NHS Pensions
Clinical Commissioning Group (CCG) guide.
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Whilst every attempt is made to ensure the accuracy of the guide, it would be helpful if employers could bring to our attention any perceived errors or omissions using the Stakeholder Engagement email address at: nhsbsa.stakeholderengagement@nhs.net.

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Introduction

Clinical Commissioning Groups (CCGs) were created following the Health and Social Care Act in 2012 and replaced Primary Care Trusts on 1 April 2013. They are clinically-led statutory NHS bodies responsible for the planning and commissioning of health care services for their local area. There are 207 CCGs in England.

CCGs are:
- Membership bodies, with local GP practices as the members
- Led by an elected governing body made up of GPs, other clinicians including a nurse and a secondary care consultant, and lay members
- Responsible for approximately 2/3 of the total NHS England budget
- Responsible for commissioning healthcare including mental health services, urgent and emergency care, elective hospital services, and community care.

Structure of healthcare within England

CCG Employing Authority (EA) codes start with a 10, 11, 12 or 13.
Capacity codes and employment type combinations used within a CCG.

<table>
<thead>
<tr>
<th>Capacity code</th>
<th>Employment type</th>
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<tbody>
<tr>
<td>4</td>
<td>Officer (Non Manual)</td>
</tr>
<tr>
<td>1</td>
<td>Nurse, Midwife, Physio, Health Visitor</td>
</tr>
<tr>
<td>1</td>
<td>Nurse, Midwife, Physio, Health Visitor</td>
</tr>
</tbody>
</table>

If the codes you are using are not listed above, please contact NHS Pensions who will advise.
CCG Board members

GP Board members

If the GP is completing work for a CCG as a board member and the member is already a GP providing work under an APMS/GMS or PMS contract, then this member is able to pension the Board work they complete for the CCG.

These members must be set up in as one of the below options:

- If GP Board members are providing services under a Contract for Service (Self-employed) the CCG must complete GP SOLO form and the GP must sign this in agreement to pension this work.
  
  – These members may have to be set up on the payroll and have National Insurance and Tax deducted at source to satisfy HMRC’s IR35 rulings. The CCG must make this post non pensionable on the payroll because the contributions must be paid over via the Solo form.

- Where a GP (or group of GPs) work for a CCG as individuals under a fee based (contract for services) arrangement however they elect for the fees to be paid directly to their practice the CCG must include the 14.38% employer contributions within the fee. A SOLO form is not required however the CCG must make it clear that the employer contributions are within the ‘cash envelope’. This income will be pensioned on the GP Provider Certificate.
  
  – No SOLO entries should be made on the Certificate with reference to this income.

- If GP Board members are issued with a Contract of Service (Employed) these members are entitled to sick pay and annual leave. These members are paid through the payroll and have National Insurance, Tax and pension contributions taken as source as with any other employee.

Non GP Board members

Non GP Board members cannot pension this work unless they already have a substantive post within the CCG. This Board work would be in addition to the role they are employed to do within the CCG and paid via enhancements through payroll. This work is pensionable up to whole time equivalent.

Please note: If board work is paid at a higher rate than the substantive post rate the Board work is only pensionable at the member’s normal rate of pay.

For example:
Substantive post rate of pay £10.30 per hour
Board rate of pay: £15.30 per hour

The member would only be able to pension £10.30 of the hourly rate for Board member work.
Flowchart for GP Board members

Does the GP already provide work under a PMS/APMS/GMS contract?

Yes

What type of employment contract is issued by the CCG?

Contract for service

This is a self-employed GP. The CCG must set up GP on the payroll system to satisfy IR35 ruling but must make the post non pensionable.

Fee paid over to GP Practice (Pooling)

The CCG will need to arrange to pay over the fee for the work to the nominated Practice along with employer contributions of 14.3% plus the administration levy of 0.08%, totalling 14.38%

No

The GP is unable to pension the Board work under a contract for service.

GP could pension work under a contract of service

The GP is employed by the CCG and would be set up as an Officer post (capacity code 4).

Set up on payroll and make post pensionable.

Contract of service

The CCG and GP must complete a Solo form. This should be submitted together with the payment to PCSE.

Payment should include the employer contribution of 14.3% plus the administration levy of 0.08%, totalling 14.38%

Fee paid directly to the GP

Fee paid over to GP Practice (Pooling)
Special Class within CCGs

Which grades make up the special classes?

- Nurses
- Physiotherapists
- Midwives
- Health visitors

Nurse Auxiliaries and Occupational Health Nurses are Special Class grades.

Nursery Nurses, Social Workers and Physiotherapy Helpers are not Special Class grades.

Health Care Assistants are not usually considered for the status.

The duties of the post the member is undertaking must be considered. For example a person who holds a nursing qualification, but works as a secretary, could not be considered for Special Class status.

If an employer is unsure whether a post qualifies for special class status they can contact NHS Pensions for advice. The final decision on whether a member is eligible for Special Class status lies with NHS Pensions.

Process for all NHS employers

If a CCG employs an individual whose role requires a nursing qualification/experience the member should be considered for retention of SC status. If there is any doubt that a member may be able to retain Special Class status then the NHS employer must refer the case to NHS Pensions and any applications for retention must include:

- the current job description
- person specification
- organisational chart
- a copy of the previous job description, and
- a completed SMR form.

If a member with Special Class whose duties change, they change new role or move to a new employment then retention of Special Class status must be reconsidered. Should the revised duties new role/employment not qualify for Special Class status, the member must be informed of the decision immediately. The employer is also responsible for informing NHS Pensions of the change to the capacity code from ‘01’ to ‘04’ and the effective date of the change.