

Governing Body (public) Meeting

DATE: 26 March 2015

Title	Primary Care Development Team (PCDT) Update
Recommended action for the Governing Body	<p>That the Governing Body:</p> <p>NOTE the work of the Primary Care Development team outlined within this report.</p>
Executive summary	<p>Over the last six months, each of the three localities within Bexley CCG (CCG) have been exploring opportunities for practices to work more closely together in a networked way, as part of the 'Future Models' work.</p> <p>As the locality plans emerged, it was clear that more resource and support was needed to allow practices to utilise the benefits of networked working. Therefore, the CCG approved a proposal to create a Primary Care Development Team (PCDT) in October 2014. The team composition is as follows:</p> <ul style="list-style-type: none"> • Locality development managers: <ul style="list-style-type: none"> ○ Clocktower - Lisa Wilson and Ann Leach, Practice Managers ○ Frogna - Fiona Bedus and Gill Collins, Practice Managers ○ North Bexley - Maria Howden, Practice Manager • General Practitioner (GP) & Clinical Vice Chair: <ul style="list-style-type: none"> ○ Dr Nikita Kanani, GP • CCG support staff: <ul style="list-style-type: none"> ○ Theresa Osborne, Chief Financial Officer (CCG lead) ○ Charles O'Hanlon and Michael Boyce, part time Assistant Directors ○ Sarah Birch, Primary Care Development Manager ○ Pauline Wortman, Primary Care Project Manager <p>The team is working with practices to progress the work already started and is able to access analytics and ultimately support practices as they move forward with their locality and Bexley wide plans.</p>

Clinical Commissioning Group

	<p>The work will also link in to Primary Care Co-Commissioning, the South East London Strategy work, including Local Care Networks and the London Health Commission.</p> <p>Since establishment of the PCDT, it has supported practices in taking forward various workstreams as follows:</p> <ul style="list-style-type: none"> • Prime Minister’s Challenge Fund • Primary Care co-commissioning • Initial data pack • Facilitating the change of the risk stratification system • Blue Stream Academy & Training • iPLATO • Practice Visits • Infrastructure Bids • LMC Support/ Locality Meetings • Federated Working • Data Sharing <p>The PCDT will be involved in supporting the following work going forward:</p> <ul style="list-style-type: none"> • Primary Care Strategy • Data Pack Development • CEPN (training) • Monthly Update in Bulletin • Primary Care co-commissioning <p>The PCDT will continue to work with practices to support them in taking forward the primary care agenda.</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	✓

Clinical Commissioning Group

Organisational implications	Key risks (corporate and/or clinical)	That insufficient resources are available to support the wide agenda.	
	Equality and diversity	All practices and localities have had equal access to funding and the time of the PCDT. All localities are represented on the Team.	
	Patient impact	It is intended that the Primary Care agenda will benefit patient care.	
	Financial	The CCG has committed £60k to this agenda in 2014/15 in addition to staff resources to support the work.	
	Legal issues	N/A	
	NHS constitution	N/A	
Consultation (public, member or other)	N/A		
Audit (considered/ approved by other committees/groups)	This paper has not been to any other Committee.		
Communications plan	N/A		
Author	Michael Boyce Assistant Director of Programme Management & Financial Information		
	Clinical Lead	Executive Sponsor	
	Dr Nikki Kanani Clinical Vice Chair	Theresa Osborne Chief Financial Officer	
Date	12 March 2015		

Primary Care Development Team (PCDT) Update

1. INTRODUCTION

Over the last six months, each of the three localities within Bexley CCG have been exploring opportunities for practices to work more closely together in a networked way, as part of the 'Future Models' work. Primary care has been finding it harder to manage the increasing workload and this offers the chance to preserve the assets of General Practice, but also adapt so that practices can continue to provide a sustainable, high quality service for patients.

As the locality plans emerged, it was clear that more resource and support was needed to allow practices to utilise the benefits of networked working. Therefore, the CCG approved a proposal to create a Primary Care Development Team (PCDT) in October 2014. The team meets fortnightly and the team composition is as follows:

- Locality development managers
 - Clocktower - Lisa Wilson and Ann Leach, Practice Managers
 - Frognal - Fiona Bedus and Gill Collins, Practice Managers
 - North Bexley - Maria Howden, Practice Manager

- General Practitioner (GP) & Clinical Vice Chair
 - Dr Nikita Kanani, GP

- CCG support staff
 - Theresa Osborne, Chief Financial Officer (CCG lead)
 - Charles O'Hanlon and Michael Boyce, part time Assistant Directors
 - Sarah Birch, Primary Care Development Manager
 - Pauline Wortman, Primary Care Project Manager

The team is working with practices to progress the work already started and can also access analytics; and will ultimately support practices as they move forward with their locality and Bexley wide plans.

The work will also link in to Primary Care Co-Commissioning, the South East London Strategy work, including Local Care Networks and the London Health Commission.

2. WORK TO DATE

Since establishment of the PCDT, it has supported practices in taking forward various workstreams as follows:

Prime Minister's Challenge Fund (PMCF)

The first area of focus was supporting practices with the Prime Minister's Challenge Fund bid. The bid included an agreement to put in place technology to enable practices to share patient data (subject to patient engagement, consent and Information Governance being in place), to

improve access and improve patient care. The team are hoping that this will be successful. However, the CCG is looking to progress parts of the bid regardless of the outcome.

Primary Care Co-commissioning

Currently, GP services are commissioned and managed by NHS England, with no CCG involvement. However, NHS England has proposed that CCGs share the commissioning of primary care, to enable more “joined up” commissioning. This is known as ‘Co-commissioning’. There were three possible levels of involvement offered:

- Level 1: Greater involvement Engagement Event
- Level 2: Joint Commissioning
- Level 3: Fully Delegated arrangements

This was discussed at the December 2014 GP engagement event / Primary Care Advisory Group, where GP members agreed to submit a bid jointly across South East London to Co-commission at level 2. This was explored further at the engagement event held on 12th March 2015, at which amendments to the Constitution, to allow for this change, was discussed and agreed.

Co-commissioning will give the CCG the opportunity to have greater control over how primary care services are commissioned for the local population; and ensure transparency of decision making.

Initial Data Pack

It was requested by GP members at the September 2014 Finance Sub Committee (FSC) meeting that a report be produced showing four specific areas of spend/activity, these being:

- Prescribing spend;
- GP referrals;
- A&E attendances;
- Individual Funding Requests.

The data sets are presented so that they showed the CCG’s overall position, by locality/GP practice and are weighted accordingly to show comparative data. They are presented at the monthly Finance Sub-Committee meetings and at the three monthly locality meetings (by the respective GP leads: Dr Fish, Dr Money and Dr Anand). Changes have been made to reflect comments received, including: additional levels of data relating to Prescribing, A&E Attendances and Choose & Book. Notes have also been added to the pack to aid interpretation.

However, whilst it is recognised that there is still more supporting information and a greater level of detail required to help interpret these graphs, the continued development of these has been halted, although they will still be produced in their current form. This is to enable the CCG’s development of a computerised data pack, which it is hoped will support practices. This has been highlighted at meetings with practices and is being led by the Locality development managers; and discussed at the fortnightly PCDT meetings.

Facilitating the change of the risk stratification system

On the advice of GPs, the CCG made the decision to transfer the provider of risk stratification from the current supplier (MSDI) to Vision Plus. It was felt that the replacement system provides easier functionality for practices and is fully integrated with the existing IT system. Roll out is planned from 1st April 2015. In addition, savings have been generated due to the lower costs of the Vision Plus system.

Blue Stream Academy & Training

Blue stream Academy has been purchased by the CCG to benefit all practices in Bexley and was launched on 16th March 2015. All practices who have submitted a staff list will be given access codes for all staff. The codes will be based on the staff role within the practice and will give access from both work and home to a suite of training modules relevant to their position.

The Practice Manager can select 'priority' modules which are relevant to the practice and staff members can complete them without leaving the practice or having an external trainer. The modules satisfy CQC and completion certificates are accepted as evidence of 'up to date' knowledge of statutory as well as staff development subjects.

The introduction of this makes training more accessible and less resource intensive for practices.

iPLATO

iPLATO has been implemented across Bexley. The system enables GPs to send automated appointment reminders to improve patient attendance. The unique '**Two-way messaging**' service allows patients to cancel appointments via SMS which frees up short term appointment slots and avoids calls to switchboard.

In addition to improving patient access, iPLATO Patient Care Messaging has proven to act as an effective cost efficient tool for reaching surgery QOF (e.g. smoking status validation)/DES/LES targets. Current GP surgery users have found the service to be user friendly, effective to reduce DNAs, effective in reducing call volumes and cost effective (as text messages are cheaper than a letter or landline call). The system directly links to the practices' systems and has been fully funded by the CCG for 1 year. The only cost to practices in future years is the cost of the messages.

Practice Visits

Throughout February and March the PCDT undertook initial introductory meetings with all practices in Bexley (a schedule of these is attached at appendix 1). The visits have been well received by practices; and the team are working on the feedback gathered to inform the programme of work going forward. Practices welcomed meeting bi-monthly or quarterly with the team and were engaged in the new data pack being developed.

Infrastructure Bids

Seven Bexley practices put forward bids for grants for improvement funding by the deadline set by NHS England. The PCDT reviewed these bids and practices were given letters of support by the CCG, with a final decision on funding to be made by NHS England. The bids were required to meet the following requirements to be considered for funding:

- Accelerate improvements to the practice's premises and increase capacity in primary care;
- Enable better access to general practice;
- Provide the foundation for possible integrated care services within the community;
- Ensure Disability Discrimination Act compliance;
- Improve services for the frail and elderly, reducing the need for urgent care services and reducing the reliance on emergency care;

If successful, the grants will improve the practices and facilities available to patients.

LMC Support/ Locality Meetings

The PCDT attends the locality meetings to ensure that member practices are kept up to date with national and local developments.

The PCDT also attends the LMC meetings, ensuring that members are informed of CCG developments.

Federated Working

To facilitate federated working across localities, and potentially Bexley, the CCG has made available £20,000 to each locality.

Iplato (see section above) has been implemented across Bexley, with all practices signed up and involved.

North Bexley & Frognal have been working together on seven work streams:

- Bulk Buying (Including training)
- Policies & Procedures (starting with a registration policy)
- Legalities/Organisational Development
- Human Resources Aspects
- I.T
- Pricing Structures for Immunisations, Letter and Reports
- CQC Regulation

Clocktower has been working on a delegated prescribing proposal, with the assistance of the CCG's CFO and AD of Medicines Management. This proposal was approved at the CCG's March FSC for April implementation. It is hoped that the scheme will improve the quality of prescribing across Clocktower; and that Frognal and North Bexley localities will also have the opportunity to adopt the scheme across their localities.

All localities have put in place mechanisms by which learning can be shared between practices and localities. This is also facilitated by the Locality Development Managers.

Data Sharing

To enable interoperability and facilitate recommendations in the London Health Commission and South East London Strategy, data sharing of patient records across the system would be necessary. GPs in Bexley agreed to share records with other Bexley clinicians as part of the PMCF submission, recognising the benefits to patients. It is hoped that this aspect of the bid can still be progressed and was discussed at the GP engagement event on 12th March. Before any data is shared, patient engagement and communication will take place and appropriate Information Governance controls will be in place.

3. FUTURE WORK

Primary Care Strategy

The Primary Care Strategy was initially published and approved by the CCG's Governing Body in mid-2014. Given the changing policy agenda, e.g. Primary Care Co-Commissioning, South East London Strategy, London Health Commission and the move towards the application of a common standard of services for general practice, across London, the strategy will be refreshed to ensure it is current. To this end, the PCDT is working with stakeholders to update the document and a draft refreshed version will be available by May 2015.

Data Pack Development

As part of the on-going work to provide more meaningful data at a practice level, the PCDT reviewed various GP reporting tools in use at other CCGs. A tool was selected for development after discussion with the PCDT. The new tool has also been discussed at practice visits. The tool will include the current requirements for Prescribing, A&E, Choose & Book and IFR information, as well as expanding upon acute data to include activity by point of delivery and by speciality; and will also include activity and price information. The tool will provide a more granular level of practice based reporting with the ability to interrogate the data within practices.

CEPN (training)

The Community Education Provider network (CEPN) is currently made up of the CCG, GP Clinical Lead, Lead Nurse Practitioner, University of Greenwich (UoG) and a dedicated Project Manager. The CEPN is developing and the next meeting will expand the membership to include Practice Managers and Oxleas; with an aim to expand further in the near future. The role of the CEPN is to take on the training and development of Primary Care staff and to this end has completed a training needs assessment for those staff. The CEPN is currently promoting and developing nurse mentors to support current and future practice nursing staff. There is also an on-going development of Health Care Assistants to ensure consistent and relevant skill competences and the CEPN will be involved in rolling this out and training and monitoring progress.

There is also an expansion of training practices with more practices taking apprentices as well as student and 'return to practice' nurses. Involvement of the UoG ensures that we have the ability to tailor courses to benefit the needs of the Bexley population and from 1st April 2015 the local CEPN will be in a stronger position to commission training modules and study days from UoG, local acute trusts, local community providers and the voluntary sector.

Monthly Update in CCG Bulletin

The PCDT will be writing a section for the CCG monthly internal bulletin updating practices on the work of the PCDT. The section will include a Q&A showing what questions were asked by individual practices at the individual meetings in order to share thinking and identify common themes.

Primary Care Co-Commissioning

As this develops, the PCDT will ensure practices are kept up to date with developments.

4. CONCLUSION

The PCDT will continue to work with practices to support them in taking forward the primary care agenda.

5. RECOMMENDATIONS

Members are asked to:

- **NOTE** the work of the Primary Care Development team outlined within this report.

Appendix 1: Practice Visit Schedule

Practice	Date of Visit
CLOCKTOWER	
Bellegrove Road	05/03/2015
Bexley Group Practice	Being arranged
Bursted Wood Surgery	25/02/2015
Crook Log Surgery	12/02/2015
Littleheath Surgery	17/04/2015
Ingleton Avenue Surgery	Being arranged
The Albion Surgery	23/03/2015
Westwood Surgery	24/02/2015
Welling Medical Practice	27/03/2015
FROGNAL	
The Barnard Medical Practice	15/04/2015
Plas Meddyg Surgery	17/02/2015
Sidcup Medical Centre	15/04/2015
Station Road Surgery	02/03/2015
Thanet Road Surgery	10/03/2015
Woodlands Surgery	13/03/2015
NORTH BEXLEY	
Belvedere Medical Centre	11/02/2015
Bexley Medical Group	16/02/2015
Bulbanks Medical Centre	11/02/2015
Cairngall Medical Practice	03/03/2015
Crayford Town Surgery	26/02/2015
Goodhealth PMS	25/02/2015
Lakeside Medical Practice	25/02/2015
Lyndhurst Medical Centre	10/02/2015
Mill Road Surgery	23/02/2015
Northumberland Heath MC	24/02/2015
Slade Green Medical Centre	18/02/2015
The Parkside Surgery	26/02/2015