

**PWYLLGOR ARCHWILIO A SICRWYDD RISG
AUDIT AND RISK ASSURANCE COMMITTEE**

DYDDIAD Y CYFARFOD: DATE OF MEETING:	17 October 2023
TEITL YR ADRODDIAD: TITLE OF REPORT:	Post Payment Verification Mid-Year Report 1 April 2023 – 30 September 2023
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Huw Thomas, Director of Finance
SWYDDOG ADRODD: REPORTING OFFICER:	Huw Thomas, Director of Finance

**Pwrpas yr Adroddiad (dewiswch fel yn addas)
Purpose of the Report (select as appropriate)**

Er Sicrwydd/For Assurance

**ADRODDIAD SCAA
SBAR REPORT**

Sefyllfa / Situation

This report highlights the narrative on how practices have been performing over the current Post Payment Verification (PPV) cycle.

PPV of claims from General Medical Services (GMS), General Ophthalmic Services (GOS) and General Pharmaceutical Services (GPS) are undertaken as a part of an annual plan by NHS Wales Shared Services Partnership (NWSSP).

There are no options included in this report. The report is for Assurance and will only detail specific risks if there are any; however, provides the narrative for what PPV, Primary Care, Finance and Counter Fraud consider to be the best approach to support practices in improving.

Cefndir / Background

In mid-year and end of financial year, the PPV Manager will prepare a report for Health Board audit committees to outline how practices have been performing and highlighting PPV progress. It also compares the overall performance of the Health Board against the national PPV visits. The report is being produced for the Committee to review and seek assurance that the Post Payment Verification cycle is being managed appropriately. PPV provides assurance in all contractor disciplines, except for General Dental Services.

The purpose of the PPV process is to provide assurance to Health Boards that the claims for payment made by primary care contractors are appropriate and that the delivery of the service is as defined by NHS service specification and relevant legislation.

The PPV team also manages the Waste Management Audit programme on behalf of the Health Boards, offering advice and support to GP Practices and Community Pharmacies in respect of Waste Management.

Asesiad / Assessment

During the past year in 2022-2023, PPV faced challenges associated with the ability to perform 'Business as Usual' due to various factors.

To effectively respond to challenges identified within Primary Care we continued to investigate further avenues to enhance our PPV services, which has maintained an excellent level of PPV, continuing to provide Health Boards with reasonable assurance that public monies are being appropriately claimed.

The following key points should be noted:

General Medical Services (GMS): Following communications issued on 20 December 2022 regarding the inability to undertake the entirety of the visits on the visit plan for 2022/2023, we are planning to condense all remaining visits from the 3-year visit plan into 2-year period of 2023/24 and 2024/25.

We also experienced some transitional points with the introduction of the new payment system, therefore a separate assurance exercise is being undertaken by our payment colleagues in SSP for the data range January 2022 to September 2022. As a result, we began by checking the data submitted from practices from October 2022. The length and period of data will extend as time moves forward, as it has done historically as part of the PPV assurance.

Regarding the revisits that were raised because of routine visits in the last financial year, and any outstanding visits, we will be utilising the same data; however, if a revisit is due at the same time as the routine, we will do an 'extended visit' which means 10% of the claims for the routine and 100% check on the services that were triggered in the initial routine.

General Ophthalmic Services (GOS): The visit plan for GOS 2022-2023 was agreed by Health Boards after these visits were subject to change due to beginning a new way of working. PPV began remote access options having full support from Optometry Wales and begun to carry out virtual visits via Microsoft TEAMS, which proved successful. Future visits will now be included in the 2023-2024 visit plan, and although we are hoping to increase the number of remote visits, we are also incorporating physical visits to carry us through this transition period of electronic claiming, which is being encouraged by Welsh Government. We also continue to undertake the GOS patient letter programme across Wales to provide additional elements of assurance to our Health Boards.

Pharmacy Services (GPS): Due to COVID-19, the Medicines Use Review (MUR) service was stopped in March 2020. In 2022/23 NWSSP introduced a pilot for two new service checks by PPV, which are the Quality and Safety Scheme and the Collaborative Working Scheme. In April 2023 we went 'Live' with the Quality and Safety scheme and will begin the Collaborative Working Scheme in April 2024.

Additional Services:

As requested by Welsh Government in 2022/2023, we have both verified Bonus Payment checks that were claimed and paid to all Health Service staff in 2021, and verified the PPV declaration for additional community pharmacy payments that were paid in 2022/2023.

We are providing a new service check for incorrect dispensing data and after a successful pilot we rolled this out nationally in August 2022 using the quarterly data from April-June 2022. This is continued as a quarterly service for all Health boards across Wales.

Clinical Waste Self Assessments have been piloted for GMS and are now being rolled out to ensure compliance with legislation. We are planning to conduct a pilot with the Self Assessments for Pharmacies in the next few months.

Quarterly meetings are scheduled with the Head of Primary Care, Primary Care Managers, Finance Lead, PPV Team and local Counter Fraud team to regularly review the progress report and to discuss themes, recommendations, and any risks.

There is a bi-monthly National GMS Working Group with Primary Care Managers and PPV to discuss and agree any issues regarding the National application of the programme. PPV are planning to commence a National GPS and GOS Working Group to align with the above which has proved successful.

PPV training events and roadshows to Practice Managers have been delivered locally and we are now recording these in advance, based on our trend data analysis. In addition to facilitating one-on-one training requirements, particularly for new practice managers where we created a video recorded guide to assist with this.

Argymhelliad / Recommendation

The Audit and Risk Assurance Committee is asked to **NOTE** and **TAKE ASSURANCE** from the contents of this report.

Amcanion: (rhaid cwblhau) Objectives: (must be completed)	
Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	3.14 Receive an assurance on Post Payment Verification Audits through bi-annual reporting to the Committee.
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	N/A
Parthau Ansawdd: Domains of Quality Quality and Engagement Act (sharepoint.com)	7. All apply
Galluogwyr Ansawdd: Enablers of Quality: Quality and Engagement Act (sharepoint.com)	3. Data to knowledge 4. Learning, improvement and research 5. Whole systems perspective
Amcanion Strategol y BIP: UHB Strategic Objectives:	3. Striving to deliver and develop excellent services
Amcanion Cynllunio Planning Objectives	Not Applicable

Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Objectives Annual Report 2021-2022	8. Transform our communities through collaboration with people, communities and partners
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Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	Evidence in collated based on claims submitted by contractors of a specific sample period.
Rhestr Termiau: Glossary of Terms:	Included in the body of the report.
Partion / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Archwilio a Sicrwydd Risg Parties / Committees consulted prior to Audit and Risk Assurance Committee:	N/A

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	To promote value for money by deterring and preventing fraud and loss.
Ansawdd / Gofal Claf: Quality / Patient Care:	N/A
Gweithlu: Workforce:	N/A
Risg: Risk:	N/A
Cyfreithiol: Legal:	N/A
Enw Da: Reputational:	N/A
Gyfrinachedd: Privacy:	N/A
Cydraddoldeb: Equality:	N/A

Audit Report - April 2023 to September 2023 = Hywel Dda

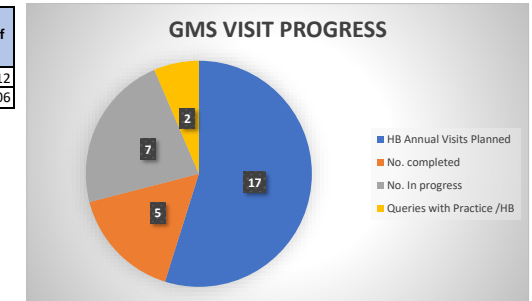
To Notes

Above planned numbers were sent to HB for 23/24 Visit Plan. Numbers may change due to ad hoc visits or closures/mergers
Health Board and Counter Fraud receive copies of each visit report to act upon PPV recommendations
PPV work collaboratively with Health Board managers and Local Counter Fraud to assist with any concerns that may arise
Training/support is provided to practices after visit where necessary

GMS	Visit Type	HB Annual Visits Planned	No. completed	No. In progress	Queries with Practice /HB	No. Recoveries	Value of recoveries	All Wales Completed	All Wales No. in progress	All Wales Planned	All Wales Value of Recoveries
	Routine	17	5	7	2	91	£2,925.20	37	27	166	£22,496.12
Revisit	21	0	1	0			3	0	131	£11,820.06	
Total	38										

Summary of themes/findings/issues

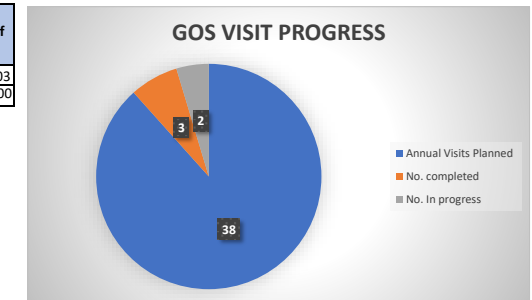
Due to the new payment system, all Revisits across Wales are on hold until Dec 2023



GOS	Visit Type	Annual Visits Planned	No. completed	No. In progress	Queries with Practice /HB	No. Recoveries	Value of recoveries	All Wales Completed	All Wales No. in progress	All Wales Planned	All Wales Value of Recoveries
	Routine	38	3	2	0	4	£173.81	25	32	301	£2,181.03
Revisit	0	0	0	0	0	0	0	0	6	£0.00	
Total	38										

Summary of themes/findings/issues

As contractors are transitioning to electronic records, remote access visits are slow in progressing.



GPS	Visit Type	Annual Visits Planned	No. completed	No. In progress	Queries with Practice /HB	No. Recoveries	Value of recoveries	All Wales Completed	All Wales No. in progress	All Wales Planned	All Wales Value of Recoveries
	Q&S Scheme	34	10	24	0	0	£0.00	52	165	239	£0.00
Total	34										

Summary of themes/findings/issues

Nothing to report at this stage

