

| <b>Primary Care Commissioning Committee (PCCC) Committee in Common (CIC)</b>  |   |                     |                          |             |
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| <b>Date of Meeting</b>  | 22/03/2018  | <b>Paper Number</b> | Item 6                   |             |
| <b>Title</b>  | Primary Care Annual Report 2017/18; Narrative   |                     |                          |             |
| <b>Sponsoring Director</b><br>(name and job title)  | Fiona Slevin-Brown, Director of Strategy and Commissioning  |                     |                          |             |
| <b>Sponsoring Clinical / Lay Lead</b><br>(name and job title)   |   |                     |                          |             |
| <b>Author(s)</b>  | Alex Tilley, Associate Director of Primary Care   |                     |                          |             |
| <b>Purpose</b>  | To present the draft section into the CCGs Annual Plan for committee approval   |                     |                          |             |
| <b>The Primary Care Commissioning Committee is required to (please tick)</b>  |   |                     |                          |             |
| <b>Approve</b>  | <input checked="" type="checkbox"/>   | <b>Receive</b>      | <input type="checkbox"/> |             |
|   |   | <b>Discuss</b>      | <input type="checkbox"/> | <b>Note</b> |
|   |   |                     |                          |             |
| <b>Risk and Assurance</b><br><i>(outline the key risks / where to find mitigation plan in the attached paper and any assurances obtained)</i> | N/A   |                     |                          |             |
| <b>Legal implications/regulatory requirements</b>   | None for this report  |                     |                          |             |
| <b>Public Sector Equality Duty</b>  | None for this report  |                     |                          |             |
| <b>Links to the NHS Constitution (relevant patient/staff rights)</b>  | <p>The NHS provides a comprehensive service available to all.</p> <p>Access to NHS services is based on clinical need, not an individual's ability to pay</p> <p>The NHS aspires to the highest standards of excellence and professionalism</p> <p>The NHS aspires to put patients at the heart of everything it does</p> <p>The NHS works across organisational boundaries and in partnership with other organisations in the interest of patients, local communities and the wider population.</p> <p>The NHS is committed to providing best value for taxpayers' money and the most effective, fair and sustainable use of finite resources</p> <p>The NHS is accountable to the public, communities and patients that it serves</p> |                     |                          |             |

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| <b>Strategic Fit</b><br><i>Primary Care strategy and Other relevant strategies</i>   | Reflects the Primary Care Strategy and Integrated Care System GP Transformation Programme   |
| <b>Commercial and Financial Implications</b><br><i>(Identify how the proposal impacts on existing contract arrangements and have these been incorporated?)</i><br><br><i>Include date Deputy CFO has signed off the affordability and has this been incorporated within the financial plan. Include details of funding source(s)</i> | Date Deputy CFO sign off .....  |
| <b>Quality Focus</b><br><i>(Identify how this proposal impacts on the quality of services received by patients and/or the achievement of key performance targets)</i><br><i>Include date the Director of Nursing has signed off the quality implications)</i>  | Date Director of Nursing sign off.....  |
| <b>Clinical Engagement</b><br><i>Outline the clinical engagement that has been undertaken</i>  |   |
| <b>Consultation, public engagement &amp; partnership working implications/impact</b>   |   |
| <b>NHS Outcomes</b><br><i>Please indicate (highlight) which Domain this paper sits within by highlighting or ticking below:</i><br><i>Please note there may be more than one Domain.</i>   | Domain 1 Preventing people from dying prematurely;<br><br>Domain 2 Enhancing quality of life for people with long-term conditions;<br><br>Domain 3 Helping people to recover from episodes of ill health or following injury;<br><br>Domain 4 Ensuring that people have a positive experience of care; and<br><br>Domain 5 Treating and caring for people in a safe environment; and protecting them from avoidable harm. |

## **Executive Summary**

The following information has been drafted to be included in the Annual Report 2017/18 required for the three CCGs in east Berkshire.

### **Primary Care**

#### **Delegated Primary Care Commissioning Function Transition**

We have delivered our Delegation transition plan with NHS England for 2017/18, in partnership with our colleagues in NHS England Thames Valley. The CCGs have had significant experience in delegated contracting including branch surgery closures, contract changes, contract performance management and applications for mergers. All new challenges bringing vital experience and learning for the Primary Care Team to take forward the role of delegated contract responsibility for primary medical services. Joint working with other CCG teams have included quality improvement, communication and engagement and financial management, all contributing to a successful first year with delegated responsibilities.

Whilst transferring to delegated commissioning of general practice more services have been commissioned into general practice with over £2 million investment in enhanced services through in the first year of the General Practice Outcomes Framework (GPOF). Additional services for the GP Outcomes framework agreed for 2018/19, include pre-diabetes service, anticipatory care service support patients with complex long term conditions and frailty.

#### **General Practice Forward View: east Berkshire CCGs**

The General Practice Forward View (GPFV) was published in April 2016, committing an extra £2.4 billion a year to support general practice services by 2012; through committing to improving patient centred care and access, and invest in new ways of providing general practice.

#### **Investment in General Practice**

We have invested in General Practice transformation through GPFV allocations enabling practices to work differently together to develop services, such as;

- proactive care for patients who are housebound through the introduction of new roles and expanding skill mix,
- reduce workload in practice through reducing the administration time for clinicians through technology and training of the practices team
- focus on self-care and prevention to reduce the demand to general practice and improve patient outcomes

#### **Workforce Development**

A significant challenge to deliver high quality services can be identified in the workforce development plans, this is due to the predicted reduction in traditional GP and nurse roles on future workforce in general practice. Through the ICS GP transformation programme the workforce gap for general practitioners has been estimated and in 2018/19 implementation of a number of initiatives to plug the gap for general practice is underway. Our Community Education Provider Network (CEPN) initiative went live in 2017/18, with training needs assessments, education and training and aligning with education providers providing a pipeline for future primary care services.

### **Workload Efficiency**

The General Practice Forward View national policy has supported the delivery of the local strategic plans including support for practices to be more productive through programmes of quality improvement such as Time for Care and Productive General Practice (PGP). The NHS England Time for Care programme works with networks of practices working together with quality improvement approaches, whereas PGP focuses on one practice at a time to implement small improvements. This programme has focused on the necessary change management skills into existing general practice teams, with the next initiatives prioritised as workforce development and self-care and prevention in general practice for 2018/19. The first cohorts for these programmes commenced in 2017/18 with 7 practices signed up for the Productive General Practices and 24 practices engaged through the development of the Time for Care programme.

### **Infrastructure**

The three CCGs have invested with NHS England, into the premises and technology across local general practice through the Estates and Technology Transformation Fund (ETTF). In 2017/18, the first ETTF scheme was completed at Dedworth Medical Centre in Windsor, adding community space and additional clinical consulting rooms. The community space completed in qtr 1 of this year, has already provided a facility for the local church to use with patients to support their living in the community and a new bridge club is being set up to provide an opportunity for people to meet up and reduce loneliness and social isolation in west Windsor.

Three further significant schemes are in train for completion in 2019/2020, including the co-location of two practices into the new Heatherwood Hospital development, two further practices co-located in a retirement home in Ascot, subject to planning permission; and a co-location of existing general practice services with community and social care in north Slough. The benefits of co-locating provides the strong emphasis on patient centred care, through service coming together suitable for the population and bringing those services closer to that population.

An additional £100,000 through minor improvement grants into general practices premises, improving standards in infection control and access to the premises across east Berkshire in 2017/18.

Our **Primary Care Strategy** is committed to delivering a transformed and high quality sustainable model of general practice for east Berkshire. We will improve overall access to general practice services and realise the opportunities and benefits set out in the national policy called the General Practice Forward View (GP FV).

The Primary Care Strategy set out the following objectives for 2017/18:

| <b>Delivery Plan<br/>2017 - 2021</b>                                      | <b>Progress in 2017/18 – Year one</b>  |
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| Secure the essential high quality general practice fit for our population | <ul style="list-style-type: none"><li>• All practices have achieved good or above ratings with CQC by April 2018</li><li>• Programme of Quality Improvement skills into general practice is in place through the Time For Care GPFV initiative</li><li>• Continual work with all practices to support their resilience for sustainable healthcare supported with the development of a primary care</li></ul> |

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|  | performance dashboard   |
| Patient centred primary care at the heart of system transformation           | Public conversation on the future of primary care services has been deferred to be included in the Primary and Community Care programme. This wider engagement programme will commence in May 2018.   |
| Improve the patient experience of accessing general practice                 | <p>The General Practice Patient Survey was reported in June with some areas of improvement:</p> <ul style="list-style-type: none"> <li>• 4% improvement of overall experience for Slough CCG at 77%</li> <li>• 1% improvement in Bracknell and Ascot CCG for ease on getting through on the phone to practices and helpfulness of receptionists</li> <li>• 10% increase for patients being aware of the ability to book appointments online and 4% improvement of patients who are well supported in their Long Term Conditions in Windsor, Ascot and Maidenhead CCG</li> </ul> <p>There continues to be ambition to improve the levels of patient experience across general practice services</p>                                  |
| Equitable extended hours and enhanced services available in general practice | <p>100% registered patients in east Berkshire CCGs are able to access extended hours general practice services Monday to Friday until 8pm</p> <p>70% registered patients in east Berkshire CCGs are able to access extended hours general practice services on both Saturdays and Sunday (Windsor, Ascot and Maidenhead and Slough)</p> <p>All services commissioned for extended hours in general practice have delivered the required level of hours per 1,000 patients by March 2018</p>   |
| Share information to support improved patient outcomes                       | <p>Social Prescribing projects are now in all three CCGs to support patients in achieving their own well-being ambitions through accessing commissioned health and social care services, community and voluntary via their general practice. The three schemes vary across the three CCGs and unitary authorities.</p> <p>Shared medical records across general practice; a pilot in Slough has been delayed and should be implemented by July 2018.</p> <p>Online consultation (to improve patient access and supporting flexible options to promote self-care) is being piloted in one practice since Feb 2018. Following evaluation and more local engagement, implementation of online consultations is planned in 2018/19.</p> |

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| <p>Increase capacity and reduce demand on general practice services</p> | <p>In addition to the extended hours available to east Berkshire patients, the three CCGs have been working collaboratively to transform GP services to work at scale.</p> <p>During the second quarter of delivery in 2017/18, the transformation plans are being implemented through practice networking together to transform general practice services. Schemes include those that improve efficiency in practice, to reduce demand through supporting patients and develop the roles in the General Practice team by March 2019.</p> |
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A review of the Strategy for 2018/19 is underway with alignment to the Integrated Care System (ICS) objectives; specifically those with co-dependencies such as the reducing variation through the design of clinical pathways and integrated decision making for frail and complex patients.

Within the Integrated Care System (ICS) programme for general practice transformation the east Berkshire CCGs have worked with our member practices as providers to develop Primary Care networks. These networks describe how practices will work together across GP Federations and clusters to support transfer of care out of hospital and strengthen resilience in individual our general practices.

**Recommendation(s)**

The PCCC is asked to support the Primary Care element of the CCG Annual Report in year one of GPFV implementation and Primary Medical Service Delegation.