

DoH reveals GP consortia details in consultation response

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GP consortia will be allowed massive freedom to merge, expand or change location, the DoH's White Paper consultation response reveals.

Here are some of the main points from the *Legislative Framework and Next Steps* document:

- The accountable officer of a GP consortium does not have to be a clinician.
- Membership of consortia will 'flex rather than be fixed forever, with consortia able to expand, contract, dissolve or merge.'
- There will be no minimum or maximum size of consortia; but the NHS Commissioning Board must be satisfied a consortium's size is appropriate.
- Each GP practice will nominate a clinician to represent it on the consortium.
- A 'small minority' of consortia will not be ready in time for the 2013 deadline – in which case the NHS Commissioning Board will commission services in those areas until GPs are ready.
- Only a small 'sub-set' of consortia's commissioning outcomes targets will be rewarded by 'quality premiums'.
- The NHS Commissioning Board will only have the power to intervene in consortia's decision-making where there is evidence that consortia are failing or are likely to fail to fulfil their functions.
- The NHS Commissioning Board will have the powers to establish and maintain a risk pool with consortia
- The NHS Commissioning Board's main office will be in Leeds, but also 'representation at a range of locations to be decided.'

More details on each of these points will be updated soon.