

<b>Subject:</b>	Primary Care Operational Report
<b>Produced by:</b>	Steve Lloyd – Head of Primary Care (WNCCG)
<b>Presented by:</b>	Steve Lloyd – Head of Primary Care (WNCCG)
<b>Submitted to:</b>	West Norfolk Primary Care Commissioning Committee
<b>Purpose of Paper:</b>	For Information
<b>Executive Summary</b>	
This paper provides an overview for the committee of any significant issues, activity, and progress in WNCCG work within Primary Care, since the last committee meeting.	
<b>KEY RISKS (in relation to CCG strategic objectives and statutory duties)</b>	
<b>Clinical &amp; Quality:</b> Any relevant issues included in the report by exception	
<b>Finance and Performance:</b> Financial impact included where relevant and data available.	
<b>Reputation:</b> The CCG routinely reviews any reputational risks associated with its work on Primary Care.	
<b>Legal:</b> The CCG ensures that it is acting within its statutory obligations in relation to primary care development.	
<b>Patient focus:</b> Aim to provide parity of services to all WNCCG patients.	
<b>Information Governance:</b> Compliance to policy	
<b>Conflicts of Interest:</b> The Committee has been set up to ensure that the CCG acts within the guidance on conflicts of interest.	
<b>Equality Impact Assessment:</b> Not applicable.	
<b>Reference to relevant risk on the Governing Body Assurance Framework:</b> Not applicable.	
<b>RECOMMENDATION:</b> Paper is for Information only	

## **West Norfolk CCG – Primary Care Operational Report September 2017**

### 1) Local Enhanced Services (LES) Update

The new offer for 17/18 LES payments, with the additional £1 payment for providing “treatment room” services, as agreed at this committee on 18<sup>th</sup> August 2017, was distributed to Practices on 24<sup>th</sup> August with a request to sign-up by the end of the month. All practices have accepted this offer for this financial year, with most signing up to provide all services. Practices have been advised to invoice for the back-payment of the increased rate from 1<sup>st</sup> April 2017. A full list services being offered by practice is included at Appendix A.

In order to avoid the complications experienced in this area this year, early agreement will need to be sought for next year’s arrangements. This may be influenced by recent LMC representation to request CCGs to consider alignment of services across CCGs.

### 2) Demand Management Initiatives

#### **2.1 Demand Management in Primary Care Agreement (DMPA)**

The DMPA was also issued for sign-up on 24<sup>th</sup> August. There has been some reticence from a minority of practices to agree to this. The main concern is over the requirement to carry out peer review before referrals are made to secondary care. Fifteen practices have signed up so far, which represents 76% of West Norfolk patient population. Work is ongoing to engage with those practices that are yet to agree to undertake this work, though it is expected that a small core of hard to reach practices are unlikely to sign-up.

Practices have been advised that the funding previously used to pay for the use of the Choose and Book E-referral service, will only be paid to those practices who have signed up to the DMPA effective 1<sup>st</sup> September. Watlington have advised us that consequently they intend to cease using the electronic referral system, and will be posting hard copy referrals to secondary care providers.

#### **2.2 Referral Support Service**

WNCCG and West Norfolk Health (WNH) have been working together to develop some additional services which can be carried out as an extension of the existing E-Referral service they run, which will support the Demand Management programme. Initial activities have been agreed as:

- Provision of administration support for practices with their internal peer review
- Management of practice compliance to prior approval thresholds
- Supporting the roll-out of increased use of Advice and Guidance
- Management all referrals to secondary care from opticians, removing the need for these to go via GP practices

A specification and work package have been written to support this work.

## 2.3 Provision of Referral Data

A report has been developed by BI, which provides data for practices on their referral rates, and how they compare to other West Norfolk practices. They can filter this data to look at any particular speciality, and see how they compare to other practices for any given speciality. This is to help them target their internal peer review most effectively. This data will be updated and reissued monthly.

### 3) West Norfolk Health

West Norfolk Health has presented their business case to the CCG and has received support from the SMT for their structure. A number of other projects will be developed in order to build the case for the release of additional funding. These additional projects will be focussed on meeting the shared aims and objectives of the CCG and WNH and also to build sustainable general practice in West Norfolk. Work continues with West Norfolk Health to develop these elements of the business case. These elements will be shared with the committee for information as previously agreed.

Work has continued to ensure that WNH and the CCG continue to develop a robust provider / commissioner relationship, where WNH can become well placed to offer services as it continues to develop. Regular meetings are scheduled between WNH and the CCG to offer both support them and ensure that objectives are met.

### 4) Estates

There are a number of proposals for premises developments within West Norfolk CCG ranging from full new builds to more minor works such as extensions and internal remodelling.

Schemes are at differing stages of development, with some being developed to Full Business Case and others at the point of early exploration. Any new developments or extensions will have the capital funded by NHS England, with any recurrent revenue costs being a cost pressure to the CCG.

A full update of each of the schemes and its current status will be provided to the next meeting as clarification is sought from NHS England, and the STP wide position becomes clearer.

### 5) Winter Planning

The system faces significant pressures every winter, with increases in demand from patients at GP practices and at hospitals. We are undertaking a number of actions which will impact on primary care:

#### **5.1 Choose Me, Not A&E**

We will be promoting the “Choose Me, Not A&E” campaign, which aims to promote the most appropriate service to patients. The intention is to increase the use of community pharmacies and self-care where appropriate. We will be asking our practices to support us in the promotion of this campaign.

## **5.2 111 and Out of Hours services**

We are working with the 111 and Out Of Hours services to ensure that they are prepared for the foreseen increase in demand. Having sufficient out of hours provision should help reduce the demand seen in daytime hours.

## **5.3 Influenza vaccinations**

We will be encouraging our practices to continue the good work undertaken annually around the promotion and provision of the influenza vaccine. We will be asking practices to particularly focus on offering the vaccine to our most vulnerable patients to reduce the likelihood of hospital admissions.

### 6) Primary Care Engagement

WNCCG would like to improve engagement with Primary Care significantly, and there are early stage plans to host monthly meetings, where practices are supported to close for normal appointments for one afternoon a month. This will enable clinicians can come together and discuss issues, policies, develop CCG work, and share information about national and local developments affecting Primary Care.

## Appendix A - Practice Sign-up to Enhanced Services

Practice	Includes	Anti-Coag	Level	Near Patient Testing	level	Post Op	Phlebotomy	Treatment Room	DVT	Minor Injury	DMPA	Practice Pop		
												Signed up	Not signed up	
Boughton Surgery		Yes	4	Yes	4	Yes	Yes	Yes	Yes	Yes	Yes	3023		
Bridge Street Surgery		Yes	4	Yes	4	Yes	Yes	Yes	Yes	Yes	No		8679	
Burnham Market Surgery		Yes	4	Yes	4	Yes	Yes	Yes	Yes	Yes	Yes	4356		
Campingland Surgery		Yes	4	Yes	4	Yes	Yes	Yes	Yes	Yes	No		7000	
Great Massingham & Docking Surgery		Yes	4	Yes	4	Yes	Yes	Yes	Yes	Yes	Yes	6341		
Feltwell Surgery		Yes	4	Yes	4	Yes	Yes	Yes	Yes	Yes	Yes	4969		
Grimston Medical Centre		Yes	4	Yes	4	No	Yes	Yes	No	Yes	No		4942	
Heacham Group Practice		Yes	4	Yes	4	Yes	Yes	Yes	Yes	Yes	tbc		7792	
Howdale Surgery		Yes	4	Yes	4	Yes	Yes	Yes	Yes	Yes	Yes	7264		
Litcham Health Centre		Yes	3	Yes	4	Yes	Yes	Yes	Yes	Yes	Yes	3650		
Manor Farm Medical Centre		Yes	4	Yes	3	Yes	Yes	Yes	Yes	Yes	Yes	6946		
Plowright Medical Centre		Yes	4	Yes	4	Yes	Yes	Yes	Yes	Yes	No		5908	
Southgates Medical & Surgical Centre	Southgates	Yes	4	Yes	3	Yes	Yes	Yes	Yes	Yes	Yes	16563		
	Woottons Surgery	Yes	4	Yes	3	Yes	Yes	Yes	Yes	Yes	Yes	5552		
St Clements Surgery - Village Health		Yes	4	Yes	4	Yes	Yes	Yes	Yes	Yes	Yes	5655		
St James Medical Practice		Yes	4	Yes	4	Yes	Yes	Yes	yes	Yes	Yes	16580		
St John's Surgery - Terrington		Yes	4	Yes	4	Yes	Yes	Yes	Yes	Yes	Yes	5116		
Upwell Health Centre		Yes	4	Yes	4	Yes	Yes	Yes	Yes	Yes	Yes	10284		
Vida Healthcare	Carole Brown Health Centre	Yes	4	Yes	4	Yes	Yes	Yes	Yes	Yes	Yes	Yes (x 2)	32894	
	The Hollies Surgery												4263	
	Gayton Road Health Centre													
	Fairstead surgery													
	St Augustines surgery													
Hunstanton Medical practice														
Watlington Medical Centre		Yes	4	Yes	4	Yes	Yes	Yes	Yes	Yes	No		6736	
As at 13/09/17													133456	41057
													signed up	<b>76%</b>