



## **Update from BMA re Capita/PCSE**

Please see latest update from the BMA below.

Apologies for the lengthy email, but we wanted to provide you with a comprehensive brief on the current state of play. Ian and I met with NHS England yesterday to discuss various issues including the current Capita/PCSE issues. Thank you for your continued feedback to the GPC office, as having real examples helps in our discussions.

We continue to highlight the significant issues that have been raised with us through LMCs. NHS England is aware of most of them already and is dealing with them as quickly as possible. We also highlighted the fact that the situation was and is unacceptable; the planning and preparations by Capita and NHS England should have been robust enough to deal with any issues without major inconvenience to practices or the public. We have emphasised that the underestimation on Capita's part is clearly unacceptable, and we understand that Capita will be held to account by NHS England (via KPIs). Capita has confirmed that it will continue to improve systems during this transition period until it is at an acceptable level, which they anticipate to be by mid-July.

As a result of our continued feedback as stakeholders, regular meeting and our published letter to NHS England, both NHS England has confirmed that it and Capita are very aware of the issues which have been reported and have put considerable resource in to deal with the reasons for these. NHS England's National Director for Transformation and Corporate Operations has stated her commitment to ensure tighter governance and oversight, as well as more robust testing and checking. We do have influence at this level and it is presently a high priority to continue regular dialogue. It is however for Capita to implement improvements and to that end Capita has appointed a new Transformation Director who is performing a full review of the Capita plan, as well as another Director who is reviewing operational logistics and planning. It has also increased the staffing capacity of the customer support centre by 300% and have increased the staffing and shift patterns for staff working in the medical records processing centre. These are positive moves, and we would expect considerable improvement in the coming weeks but it will still be valuable to hear feedback via LMCs to inform our ongoing discussions. As the overall chaos settles it will become more important to identify individual problems and highlight any new developments.

The statistics it is receiving show that broadly England-wide, there is improvement in the areas of medical records and supplies. We are also keeping an eye on the UK wide picture and how it impacts on cross border practices and the devolved administrations. It is aware of localised issues where local hubs and depots are not performing as they should (eg Manchester, Norwich), as well as some issues for particular types of practice (ie university practices and those with higher than average turnover) and it is dealing with these on a case by case basis. For example it is increasing the capacity of CitySprint vans, altering delivery routes, and also working with the NHS supply chain. NHS England is working with, and monitoring, Capita closely in dealing with these issues and they have asked that issues continue to be raised via the customer service centre so that they can be dealt with appropriately, and they can analyse where the affected areas are.

With regard to supplies, the twice-weekly data they receive from CitySprint suggests that approx. 80% of orders are delivered in full on the designated date. There are some issues with individual hubs and these issues are being drilled down to find the source, but overall management and storage of supplies is improving.

With regard to records, there appear to be a few locales where there are particular issues, and the reasons behind the issues are being investigated and resolved. 30,000 records are being processed per day which means that there should be no backlog by mid-July and systems should be running to a high standard. The system in place for dealing with urgent records has improved and so urgent requests should be received appropriately. The notes contingency will run until NHS

England is satisfied that Capita can deliver notes consistently within the contractually stipulated margin, but we do not expect them to exit the pilot for several months. There has also been trade press interest in information governance breaches around the transportation of notes. We are assured that NHS England are reporting any breaches to the ICO and will publish details within their normal reporting timescales but we understand any serious breaches are in single figures. NHS England are involving the ICO in plans for the future system, but also looking at the historic arrangements which with scrutiny have shortcomings, hence an imperative to change.

The GPC needs to maintain pressure and be aware of improvements and deficits while the situation is stabilised. We have been meeting every couple of weeks and are in regular contact with the senior management team.

NHS England anticipates that all systems (medical records and supplies) should be running as standard by mid-July, so with that in mind, we ask that

1. each LMC provide feedback on 18 July on any new issues arising between 1 July and the 18 July; and
2. each LMC provide feedback on 1 Aug on any new issues arising between the 18 July and 1 Aug, and any issues that have not been resolved from the last period

This should allow us to assess whether the systems are running to an acceptable standard, and whether improvements are being realised on the ground.

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