

## **Primary Care Transformation Update**

Joint Health Overview & Scrutiny Committee Tuesday 15 October 2019

Dr Anil Mehta, Chair, Redbridge CCG Sarah See, Director, Primary Care Transformation, BHR CCGs

### **Agenda**



- 1. Primary care update
- 2. CQC inspections update
- 3. Digitisation of patient records
- 4. Estates Programme
- 5. Access (number of GP appointments, GP online video consultations)
- 6. GP patient survey
- 7. Key performance updates (diabetes, AF, learning disabilities)



## Primary care update

# Primary care transformation refresh

### **Background**



- BHR CCGs approved their Primary Care Strategies in May 2016
- The BHR Primary Care Transformation Programme Board has achieved good progress, including:
  - Maturity of the GP federations
  - Delivery of Primary Care Diabetes and Atrial Fibrillation schemes
  - Design and implementation of workforce initiatives such as GP SPIN
- The seven north east London CCGs are coming together to form the North East London Commissioning Alliance, leading to a single Primary Care Strategy (approved by the BHR CCGs Joint Committee and the BHR Health & Care Cabinet in June 2019)
- The BHR Transformation Programme has been refreshed for 2019/20
- The following slides summarise the key elements of the NEL Primary Care
   Strategy and set out the draft refreshed BHR Transformation Programme Plan.

#### **Primary Care Transformation Programme Board scope**



The Primary Care Transformation Programme is the delivery vehicle that brings together requirements and support for the development of primary care.

Barking and Dagenham, Havering and Redbridge Clinical Commissioning Groups

mplementation of Primary Care

Transformation for BHR





#### Resources

- **GP Forward View monies**
- **Delegated Commissioning**
- BHR CCGs Primary Care Funds
- ETTF (estates and technology)
- Health Education England funded programmes (e.g. CEPN)
- NHS England Programme Funding (e.g. International GP Recruitment, Social Prescribing, LTBI)

#### **Delivery**

#### **Programme:**

**Primary Care** Transformation **Programme Board** 

As part of the wider transformation policy

#### **Delivery model:**

Federations Care localities. working as part of wider Integrated Care System

with Primary Networks, in

## Vision



"Person-centred, integrated and comprehensive care delivered by sustainable general practice that forms the corner stone of our integrated care system."

North East London Primary Care Strategy, 2019

We will achieve this through four workstreams:

- 1. Quality and efficiency
- 2. Recruit and retain workforce
- 3. New models of provider development and digital innovation
- 4. Enablers



# Aspirations for primary care transformation by 2021

- Quality and efficiency 95% good or outstanding CQC rating for practices; one Quality Improvement expert per network; standardisation of five care pathways across NEL
- Recruit and retain workforce Implementation of local salaried portfolio scheme for GPs; development of STP primary care workforce training hub; modelling of future workforce requirements to ensure proactive recruitment
- New models; at scale working Matured federations delivering population-based outcomes; a vibrant primary care network development programme; more digital tools in every practice.



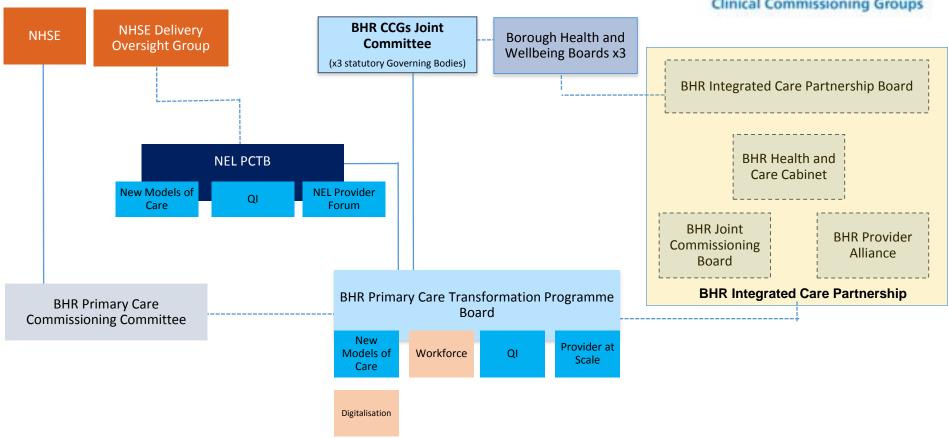
## Priorities and activities for 2019/20

- Quality and efficiency Programme of training to support CQC registration and practice viability; embed use of Dragon technology; work with Care City to test options for front line staff efficiency
- Recruit and retain workforce All PCNs to recruit a Clinical Director;
   PCNs to prepare for new roles from 2020/21; explore CPD opportunities for all staff
- New models; at scale working PCNs to be 'Direct Enhanced Service (DES) ready' by April 2020; reduce 'Did Not Attend' (DNAs) through text messaging and GP online; 75% of the registered population within BHR should have access to online GP consultations.

#### **Governance and delivery arrangements**

Overseeing delivery of primary care transformation and delegated commissioning.





#### **General Practice Providers**

Havering
GP Federation / PCNs x4

B&D

GP Federation / PCNs x6

Redbridge
GP Federation / PCNs x5



## Primary care update

The new General Practice landscape and the establishment of Primary Care Networks



## What are Primary Care Networks?

- 'At scale' general practice that helps to create a more integrated health and care system
- Pressure on GPs is reduced by working together; the NHS Long-Term Plan put a formal structure in place
- Around £1.5m will come into the NEL STP to support PCN development
- All BHR GP practices have come together to form 15 PCNs, covering 30,000+ patients
- 6 PCNs in B&D, 4 in Havering, 5 in Redbridge
- All GP practices in BHR will be open during core hours by end of October 2019 (meaning no more half-day closures).

General practice as the foundation of a wider Integrated Care System, working in partnership with other health and care providers to collaboratively manage and provide integrated services to a defined population within a shared budget

Usually at a borough level and often a single formal organisation e.g. Federation, this is the platform to provide the scale to develop and train a broad workforce, create shared operational systems and quality improvement approaches including use of locally owned data, support the delivery of collective back office functions to reduce waste and enhance efficiency, develop integrated unscheduled and elective care services for the whole population, and provide professional leadership and the 'voice for general practice in the local health economy

Serving populations of 30,000 – 50,000, bringing together groups of practices and other community providers around a natural geography. Support multi disciplinary working to deliver joined up, local and holistic care for patients. Key scale to integrated community based services around patients' needs who require collaboration between service providers and long-term care coordination

General practice as the foundation of a wider Integrated Care System, working in partnership with other health and care providers to collaboratively manage and provide integrated services to a defined population within a shared budget

The **Primary Care Network** model is at the core of both the development of General Practice in its own right, and as the foundation of place-based, integrated care. The **GP Federations** are a key platform to expand on the benefits of PCNs and enable further commissioning and to achieve economies of scale at both a borough (single GP Federation) and multi borough (e.g. three BHR Federations working together) level.





**BOROUGH** 



**Primary Care Network** 

**Integrated Care** System

Larger-scale **General Practice** 

**Organisation** 

PRIMARY CARE NETWORK x15 **Primary Care at** Scale

**Practice** 

**General Practice Based Team** 

PLACE

EIGHBOURHOOD



# Primary Care in the context of an integrated system

#### **Federations**

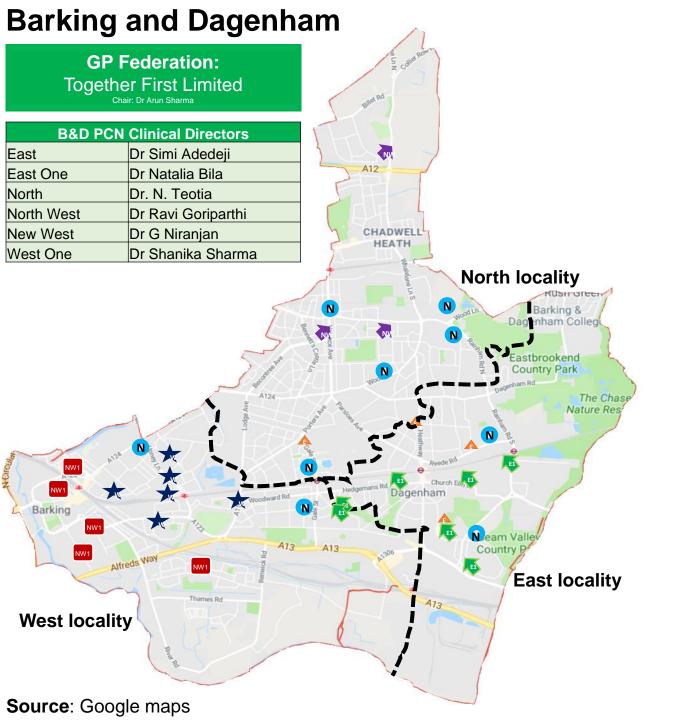
- Hold contracts to be delivered through primary care at scale
- Provide infrastructure to achieve economies of scale
- Represents primary care at the BHR Provider Alliance.

#### **GP Networks**

- Work with member practices to reduce variation in quality
- Work with network member practices and federation leads to ensure the network has the capacity and capability to deliver key services.

#### **Localities**

- Primary care is the core
- Drives delivery of integrated care commissioned by the CCGs and in some cases by the Local Authority as well
- Identifies and implements approaches to streamline processes between different providers within the localities i.e. looks to remove avoidable bureaucracy.



N	North Primary Care Network; 8 p List size 45,669	ractices
Green Lar	ne Surgery	3740
Dr S Z Hai	der & Partners	5704
Dr A K Sh	arma	9872
Dr A Arif		4533
Five Elms	Medical Practice	4057
Gables Su	irgery	6876
Dr M Ehsa	an	3042
Dr B K Jai:	swal	5415
Dr Prasad	(Faircross Health Centre)	2430
		45,669

21062

32,637

11348 2953

40,489

2202

6553

6779

4682

5401

4895

5717

4598

3765 **37,134** 

11,024 **39,458** 

30,973

₩.	North	West PCN; 3 practice List size 32,637	S
Marks Gate Healt	th Centre		
ulasi Medical Ce			:
econtree Medic	al Centre		
			3
West	One Pri	mary Care Network;	6 practices
交		list size 40,489	
Drs Chibber &	Gupta		
Drs Sharma &	Rai		
Highgrove Sur	gery		
Dr Ansari & Ar			
The Barking M	ledical Gr	oup Practice	
The John Smit	h Medica	I Centre	
			4
NW1	New	West PCN: 5 practice List size 30,973	S
Abbey Medica	al Centre		
Dr G. Kalkat			
Dr N. Niranjar	1		
Drs John & Jo	hn		
Shifa Medical	Practice		
			3
Ea	st Prima	ary Care Network; 4 P List size: 39,458	ractices
Broad Street M	1edical Cer	ntre	
Porters Avenue	e (merged (	01.04.2019 with Child & Family)	
Church Elm			

East ONE Primary Care Network; 7 Practices

List size: 37,134

Halbutt Street Surgery

Dr Alkaisy Surgery First Avenue Surgery

Hedgemans rd

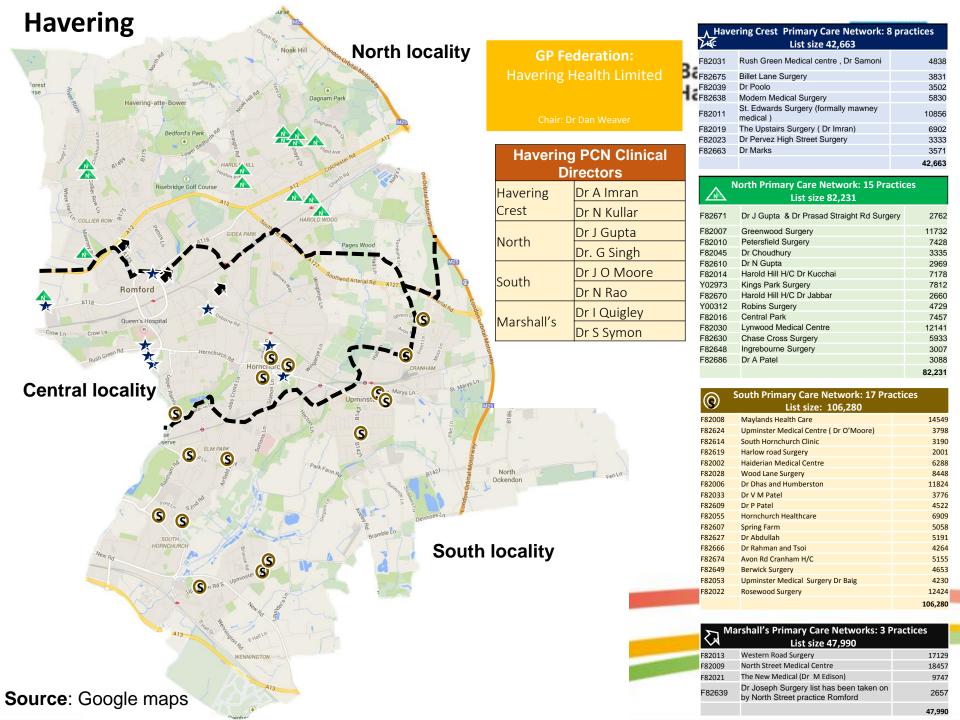
St Albans Surgery

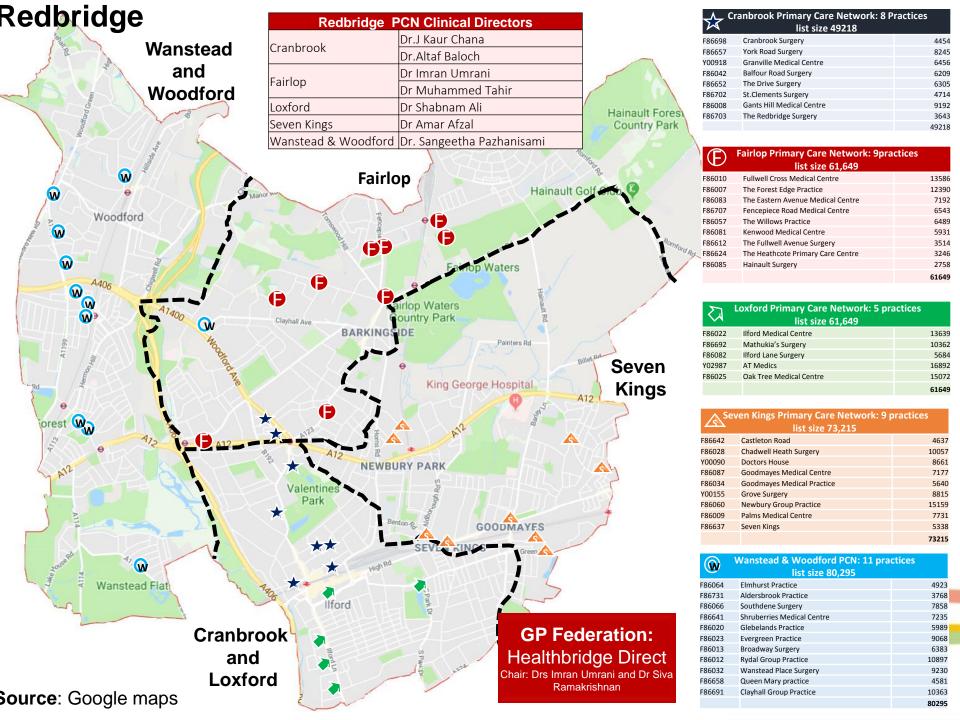
The Surgery (Dr Ola)

Parkview

Heathway Medical Centre

Child and Family Health





### **PCN focus – 2020/21**



- Focused on seven DES:
  - Structured Medication Reviews
  - 2. Enhanced health in care homes
  - 3. Anticipatory care with community services
  - 4. Personalised care
  - 5. Supporting early cancer diagnosis
  - 6. CVD prevention and diagnosis
  - 7. Inequalities
- Support the sustainability of core PCN members
- Understand the needs of local populace to inform current and future service planning





- Initiate the recruitment of the PCN workforce
- Establish extended hours DES arrangements at a PCN level
- Develop communication and engagement plans for PCN local communities
- Actively engage and understand role with the respective BHR Transformation Programmes.



# Recruitment, retention and leadership

#### **GP Salaried Portfolio Innovation (SPIN) scheme**

- This offers a permanent contract with a local GP practice for 4-7 sessions per week, two sessions per week as a portfolio day for 12 months and a monthly peer support action learning set with GP facilitation for 12 months
- In 2018/19 this scheme employed seven GPs in BHR. As it comes to a close some GPs are choosing to remain in BHR
- The scheme is moving into its second year
- 8 ST3/GPs have successfully applied for the 2019/20 scheme which starts in Sept 2019.

#### **General Practice Nursing (GPN)**

- To promote general practice nursing across BHR, four nurse leadership positions have been established
- These roles are to provide leadership, support and direction for GPNs across BHR, and to shape an ongoing strategy to improve GPN recruitment and retention
- Links are established with the local community education provider network (CEPN)
- BHR is now a member of the NELFT-hosted super hub to increase the profile of nursing.

## **CQC** inspections



• The CQC has inspected all 118 practices across BHR: 106 are rated good, 11 require improvement, and 2 are inadequate and in special measures.

CCG	Total no. of practices		No. rated 'inadequate'		No. rated 'requires improvement'		No. rated 'good'	
	Mar-17	Aug-19	Mar-17	Aug-19	Mar-17	Aug-19	Mar-17	Aug-19
B&D	36	34	1	2	6	4	29	29
Havering	44	42	3	0	6	4	35	38
Redbridge	43	42	0	0	6	3	37	39
Total	123	118	4	2	18	11	101	106



## **CQC** Inspections

• Practices rated 'inadequate' and 'requires improvement. Note: Maylands have been removed from this list as they are now rated 'good' following their inspection in August 2019.

ccg	Practice_Name	Date of Report publication:	CQC Overall Rating	SAFE Rating	EFFECTIVE Rating	CARING Rating	Responsive Rating	WELL-LED Rating
NHS Redbridge CCG	The Willows Medical Practice	23.04.19	Requires improvement	Requires improvement	Requires improvement	Good	Requires improvement	Requires improvement
NHS Redbridge CCG	Eastern Avenue Medical Centre	16.04.19	Requires improvement	Requires improvement	Requires improvement	Good	Good	Requires improvement
NHS Redbridge CCG	Cranbrook Surgery	01.02.19	Requires improvement	Requires improvement	Good	Good	Good	Inadequate
NHS Havering CCG	Chadwell Heath Health Centre (Dr Hamilton-Smith/Dr Francis Oladimeji)	15.1.19	Requires improvement	Requires improvement	Requires improvement	Requires improvement	Requires improvement	Requires improvement
NHS Havering CCG	Rosewood Medical Centre	16.01.19	Requires improvement	Requires improvement	Good	Good	Good	Requires improvement
NHS Havering CCG	Rush Green MC - Dr B Beheshti	05.09.18	Requires improvement	Requires improvement	Good	Good	Requires improvement	Good
NHS Havering CCG	Dr K Subramanian/The Surgery	09.02.18	Requires improvement	Requires improvement	Requires improvement	Good	Good	Requires improvement
Barking & Dagenham	Five Elms Medical Practice	09.11.18	Requires improvement	Good	Good	Requires improvement	Requires improvement	Good
Barking & Dagenham	Dr KP Kashyap's Practice/Marks Gate HC	22.02.18	Requires improvement	Requires improvement	Good	Good	Good	Requires improvement
Barking & Dagenham	Dr KM Alkaisy - Urswick Medical Centre	09.07.18	Requires improvement	Requires improvement	Good	Good	Good	Requires improvement
Barking & Dagenham	Highgrove Surgery	05.02.19	Requires improvement	Requires improvement	Requires improvement	Good	Good	Good
Barking & Dagenham	Shifa Medical Practice/Dr Yousef Rashid	29.03.19	Inadequate	Inadequate	Inadequate	Good	Requires improvement	Inadequate
Barking & Dagenham	Halbutt Street Surgery (Drs A Adedeji & SA Adedeji)	22.03.19	Inadequate	Inadequate	Requires improvement	Requires improvement	Requires improvement	Inadequate



## Digitalisation of patient records

- This is the offsite scanning of paper records that are returned to the practice in a digital format that can be uploaded and joined with electronic patient records
- It is a national initiative but currently not funded by NHS England/Improvement
- Until it is funded the CCGs are prioritising digitisation based on this criteria:
  - Whether other options exist (e.g. using spare rooms)
  - Practices indicating they need to close their list
  - Practices wanting to take on more clinical staff but not having the space
  - Projected and historical growth rates
  - Pressure from neighbouring practices
  - New developments in the area
  - Cost of digitisation vs. clinical space
  - Health and safety issues.



### **Estates redevelopment**

- Over the next 15 years Redbridge is projected to have the largest population increase in north east London – approx. 43,000 increase
- LBR local plan estimates 6,000 new homes in Ilford and 5,000 in proximity to King George and Goodmayes hospital sites (in the 'Crossrail corridor'); 19,000 in Redbridge overall
- The CCG is developing a plan to address the model of care in a future where different services are provided at different geographical levels
- The main challenge to this is capital funding, and we will likely need significant support from developer contributions
- There are also several short term issues in the borough: relocation of Cranbrook and Eastern Avenue practices, Heathcote practice structural issues, Forest Edge and The Willows practices need additional space, Central Ilford may need a new practice in the next decade.



### Access to primary care

- Most of the contact that people have with the NHS is with general practice; poor access can cause frustration for patients, whilst good access reduces pressure on the NHS (particularly A&E)
- There are several key challenges in access that we are working to address:
  - Working towards redressing the shortfall of clinical staff (e.g. GP SPIN and recruitment events)
  - Up-skilling existing staff within practices
  - Changing the skill mix to utilise more nurses and Healthcare Assistants
  - Introducing new clinical roles (e.g. Physician Associates, Clinical Pharmacists and physiotherapists)
  - Training care navigators to redirect patients
  - Tackling Do Not Attend (DNA) numbers
  - Training admin staff to do work that frees up medical staff
  - Utilising online access solutions
  - Increasing uptake of online (e.g. repeat prescriptions)
  - Adopting physical and telephone triage, where appropriate
  - Using different techniques e.g. no fixed appointments and clinicians answering phones
  - Incentivising improvements in appointment numbers and demand management
  - Supporting practices in improving quality through Quality Improvement training.



## Access to primary care, cont.

- A Primary Care Access Scheme has been set up to deliver a constant above-average level of access whilst encouraging efficiency in practices
- 37/42 practices in Redbridge have signed up
- Deliverables include an agreed level of appointments and being open between 8.00am-6.30pm five days a week
- It is not easy to measure access or expectations as to what counts as 'good' – we have tried to address this with our 2019 GP Patient Survey for BHR.





The 2019 Long Term Plan and GP contract reform set out a clear direction to provide patients with digital access to NHS services.

- GP Online all patients should have access to GP Online by April 2020. As of July 2019 the highest achieving practice in BHR is at 66%
- Online consultations (eConsult) all patients should have access to online consultations by March 2020. As of August 2019 the average BHR achievement is 41.8%
- Video consultations all patients should have access to video consultations by April 2021, and this is currently being piloted by eConsult
- NHS App now launched in all three boroughs, and Havering has the highest number of downloads of any London CCG.

### **GP Patient Survey**



- The national survey was sent to 46,566 adults in BHR, and 13,181 (28%) were returned
- Generally, how easy is it to get through to someone at your GP practice on the phone?
  - B&D: 61% easy
  - Havering: 64% easy
  - Redbridge: 52% easy
  - National average: 68% easy
- Overall, how would you describe your experience of making an appointment?
  - B&D: 58% good
  - Havering: 63% good
  - Redbridge: 57% good
  - National average: 67% good
- Overall, how would you describe your experience of your GP practice?
  - B&D: 74% good
  - Havering: 78% good
  - Redbridge: 74% good
  - National average: 83% good



### **Diabetes**

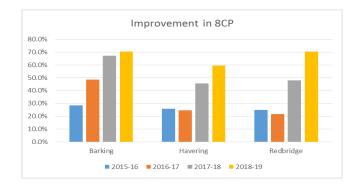
Barking and Dagenham, Havering and Redbridge Clinical Commissioning Groups

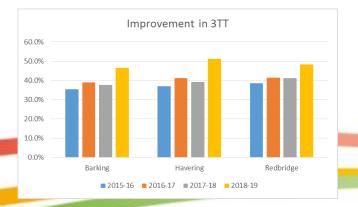
- From 2016-17 BHR CCGs have invested in improving the quality of life for Type 2 diabetics across BHR
- Patients (T2 %) 8 care processes 2015-16 CCG 2016-17 2017-18 2018-19 48.4% 67.2% 70.5% Barking 28.4% 59.3% Havering 25.8% 24.7% 45.6% Redbridge 25.0% 21.7% 47.8% 70.2% **BHR** Average 66.7% 26.4% 31.6% 53.5% **England** 53.9% 47.7% 58.8% NK
- Work has primarily focused on increasing the number of diabetics receiving annual reviews
- risen since by 22,967

  Number of patients achieving control of their diabetes has risen by 9,900
- In May 2019 Barking & Dagenham CCG won the HSJ Value award for Best Diabetes Innovation for its impact in tackling inequality in diabetes care.

Number of patients receiving 8 care processes has

Patients (T2 %) achieving tripple treatment target								
<b>CCG</b> 2015-16 2016-17 2017-18 2018-19								
Barking	35.3%	39.0%	37.6%	46.5%				
Havering	37.0%	41.1%	39.2%	51.1%				
Redbridge	38.5%	41.4%	41.1%	48.3%				
England	40.4%	41.1%	40.2%	NK				

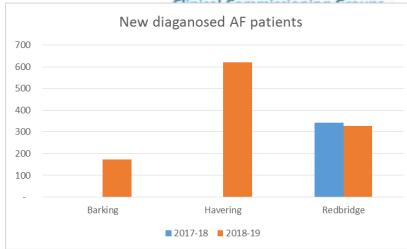




### **Atrial Fibrillation**

- In 2016-17 Redbridge CCG led an initiative to increase the detection of Atrial Fibrillation (AF)
- Success in 2017-18 led to scaling up this quality improvement across BHR
- First full year across the three boroughs has identified 1,121 AF patients
- BHR CCGs and Barts Health were nominated for an HSJ Value award for this work
- The scheme was previously recognised with an Anticoagulation Achievement Award and Healthcare Pioneers Award in 2018 by the Arrhythmia Alliance.





CCG	2017-18	2018-19
Barking		173
Havering		620
Redbridge	344	328
TOTAL	344	1,121

Outcome - reduce incidence of stroke over future years.



## Learning disabilities

- The NHS National Operating Planning and Contractual Guidance requires by 2020/21 that 75% of patients on the Learning Disabilities (LD) Register should receive an annual health check
- In 2018/19, Havering exceeded the NHS England standard, achieving 79%
- B&D and Redbridge (both at 73%) have not yet reached this target, but have improved significantly since 2017/18.
- Overall, an additional 251 LD patients in BHR received the health check in 2018/19 with an overall BHR average of 75% achievement of completed checks.

2018-19 Learning Disabilities Data								
CCG	Patients on LD Register	Completed LD checks	No of additional Patients receiving LD check	% of checks completed	% improvements on 2017-18			
Havering	928	733	18	79%	+5%			
Barking & Dagenham	872	638	48	73%	+12%			
Redbridge	1143	830	185	73%	+18%			
BHR Totals	<u>2943</u>	<u>2201</u>	<u>251</u>	<u>75%</u>	+12%			



## **Any questions?**