

Has clinical commissioning found its voice? GP perspectives on their CCGs

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April 2016

About this research

- Since 2012, the Nuffield Trust and The King's Fund have been tracking the development of six clinical commissioning groups (CCGs) that are broadly representative of CCGs across England
- Our focus has been on CCGs' relationship with their members – in particular:
 - How involved are CCG members in the activities of the CCG, and what relationships are being built between them and CCG leaders?
 - How are CCGs discharging their responsibility to support quality improvement in general practice?
- Findings from earlier stages of the research, which include interviews and observations in each CCG, can be found [here](#)
- This slide set presents the results of our fourth annual online survey of GPs and practice managers in the six CCGs.

Key findings: Important progress has been made

- Three years since their launch, CCGs have matured as organisations and made progress in establishing their internal processes:
 - **Clinical leaders are increasingly confident in their commissioning role** and report improvements in the support and training received
 - **The majority of GP leaders would like to remain in their role** for the foreseeable future, and others express an interest in becoming more involved.
- From the perspective of local GPs, **CCGs are an influential part of the local health economy** and are increasingly driving changes to the way primary care is provided:
 - The majority of GPs who had received support for changing the way primary care was organised felt it had led to improvements
 - In terms of impact on GP services, CCGs were seen to have had a much greater impact on organisational form and on relationships between practices and pathways of care, but to have had little impact on the quality of care or patient experience.

Key findings: Some key challenges remain

- A founding principle of CCGs – to improve clinical engagement in commissioning – has not yet been realised fully:
 - **CCG managers and NHS England were seen as more influential than GP leaders**
 - **Only one fifth of GPs without a formal role in the CCG felt able to influence decisions.**
- Some GPs voiced concerns relating to CCGs' extended role in the design and structure of primary care provision:
 - **Four fifths of GPs without a formal role in the CCG were either neutral or negative about the introduction of co-commissioning**, and most had not noticed any changes yet as a result of these new responsibilities
 - **One fifth of GPs were concerned about their CCG's ability to effectively manage conflicts of interest.**
- Those who provide external scrutiny to commissioning decisions – i.e. lay members, Health and Wellbeing Boards, and patients – were not seen to be influential.

Policy implications

- It has taken several years for CCGs to develop as organisations, illustrating the length of time required for major structural changes to embed. Further change to commissioning structures should be incremental and build on the progress made.
- CCGs are entering into co-commissioning and other primary care development activities without a groundswell of support from GPs. NHS England should work with CCG leaders to find ways of reducing the risks to clinical engagement caused by increasing CCGs' role in primary care commissioning.
- As NHS England considers delegating further responsibilities to CCGs, it is important to recognise the time necessary to fully transfer functions, and to be realistic about the influence that CCGs are able to exert.

Methodology

- The survey has been fielded four times: in February/March 2013, January/February 2014, January/February 2015 and January/February 2016
- We have captured a diverse range of perspectives in each area:
 - GPs who sit on the governing body
 - GPs who are practice or member representatives
 - GPs without a formal role in the CCG
 - Practice managers with or without a formal role in the CCG.
- Most of the slides that follow show responses **from GPs only**. Slides that show all respondents include practice managers and a small number of other practice staff who completed the survey. (See notes under each slide for clarification.)
- In 2016, responses were received from approximately 24% of GPs within the six CCGs and 38% of practice managers.

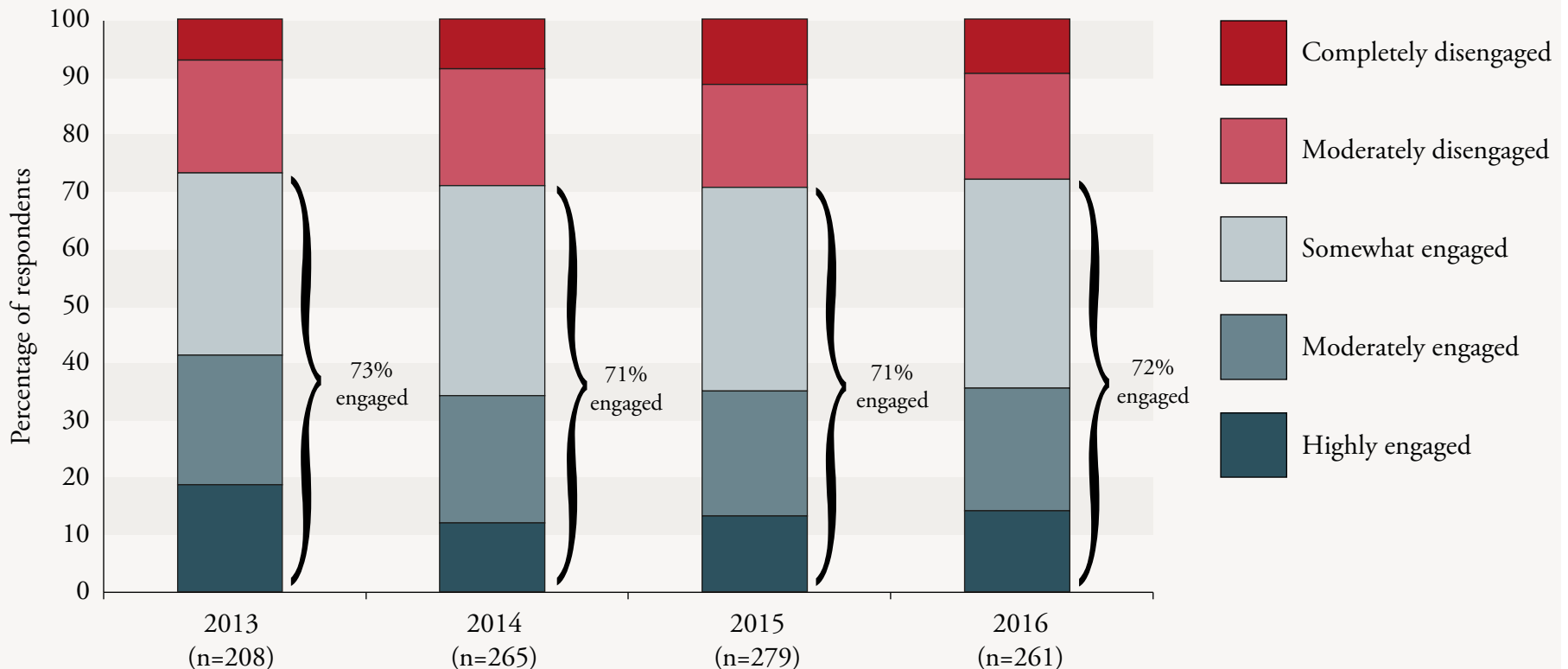
Survey respondents - breakdown

Role	2013		2014		2015		2016	
	n	%	n	%	n	%	n	%
GP principal	149	64%	198	71%	159	51%	164	55%
Salaried GP	17	7%	34	12%	33	11%	32	11%
Practice manager	47	20%	28	10%	103	33%	87	29%
Other/skipped	19	8%	19	7%	17	5%	16	5%
Total	232		279		312		299	

CCGs have made progress in establishing themselves and building their influence

CCGs have sustained a fairly constant level of engagement from their members since 2013

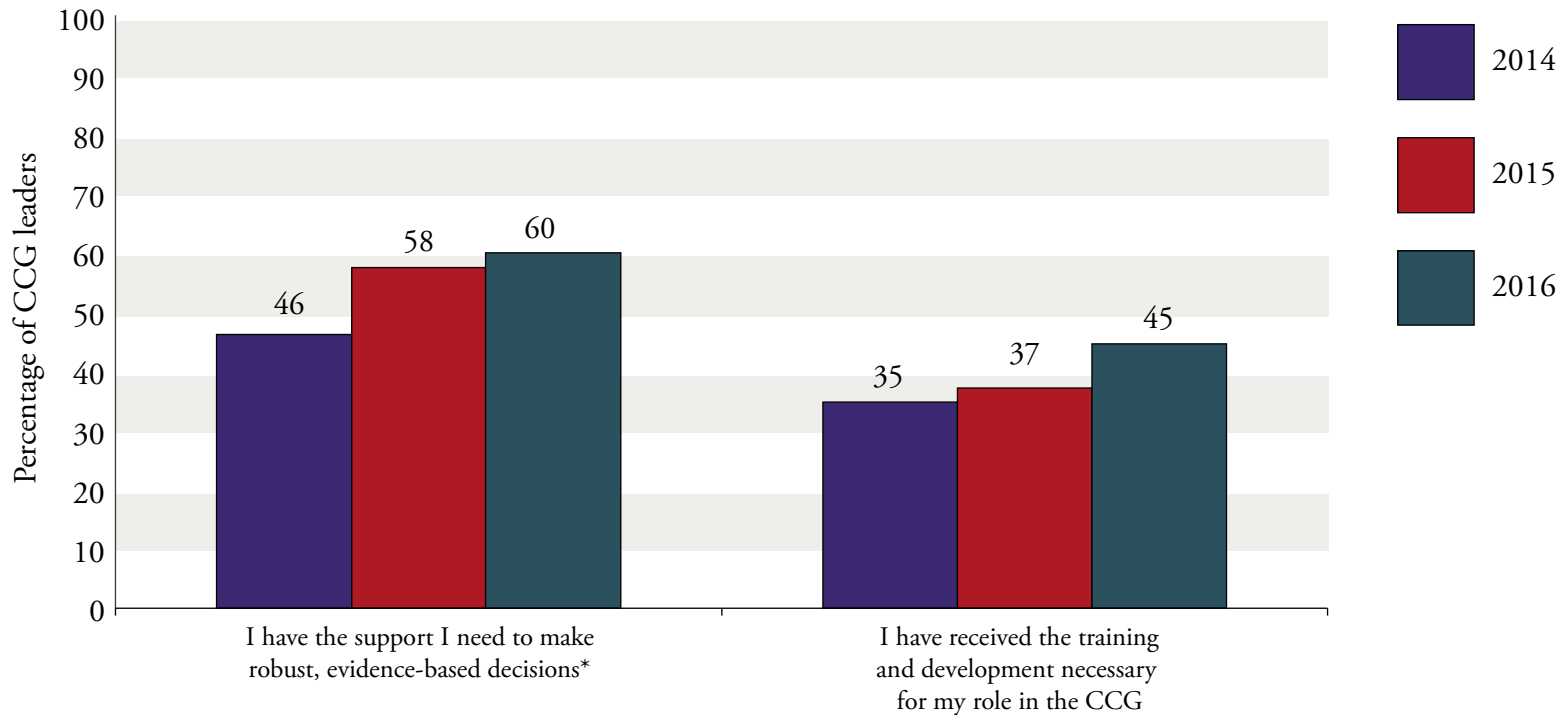
How engaged do you feel with the work of the CCG?



Notes: Base: all respondents. Respondents who skipped the question were excluded from the distribution.
 Source: Nuffield Trust and The King's Fund surveys of six CCGs (2013, 2014, 2015 and 2016)

CCG leaders feel more supported in their roles

To what extent do you agree with the following statements?
 (Percentage who 'strongly agree' or 'agree')



Notes: Base: Governing body members, CCG practice representatives, CCG locality/neighbourhood leads or CCG subcommittee members.

n=89 (2014); n=87-89 (2015); n=100-101 (2016)

Respondents who skipped the question were excluded from the distribution.

*Change from 2014 is statistically significant, $p < 0.05$ using chi-squared test.

Source: Nuffield Trust and The King's Fund survey of CCGs (2014, 2015 and 2016)

The majority of GPs and practice managers (83%) felt that the CCG played a significant role in their local area

WHY RESPONDENTS FELT THE CCG PLAYED A SIGNIFICANT ROLE IN THEIR LOCAL AREA:

“Good engagement with all stakeholders. Taken seriously by local providers and other commissioners.”

“It brings practices together and helps us think about how we can work together to care for our patient population”

“Working with partners to deal with budget cuts”

“Strong membership”

“Active and leading part of transformation of services”

WHY RESPONDENTS FELT MORE ENGAGED IN THE WORK OF THE CCG:

“Role description has changed which has led to me feeling more engaged”

“My confidence and knowledge of how commissioning works has continued to improve”

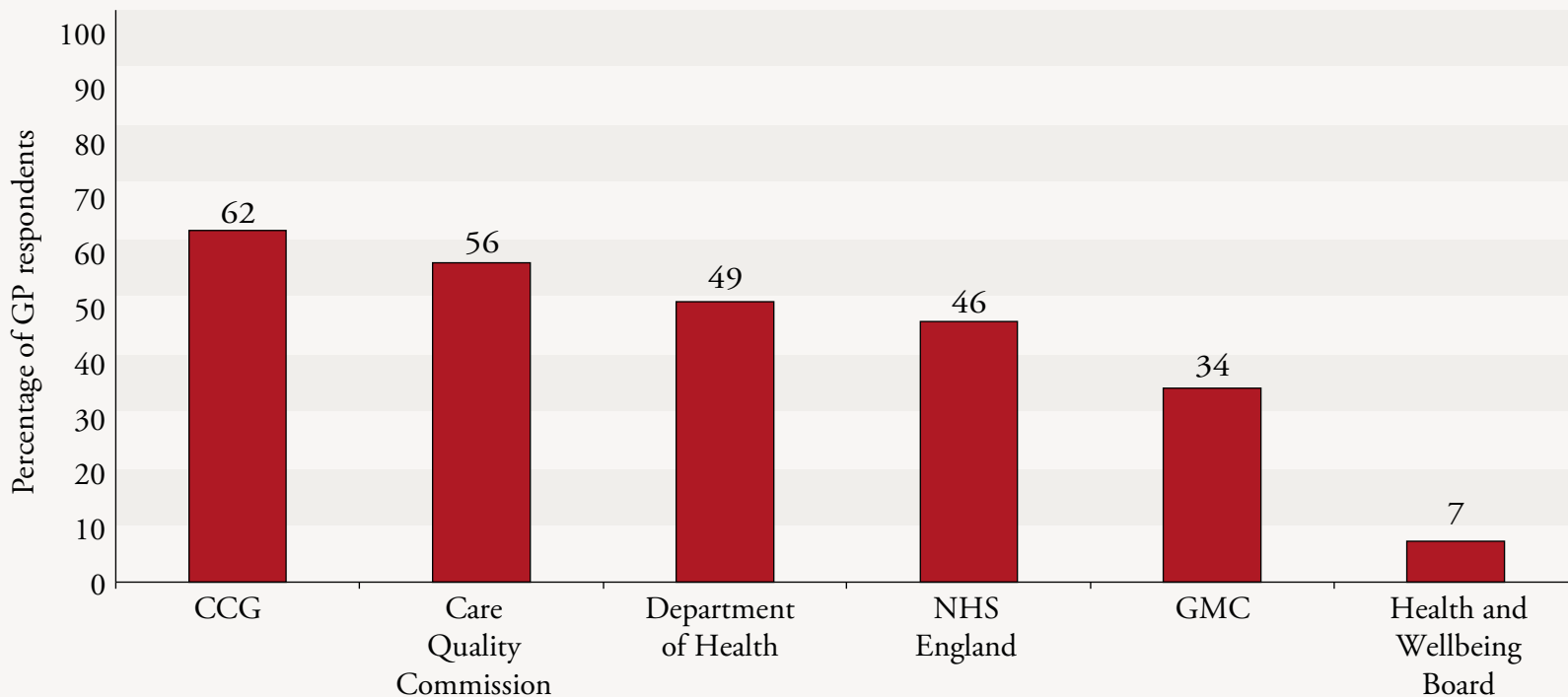
“More engaged with a new/additional role started”

“Much more support, so much more engaged”

“Collaborative working with neighbouring practice/vanguard work”

GPs reported that CCGs had the most influence over their clinical behaviour compared with other organisations

What degree of influence do you feel each of the following has had over your clinical practice/practice management in the last year?
(Percentage who selected 'very influential' or 'quite influential')



Notes: Base: GPs only. Respondents who skipped the question were excluded from the distribution. n=167-170 (2016).
Source: Nuffield Trust and The King's Fund survey of six CCGs (2016).

Despite improvements in some areas,
the status of CCGs as clinically led
organisations remains fragile

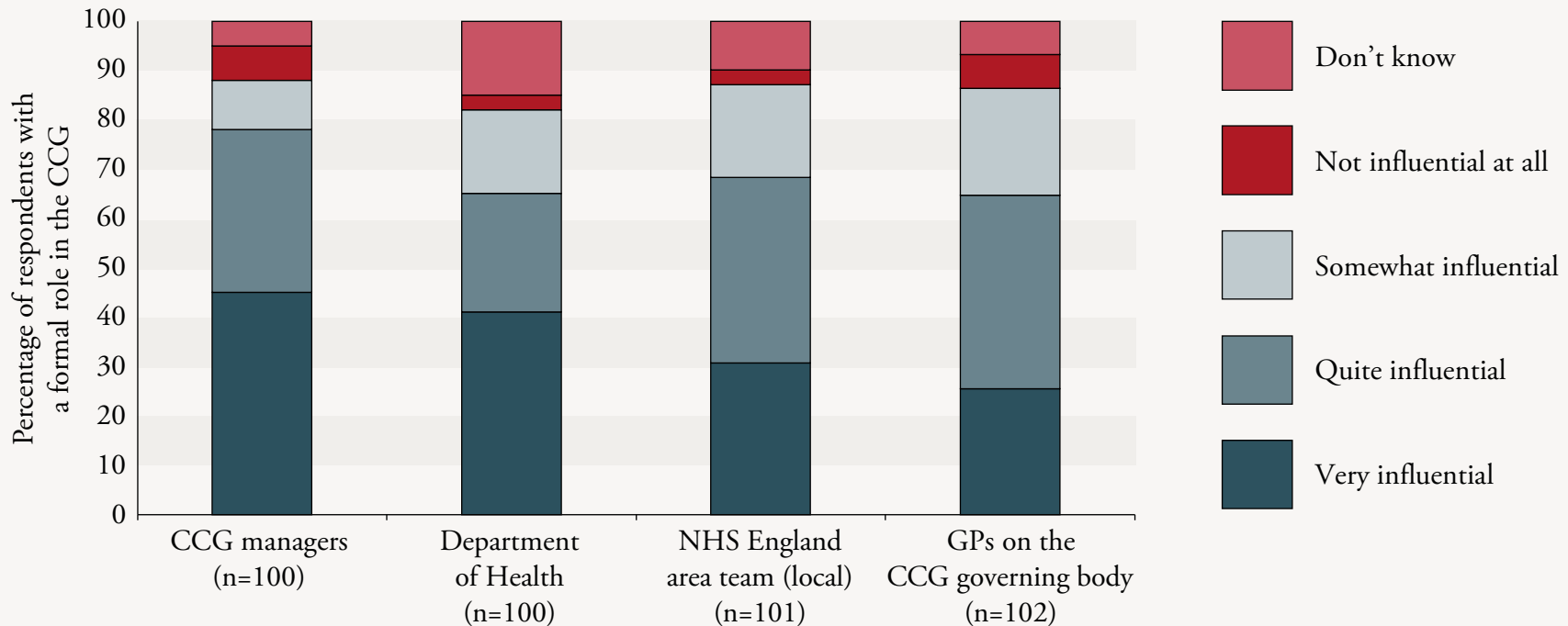
GP leaders* continued to struggle with the competing demands of their clinical and commissioning roles

- The proportion of GPs on the governing body who were 'highly' engaged in the work of the CCG has fallen from 83% in 2013 to 64% in 2016
- Over one third of GP leaders did not have the time necessary to fulfil their role in the CCG (40%)
- A similar proportion of leaders thought that their commissioning role was having a negative impact on their clinical role (36%)
- Less than two fifths of GP member representatives felt that being part of the CCG made their working life more fulfilling (38%)
- This figure rises to 88% for GPs with a role on the governing body

* 'GP leaders' includes GPs on the governing body, member practice representatives, neighbourhood leads, and sub-committee members.

GPs on the governing body were seen as less influential than CCG managers and NHS England area teams

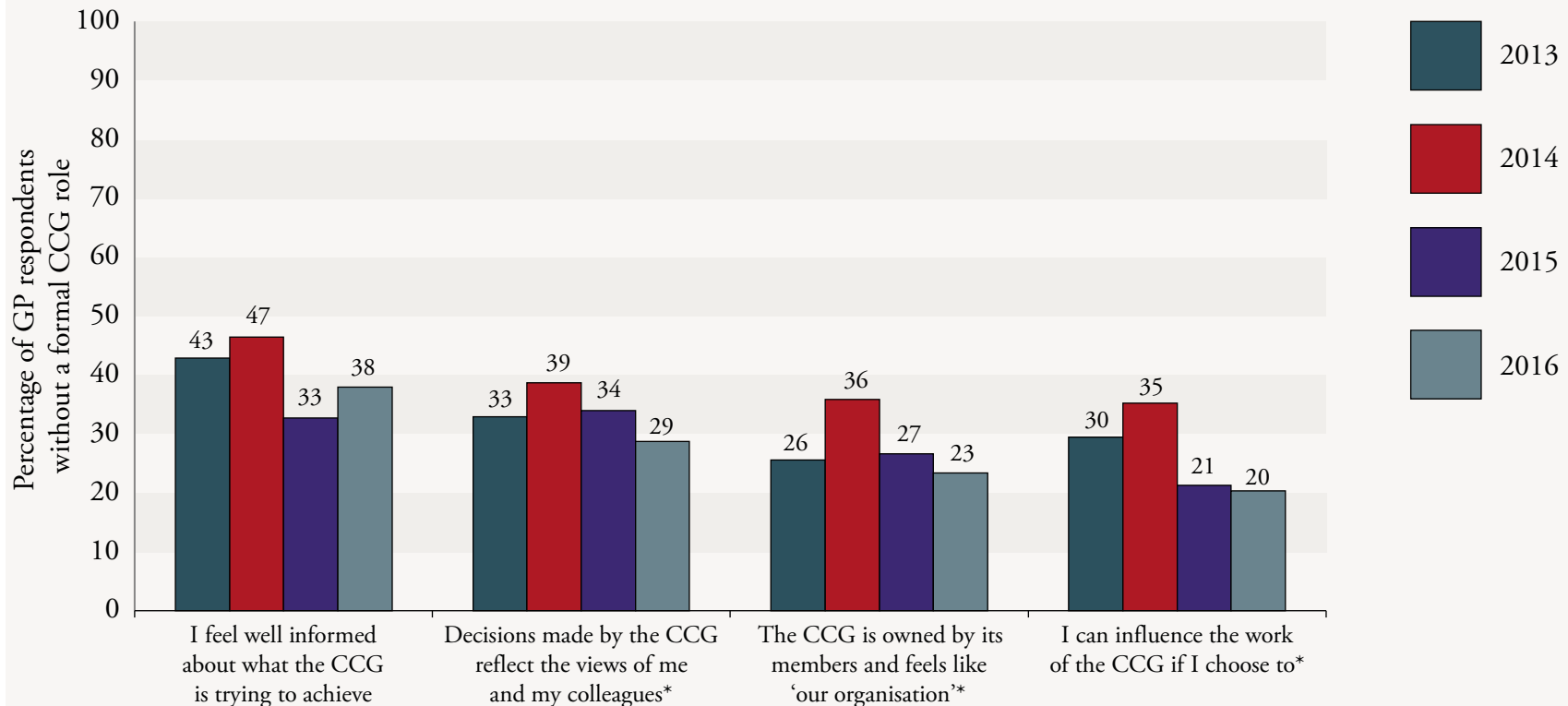
What degree of influence do you feel each of the following has had on the commissioning decisions of your CCG in the last year?



Notes: Base: Governing body members, CCG practice representatives, CCG locality/neighbourhood leads or CCG subcommittee members. Respondents who skipped the question were excluded from the distribution. Source: Nuffield Trust and The King's Fund survey of CCGs (2016)

The view from GPs without a formal role was that CCGs were increasingly difficult to influence and did not reflect their views

To what extent do you agree with the following statements?
(Percentage who 'strongly agree' or 'agree')



Notes: Base: GPs only (those without a formal CCG role). n=77-79 (2013); n=142 (2014); n=107-109 (2015); n=107-108 (2016).

Respondents who skipped the question were excluded from the distribution.

*Change from 2013 is statistically significant, p<=0.05 using chi-squared test.

Source: Nuffield Trust and The King's Fund survey of CCGs (2013, 2014, 2015 and 2016)

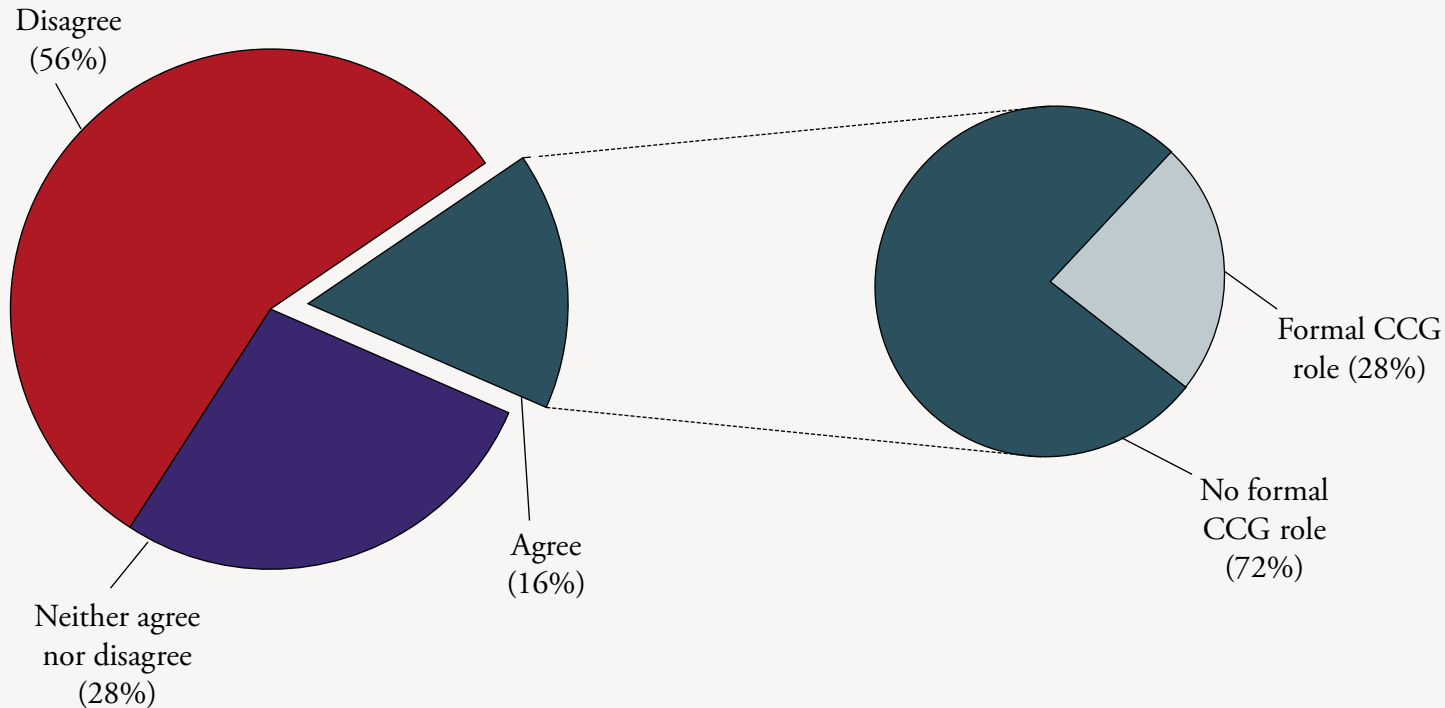
Difficulties faced by GPs without a formal role in the CCG included workloads, communication from CCG and collaborative working

Has anything changed over the past 12 months that has made you feel more or less engaged? (*Those without a formal role*)

- *“So busy at work difficult to find time or energy to do other things”*
- *“Seem to be more pressure from CCG coming down to us, with less clinical input from grassroots.”*
- *“The CCG does not seem to listen to members – it feels as if we are jumping through hoops so they can tick a box.”*
- *“Multiple outcomes making me feel LESS engaged.”*
- *“Loss of key admin support staff has made things less organised”*
- *“Unclear information and messages from the CCG”*
- *“The CCG agenda appears to come from central government with little or no influence locally”*

Despite pressures, leaders plan to continue in their roles (70%). Others are willing to get more involved

I am interested in getting more involved in the work of the CCG or taking a leadership role in the future



Notes: Base: GPs only. n=156 (2016). Includes CCG practice representatives, CCG locality/neighbourhood leads, CCG sub-committee members and those without a formal role in the CCG. Respondents who skipped the question were excluded from the distribution.
 Source: Nuffield Trust and The King's Fund survey of six CCGs (2016).

CCGs are increasingly active in reshaping primary care, but challenges lie ahead

CCGs are driving change in the structure of general practice and local relationships

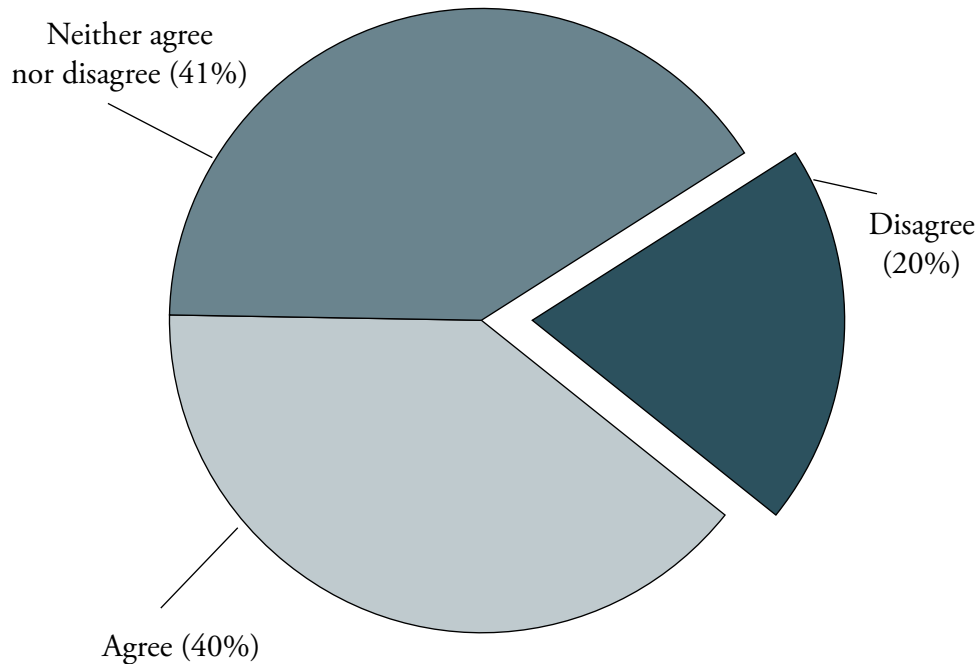
- 70% of GPs reported that their CCG was encouraging changes to how primary care is organised (e.g. the formation of GP federations). Of those respondents, almost half felt the CCGs' involvement had led to improvements
- One quarter of GPs reported that their CCG was involved in encouraging changes to services within their practice
- Just over half of GPs felt that the CCG had had a positive impact on relationships between practices
- 41% of GPs reported that the CCG had had a positive impact on them working with other professionals as part of multidisciplinary teams.

Despite evidence of CCGs' positive influence, some GPs remained unsure about CCGs' expanded role in primary care

- When asked whether their CCG effectively manages conflicts of interests, one fifth of member representatives and one quarter of GPs without a formal role in the CCG disagreed
- Organisations or groups who provide external scrutiny were not seen to be influential in commissioning decisions:
 - 34% of GPs felt that lay members were 'very influential' or 'quite influential' in commissioning decisions
 - 23% of GPs felt this way about the influence of patients
 - 32% of GPs felt this way about Health and Wellbeing Boards.

Uncertainty towards conflicts of interest was linked to concerns about co-commissioning

How far do you agree that 'The CCG effectively manages conflicts of interest'?

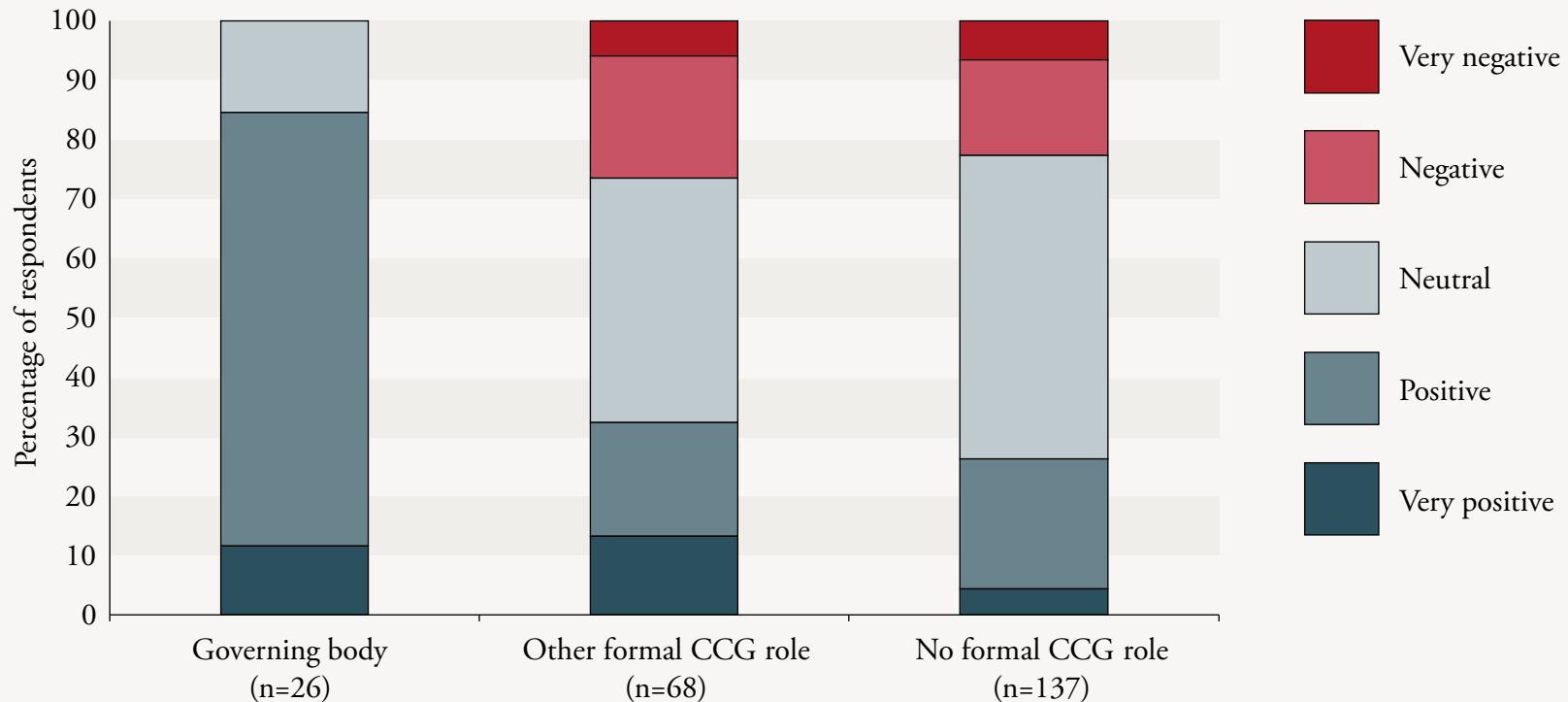


20% of all respondents were concerned about how the CCG manages conflicts of interest. Of those who were negative about the introduction of co-commissioning, this number rises to 42%, suggesting that GPs are concerned about the conflicts of interest raised by co-commissioning

Notes: Base: GPs only. n=182 (2016). Respondents who skipped the question were excluded from the distribution.
Source: Nuffield Trust and The King's Fund survey of six CCGs (2016).

Governing body members were largely positive about co-commissioning, but others were unsure

In April 2015, CCGs took on new responsibilities for sharing the commissioning of primary care with NHS England (co-commissioning). How do you feel about this development?



Notes: Base: all respondents. Respondents who skipped the question were excluded from the distribution.
 Source: Nuffield Trust and The King's Fund surveys of six CCGs (2016)

Co-commissioning had resulted in some changes but the majority of respondents had not noticed any changes (83%)

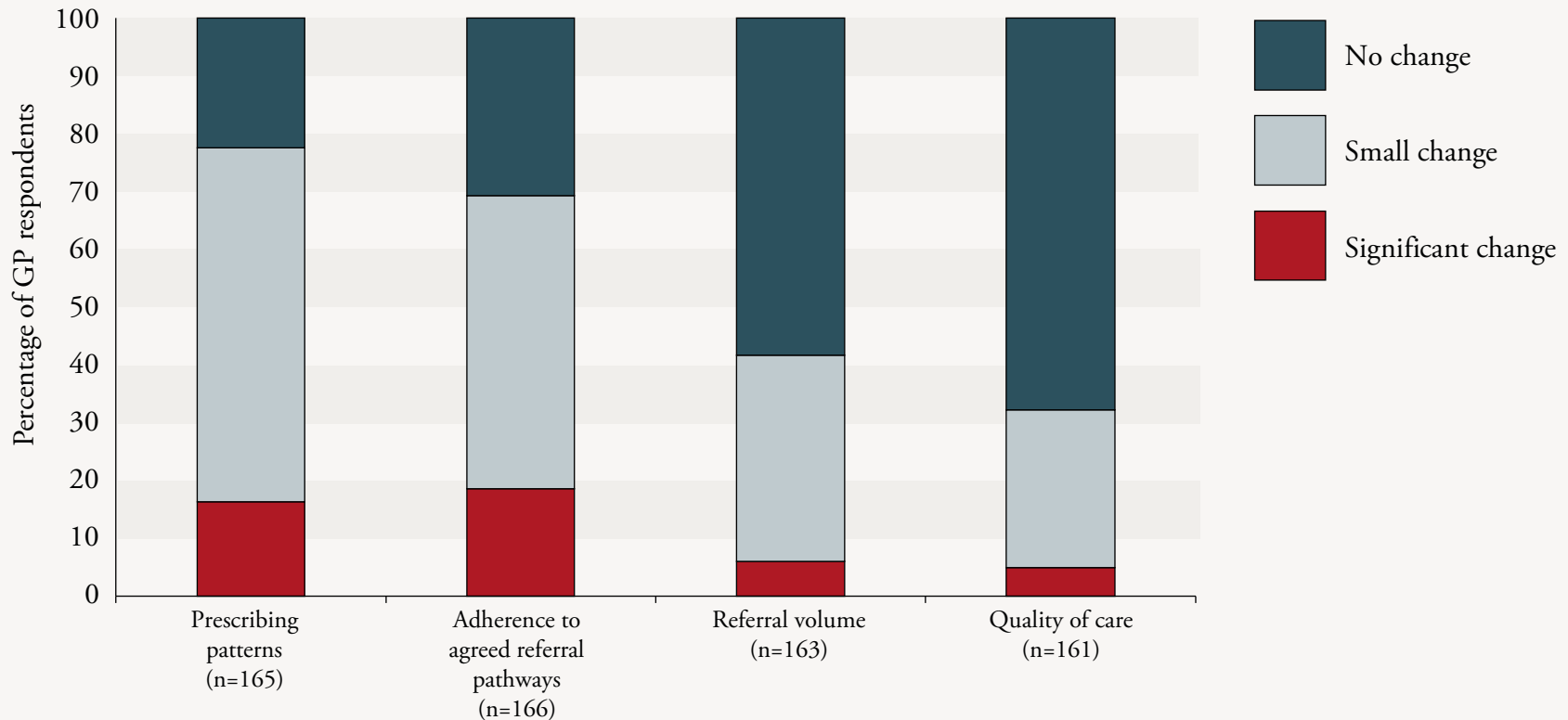
Since April 2015, have you noticed any changes as a result of co-commissioning?

- *“Better data, plan developing around premises development but big questions remain about freedom to establish and funding of new schemes”*
- *“Local discussion – albeit without any positive outcome on contract reviews”*
- *“More coherent and sensible care pathways”*
- *“More realistic approach to monitoring”*
- *“More correspondence, more transparency”*
- *“Premises taken over by CCG – very negative outcomes”*
- *“Lot of pilot projects. Difficult to keep up to date, too many.”*
- *“More targets and measurements of performance = greater burden”*

Widespread change takes time:
CCGs' impact on primary care to date
has been mixed

CCGs have changed prescribing and pathways, but, overall, quality and referral rates were felt by the majority to be unchanged

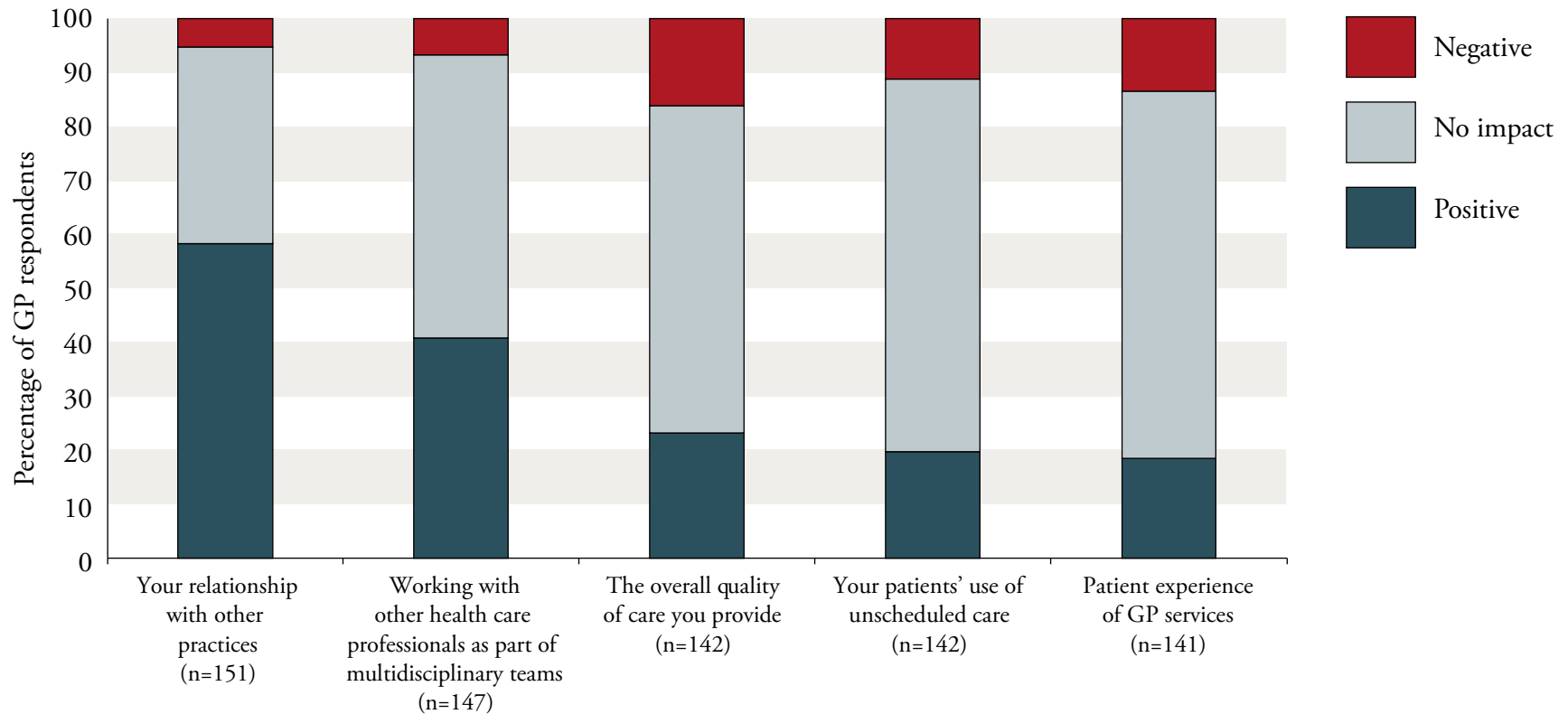
Has being part of a CCG changed your work in any of the following areas?



Notes: Base: GPs only. Respondents who skipped the question were excluded from the distribution.
Source: Nuffield Trust and The King's Fund survey of six CCGs (2016).

CCGs are having a positive impact on relations between professionals, but less impact on the quality of care

What impact has being part of the CCG had on your work in the following areas?



Notes: Base: GPs only. Respondents who skipped the question were excluded from the distribution.
 Source: Nuffield Trust and The King's Fund survey of six CCGs (2016).

If you have any questions about the research, please contact

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For more information on the project, see:

www.kingsfund.org.uk/projects/evolution-clinical-commissioning-learning-local-experience

www.nuffieldtrust.org.uk/our-work/projects/evolution-clinical-commissioning-learning-local-experience



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