through the PCN as a whole entity - commissioners will not be able to deselect GP practices.

If an organisation leaves the network early, CQRS will automatically end their participation.

These services can use a new value called Weighted Practice List Size (WPLS) which is a modified version of CRP, and this will be automatically populated in CQRS for calculation.

There will be two new user roles available in CQRS.

PCN View

PCN View is available to GP Practice and PCN organisations. It allows access to:

- new dashboards that allow the user to view all GP practices within their PCN including data submission details and payment declaration details.
- expanded reporting to enable users to view additional organisations.

PCN Management

PCN Management is available to PCN organisations. It gives access to:

- new dashboards that allow the user to view all GP practices within their PCN, including data submission details and payment declaration details.
- add/update GP practice data within their PCN.
- expanded reporting to enable users to view additional organisations.

It is imperative that you also download a copy of the guide titled - **PCNS for Service Providers** as well as watching both video tutorials in modules 11 and 12 so that you have a much greater understanding of the end to end process. The link to the guides as well as the CQRS Learning Centre can be found in section 13 - Additional Information.

Disclaimer:

All names, images and any financial information are completely fictitious and have been created entirely for training purposes and do not relate to any real organisations.

PCN	▼ Org ID ⇕	Service Provider Name	⇕ Parent Organisation
BISCAY PARTNERSHIP PCN	V54321	LIGHTHOUSE MEDICAL	NHS VIKING, NORTH & SOUTH UTSIRE
BISCAY PARTNERSHIP PCN	V12345	NORTHSTACK SURGERY	NHS VIKING, NORTH & SOUTH UTSIRE
BISCAY PARTNERSHIP PCN	V25142	ROCKALL MEDICAL CENTRE	NHS VIKING, NORTH & SOUTH UTSIRE

2.Viewing your available PCN Services

The Available Services sub-tab allows you to view the PCN services which are available to offer out to your Primary Care Network.
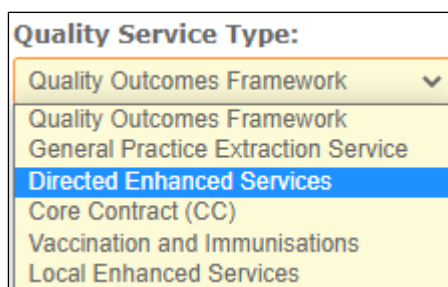
Please note that Network Participation Payments 2021 is not a Primary Care Network and will therefore not be referenced in this document.

To view this description, click on **Participation Management**, then **Manage Services**, followed by clicking on **Available Services**.
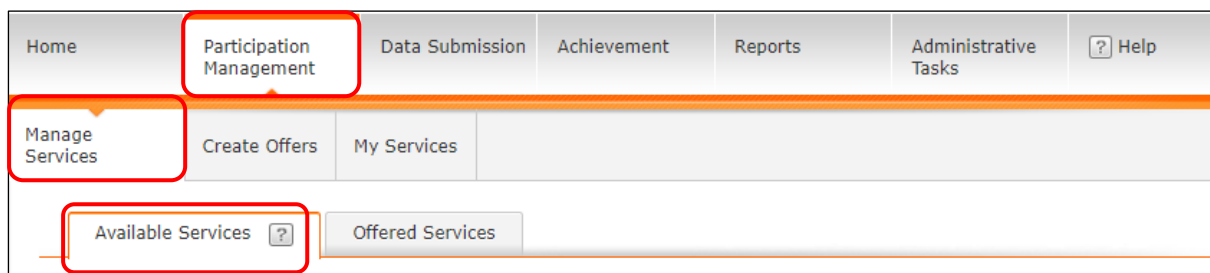
Next is to select your **Quality Service Type** from the drop-down menu.

Select the **Direct Enhanced Services**.

Once this has been selected you will see all the available PCN Quality Services.

Primary Care Networks 2020/21	The second year of the Network Contract DES will begin in April 2020 and the data being collected linked to this service will be expanded to cover: - the introduction of two new workforce roles, physician associates and advanced clinical physiotherapist; and -the introduction of five of the seven new service requirements, covering Enhanced Health in Care Homes, Anticipatory Care, Personalised Care, Early Cancer Diagnosis and Structured Medication Reviews. The data collected will be to understand how the new (and existing) staff employed via the Additional Roles Reimbursement Scheme, within the Network Contract DES, are increasing capacity within General Practice and to monitor the uptake of patient interactions with these additional staff. It will also support monitoring delivery of the five service requirements. This data will be collected at GP practice level and then reported in CQRS at both practice and PCN level (when the later functionality becomes available).	Original	03/08/2020
Primary Care Networks calculations 2020/21 - Clinical Director payment	Clinical Director Payment: The Clinical Director payment will be payable from the start of the month in which the PCN has been approved by the commissioner. The above payments will be payable on a monthly basis by no later than the last day of the month in which the payment applies and taking into account local payment arrangements. There is no GPES extract or manual data entry required for this service.	Original	03/08/2020
Primary Care Networks calculations 2020/21 - Core PCN funding payment	Core PCN Funding Payment: The Core PCN funding payment will be payable from the start of the month in which the PCN has been approved by the commissioner. The above payments will be payable on a monthly basis by no later than the last day of the month in which the payment applies and taking into account local payment arrangements. There is no GPES extract or manual data entry required for this service.	Original	03/08/2020

There are 4 PCN services which are currently available to you to offer your network (s) These are:

- PCN Core PCN Funding 2021
- PCN Clinical Director Payment 2021
- PCN Extended Hours Access Payments 2021
- Primary Care Networks 2020/21

3.Participation Management

Service offers are automatically sent to all PCN's within the commissioner's authority when the Lead Commissioning Organisation selects to complete the offer.

For auto- accept offers, no action is required by the practice as this is undertaken by the commissioner on behalf of the practice.

New Organisations

When new organisations join a PCN, the following steps must be taken to add the new service provider to the network offers:

- ○ ODS must publish the updated relationship detail.
- ○ CQRS will automatically pick up the new relationship detail from ODS within 24 hours.
- ○ Commissioning Organisation will offer the PCN service(s) again. This will automatically route to any organisations that do not already have the offer. This will need to be offered on an individual practice basis using the practice code. For those CQRS services that are automatically accepted, the commissioner will need to enter the date that the practice joined the PCN.

Excluding PCNs

It was not originally intended for individual PCN's or service providers within a PCN to be excluded from any PCN services available. However, should a situation arise that a PCN should need to be excluded from a service for any reason, you will be able to cancel it on the Offered Services page after the offer is complete. This will need repeating each time new offers are made for newly joining organisations.

Offered Services

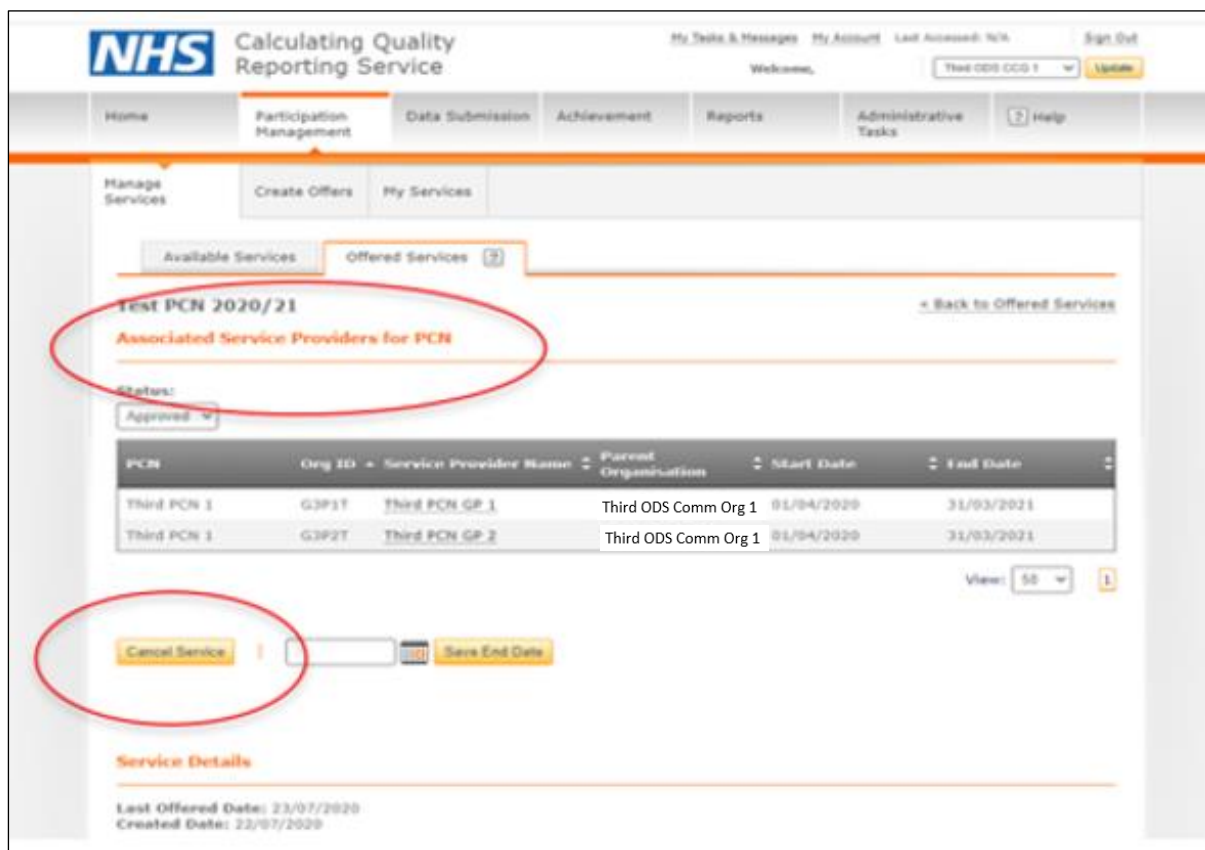Offered Services will have a new transition page when a PCN service is selected:

1. First page will show the list of PCNs.

2. Once you select the link, you will see the associated Service Providers as usual.

3. Cancel Service Function can only be applied for the while PCN, not individual practices or service providers.

4.The Services which have auto-accepted participation offers

In module 4 we looked at the functionality of offering Quality Services to multiple Service Providers manually. In the case of PCNS, step 3 will be by-passed as this service will be going out to all GP practices associated within that Commissioning Organisation and this ultimately means that this step will bypass the acceptance process of the offer.

The PCN Services will automatically accept the offer by default. The automation cannot be overridden nor will you have the ability to de-select any GP practices.

You will be reminded that this is an automated offer at the bottom of the screen in Step 2.

5.The Services which have auto-declared Achievement

Auto-declared Achievement is different to the Services which have been offered to you previously and have required manual or auto-data submission. The PCN services do not require you to do this as it is automatically declared. The 3 PCN services are:

- PCN Core PCN Funding 2021
- PCN Clinical Director Payment 2021
- PCN Extended Hours Access Payments 2021

The Primary Care Networks 2020/21 is the only Service which will require a data extraction. This will be auto-extracted using GPES at quarterly frequencies.

This data will be collected at GP practice level and then reported in CQRS at both practice and PCN level (when the later functionality becomes available).

In each of the Quality Services there is some very useful information contained within each of the descriptions. There will be an indication of payment frequencies as well as reminding you that there is no provision of data entry requirements, which in the case of the Quality Services currently available to your network will not apply as they are auto-calculated.

| Primary Care Networks calculations 2020/21 – Extended hours access payment | Extended hours access payment: The extended hours access payment will be payable from the start of the month in which the PCN has been approved by the commissioner. The above payments will be payable on a monthly basis by no later than the last day of the month in which the payment applies and taking into account local payment arrangements. There is no GPES extract or manual data entry required for this service. | Original |

6.Creating a Service Offer

Please note that this functionality can only be completed by users with a 'Commissioning Management' role in CQRS. You can find out more about CQRS user roles in the CQRS Administration module, as well as the User Roles Job Aid.

The creation of offers for Primary Care Networks is very similar to what you learnt in module 4, the only differences will be that you will not select the Service Providers you wish to offer the Quality Service to, instead you will choose your Quality Service, define the Service Details and after you have confirmed and submitted your Service it is automatically approved by all the Service Providers under your particular Primary Care Network.

Please note that unlike other Quality Services, any that have been created and set for PCNS cannot be customised.

Let's begin by creating an offer of a Quality Service for our Primary Care Network.

From the **Participation Management tab** and **Create Offers** sub-tab you can select the Quality Service type by clicking on the dropdown arrow under the **Payment Type** menu.

Select the **Direct Enhanced Service**. After making your selection, the Quality Services available appear below.

Please note again that there will be no GPES extract or manual data entry required for these three services with the exception of Primary Care Networks 2020/21.

From our selection, we are going to click on the **Primary Care Networks Calculations 2020/21 – Clinical Director payment.** This is Step 1.

As with all other Service offers, there are 5 steps that need to be taken when Commissioners create a Quality Service.

The Service Start and End dates - these are the default dates and are the period of time the participation in the Quality Service is active. Dates can be overridden but must remain within the dates in the original Service Start and End Dates.

Once you have acknowledged the Service Details, select the **Continue** button at the bottom of the page.

As Step 3 is automatically bypassed, we move straight onto Step 4 which displays a list of the Service Providers who will be participating in this particular Quality Service.

Please note that If you leave the system at this point, your progress will not be saved.

Once you review the offer, you can continue to the next screen by selecting the **Submit** button.

Step 5, the last step, is to submit the offer. You can review the information and then decide to submit the offer or not. To submit, select the **Yes** button.

Steps 1 to 5 have been completed. After you have confirmed that you want to submit the selected service you will receive a notification that the service has been submitted and is currently processing.

You can go back to look at the service you have just offered out by either clicking on the **View offered services** above or alternatively, this can be accessed by **Participation Management → Manage Services → Offered Services.** Selecting the **Financial Year** will refresh the list.

If you click on the link as highlighted in blue above, you can see which PCNS have been offered the Service. A full list including PCN ID, PCN Name and Parent Organisation will be displayed.

To drill down a little further to see the names of the Service Providers within any of the listed PCNS, click on the PCN name as shown in blue below.

You will then be presented with a list displaying the names of the practices associated with that PCN. You will also notice that the status of the service is that it has been automatically approved.

7.Data Entry and Calculations

Most PCN services do not require data submission and will calculate automatically on the 1st of the month.

- If data is required, then once all data is received, the calculation will trigger.
- PCN services do calculate at the individual Service Provider level first even though these individual payment amounts will not be sent to the Service Providers and instead the total value will be aggregated and paid to the PCN's nominated payee.

Approval Process

PCN services are set up to skip the Service Provider declaration since these payments will be made at the network level, however Commissioning Organisation Approval at the individual Service Provider level allows the Commissioning Organisation to identify inaccurate values prior to aggregating the payments into a single PCN payment declaration.

Weighted Practice List Size

Weighted Practice List Size uses the January quarter data for both calculations and in reporting. This can be found in the following reports:

- Provider Payment Declaration

If a different WPLS is desired from the one provided in the quarterly file e.g., due to practice merger, the January quarter data can be updated manually by submitting the List update request form to support@cqrs.co.uk. Please also refer to the PCN FAQs for Users - December 2020: **Click here**

8.Financial Approval for auto-declared Achievement

Commissioning Organisations have two tiers of financial approval.

The **Approval Management** role can approve achievement and payment declarations for Service Providers.

The **Finance Management** role can provide finance approval to achievement and payment declarations after approval from the Approval Management role.

These two roles could be the responsibility of two different individuals, or by the same individual.

Once the 5 Steps have been done, as shown above, it will be time to go to **Achievement**, then **Declaration Management**. The Status should already be selected to show 'Awaiting Commissioning Organisation Approval'. If it isn't you can select it from the drop-down menu below.

Further down the page you will see a list of all the Service Providers who require Commissioning Approval. This is the first of two approvals that are required by the Commissioner.

You will also be able to view the Achievement Amount for each Service Provider.

You will need to place a tick into the box or boxes adjacent to the Service Provider you wish to Approve. The **Select All** check box allows you to select all the Service Providers in one go.

Select All ☐	Org ID ▲	Name ↕	Quality Service	↕	Payment Period ↕	Date of Achievement ↕	Achievement Amount ↕	Notes
☑	V54321	LIGHTHOUSE MEDICAL	Primary Care Networks calculations 2020/21 - Clinical Director payment		01/04/2020 - 30/04/2020	30/04/2020	£240.57	▶ Notes
☑	V12345	NORTHSTACK SURGERY	Primary Care Networks calculations 2020/21 - Clinical Director payment		01/04/2020 - 30/04/2020	30/04/2020	£312.32	▶ Notes
☑	V25142	ROCKALL MEDICAL CENTRE	Primary Care Networks calculations 2020/21 - Clinical Director payment		01/04/2020 - 30/04/2020	30/04/2020	£198.54	▶ Notes

Finally, click **Approve**.

Approve	Hold	Cancel	Revert

9.Dashboards and Payments

Both the Data Submission and Achievement tabs have new dashboards available to track in progress payment calculations and approval processing.

Network Achievement

This dashboard provides the status at the individual organisation level within the PCN to display eith*er Awaiting Data or Data Submitted.*

- *Awaiting Data* can either mean that data needs to be received or it could be caused by an organisation being added to the PCN after the scheduled payment processing completed for that achievement date.
- *Data Submitted* signifies that a successful calculation has been completed.

The statuses displayed in CQRS are in bold below.

1. *Awaiting Data* includes organisations that require further detail before a payment declaration can be generated. Note: it might take 24 hours for this to be reflected in the report.
2. *Awaiting Commissioning Organisation Approval* verifies that the payment has not yet been aggregated to the network level and that the commissioner needs to approve payments auto declared by practices.
3. *Awaiting Network Achievement* shows that for these payments, the Commissioning Organisation Approval is complete, but it is still waiting for 100% of payments for the PCN to be approved by the commissioner.
4. *Aggregated* represents that 100% of payments for the PCN have been approved by the commissioner and the individual payments have been aggregated to the network level, however they are still awaiting Financial Approval.
5. **Aggregated Complete**

Aggregated payment status lifecycle:

1. The aggregated payment then moves on to be processed and paid.
2. **Awaiting Financial Approval** - labelled as "Approved" on reports.
3. **Payment Requested.**
4. **Sent to SSD** (or Payment Not Needed if payee is set to not generate a payment).

PCN payments will be made to the nominated payee. Nominated payees that are not service providers (general practices) are currently set to not generate a payment so these will need to be paid off-system.

We can see in this image that the 3 Service Providers Achievement Amounts have now been aggregated and will mean that it can now go to the 2nd stage of Approval - this is called Financial Approval.

PCN	Org ID	Service Provider Name	Parent Organisation	Nominated Payee	Achievement Amount	Declaration Status
BISCAY PARTNERSHIP PCN	V54321	LIGHTHOUSE MEDICAL	NHS VIKING, NORTH & SOUTH UTSIRE	NORTHSTACK SURGERY	£240.57	Aggregated
BISCAY PARTNERSHIP PCN	V12345	NORTHSTACK SURGERY	NHS VIKING, NORTH & SOUTH UTSIRE	NORTHSTACK SURGERY	£312.32	Aggregated
BISCAY PARTNERSHIP PCN	V25142	ROCKALL MEDICAL CENTRE	NHS VIKING, NORTH & SOUTH UTSIRE	NORTHSTACK SURGERY	£198.54	Aggregated

New tasks and messages will keep commissioners informed of the status of the payment declarations within the PCN.

Once 100% of the payment declarations have been submitted the Commissioner will then receive a new task. Clicking on the subject **Service Requiring Financial Approval** will open the task.

Type	Subject	Detail	Achievement Date	Create Date	Count
TSK	Service Requiring Financial Approval	Primary Care Networks calculations 2020/21 - Clinical Director payment	30/09/2020	29/09/2020	23

You will then be taken directly to the approval section.

Declaration Management [?] - Financial Year | 2020/2021 ▾ |

▶ Run Achievement Summary Report

ⓘ There are a total of 23 records matching your criteria.

Status:
| Awaiting Financial Approval ▾ |

Quality Service:
| Primary Care Networks calculations 2020/21 - Clinical Director payment ▾ |

Below will display a list of all the Service Providers, the name of the Quality Service as well as the Achievement Amount. You will need to select the practice (s) prior to approving the payment amount.

Place a tick in the **Select All** box or alternatively place a tick in the box next to the corresponding GP practice.

Select All ☐	Org ID ▲ Name	Quality Service	Payment Period	Date of Achievement	Achievement Amount	Notes
☑	V54321 LIGHTHOUSE MEDICAL	Primary Care Networks calculations 2020/21 - Clinical Director payment	01/04/2020 - 30/04/2020	30/04/2020	£240.57	▶ Notes
☑	V12345 NORTHSTACK SURGERY	Primary Care Networks calculations 2020/21 - Clinical Director payment	01/04/2020 - 30/04/2020	30/04/2020	£312.32	▶ Notes
☑	V25142 ROCKALL MEDICAL CENTRE	Primary Care Networks calculations 2020/21 - Clinical Director payment	01/04/2020 - 30/04/2020	30/04/2020	£198.54	▶ Notes

Once the practices have been selected, scroll down to the very bottom of the screen and click the **Approve** button.
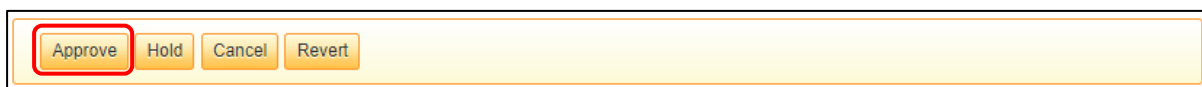
Once this has been Approved you will receive notification that the Payment Declaration request has been submitted.
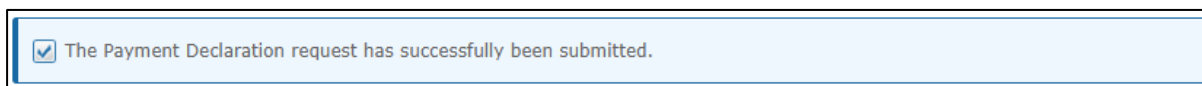
Once financially approved, the status of the individual payment calculations will then show as "Aggregated Complete" under the **Network Declaration Management** tab.
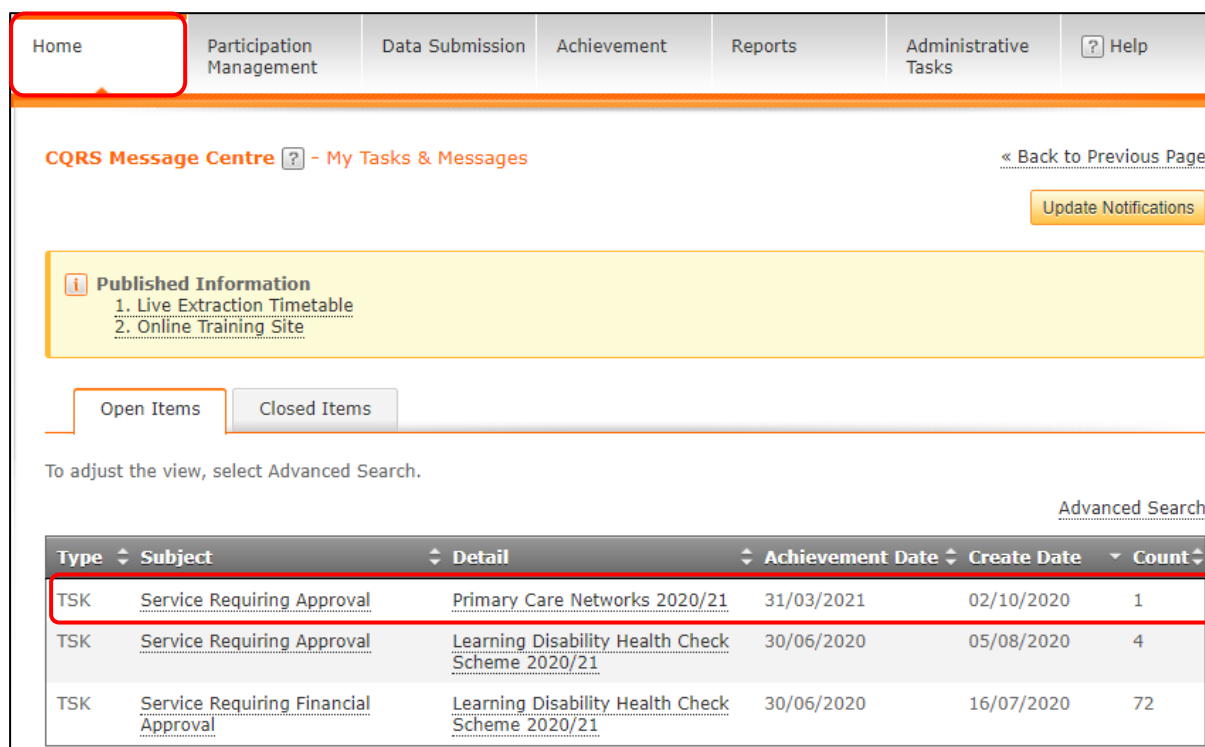
The payment file will then be sent PCSE for financial processing. The payment amount will then be sent to your chosen Nominated Payee.

For information on Nominated Payees, please refer to section 11 below.

10.   Service Provider Data Submission & Financial Approval

This particular section which covers data submission is solely for submitting information relating to **Primary Care Networks 2020/21** which is the only PCN Service which requires some data submission from a Service Provider. This data submission is automated.

Once a Service Provider has their achievement data auto-submitted , you will receive a **task** which can be found on your homepage – this particular task informs you that the Service requires Approval.

Clicking on the **Service Requiring Approval** link will take you directly to the **Awaiting Commissioning Organisation Approval** page.

Below will display a list of all the Service Providers, the name of the Quality Service as well as the Achievement Amount. You will need to select the practice (s) prior to approving the payment amount.

Place a tick in the **Select All** box or alternatively place a tick in the box next to the corresponding GP practice you wish to Approve.

Once the practices have been selected, scroll down to the very bottom of the screen and click the **Approve** button.

Once this has been Approved you will receive notification that the Payment Declaration request has been submitted.

11. Checking your Network's Achievements

To check your network's achievements and what the current declaration status is, do the following:

From the **Achievement tab**, click on the **Network Declaration Management** subtab. Select your Financial Year, Quality Service and Achievement Date.

This image illustrates that only 1 of the 3 Service Providers have submitted their Achievement Data. Once the remaining 2 have submitted their data the 100% threshold would have been met and the status will change to Aggregated before Financial Approval.

PCN	Org ID	Service Provider Name	Parent Organisation	Nominated Payee	Achievement Amount	Declaration Status
BISCAY PARTNERSHIP PCN	V54321	LIGHTHOUSE MEDICAL	NHS VIKING, NORTH & SOUTH UTSIRE	NORTHSTACK SURGERY	£240.57	Awaiting Network Achievement
BISCAY PARTNERSHIP PCN	V12345	NORTHSTACK SURGERY	NHS VIKING, NORTH & SOUTH UTSIRE	NORTHSTACK SURGERY		Awaiting Network Achievement
BISCAY PARTNERSHIP PCN	V25142	ROCKALL MEDICAL CENTRE	NHS VIKING, NORTH & SOUTH UTSIRE	NORTHSTACK SURGERY		Awaiting Network Achievement

12. Frequency of Calculations

Information on payment calculations is displayed below. There is some useful information contained within the description of each of the PCN Quality Services. Please see section 4 above.

The scheduled job runs at 10pm on the 1st day of each month. The calculations will then run through the night and complete by the morning of the 2nd day of the month.

Quarterly calculations:

- Primary Care Networks 20-21

Monthly calculations:

- Clinical Director Payment 20-21
- Core PCN Funding 20-21
- Extended Hours Access Payment 20-21

13. Information about Nominated Payees

Commissioners can easily see who the Service Providers Nominated Payee is by clicking on the Achievement tab and then selecting the Network Declaration Management subtab.

PCN	Org ID	Service Provider Name	Parent Organisation	Nominated Payee	Achievement Amount	Declaration Status
BISCAY PARTNERSHIP PCN	V54321	LIGHTHOUSE MEDICAL	NHS VIKING, NORTH & SOUTH UTSIRE	NORTHSTACK SURGERY	£240.57	Aggregated
BISCAY PARTNERSHIP PCN	V12345	NORTHSTACK SURGERY	NHS VIKING, NORTH & SOUTH UTSIRE	NORTHSTACK SURGERY	£312.32	Aggregated
BISCAY PARTNERSHIP PCN	V25142	ROCKALL MEDICAL CENTRE	NHS VIKING, NORTH & SOUTH UTSIRE	NORTHSTACK SURGERY	£198.54	Aggregated

14. The Cancellation of a Service

If you wish to cancel a Service please be advised that this function can only be applied for the whole PCN, not individual Service Providers. This is also shown in section 3 above To cancel such a Service, please do the following:

Home	Participation Management	Data Submission	Achievement	Reports	Administrative Tasks	? Help

Manage Services	Create Offers

Available Services	Offered Services ?

Financial Year:
2020/2021 ∨

From the list, select the Service you wish to cancel. Be sure that it is the correct one! Please note that this may take a minute or two to load.

Services	▲ Date Offered
Clinical Pharmacists in General Practice years 1-3 2020/21	
Primary Care Networks 2020/21	

Select the PCN.

PCN ID	PCN Name	Parent Organisation
FA7573	BISCAY PARTNERSHIP PCN	NHS VIKING, NORTH & SOUTH UTSIRE

Unlike with other Services, you cannot de-select any Service Provider.

PCN	Org ID	Service Provider Name	Parent Organisation	Start Date	End Date
BISCAY PARTNERSHIP PCN	V54321	LIGHTHOUSE MEDICAL	NHS VIKING, NORTH & SOUTH UTSIRE	01/04/2020	31/03/2021
BISCAY PARTNERSHIP PCN	V12345	NORTHSTACK SURGERY	NHS VIKING, NORTH & SOUTH UTSIRE	01/04/2020	31/03/2021
BISCAY PARTNERSHIP PCN	V25142	ROCKALL MEDICAL CENTRE	NHS VIKING, NORTH & SOUTH UTSIRE	01/04/2020	31/03/2021

Lastly is to click the **Cancel Service** button.

Cancel Service		Save End Date

15. PCN Reporting

Currently the following reports provide details about PCN services and payments to support you with your daily tasks in CQRS:

Provider Payment Declaration (located under Declarations)

This report incorporates a new report called **Network Provider Payment Declaration** when it is run for a PCN service. This new report will automatically display at the top level, then you can drill into the Provider Payment Declaration report for more detail on these services. When running the report for a non-PCN service, the Provider Payment Declaration report will display first as usual.

Network Provider Payment Declaration Report

Primary Care Networks calculations 2020/21 - Extended hours access payment

Underlying Data: Yes

**Network Organisation Relationship** (located under Administrative)

This is a new report showing relationships between Service Providers and Primary Care Networks and the date ranges for these relationships.

Nominated Payee (located under Administrative)

This is a new report showing who is the nominated payee for the Primary Care Networks for the date ranges selected.
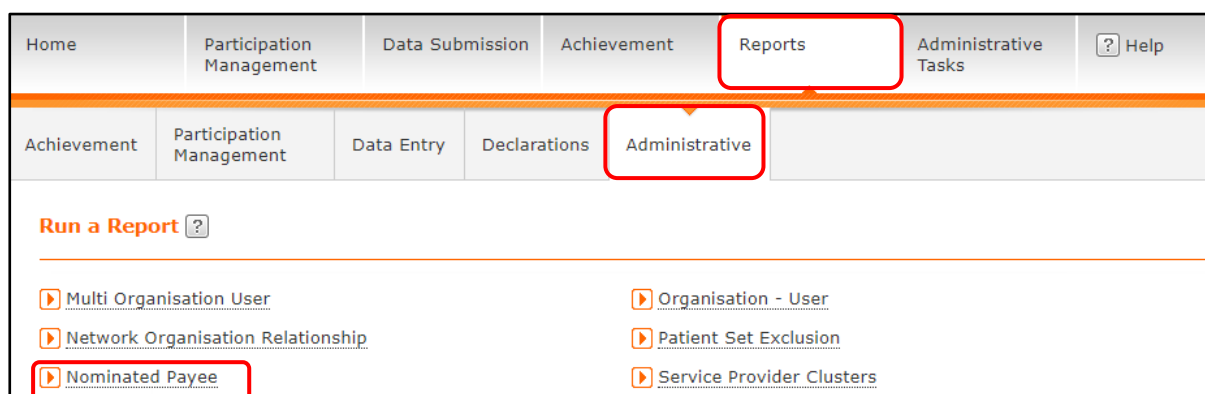
16. Further Enhancements Planned

CQRS development continues to support PCN functionality and additional features planned for the CQRS application include:

- **Removing the PCN flag for Service Provider Clusters:** This functionality was used to track and manage PCN networks until the PCN service features were available.
- **Adding an exception process to allow commissioners to request an aggregated payment prior to reaching 100% threshold for the PCN**. This is to protect organisations from being blocked from payment due to extenuating circumstances. For example, if a service provider is being terminated from a network due to a violation of network agreement, then the commissioner may choose not to approve the individual service provider declaration for an achievement date that has already calculated a value for the irrelevant organisation. If this type of exception is warranted, the commissioner will submit this through a request to support@cqrs.co.uk

Further enhancements to the reports are being developed, so the following reports will undergo additional updates to fully support the PCN services and/or payments:

Provider Payment Declaration/Network Provider Payment Declaration

Where can I find this information now?

In-process payments can be tracked on the dashboard under Achievement -> Network Declaration Management.

- The underlying data will show all payment related to a PCN service regardless of if they are aggregated or not. This should make it clearer to see which payments require approval so that they can be aggregated. The top-level white row will still show as awaiting data if aggregation has not yet occurred and will be populated once the aggregation takes place and a payment value is created for the nominated payee.
- The report has been restricted to show only data relevant to the organisation running it if they fall within the correct hierarchy and will limit the achievement dates accordingly.
- The size of spacing has been reduced, however, as there is a large amount of data this can end up filling into two pages.
- The weighted practice list size is now shown when you drill down into the provider payment report.
- You can now drill down into provider payment for both the white row nominated payee and the underlying data organisations.

- When drilling into the provider payment report it will now run for the organisation selected within the report (previously the report was run against any organisation selected on the parameter page).
- The underlying data will show all payment related to a PCN service regardless of if they are aggregated or not. This should make it clearer to see which payments require approval so that they can be aggregated. The top-level white row will still show as awaiting data if aggregation has not yet occurred and will be populated once the aggregation takes place and a payment value is created for the nominated payee.
- Offered services page has been updated to show PCN services.
- The statuses on the payment declaration report have been updated.

Report Run Date: 12/11/2020
Page 1 of 4

Network Provider Payment Declaration Report

Primary Care Networks calculations 2020/21 - Core PCN funding payment

Underlying Data:	Yes
Payment Period:	All
Declaration Status:	All
Awaiting Data:	30
Awaiting Service Provider Approval:	0
Awaiting Commissioning Organisation Approval:	0
Awaiting Network Achievement:	0
Network Achievement Aggregated:	0
Network Achievement Complete (Final State):	0
Approved:	0
Payment Requested:	0
Sent to SSO (Final State):	3
Payment Not Needed (Final State):	0
On Hold:	3
Cancelled:	0

Nominated Payee ID	Nominated Payee Name	CRP	Weighted Practice List Size	Parent Organisation Name	Commissioning Organisation	Amount	Achievement Date	Status	Declared Date	Approved Date	Aggregated Date	Financial Approval Date
							31/03/2021	Awaiting Data				
							28/02/2021	Awaiting Data				
							31/01/2021	Awaiting Data				
							31/12/2020	Awaiting Data				
							30/11/2020	Awaiting Data				
							31/10/2020	ON_HOLD	02/10/2020			
							30/09/2020	Awaiting Data				
							31/08/2020	SENT_TO_SSO		12/09/2020	15/09/2020	15/09/2020
							31/08/2020	AGGREGATED-COMPLETE	02/09/2020		14/10/2020	
							31/08/2020	AGGREGATED-COMPLETE	02/09/2020		14/10/2020	
							31/08/2020	AGGREGATED-COMPLETE	02/09/2020		14/10/2020	

Payment Declaration

There are some new statuses associated with the PCN payment declarations. These include Awaiting Network Achievement, Aggregated, Aggregated Payment Sent (sometimes referred to as Aggregated-Complete), and Rejected. When payments are in these statuses, they do not display on the report.

Where can I find this information now?

In-process payments can be tracked on the dashboard under Achievement -> Network Declaration Management.

Annual Activity Summary

There are some new statuses associated with the PCN payment declarations. These include Awaiting Network Achievement, Aggregated, Aggregated Payment Sent (sometimes referred to as Aggregated-Complete), and Rejected. When payments are in these statuses, they do not display on the report.

Where can I find this information now?

In-process payments can be tracked on the dashboard under Achievement -> Network Declaration Management.

Achievement Summary

This report does not yet have the Weighted List Size displayed.

Where can I find this information now?

Weighted List Size can be viewed on Detailed Provider Achievement or Provider Payment Declaration reports.

17. Additional Information

Note that some links for additional information are displayed. You can also find additional training resources in the CQRS Learning Centre.

The Online Courses tab contains more in-depth training modules for both Commissioning Organisations and Service Providers.

The Job Aids and Tutorials tab contains simulation tutorials that demonstrate the specific steps required to complete common and/or critical CQRS tasks and job aids providing key learning points and steps for common and/or critical CQRS tasks.

Links to additional information:

CQRS Learning Centre:
https://academy.midlandsandlancashirecsu.nhs.uk/cqrs-national-training/e-learning/

CQRS Guides:
https://academy.midlandsandlancashirecsu.nhs.uk/cqrs-national-training/training-materials/

For CQRS news and updates:
https://welcome.cqrs.nhs.uk/

For more information on GPES:
http://content.digital.nhs.uk/gpes

PCN FAQs for Users - December 2020: Click here

Links to DES specification documentation:

Network Contract DES specification:
https://www.england.nhs.uk/publication/des-contract-specification-2020-21-pcn-entitlements-and-requirements/

Network Contract DES guidance:
https://www.england.nhs.uk/publication/des-guidance-2020-21/

Primary Medical Services direction:
https://www.gov.uk/government/publications/nhs-primary-medical-services-directions-2013

18. Frequently Asked Questions

Which of the services have auto-declared achievement at practice level?

- Clinical Director Payment 20-21

- Core PCN Funding 20-21

- Extended Hours Access payment 20-21

Which of the service require manual declaration by practices?

- Primary Care Networks 20-21 (this is the quarterly, automatic data extract from practice clinical systems used to calculate IIF payment)

When do the calculations take place?

The scheduled job runs at 10pm on the 1st day of each month to submit the data against the clinical director, extended hours access and core PCN funding services. The calculations will then run through the night and complete by the morning of the 2nd day of the month.

What information/data is used for the calculations?

The calculations are based on the Practice List Size (CRP) or Weighted Practice List Size (WPLS) recorded in CQRS as of 1 January 2020. This figure is used for every monthly calculation throughout the year.

The £ per item figures used by CQRS to calculate payments are as follows:

Calculation/Indicator Name	£ per item	List Size Utilised
Core PCN funding payment	£1.50	CRP
Clinical Director payment	£0.722	CRP
Extended hours access payment	£1.45	CRP
Network Participation Payment	£1.761	WPLS

Do the services require manual data submission?

The below services do not require manual data submission, nor do they have a data extraction. They are payment only services:

- Clinical Director Payment 20-21
- Core PCN Funding 20-21
- Extended Hours Access payment 20-21

Primary Care Networks 20-21, the GPES data extract which contains IIF payment indicators, will have a quarterly extraction. As with other data extracts, manual entry or adjustment will not be routine but may be required in certain circumstances.

Why does the practice list size in CQRS not match the list size in Open Exeter for 1 January?

The practice list size used may differ from the list size available from Open Exeter where practices have submitted an update to their CRP. If a CRP update was submitted, this supersedes the automated list size for the previous financial year 1 January quarter, and it will not match the list size in Open Exeter.

It is important to note that changing the CRP value will affect historical reporting, as the report will show the updated value, rather than the value used within the calculation run at the time.

See below question for regarding commissioners approving list size changes for PCNS due to practice mergers, splits etc.

Why does the Provider Payment Declaration report show that the current month list size has been used?

The contractor population shown on the report picks up the most current CRP held for a practice in CQRS. To view the correct CRP used for the calculation, you should select "with underlying data when

you run the report. This will generate an extra line of information which will show the list size which was applied to the calculation.

There has been a practice merger in-year, can the list size be updated to reflect this merger?

Yes, in line with section 5.13.3 (page 28) of the Network Contract DES specification (https://www.england.nhs.uk/wp-content/uploads/2020/03/Network-Contract-DES-Specification-PCN-Requirements-and-Entitlements-2020-21-October-FINAL.pdf).

Changes to the list size may occur for the following reasons, though this list is not exhaustive:

- practice split
- practice merger
- contract termination impacting PCN membership
- influx or reduction in patient numbers that commissioners deem would have an impact on payments.

As PCN services uses the previous financial January quarter list sizes, any changes in list sizes and mergers should be reported as follows:

Update Type	List Size Type	Change	Process
Practice Mergers for PCN's	Contracted Registered Population (CRP)	Updates to CRP due to a practice merger	Commissioner submits a request to support@cqrs.co.uk This request must be approved and be sent to the service desk by the commissioner, a practice cannot request an update directly. Any practices who submit a request direct to the service desk will be asked to contact their commissioner. N.B this will update the previous financial years, January quarter CRP. The default CRP should be combined values from the 1 January 2020. See Appendix 2 for the Request Form
	Weighted Practice List Size	Updates to the WPLS due to a practice merger	Commissioner submits a request to support@cqrs.co.uk This request must be approved and be sent to the service desk by the commissioner, a practice cannot request an update directly. Any practices who submit a request direct to the service desk will be asked to contact their commissioner. N.B this will update the previous financial years, January quarter WPLS The default WPLS should be combined values from the 1 January 2020. See Appendix 2 for the Request Form

Updated: General updates for the current quarter used in other services has a different process. CRP is updated via NHAIS (Exeter).

How can I view members of my PCN in CQRS?

A GP Practice user individually can go to My Services under Participation Management and see their PCN.

Commissioners, PCN organisations, and GP Practices can use new dashboards which are available as follows to see lists of organisations:

Data Submission tab > Network Achievement dashboard

Achievements tab > Network Declaration Management dashboard

Can I see who the nominated payee is in CQRS?

Yes. This can be found under the Achievements tab > Network Declaration Management dashboard.

Who can view the 'Network Declaration Management' subtab?

All users with access to the Achievement tab and PCN permissions can view this.

How do I get "PCN view" permissions in CQRS?

This permission level is available for CQRS users in general practices. The permissions have not been automatically applied to user accounts. You will need to request this access from your commissioning organisation or CQRS administrator.

How do I update PCN membership?

You should follow the guidance set out within the Network Contract DES guidance (https://www.england.nhs.uk/publication/des-guidance-2020-21/) to request changes to PCN membership or nominated payees from the ODS team. See section 5.3 on page 12.

Once the updates have been processed by ODS, they update will be automatically sent to CQRS and updated via the daily automated feed.

Why is my PCN membership wrong in CQRS?

In some cases, changes made to PCN membership or nominated payee details in ODS have not been reflected in CQRS. This is due to the limitations of NHAIS processing organisational data that would have been resolved by the implementation of PCSE Online.

In some cases membership may appear wrong because a practice is not included in the service offers for their new PCN – refer to the next question

From 28 September 2020, CQRS receives daily updates from ODS via an automatic feed.

If you find that your memberships are still wrong in CQRS after 28 September, please check the published ODS data in the ePCN.xls file in the first instance to ensure that the updates to PCN memberships were received and processed by ODS. Please note there is a 7-day turnaround for any updates requested.

If after checking this file, you believe there are outstanding updates that need to be made to ODS data please complete/forward a PCN Change Instruction Notice to exeter.helpdesk@nhs.net. Nominated payee data is not included in the ePCN.xls file so any queries re this should be raised with ODS via exeter.helpdesk@nhs.net.

If changes were received and processed and displaying correctly in ODS but the detail in CQRS is still wrong, please contact support@cqrs.co.uk. You should provide full details including practice codes, PCN codes and PCN start and end dates for the affected practices.

If a practice changes PCN, will their participation automatically transfer to their new PCN?

No. If a practice leaves a PCN, CQRS will automatically close their existing offer so that they are no longer participating under their previous PCN.

To include a practice in the offers for their new PCN, for each of the three monthly PCN services (clinical director, extended hours access and core PCN funding) Commissioners will need to:

- ensure the final payments for the PCN services have been financially approved for the practice's previous PCN.

- cancel the existing offer to the new PCN for each of the PCN services.

- issue a new auto-accept offer to the new PCN for each of the PCN services.

The process to issue a new offer to add a practice to their new PCN should only be started after the final PCN payment from the practice's previous PCN has been financially approved by the commissioner and processed for payment.

Commissioners should refer to the process diagram in Appendix A

Will monthly PCN payments be recalculated once memberships are correct?

For PCN services CQRS will not make retrospective updates to payment calculations.

Any affected payments that cannot be recalculated need to be managed off-system by the commissioner.

**Can I cancel a service offer for one provider/practice only?**

No. The "Cancel Service" function can only be applied for the whole PCN, not individual practices or service providers. Commissioners would need to retract the offer for the whole PCN and re-offer it to the whole PCN.

If a practice moves PCN, can I request the end date and start date to be the same date?

No, a practice cannot leave one PCN and join another on the same day. This is built into the technical specification for PCNS in the ODS system.

Consecutive dates should be applied instead, i.e. end date 30/09/2020 and a start date of 01/10/2020. If you do submit a request with the same start and end dates, ODS will apply consecutive dates.

Appendix 1 – PCN Membership Process Flow
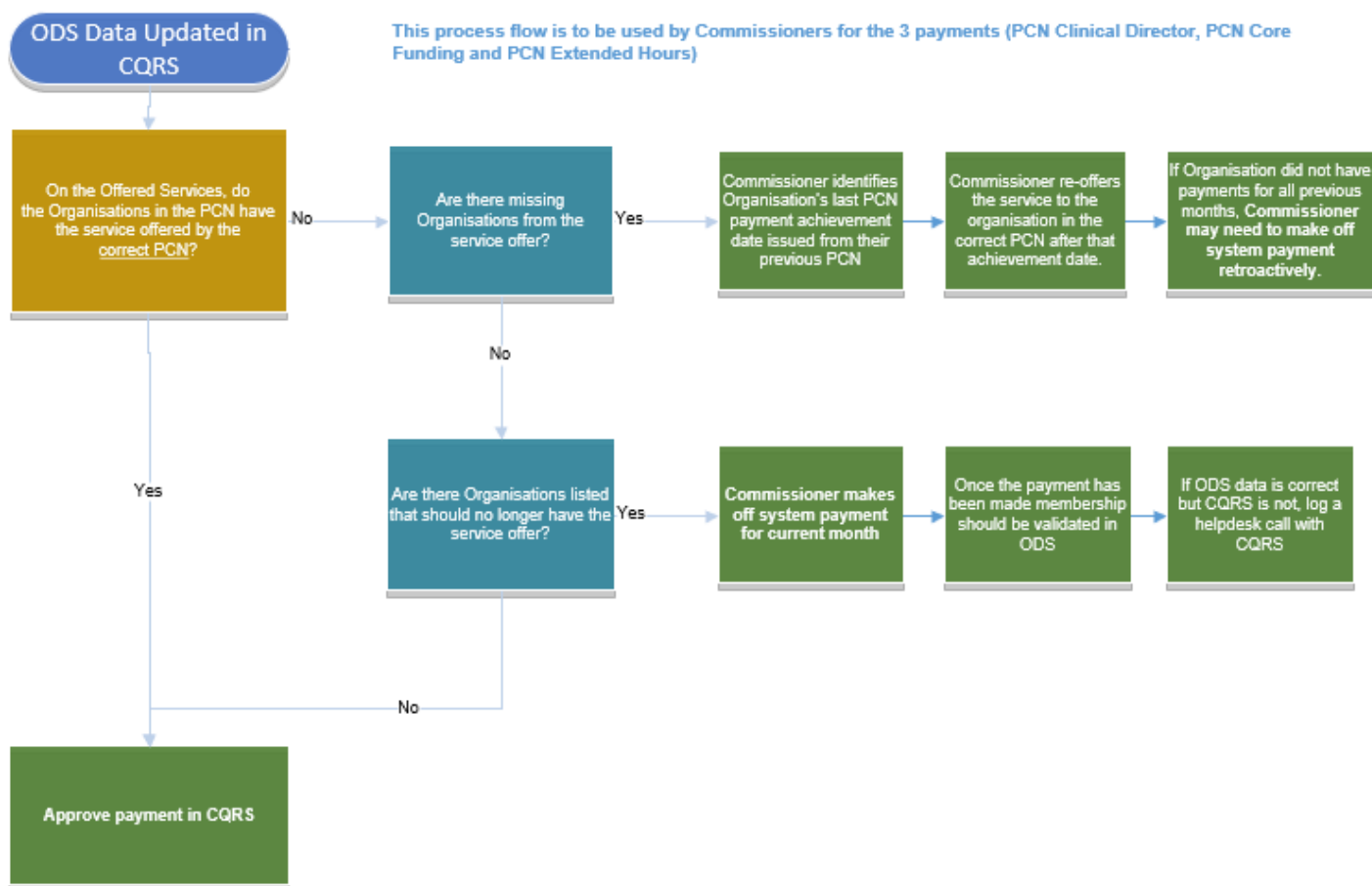
Appendix 2 – WPLS/ CRP PCN Request Form

Request to update WPLS/ CRP list sizes for PCN services.

CQRS - PCN service
Practice List Change

Guidance Notes:

- Changes to the WPLS or CRP are to be requested by Commissioners on behalf of the GP Practice. Commissioners can find the CRP and WPLS from the quarterly Global Sum reports.

- With regards to practice mergers the default CRP and weighted list size should be combined for 1 January 2020.

- Any changes to the weighted list size or practice list size will impact historical reports – for example, if the CRP is changed in September and a report is run for the previous July, the calculation and amounts in the report will look different (even though the payment amount and audit trail has not been changed).

- The support desk will action this request on receipt and acknowledge receipt. To ensure adequate time to update, in preparation for the next calculation run, where possible please provide five days' notice of this change.

- Any questions regarding practice list sizes and mergers need to be directed to the policy team.

Please send the completed request form to: support@cqrs.co.uk

END OF DOCUMENT