

General practice update

Overview and Scrutiny Committee (Adult Social Care and Health)

26 June 2018



Staying local & together together with you



Local context 2018-2019

Southport and Formby	South Sefton		
Joint Com	missioners		
Out of Hours Provide	der - Go To Doc Ltd		
Primary Care Clinical Lead: Dr Kati Scholtz	Primary Care Clinical Lead: Dr Craig Gillespie		
19 GP Practices	30 GP Practices		
4 Localities	4 Localities		
List Size Actual 125,004, Weighted 133,996	List Size Actual 155,104, Weighted 167,157		
Federation	Federation		
GMS funding per weighted patient £87.92 minus 4.87% for out of hours deduction	GMS funding per weighted patient £87.92 minus 4.87% for out of hours deduction		





Delegated commissioning

Level	NHS England (NHSE) / CCG roles
Greater influence	NHSE – full contract holders
Joint commissioners	NHSE – contract holders CCG – joint development
Full delegation	CCG – full contract holders





Contracting for primary care

Core contract type	S&F	SS
General Medical Services (GMS) contracts are nationally agreed with a payment of £87.92 per weighted patient in 18/19. GMS Contracts are awarded in perpetuity.	7	16
Personal Medical Services (PMS) are locally agreed contracts underpinned by national regulation. There is a national programme from 2016 to reduce PMS premiums over a 4 year period to achieve GMS funding levels. Funding released from the contract will be re-invested back into local primary medical care through the Local Quality Contract. PMS contracts are awarded in perpetuity.	10	5
Alternative Providers of Medical Services (APMS) are provided under Directions of the Secretary of State for Health. APMS contracts can be used to commission services from traditional GP practices as well as others including (but not limited to) commercial providers or NHS Trusts. This contract is awarded on a time limited basis, typically 5 years.	2	9





Local Quality Contract (LQC)

- A 12 month contract commissioned by both CCGs from general practice to deliver enhanced services over and above the core contract
- The intention is for the LQC to deliver schemes which result in quality improvements, efficiencies in the health economy, and sustainability of general practice

Schemes	Payment Structure
Part 1 Schemes for delivery by all practices, including access, prevention of disease, palliative/terminal care, use of resources, e-RS and prescribing quality	Equity based payment to a maximum of £106.38 per weighted patient (includes core contract payment)
Part 2 Schemes that are optional to deliver including phlebotomy, shared care and Drug Administration	Activity based payments
Part 3 Schemes that are optional to delver including ABPI, Syrian Resettlement and Gypsies and Travellers	Activity based payments

Overview of NHS South Sefton CCG

There are 4 localities in South Sefton CCG:



Overall, health in South Sefton is getting better, but there are clear areas for improvement:

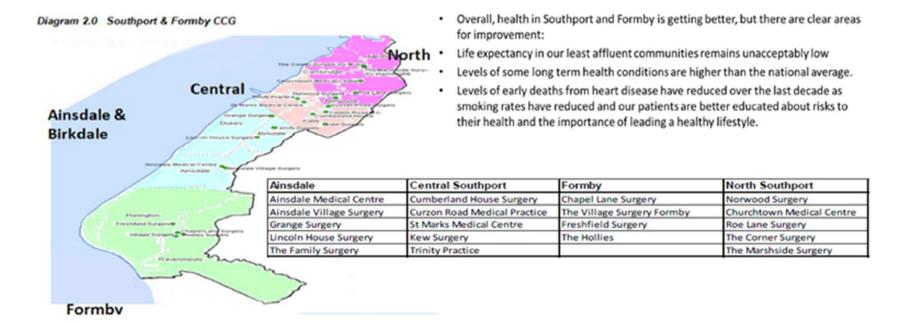
- · Life expectancy in our least affluent communities remains unacceptably low
- Levels of long term health conditions are much higher than the national average; particularly heart disease, respiratory disease, kidney disease, mental health conditions and obesity.
- Levels of early deaths from heart disease have reduced over the last decade as smoking rates have reduced and our patients are better educated about risks to their health and the importance of leading a healthy lifestyle.

Bootle	Crosby	Maghull	Seaforth & Litherland
Aintree Rd Medical Centre	42 Kingsway	High Pastures Surgery	Glovers Lane Surgery
Bootle Village Surgery	Liverpool Rd Medical Practice	Maghull Health Centre (Dr Sapre)	Bridge Rd Medical Centre
Moore St Medical Centre	Eastview Surgery	Westway Medical Centre	Orrell Park Medical Centre
North Park Health Centre	Blundellsands Surgery	Maghull Health Centre	Ford Medical Practice
The Strand Medical Centre	Crosby Village Surgery	Maghull Surgery	15 Sefton Rd
Park Street Surgery	Kingsway Surgery		Seaforth Village Surgery
Concept House Surgery	Thornton - Ashurst Healthcare		Litherland Practice
	Crossways Practice		Rawson Road Medical Centre
	Hightown - Ashurst Healthcare		Dr Jude's Practice



Overview of NHS Southport and Formby CCG

4 localities in Southport & Formby CCG:



General Practice Forward View: On A Page

Maureen Baker (RCGP President) called this "the most significant announcement for general prasticates Section €118€0\$ Commissioning Group

CHAPTER 1: £

- Investing a further £2.4 billion by 2020/21 into general practice services.
- This means that investment will rise from £9.6 billion a year in 2015/16 to over £12 billion a year by 2020/21.
- This includes recurrent and transformational funding
- · Additionally a review on Carr-Hill formula in progress to ensure it reflects deprivation and workload etc

CHAPTER 2: WORKFORCE

- Create an extra 5,000 additional doctors working in general practice by 2020
- Attract an extra 500 GPs from abroad and targeted £20,000 bursaries that have found it hardest to recruit.
- A minimum of 5,000 other staff working in general practice by 2020/21
- · 3,000 mental health therapists
- 1,500 pharmacists
- £206 million in support for the workforce through:
- £112 million (in addition to £31m already committed) for the clinical pharmacist programme to enable a pharmacist per 30,000 population
- £15 million national investment for nurse development support including improving training capacity in general practice, increases in the number of pre-registration nurse placements and measures to improve retention of the existing nursing workforce and support for return to work.
- £45 million benefitting every practice to support the training of current reception and clerical staff to play a greater role in navigation.
- Investment by HEE in the training of **1,000 physician associates to support general practice.** Introduction of pilots of new medical assistant roles that help support doctors.
- £6 million investment in practice manager development, alongside access for practice managers to the new national development programme.

3: WORKLOA

Support for GPs to manage demand, unnecessary work, bureaucracy and integration with wider system

- £16 million extra investment in specialist mental health services to support GPs with burn out and stress.
- new standard contract measures for hospitals to stop work
- 3 year 'Releasing Time for Patients' programme to reach every practice in the country to free up to 10 percent of GPs' time (£30m), new four year £40 million practice resilience programme (including)
- move to five yearly CQC inspections for good/outstanding practices
- introduction of a simplified system across NHS E, CQC and GMC, streamlining of payment for practices,& automation of common tasks.

CHAPTER 4: INFRA-STRUCTURE

- £900m for premises and IT (this is the continuation of the Primary Care Transformation Fund, now renamed)
- £45m for e-consultation support
- New rules to allow up to 100% reimbursement of premises developments
- Over 18% increase in allocations to CCGs for provision of IT services and technology for general practice

CHAPTER 5: CARE REDESIGN Support to strengthen & redesign general practice by commissioning and funding of services to provide extra primary care capacity across every part of England, backed by over £500 million of funding by 2020/21 incl.£171 million one-off investment by CCGs starting in 2017/18, for practice transformational support, introduction of a new voluntage Multi-speciality Community Provider contract from April 2017.



GPFV	Progress	To Date
	1 1091000	10 Date

CHAPTER 1: INVESTMENT	Resilience Funding	1	 Applications have been approved in since 2016 for different projects across both CCGs EOI's have been requested to access 2018/19 funding, outcome of bids is awaited, a panel will meet in July to consider applications 					
CHAPTER 2: WORKFORCE	International Recruitment	1	 Both CCGs are part of a successful Cheshire and Merseyside wide bid for Internationally recruited GPs to be placed in General Practice. There is a meeting planned for 26th June for GP practices to understand the next steps in the process. The timescale anticipated in January 2018 for the first recruits to arrive. Recruits will be placed in training practices for a period of observership before joining their employing practices 					
	Clinical Pharmacists	1	Both CCGs have been successful in a clinical pharmacist bid which will see an expansion of pharmacists working in general practice.					
	Receptionist and Clerical Staff Training	1	 Practice reception and clerical staff across Sefton have had the opportunity to access active signposting training to direct patients to the most appropriate health professional. Both CCGs are currently evaluating the training and how successfully training is being implemented across general practice 					
	Practice Manager Development	✓	 Practice manager online learning packages where made available locally. There has been development funds made available for Practice managers to bid for various courses which NHSE have supported 					
CHAPTER 3: WORKLOAD Workforce		√	 As part of the International Recruitment bid, workforce modelling was completed in September 2017 from information supplied on the primary care web tool, practices have been asked to check the accuracy of the information for further workforce data to be extracted A workforce Steering Group has formed which includes representation from across NHSE/CCGs and Health Education England to plan to expand different skill mix models across general practice 					
	10 High Impact Actions	1	 'Releasing Time for Care' programme was completed end of April 2018 A 'Releasing Time for Care' showcase was held where practices could learn from each others experiences 10 high impact actions were included in both CCGs Local Quality Contract 2017/18 					
CHAPTER 4:	Premises	1	Awaiting outcome of premises bids					
INFRASTRUCTURE	IT	1	 Online Consultation Systems - will be provided by E Consult IT bids - Patient Partner and Envisage / Express Access; Roll out complete Further bidding opportunities became available, and appropriate bids were submitted on the 31st May 2018, outcomes are awaited 					
CHAPTER 5: CARE REDESIGN	Support to Strengthen and Redesign General Practice	1	 A one year transformation programme was commissioned through the Local Quality Contract for bot CCGs in 17/18 from CCG allocation £3 per head of population, this provided practices with the opportunity to streamline prescribing processes and consider new ways of working 					

Enhanced Access - GPFV

- Both CCGs are currently undertaking a procurement process to identify suitable providers to deliver enhanced access services
- Patients will have access to primary care services at scale delivered from a primary care hub in each CCG
- Patients will be able to access routine and on the day appointments with a variety of clinicians, including a GP until 8pm Monday to Friday, and at times to be agreed on Saturdays and Sundays
- Arrangements will be in place to ensure that the patients GP medical record can be accessed by the service
- Both services will be operational by 1st October 2018
- National communication materials have been made available to advertise the new services to patients
- GP practices will promote the service through their practice websites

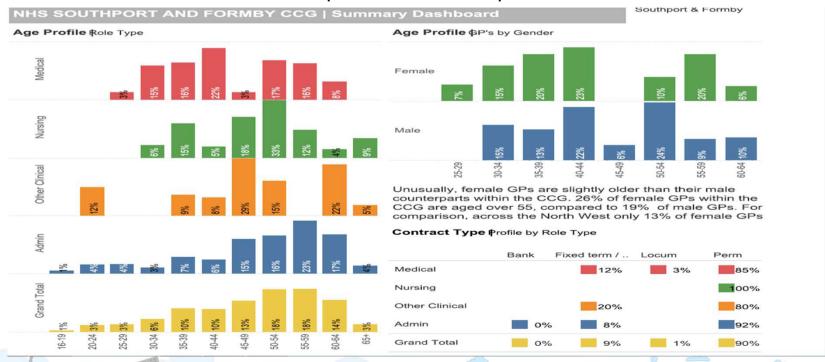


Primary care workstreams

Demography	Localities
2009	Federation (s)
	Primary Care Home
	GP Providers with Multiple Contracts
	At Scale Delivery of Enhanced Access
	Delegation Status
Workforce	Apex/Insight
	GP workload Tool
	Primary Care Dashboard
	Sefton Workforce Data (Sept 17)
	C&M Workforce Steering Group
	International Recruitment
	Receptionist /PM training
	Clinical Pharmacy Pilot
	Productive General Practice / Action Learning Sets
Clinical Services	Procurement of 7 Day Enhanced Access
	Local Quality Contract Enhanced Services
Premises/IT	Estates Bids
	E-Consultations
	Patient Partner and Envisage
	Express Access Laptops
	Practice WiFi
Health Outcomes	CQC
Au	GP Survey Results

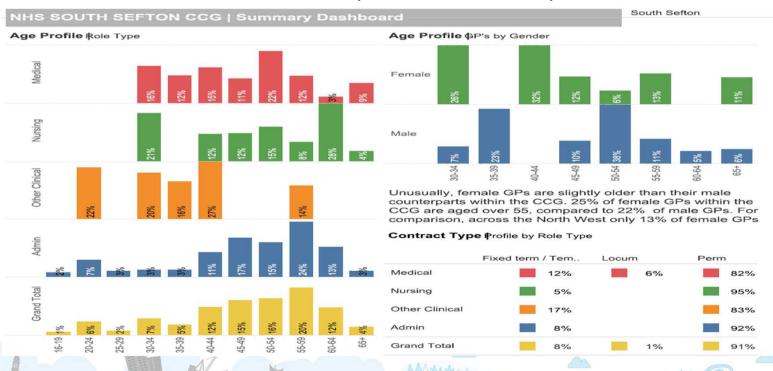
Southport and Formby workforce

- A Health Education England (HEE) workforce survey in 2017 had a return rate from 58% of practices and showed:
- 36% of total workforce are over the age of 55
- 57% of GPs work part time
- The information below formed part of the HEE report



South Sefton workforce

- A Health Education England workforce survey in 2017 had a return rate from 53% of practices and showed:
- 36% of total workforce are over the age of 55
- 70% of GPs work part time.
- The information below formed part of the HEE report





CQC visits - Southport and Formby

		Soutl	port & Formby	CCG				
Practice Code	Practice Name	Date of Last Visit	Overall Rating	Safe	Effective	Caring	Responsive	Well-led
N84005	Cumberland House Surgery	31 May 2018	Good	Good	Good	Good	Good	Good
N84013	Christina Hartley Medical Practice	29 September 2017	Outstanding	Good	Good	Good	Outstanding	Outstanding
N84021	St Marks Medical Centre	08 October 2015	Good	Requires Improvement	Good	Good	Good	Good
N84617	Kew Surgery	10 April 2017	Requires Improvement	Requires Improvement	Requires Improvement	Good	Good	Requires Improvement
Y02610	Trinity Practice	n/a	Not ye	t inspected the	service was regi	stered by CQC	on 26 Septembe	r 2016
N84006	Chapel Lane Surgery	24 July 2017	Good	Good	Good	Good	Good	Good
N84018	The Village Surgery Formby	10 November 2016	Good	Good	Good	Good	Good	Good
N84036	Freshfield Surgery	22 October 2015	Good	Requires Improvement	Good	Good	Good	Good
N84618	The Hollies	07 March 2017	Good	Good	Good	Good	Good	Good
N84008	Norwood Surgery	02 May 2017	Good	Good	Good	Good	Good	Good
N84017	Churchtown Medical Centre	26 October 2017	Good	Good	Good	Good	Good	Good
N84611	Roe Lane Surgery	22 May 2018	Good	Good	Good	Good	Good	Good
N84613	The Corner Surgery (Dr Mulla)	15 April 2016	Good	Good	Good	Good	Good	Good
N84614	The Marshside Surgery (Dr Wainwright)	03 November 2016	Good	Good	Good	Good	Good	Good
N84012	Ainsdale Medical Centre	30 April 2018	Good	Good	Good	Good	Good	Good
N84014	Ainsdale Village Surgery	28 February 2017	Good	Good	Outstanding	Good	Outstanding	Good
N84024	Grange Surgery	30 January 2017	Good	Good	Good	Good	Good	Good
N84037	Lincoln House Surgery	15 December 2017	Good	Good	Good	Good	Good	Good
N84625	The Family Surgery	10 August 2017	Good	Good	Good	Good	Good	Good





CQC visits - south Sefton

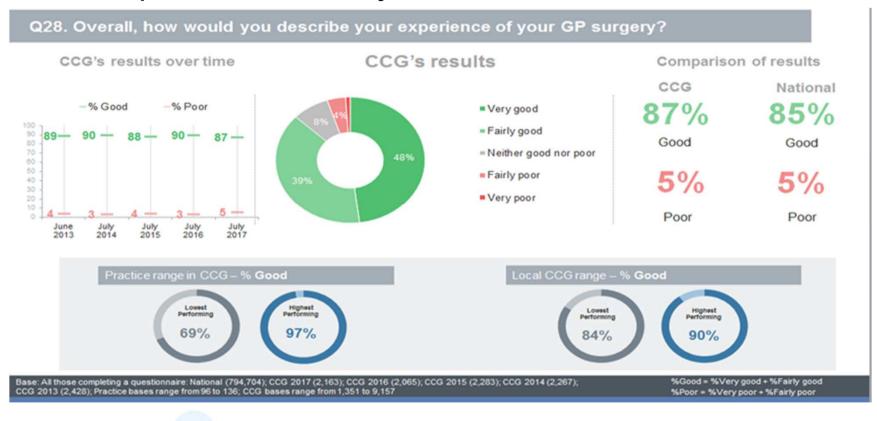
			uth Sefton CCG					
Practice Code	Practice Name	Date of Last Visit	Overall Rating	Safe	Effective	Caring	Responsive	Well-led
N84002	Aintree Road Medical Centre	19 March 2018	Good	Good	Good	Good	Good	Good
N84015	Bootle Village Surgery	03 August 2016	Good	Good	Good	Good	Good	Good
N84016	Moore Street Medical Centre	17 June 2016	Good	Good	Good	Good	Good	Good
N84019	019 North Park Health Center n/a Not yet inspected the service was registered by CQC on 7 March 2							017
N84028	The Strand Medical Centre	04 April 2018	Good	Good	Good	Good	Good	Good
N84034	Park Street Surgery	17 June 2016	Good	Good	Good	Good	Good	Good
	Concept House Surgery	30 April 2018	Good	Good	Good	Good	Good	Good
N84038	129 Sefton Road (Branch Surgery)	08 August 2017	Requires Improvement	Requires Improvement	Good	Good	Good	Requires Improvemen
N84001	42 Kingsway	07 November 2016	Good	Good	Good	Good	Good	Good
N84007	Liverpool Rd Medical Practice	06 April 2017	Good	Good	Good	Good	Good	Good
N84011	Eastview Surgery	11 October 2017	Good	Good	Good	Good	Good	Good
N84020	Blundellsands Surgery	24 November 2016	Good	Good	Good	Good	Good	Good
N84026	Crosby Village Surgery	29 October 2015	Requires Improvement	Good	Good	Good	Good	Requires Improvement
N84041	Kingsway Surgery	07 November 2016	Good	Good	Good	Good	Good	Good
N84621	Thornton Practice	19 February 2015	Good	Requires Improvement	Good	Good	Good	Good
N84627	Crossways Practice	06 August 2015	Good	Good	Good	Good	Good	Good
N84626	Hightown Village Surgery	18 February 2016	Good	Requires Improvement	Good	Good	Good	Good
N84003	High Pastures Surgery	09 June 2017	Good	Good	Good	Good	Good	Good
N84010	Maghull Family Surgery (Dr Sapre)	21 August 2017	Good	Requires Improvement	Good	Good	Good	Good
N84025	Westway Medical Centre	23 September 2016	Good	Good	Good	Good	Good	Good
N84624	Maghull Health Centre	05 February 2015	Good	Good	Good	Good	Good	Good
Y00446	Maghull Practice	19 March 2015	Requires Improvement	Requires Improvement	Requires Improvement	Good	Good	Requires Improvemen
N84004	Glovers Lane Surgery	10 May 2016	Good	Good	Good	Good	Good	Good
N84023	Bridge Road Medical Centre	15 June 2016	Good	Good	Good	Good	Good	Good
N84027	Orrell Park Medical Centre	20 August 2015	Good	Good	Good	Good	Good	Good
N84029	Ford Medical Practice	31 March 2015	Good	Good	Good	Good	Good	Good
N84035	15 Sefton Road	22 March 2017	Good	Good	Good	Good	Good	Good
N84043	Seaforth Village Practice	29 October 2015	Good	Good	Good	Good	Good	Good
N84605	Litherland Town Hall Health Centre	26 November 2015	Good	Good	Good	Good	Good	Good
N84615	Rawson Road Medical Centre	16 March 2018	Good	Good	Good	Good	Good	Good
N84630	Netherton Practice	24 September 2015	Good	Requires Improvement	Good	Good	Good	Good





Patient survey results – July 17

Southport and Formby

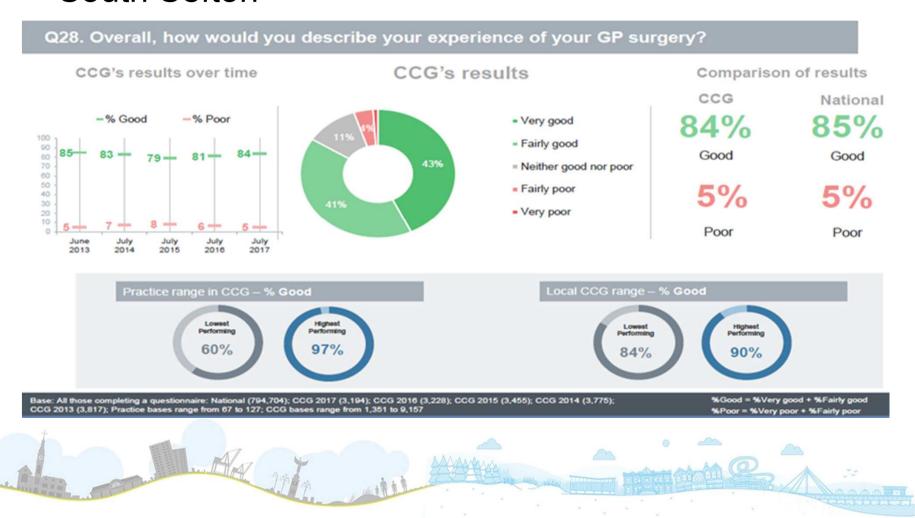






Patient survey results – July 17

South Sefton





Challenges

- Ageing population
- Multiple co-morbidities
- Ageing clinical workforce
- Reduced number of GP trainees
- Workload
- Estates
- Continuous quality improvement
- Primary care funding
- Sustainability of general practice





Role of general practice

 To integrate with the wider health, social and voluntary care services to deliver holistic, proactive and preventive care tailored to the needs of the registered population, blending initiatives to sustain and promote health and wellbeing alongside more traditional services to manage illness.





Aims

- Improved health and wellbeing
- Improved quality of care
- Improved use of resources
- Improved patient experience and staff satisfaction



Strategy

- Develop a primary care strategy through strong clinical leadership
- Establish a workforce baseline to identify current capacity and future workforce requirements
- Work in partnership with Health Education England and the Mersey Deanery
- Deliver 7 day access to services through primary care hubs by October 2018
- Support practices to deliver enhanced services through a Local Quality Contract
- Secure investment opportunities to enhance primary care through the GPFV





How will we get there?

- At Scale Working
- Integrated Working
- Target care to meet population needs
- Managing resources and reducing variation
- Empowered primary care



Integrated care

- GPs as extended medical generalist a modernised role for GPs acknowledging GP expertise as the senior clinical leader in the community
- Extended and expanded clinical roles eg pharmacists, dietetic services, podiatry, physiotherapy, minor surgery and services based dependent on clinical skills
- Coordinated multi-disciplinary integrated teams wider primary and community (including community mental health), social care teams and third sector working without organisational boundaries
- Integration of generalists and specialists the modernised GP role will be able to interact more closely with specialist colleagues, who in turn will need to extend their role from traditional hospital settings and provide expertise in a more flexible manner.



Targeted care

- Services are designed to meet the current and future population needs
- Risk reduction and preventative care provided.
- A focus and emphasis on prevention, self-care and social support in the communities.
- Integrated model of care, wider than health incorporating social and voluntary service providers.
- Working with local authorities / public health teams responsible for the production of local health needs assessments (JSNA) that support what is commissioned and delivered
- Local networks will refer people into lifestyle services that keep people well and avoid the need for GP appointments
- General practice and practice systems collaborate with the wider community MDT and third sector to encourage self care and social support in neighbourhoods.
- Patients will be informed and empowered to self care



Any questions?

