

Governing Body (public) meeting

DATE: 26 March 2015

Title	Update on Referrals and Primary Care
<p>Recommended action for the Governing Body</p>	<p>That the Governing Body:</p> <p>NOTE the development of a GP data dashboard and continued research of best practice methods to work with practices to address variation and ensure high quality referrals.</p>
<p>Executive summary</p>	<p>Bexley is committed to high quality best practice referrals that improve outcomes for patients. The CCG has been working with practices to understand why there has been an increase in patient referrals and take clinically led action to ensure that patients are seen at the most appropriate time, by the most appropriate person or service.</p> <p>A paper was created for the Governing Body meeting on the 27th January 2015, outlining the continued increase in GP referrals, which were reported to show an overall increase of approximately 15%. The paper described the work under way within the CCG to support practices to review and examine any underlying high or low variance in their referral rates. This work include the on-going production of locality summary data packs, 'deep dive' and clinical lead input, where requested by practices, as well as working with the referral management provider, to improve the accuracy and flow of information across the system, and to rectify any year to year anomalies in the data.</p> <p>The report listed a number of potential ideas which could be implemented in partnership with practices, to improve high quality referring practices across the borough. It was intended to hold a GP summit during February 2015 to discuss these emerging ideas with GP's and clinicians to determine the most suitable and promising ideas. However, based on feedback from localities that greater granularity is needed in the monthly referral levels, the CCG has decided to create a new data dashboard, so that all parties can have clear sight of their referral levels. Once this is in place, it is intended to hold the GP summit, so that ideas can be put forward for decision, via the established clinical and corporate governance process. To inform the above work, the CCG continues to gather information</p>

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	<p>and research best practice methods and case studies to improve the quality of referrals.</p> <p>The continued emphasis of the programme is to ensure that patients are offered equitable access to the right clinical service, based on their condition, using best practice tools and examples to address underlying variation</p>	
Which objective does this paper support?	Patients: Improve the health and wellbeing of people in Bexley in partnership with our key stakeholders	✓
	People: Empower our staff to make NHS Bexley CCG the most successful CCG in (south) London	✓
	Pounds: Delivering on all of our statutory duties and become an effective, efficient and economical organisation	✓
	Process: Commission safe, sustainable and equitable services in line with the operating framework and which improves outcomes and patient experience	✓
Organisational implications	Key risks <small>(corporate and/or clinical)</small>	GP referrals continue to be highly variable between and within practices.
	Equality and diversity	Variation in referrals and activity could mean all patients do not have equal access to the right services, according to clinical need.
	Patient impact	Appropriate care is provided at the appropriate time by the appropriate clinicians.
	Financial	Increasing referral volumes impact on the sustainability of the CCG's financial position.
	Legal issues	Extension of contract to referral management services provider, following unsuccessful procurement.
	NHS constitution	The CCG cannot continue to support access to clinically appropriate services within budget.
Consultation (public, member or other)	Locality Grouping consultation.	
Audit (considered/approved by other committees/groups)	Approach and detailed information considered by Finance Sub Committee	
Communications plan	Monthly Locality meetings	

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Author	Charles O'Hanlon	
	Clinical lead	Executive sponsor
	Clinical Locality Leads	Sarah Valentine Director of Commissioning
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