



SCHEDULE 6 – CONTRACT MANAGEMENT, REPORTING, AND INFORMATION REQUIREMENTS

A. Reporting Requirements

	Reporting Period	Format of Report	Timing and Method for delivery of Report
National Requirements Reported Centrally			
1. As specified in the list of omnibus, secure electronic file transfer data collections and BAAS schedule of approved collections published on the NHS Digital website to be found at https://digital.nhs.uk/services/the-challenging-burden-service/central-register-of-collections where mandated for and as applicable to the Provider and the Services	As set out in relevant Guidance	As set out in relevant Guidance	As set out in relevant Guidance
National Requirements Reported Locally			
1. Activity and Finance Report (<i>note that, if appropriately designed, this report may also serve as the reconciliation account to be sent by the Provider under SC36.22</i>)	[For local agreement, not less than quarterly]	[For local agreement]	[For local agreement]
2. Service Quality Performance Report, detailing performance against Operational Standards, National Quality Requirements, Local Quality Requirements, Never Events and the duty of candour	[For local agreement, not less than quarterly]	[For local agreement]	[For local agreement]
3. CQUIN Performance Report and details of progress towards satisfying any Quality Incentive Scheme Indicators, including details of all Quality Incentive Scheme Indicators satisfied or not satisfied	[For local agreement]	[For local agreement]	[For local agreement]
4. Complaints monitoring report, setting out numbers of complaints received and including analysis of key themes in content of complaints	[For local agreement, not less than annually]	[For local agreement]	[For local agreement]
5. Summary report of all incidents requiring reporting	[For local agreement, not less than annually]	[For local agreement]	[For local agreement]

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Local Requirements Reported Locally			
<ul style="list-style-type: none"> Confirmation that the provider has undertaken a minimum of 40 vasectomy procedures within the most recent 12 months Confirmation that the provider provides a minimum of 1 vasectomy operating list per month Evidence of attendance at annual basic life support training for all GPs providing the service and any nurses assisting in providing the service Copy of the practice's infection prevention audit completed within the last 12 months Copy of an audit of complications/failure rates within the last 12 months Evidence of indemnity cover for the provision of vasectomy services Evidence of annual infection control training including hand hygiene and aseptic non-touch technique training for all GPs providing the service and any nurses assisting in providing the service. <p>In addition, the commissioner will review the following via the claims submitted by the provider for payment:</p> <ul style="list-style-type: none"> Number of counselling appointments Number of vasectomy procedures undertaken. 	<p>Annually</p> <p>Annually</p> <p>Annually</p> <p>Annually</p> <p>Annually</p> <p>Annually</p> <p>Annually</p> <p>Annually</p> <p>Annually</p>	 <p>Annual local quality requirements report.c</p>	<p>End of January 2024 to the CCG</p>
<p>Accreditation/Re-accreditation process</p> <ul style="list-style-type: none"> Completion of the accreditation (new providers) and re-accreditation template (current providers) Have been accredited/reaccredited as a GP with Extended 	<p>Every 3 years</p>	 <p>Final revised accreditation templat</p>	<p>Every 3 years or earlier should the commissioner request.</p>

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<p>Role (GPwER) by East Lancashire CCG and Blackburn with Darwen CCG within the last 3 years, including approval of the premises, facilities, and equipment in line with CQC regulations and National Guidance</p> <ul style="list-style-type: none"> • Evidence of current minor surgery experience • Have specific training regarding vasectomy provision, conforming to that advocated by the Faculty of Sexual and Reproductive Healthcare (FSRH), equivalent experience or qualifications • Keep up to date with current best practice and guidance • Compliance with the Health and Social Care Act 2012 by completing and submitting an infection prevention audit using an approved and current audit tool available from the following link: http://www.ips.uk.net/professional-practice/quality-improvement-tools/quality-improvement-tools/ • Are registered with CQC with surgical procedures as a regulated activity. 	<p>Every 3 years</p> <p>Every 3 years</p> <p>Every 3 years</p> <p>Every 3 years</p> <p>Every 3 years</p>		