

Meeting:	Adults and Health Scrutiny Panel
Date:	22 January 2015
Title:	Draft Primary Care Strategy – Summary
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Summary:

This report provides a strategic overview of Primary Care in Haringey, highlighting the key national agendas and the proposed strategic direction in Haringey specifically.

It also provides an update to the ongoing work of the Premises Task and Finish Group which has been developed to manage access to appointment issues in the east of the borough.

Supporting Papers:

none

Recommended Action:

This report is for information. The Adults and Health Scrutiny Panel are invited to consider how they might support the ongoing Primary Care work in Haringey.

Objective(s) / Plans supported by this paper:

Audit Trail:

Patient & Public Involvement (PPI): There was no patient involvement in this paper

Equality Analysis: N/A

Risks: N/A

Resource Implications: Dependant on what is agreed in budget meetings

1.0 Introduction

A number of significant documents have been published recently which provide an indication of the future direction of Primary Care. In addition there are organisational changes, such as the introduction of co-commissioning, which will potentially have an impact on how primary care is commissioned. This report provides a brief overview of the key reports and the emerging strategic direction for Haringey specifically.

In additional to this it will provide an update on the work of the Premises Task and Finish Group. In October 2014 Healthwatch Haringey provided a report to the Health and Wellbeing Board which described concerns in terms of access to GP appointments and patient satisfaction in the east of the borough. Following the Health and Wellbeing Board a premises task and finish group and, as a sub-group, an assess taskforce were set up, led by NHS England with a view to understanding more about the issues and to develop a plan to resolve them.

2.0 Recent National Papers and Changes in Primary Care

- Five Year Forward View: published by Simon Stevens of NHS England in October 2014. This
 document highlights how far the NHS has progressed in 10 years and describes possible ways
 of moving forward in the next 5 years. It suggests that there are three main areas requiring
 focus: prevention, managing issues such as smoking, alcohol, diet and exercise, restructuring
 how care is provided including considering new models of care and additional investment into
 Primary Care.
- Strategic Commissioning Framework for Primary Care Transformation in London: is being developed by the London Primary Care Transformation Programme chaired by Dr Clare Gerada. This document provides a vision for primary care in London and highlights the need to improve access and make care more coordinated and proactive.
- Better Health for London: a report by the London Health Commission to the Mayor of London
 which is aimed at improving the health of Londoners. Its key messages include identifying the
 need to invest further in Primary Care, continuing to develop Primary Care premises, setting
 ambitious quality standards for general practice and promoting the development of networks of
 GPs who work together to meet expected standards.
- Co-commissioning: CCGs have been invited to make expressions of interest in relation to
 having a more collaborative role in commissioning primary care with NHS England. The goal is
 to create a more joined up, clinically led commissioning system which delivers seamless,
 integrated primary care services based around the needs of the local population. This will be
 managed at a north central London level. The goal is to produce more consistency and
 efficiency and a more collaborative approach to meeting the challenges of the next few years.

3.0 Strategic Direction for Primary Care in Haringey

We are committed to continuing to support General Practice in improving quality as their provide Primary Care to our community. The key areas of focus are as follows:

- Making Primary Care more accessible this includes ensuring that people are able to see a GP when they need to but also considering other means of accessing Primary Care. This might include telephone or email consultations or healthcare apps for mobile phones.
- Coordinating care around the needs of our patients Ensuring people receive a patient centred, joined up approach to care, where plans are coordinated between different specialties in a seemless service.
- **Making care more proactive** actively promoting self-management and in providing tools for patients to care for themselves better and prevent them from becoming unwell.
- Working at Scale in order to meet the challenges of the next few years GPs will have to work together. This will enable the more effective sharing of specialist knowledge and will make Primary Care more accessible.
- **Premises development** ensuring that premises are in the right place to meet the needs of the community and are of a high standard.
- **Workforce Development** ensuring we have the right numbers of staff who are trained and developed on an ongoing basis to provide high quality care.
- **Technology Development** ensuring that the right technology is in place to support GPs to do the work that they do.

4.0 Premises Task and Finish Group

4.1 Background

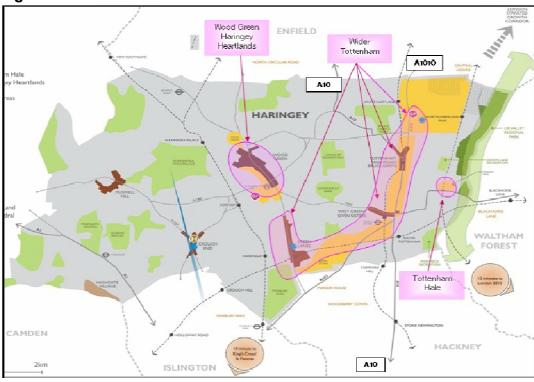
The key aim of the group is to address primary care provision in specific regeneration areas of Haringey, particularly focusing on the Tottenham area and Wood Green, and to look at ways of improving the quality of primary care access across the borough.

Haringey has a number of significant regeneration schemes and housing developments which have been planned, particularly for the East of the borough. These are predicted to deliver an increased population of circa 15,000 people by 2020 increasing to circa 28,000 by 2025 and the potential of continuing increased demand in capacity. About half of this increased population will be in the Tottenham area and the other half spread across the borough. Each will have a significant impact on population and will therefore place significant additional pressure on Primary Care which cannot be managed within the current resource.

Some of the development has already started and a recent Healthwatch report identified in the east of the borough some people are experiencing significant difficulties accessing GP appointments. It highlighted low patient satisfaction on the GP survey in relation to access in this area. It also identified that 32% of GPs in Haringey were over 60 years in age and were therefore a significant percentage were likely to retire within the next 10 years.

Figure 1 below shows the key areas of development opportunity in Haringey as identified in the 2010 Borough Investment Plan.

Figure 1



4.2 Progress to Date

The Task and Finish group have met on a number of occasions through the autumn period and have secured funding to move to the next stage. In order to fully identify the level of need as well as possible short, medium and long term solutions an options appraisal or strategic plan is being undertaken by GP Partnerships Ltd which is a private/public body who are specialists in premises development. The plan is due to be completed in April and during this period will establish:

- what the current and future needs are, including urgent needs through engagement with key stakeholders
- suggest various options as solutions in the short, medium and long term
- assess and prioritise those options
- agree next steps

The findings of this appraisal and the strategic plan will then provide evidence and clear strategic direction to enable NHS England to approve any changes and developments that need to be made.

4.3 Short term management of the situation

An access taskforce has also been initiated to explore what immediate actions can be taken to improve the ability of people in Haringey to access appointments. Initial analysis did not indicate that the issues relate to only a lack of GPs or GP practices. It would seem that in some areas practices have adequate numbers of GPs but need further support to improve their systems and processes in relation to making appointments available. Haringey CCG has been working closely

with individual practices to support them in improving access where this is an issue and the new GP survey (published January 2015) shows that some have made significant progress in this area.

Not all practices have yet been able to see the implement the necessary changes to improve access issues and, where necessary, NHS England also has the power, should a practice not meet expected standards in relation to access, to instigate contractual measures to bring about change these situations.

4.4 Next Steps

- The interim findings of the Options Appraisal will be brought back to the Health and Wellbeing board in May.
- The Access Taskforce will continue to meet to explore short term solutions to immediate problems