

PCNs for Service Providers

User Guide

January 2021

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1. An introduction to PCNs using CQRS

PCN services are offered to GP practices from the lead commissioning organisation through the PCN as a whole entity - commissioners cannot 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 Commissioning Organisations](#) 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 8 - 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 CCG
BISCAY PARTNERSHIP PCN	V12345	NORTHSTACK SURGERY	NHS VIKING, NORTH & SOUTH UTSIRE CCG
BISCAY PARTNERSHIP PCN	V25142	ROCKALL MEDICAL CENTRE	NHS VIKING, NORTH & SOUTH UTSIRE CCG

2. 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.

3.Viewing your auto-approved Service

You can view which services have been auto-approved by clicking on **Participation Management**, followed by clicking on **Approved** from the Quality Service Status drop-down menu.

The screenshot shows a web application interface with a navigation bar at the top containing 'Home', 'Participation Management', 'Data Submission', 'Achievement', 'Reports', 'Administrative Tasks', and 'Help'. The 'Participation Management' tab is highlighted with a red box. Below the navigation bar, there is a 'My Services' section. Under 'My Services', there is a 'Services' section with a 'Financial Year' dropdown set to '2020/2021'. Below this, there is a table of service details:

Service Provider Name:	LIGHTHOUSE MEDICAL	Projected:	N/A
Service Provider ID:	V54321	Maximum:	N/A
PCN Organisation Name:	BISCAY PARTNERSHIP PCN		

Below the table, there is a 'Quality Services' section with a 'Quality Service Status' dropdown menu set to 'Approved', which is also highlighted with a red box.

Your Quality Service along with key information will be displayed.

Service	Comm. Org	Start Date	End Date	Detailed Guidance	Status
Primary Care Networks calculations 2020/21 - Clinical Director payment	NHS VIKING, NORTH & SOUTH UTSIRE CCG	01/04/2020	31/03/2021	Detailed Guidance	Approved

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.

4.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

Service	Comm. Org	Start Date	End Date	Detailed Guidance	Status
Primary Care Networks calculations 2020/21 - Clinical Director payment	NHS VIKING, NORTH & SOUTH UTSIRE CCG	01/04/2020	31/03/2021	Detailed Guidance	Approved

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.

5.The PCN Services which require a Manual Declaration

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).

6.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 either *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.

To check your own PCN achievement, click on the **Achievement tab** followed by the **Network Declaration Management** sub tab. Select the Financial Year, Quality Service and Achievement Date.

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 CCG	NORTHSTACK SURGERY	£240.57	Awaiting Network Achievement
BISCAY PARTNERSHIP PCN	V12345	NORTHSTACK SURGERY	NHS VIKING, NORTH & SOUTH UTSIRE CCG	NORTHSTACK SURGERY		Awaiting Network Achievement
BISCAY PARTNERSHIP PCN	V25142	ROCKALL MEDICAL CENTRE	NHS VIKING, NORTH & SOUTH UTSIRE CCG	NORTHSTACK SURGERY		Awaiting Network Achievement

Detailed guidance relating to Network Achievement, Aggregation & the Financial Approval Process can be found in module 11 - PCNs for Commissioning Organisations. Refer to sections 7 through to 10.

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 refer to the *PCN FAQs for Users* document for guidance as to how to submit a request).

8. Frequency of Calculations

Information on payment calculations is displayed below. There is some very useful information contained within the description of each of the PCN Quality Services. There is an indication of payment frequencies as well as detailing the provision of data entry requirements.

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

9. Information about Nominated Payees

Your nominated payee will receive the total sum value for the whole network to manage the individual payments and distribute accordingly. If there isn't a Nominated Payee all networks payments will be sent to the PCN who will then distribute the funds to practices/providers.

10. 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>

11. Frequently Asked Questions

Which manual indicators do I need to complete on CQRS?

Manual entry of indicators is not required for 2020/2021, unless you are one of the small number of organisations that must enter data manually for all indicators. More detail can be found below on the circumstances which normally require a full manual submission.

There are no manual indicators this year – we are setting them to ‘yes’ by script as part of income protection. This means that the only practices submitting manually are those that have to submit everything manually.

What is required if a GP practice is closing before 31 March 2021?

If your GP practice is closing before the 31 March 2021 please perform the following actions:

1. Check the GP practice closure date on CQRS. If it is not correct, contact your commissioning organisation, who will need to update this via PCSE.
2. Commissioners must check that participation in QOF 2020/21 ends on the same date that the GP practice closes and make any amendments in CQRS.

Aspiration Payments for Merged Practices - Option 1 – automated extract and calculation with subsequent reconciliation

A normal calculation can be allowed to run in CQRS through year-end, with a separate reconciliation taking place afterwards. To do this:

- Request that your **commissioner** provides updated CRP figures to the service desk so that CQRS can be updated to reflect the new practice list size including the merged patients

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

For information: General updates for 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

NHS Calculating Quality Reporting Service

My Tasks & Messages My Account Last Accessed: N/A Sign Out

Welcome, Third ODS CCG 1 Update

Home Participation Management **Data Submission** Achievement Reports Administrative Tasks Help

Record Provider Achievement Record Provider Aspiration **Network Achievement**

Financial Year: 2020/2021 Run Data Submission Report

Quality Service: Test PCN 2020/21

Achievement Date: 30/04/2020

PCN	Org ID	Service Provider Name	Parent Organisation	Submission Status	Latest Submission Date
Third PCN 1	G3P1T	Third PCN GP 1	Third ODS CCG 1	Data Submitted	23/07/2020
Third PCN 1	G3P2T	Third PCN GP 2	Third ODS CCG 1	Awaiting Data	

View: 50 1

Achievements tab > Network Declaration Management dashboard

NHS Calculating Quality Reporting Service

My Tasks & Messages My Account Last Accessed: N/A Sign Out

Welcome Third ODS CCG 1 Update

Home Participation Management Data Submission **Achievement** Reports Administrative Tasks Help

Achievement Results Declare Declaration Management Provider Post Achievement Modelling Network Declaration Management

Financial Year: 2020/2021

Quality Service: Test PCN 2020/21

Achievement Date: 30/04/2020

PCN Name: Third PCN 1

Nominated Payee:

Org ID	Service Provider Name	Parent Organisation	Achievement Amount	Declaration Status
G3P1T	Third PCN GP 1		£150.90	Awaiting Service Provider Approval
G3P2T	Third PCN GP 2			Awaiting Data

View: 50 1

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.

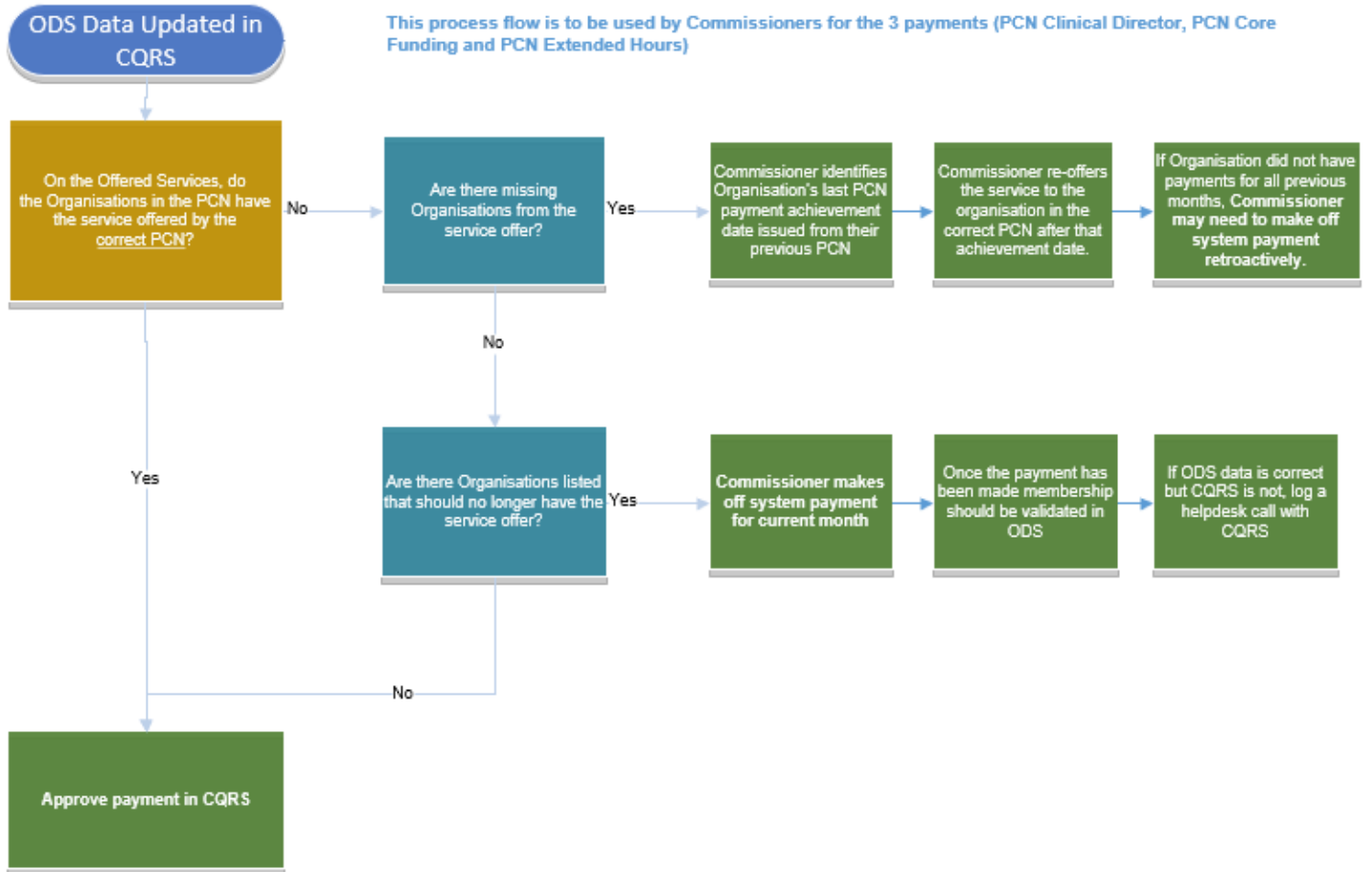
If a practice moves PCN, can I request the end date and start date to be the same date?

No, a practice cannot leave one PCN and join another on the same day. This is built into the technical specification for PCN's 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

PCN membership process flow – Commissioner actions



Appendix 2 – WPLS/ CRP PCN Request Form

Request to update WPLS/ CRP list sizes for PCN services



CQRS - PCN Service Practice List Size 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@cgrs.co.uk

END OF DOCUMENT