

Meeting:	Adults and Health Scrutiny Panel
Date:	29 th June 2015
Title:	Primary Care in Haringey Update
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Summary:

In January a report was provided to the Adults and Health Scrutiny Panel which gave a strategic overview of Primary Care in Haringey, highlighting the key national agendas and the proposed strategic direction in Haringey specifically. It also provided information regarding the progress of the Premises Task and Finish Group which has been looking the issue of GP access, particularly in the east of the borough.

This report provides an update in relation to the work of the task and finish group, cocommissioning and the development of new models of primary care in Haringey. It was agreed that certain elements of the initial report (sections 2 and 3) would be provided as background again as the membership of the panel has changed significantly since the last meeting.

Supporting Papers:

none

Recommended Action:

This report is for information.

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 addition to this it will provide an update on the work of the Premises Task and Finish Group. Progress made in relation to co-commissioning and developing new models of primary care in Haringey.

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: developed by the London Primary Care Transformation Programme chaired by Dr Claire 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: 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.

3.0 Strategic Direction for Primary Care in Haringey

Haringey CCG 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:

- **Improving Quality** ensuring that patients receive safe, effective care and have a good patient experience.
- 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. This includes ensuring that GPs, with patient consent, are able to access other GPs records in order to see the patients of another practice.

4.0 Premises Task and Finish Group

The group was developed to address immediate access issues particularly in the east of the borough as well as to ensure adequate future provision in regeneration areas, most notably, the Tottenham and Wood Green areas.

A strategic development plan was commissioned by NHS England, as the commissioner of Primary Care, to look at current capacity, any areas of current shortfall, future requirements based on predicted population increase and to make recommendations to meet identified needs. As part of this work four areas were identified as requiring closer investigation; Tottenham Hale, Northumberland Park, Noel Park and Green Lanes.

The draft report is to be presented to Health and Wellbeing Board on 23rd June 2015. It confirms that there is a current shortfall in provision in two areas; Tottenham Hale and Northumberland Park. The Tottenham Hale area showing a particularly stark shortage of GPs.

NHS England is working to resolve these immediate issues in two ways:

Infrastructure Grant

At the end of 2014 an infrastructure fund was released by NHS England for extending GP premises where it would increase availability of access. In Haringey 6 practices were successful in bidding for the fund. Five of the bids will directly support increased access in the areas identified including Northumberland Park and Tottenham Hale.

Commissioning a new zero list practice in Tottenham Hale

NHS England is actively working to commission a new practice in Tottenham Hale which would be provided by a local practice. This would offer additional GP and nurse appointments in the area in a temporary building until a new building is completed which may take 3-5 years. This provision is intended to be in place in the autumn.

Longer term solutions have started to be considered and additional capacity is being included in regeneration plans, however further work is now beginning to confirm where additional capacity will be provided.

5.0 Co-commissioning

Last year CCGs were invited to become more involved in commissioning primary care in collaboration with NHS England. The goal was 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 is managed at a north central London (NCL) level.

There are three levels of co-commissioning which CCGs could opt for:

- Level 1: Greater involvement in decision making
- Level 2: Joint commissioning joint decision making
- Level 3: Delegated authority take on delegated responsibilities

From April 2015 NCL CCGs entered co-commissioning at level 1. As a result NHS England now engages the CCG in discussion around decisions, for example when they receive requests for mergers and premises discussions.

In October 2015 NCL will begin joint commissioning. A pan-NCL joint commissioning committee is currently in a development phase and will be responsible for the following:

- Oversight of contracts (including the design of new contracts, sharing contract monitoring information)
- Development of newly designed enhanced services
- Design of local incentive schemes as an alternative to the Quality Outcomes Framework
- Informing decision making on whether to establish new GP practices in an area
- Informing decision making on approving of practice mergers, retirements, resignations etc.
- Ratifying of decisions made by the NHS England Central Contracting Team with regards to 'discretionary' payment (e.g., returner/retainer schemes).

6.0 New models of Primary Care

With the need to increase access in Primary Care and to provide more coordinated services there has been an increasing move to consider different ways of providing health care. Nationally GP practices are coming together in federations to provide services, both to increase access and to ensure that all services are available to all. In Haringey there have been various pilots initiated where GPs have been working together in new ways. These include Saturday clinics, extended hours telephone consultations, a call centre and personalised care plans for over 75s with long term conditions.

The pilots have proved successful and in Haringey there are two collaborative groups of GPs in the West and Central areas who have come together as legal federations. The east of the borough is now in the process of forming a similar body and there is discussion over the potential for a pan-Haringey umbrella organisation which would support population level provision of services. The goal is that in the last two quarters of the year that Saturday clinics would be available across Haringey and patients would have access to a primary care clinician Monday to Friday 8am to 8pm.

7.0 Conclusion

This report provides information regarding the current developments in Primary Care in Haringey. The Assistant Director of Primary Care Quality and Development would be happy to return in future to provide any update in relation to the work of the CCG.