

13 January 2015		ITEM: 7
Health and Well-being Overview and Scrutiny Committee		
Developments in Primary Care		
Wards and communities affected: All	Key Decision: Not applicable	
Report of: Lisa Henschen, Senior Consultant - Primary Care support to Thurrock CCG.		
Accountable Head of Service: Mandy Ansell, Acting (Interim) Accountable Officer, Thurrock CCG		
Accountable Director: Mandy Ansell, Acting (Interim) Accountable Officer, Thurrock CCG		
This report is: Public		

Executive Summary

The purpose of this report is to provide an overview of developments in Primary Care underway in Thurrock. The report provides an overview of the following areas:

Primary Care Transformation Bid: This details that Primary care in Thurrock has been successfully awarded £248,996 through a bid that they made to NHS England for extending access to Primary Care in Thurrock. The extended access provision will be provided on a locality basis, through four locality based hubs, offering access to a GP and Practice nurse on Saturday and Sunday mornings (9am – 12.30pm).

Primary Care Strategy: An overview is provided in this paper of progress that Thurrock CCG is making in implementation of the Primary Care Strategy.

Health Care provision and the Purfleet redevelopment: This paper provides details of the scoping work that has been completed to date to map the requirements of a healthcare offer that will result from the population increase in Purfleet from the current redevelopment programme.

National developments in primary care commissioning and implications for Thurrock: NHS England have issued guidance to CCGs regarding the future of primary care commissioning. This guidance sets out the three primary care co-commissioning models CCGs could take forward. This paper describes these options and the one that Thurrock CCG have put forward to NHS England: Greater Involvement in Primary Care Decision Making.

1. Recommendation(s)

- 1.1 To note the development of four locality hubs for extended primary care access in Thurrock and provide any comment on their progression.
- 1.2 To note the progression of implementation of the primary care strategy.
- 1.3 To note the development of a health care offer for Purfleet as a result of the regeneration programme and provide advice on the best way to engage the Health Overview and Scrutiny Committee on the ongoing development of this work.
- 1.4 To note the intention of Thurrock CCG in relation to primary care commissioning.

2. Introduction and Background

The purpose of this paper is to provide an update against key developments in primary care in Thurrock. The introduction and background to these developments is as follows:

- 2.1 In August 2014, NHS England invited primary care providers to bid for additional primary care funding to support better access to primary care. Applications for funding were open to all primary care providers across Essex. Primary Care providers in Thurrock developed a Thurrock wide application to support weekend access to primary care, through a locality model, with one hub providing access to General Practice for patients registered in that locality.

Thurrock were successful in their application and have been awarded £248,996, which will allow the provision of a GP and a Nurse session (9am – 12.30pm) on both a Saturday and a Sunday within the four hub locations.
- 2.3 In March 2013, NHS England published, *The Heart of Patient Care: Transforming Primary Care in Essex* which sets out the vision for a strong and sustainable primary care community, as well as high quality and accessible primary care provision for patients. Thurrock CCG will lead the local implementation of this strategy. The key areas of focus for Thurrock are integration, improving quality, addressing demand, workforce development, estates development and shifting activity from secondary care to primary care.
- 2.4 A 10 year programme for regeneration of the Purfleet area is commencing, with a range of proposals, including over 3,000 new homes through a range of developments. As a result of these developments, it is estimated that the total number of patients registered in Purfleet by 2026 will be 16,545. This includes the 5,345 patients currently registered at the Purfleet Health Centre.

It is clear from this significant population increase that additional healthcare provision will be needed for Purfleet, both to address the population increase and to use this as an opportunity to enhance the healthcare offer for the

existing community. In order to start shaping what this offer might look like, a healthcare needs assessment has been undertaken by Thurrock CCG to inform a service offer, as well as a stock-take of existing provision in Purfleet, including benchmarking quality, performance and access.

- 2.5 In November 2014, NHS England issued guidance to CCGs on the next steps for primary care co-commissioning in 2015/16. This guidance sets out the three primary care co-commissioning models CCGs could take forward. These models are (1) Greater involvement in primary care decision-making, (2) Joint Commissioning arrangements and (3) Delegated Commissioning.

3. Issues, Options and Analysis of Options

- 3.1 **Primary Care Transformation Bid:** Thurrock CCG have been supporting the primary care community in Thurrock to implement the hub arrangements for extended access in primary care and confirm the four locations for the hubs. Discussions with the four potential hub locations are underway with the aim of confirming the locations in early 2015.

An implementation group comprising of clinical leads and supported by project management, are working to the opening of the first extended hub on the weekend of 17th January 2015 which is in line with the funding conditions set by NHS England. The hubs will then continue to be opened on a phased basis, with two opening in February 2015 and the final one in March 2015. This is to allow identification of any operational issues early and for learning to be applied.

In relation to communication and engagement with the population on the opening of the hubs, a “soft launch” approach is being taken until the demand for the service can be fully ascertained. We will, however, be specifically raising awareness of the service through voluntary and community sector groups who work with communities who traditionally experience challenges in primary care access.

- 3.2 **Primary Care Strategy:** The development of the extended access hubs has a strong relationship to the progress that is being made against the implementation of the primary care strategy in Thurrock. It is well recognised that in order to meet both current and future challenges, General Practice needs to move towards a more federated model of service delivery, in order to take a population needs based approach and to create efficiencies through working at scale.

The development of the extended access hubs are providing a catalyst to collaboration in primary care. This is a key step towards Practices working together on a locality basis to provide “at scale” extended access to primary care. A key component of the evaluation of this implementation will be to

focus on how this model can develop and extend to meet the broader primary care agenda.

In addition to the development of the collaboration working Practices, Thurrock CCG are also co-funding with NHS England an incentive scheme to encourage GPs into Thurrock. This will be an important measure to address the workforce challenges that are faced locally.

The next stage for the primary care strategy development will focus on estates to ensure that they are fit for purpose and have the capacity to meet the population growth experienced in the borough.

- 3.3. **Health Care provision and the Purfleet redevelopment:** Thurrock CCG has been asked to give an indicative position in relation to a potential new health centre as part of the Purfleet redevelopment. Thurrock CCG has put forward an initial draft figure for a potential new health centre space which is based on the population growth, analysis of the health needs of the current population of Purfleet and the associated health offer that should be provided. A potential vision for future healthcare provision in Purfleet has also been developed in line with the direction of local primary care strategy to deliver greater service integration.

Important discussions in this area will progress over coming months that will relate particularly to existing Primary Care Contractors in the Purfleet area and how the current and potential new health care services will best deliver increased quality and accessibility of services.

- 3.4 **National developments in primary care commissioning and implications for Thurrock:** In relation to the changes in Primary Care Commissioning arrangements, the three options that have been offered to Thurrock CCG, and an overview of their implications are:

Option 1: Greater involvement in primary care decision-making

This option is simply an invitation to CCGs to collaborate more closely with their area teams to ensure that decisions taken about healthcare services are strategically aligned across the local health economy.

This option will assist CCGs in fulfilling their duty to improve the quality of primary medical care. There are no new Governance arrangements associated with this option.

Option 2: Joint commissioning arrangements

This option would involve the creation of a “joint committee” with the local area team that would address General Practice functions including GMS, PMS and APMS Contracts (design, monitoring and contractual action), newly designed enhanced services, design of a local incentive scheme as an alternative to QOF and approving Practice mergers.

This function could be carried out in collaboration with other CCGs. This option would exclude individual GP performance management as well as pharmacy and optometry commissioning. CCGs wishing to take forward this option are required to complete a proposal if this is their preferred option and submit this by 30 January 2015.

Option 3: Delegated commissioning

Delegated commissioning offers an opportunity for CCGs to assume full responsibility for commissioning General Practice services. The functions would be the same as the examples cited under option 2, but would be assumed fully by the CCG.

This option would exclude individual GP performance management as well as pharmacy and optometry commissioning. CCGs wishing to take this forward as their preferred option are required to complete a proposal and submit by the 9th January 2015.

Thurrock CCGs position

Thurrock CCG has decided to choose option 1: greater involvement in primary care decision making, as this fits strategically with CCG developments at this current time. It is acknowledge however, that the role in commissioning of primary care may not be a choice for CCGs in the future. The CCG is also aware that these changes will impact on the form and capacity of the NHS England team support primary care and will continue conversations through the Primary Care Strategy Group to ensure that both Statutory Duties, as well as strategic priorities continue to be taken forward.

4. Reasons for Recommendation

- 4.1 This is a report for the Health Overview and Scrutiny Committee to note and provide comment. No recommendations are made.

5. Consultation (including Overview and Scrutiny, if applicable)

- 5.1 There has been extensive clinical and patient engagement in all of these primary care developments.

6. Impact on corporate policies, priorities, performance and community impact

- 6.1 None

7. Implications

- 7.1 **Financial**

Implications verified by: **N/A**

There are no financial implications

7.2 **Legal**

Implications verified by: **N/A**

There are no Legal implications.

7.3 **Diversity and Equality**

Implications verified by: **N/A**

There are no specific diversity and equality implications related to this update.

7.4 **Other implications** (where significant) – i.e. Staff, Health, Sustainability, Crime and Disorder)

None

8. **Background papers used in preparing the report** (including their location on the Council's website or identification whether any are exempt or protected by copyright):

- None

9. **Appendices to the report**

- none

Report Author:

Lisa Henschen

Senior Consultant

NELCSU on behalf of Thurrock CCG