Primary Care Strategy for Bedfordshire

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This report relates to a non-Key Decision

Purpose of this report

1. To provide Members of the Committee with an overview of the work underway to develop a Primary (Health) Care Strategy for Bedfordshire.

2. To provide a key opportunity for Members to feed into the strategic priorities and intentions for Bedfordshire Clinical Commissioning Group (BCCG) with regard to primary healthcare services, particularly general practice services.

3. To provide assurance to the Committee as to how the views of local service users and residents have helped to shape the draft Primary Care Strategy.

RECOMMENDATIONS
The Committee is asked to:
1. consider the work underway to develop a Primary (Health) Care Strategy for Bedfordshire
2. consider the draft strategic priorities and intentions
3. consider the efforts which have been taken to ensure that these priorities reflect the needs of local residents.
Executive Summary

Bedfordshire CCG (BCCG) has identified the development of primary care as one of its seven strategic priorities. A programme to drive this workstream forward has been established and work is underway to produce a Primary Care Strategy to provide a clear framework for action.

The BCCG Primary Care Strategy will outline a set of practical initiatives to help ensure the ongoing sustainability of high quality primary care services across Bedfordshire, and will support the CCG to be effective in its new role as a co-commissioner of general medical services. Implementation of the Strategy will have an impact on how the CCG commissions services and how expenditure is prioritised. A number of key workstreams to support delivery of the Strategy are already underway.

The core of the Strategy is the development of new models of care where general practices, particularly groupings of practices, will be more effectively integrated with community services and social care and will act as the hub from which care packages for many of our most complex and vulnerable patients will be managed, delivering more proactive, preventative care with better health outcomes for local people. These new models will be enabled through the development of integrated health & social care hubs, and more joined up and effective IT systems. A range of workforce development initiatives will help to address some of the pressures around GP and nurse recruitment, and will support the development of new clinical roles within primary care. The implementation of the Strategy will be underpinned by a robust quality and performance framework.

Delivery of the strategy will be dependent on continuing to develop more integrated services across health and social care at locality/quadrant level, through continued closer working with both local authorities and community health services.

The development of the Strategy has drawn upon the significant consultation with local people which has taken place over the last two years to support the Strategic Healthcare Review.
1.0 Introduction

Bedfordshire CCG (BCCG) has identified the development of primary care as one of its seven strategic priorities. A programme to drive this workstream forward has been established and work is underway to produce a Primary Care Strategy to provide a clear framework for action.

General practice is the bedrock within our healthcare system, and the CCG is proud that local practices offer high quality care and are highly valued by patients. However, the health system overall and general practices are under significant pressure, and the resilience of primary care services is at risk.

The BCCG Primary Care Strategy will outline a set of practical initiatives to help ensure the ongoing sustainability of high quality primary care services across Bedfordshire, and will support the CCG to be effective in its new role as a primary care co-commissioner.

The Strategy will:

- Support a sustainable GP practice base
- Support delivery of the wider CCG vision of closer integration between services, greater multi-disciplinary working within geographical clusters, and increased focus on prevention
- Provide practical approaches within co-commissioning to support development of premises, workforce and professional skills, and enabling IT to build that model
- Provide practical approaches to support collaborative working between practices
- Help the CCG and practices speed up progress towards delivering new models of care underpinned by more robust business management models.

Implementation of the Strategy will have an impact on how the CCG commissions services and how expenditure is prioritised, particularly once the CCG takes on more responsibility for commissioning general practice services under new joint commissioning arrangements with NHS England (co-commissioning). Delivery of the strategy will be dependent on continuing to develop more integrated services across health and social care at locality/quadrant level, through continued closer working with both local authorities and community health services.

This report provides a summary of how the Strategy is being developed and the key areas it will cover.

2.0 Developing the Strategy

The Primary Care Strategy is being produced by members of a Primary Care Working Group, with input from the five locality Chairs and Business Managers, other key CCG teams, the Local Medical Committee (LMC) and NHS England. An outline of the strategic direction has been discussed with all five Locality Boards, Healthwatch for both local authorities, the CCG’s Patient Engagement Forum (PEF) and draws upon patient views already captured from Locality Patient Participation Networks and within the Strategic Healthcare Review. It is being developed alongside and interlinks with the other priority programmes within the CCG. A Communications & Engagement Plan has been developed to ensure that the Strategy is shared with key stakeholders before being finalised.
The feedback the CCG has received from consulting with hundreds of local people tells us that on the whole general practice services are highly valued. Priorities for enhancing/improving services going forward include:

- Reducing variation in access to GP surgeries, i.e. arrangements for booking an appointment and the time it takes to be seen
- Extending opening times for GP surgeries, especially for people with long term conditions to avoid missing time from work/education
- Maintaining a personalised service, with continuity of care
- GPs having more time to listen to patients and fully engage them in their care plans
- Developing more specialised services within primary care, particularly for children and older people with complex conditions
- Improving communication between services, especially liaison between GPs and hospitals, but also between GPs and community services and social care
- Providing more care closer to home
- Maintaining access to care for rural communities
- Increasing the use of technology to help make it easier to access services.

These priorities have helped to shape the draft Strategy, and engagement is underway with local patient groups to ensure that the initiatives being developed adequately reflect the needs and expectations of local people.

3.0 General Practice Business & Delivery Model

The main focus of the Primary Care Strategy will be around sustainability, both ensuring the sustainability of high quality general practice services across Bedfordshire, and the role primary care needs to play in ensuring the long-term sustainability of the local healthcare system.

The health system overall and general practices are under significant pressure, and it is unlikely that the current GP practice business model is fit for purpose in the longer term. The CCG aims to support local practices to develop a vibrant and sustainable general practice system, and enable practices to operate at the centre of new models of integrated health and social care delivery across Bedfordshire.

The demographics, health needs and expectations of the population are significantly changing, and in order to meet these, health and social care services will need to operate in a more integrated system, where clinicians work in flexible teams around the needs of the patients/service users with a clear focus on proactively managing care needs, away from hospital, in alternative home and community settings at a time and place that is convenient for patients.

The core of the Strategy is the development of new models of care where general practices, particularly groupings of practices, will be more effectively integrated with community services and social care and will act as the hub from which care packages for many of our most complex and vulnerable patients will be managed, delivering more proactive, preventative care with better health outcomes for local people.

To enable this to happen, the CCG will need to implement a range of initiatives and change how we commission services to: encourage and support practices to work more collaboratively together; redesign community services and co-locate with general practice where possible; and roll out new models of multi-disciplinary working and enhanced primary care across the county. A project has already commenced to scope the potential for delivering a Practice Manager Development Programme to help enhance strategic planning and change management skills.

Locally we intend to focus on developing new models of care within the following areas:

- The management of long term conditions, with a priority focus on diabetes and respiratory conditions in the first year
• The management of children with long term conditions, particularly children with asthma and other respiratory conditions
• Supporting people with complex conditions, particularly frail older people and people with multiple long term conditions
• How we organise home visiting arrangements and support to people residing in care homes
• How we organise services for people with urgent care needs, looking at new approaches to triage arrangements and same day appointments, particularly skill-mix within the delivery of this part of general practice activity
• Extending the hours that elements of primary care are available, including later into the evening and on weekends.

The aim of these new models of care will be to improve clinical outcomes and provide more care closer to home for local people, and also to develop more effective and sustainable systems for organising the delivery of care.

4.0 Workforce Development

Practices across Bedfordshire currently face significant workforce challenges. There is a need to simultaneously address the immediate pressures while improving recruitment and retention, supporting succession planning and developing enhanced roles for GPs, nurses, practice managers and other allied practice staff. Workforce planning needs to consider links to all health professionals within an integrated health and social care model including pharmacists and the wider community workforce.

Working in partnership with member practices, the LMC, Health Education England, NHS England, the GP Federation/s, the two Local Authorities and neighbouring CCGs, BCCG aims to tackle these challenges through a number of work streams, which include a mixture of short and long-term solutions to support practices right now, whilst also working towards creating a general practice workforce to support future models of care.

A Workforce Strategy group is already up and running with representation from the CCG, Health Education England, the LMC, the Horizon GP federation, practice nurses and practice managers. Key projects already underway include:
• GP Development and Practice Nurse Development Schemes in partnership with neighbouring CCGs
• Scoping the potential for establishing a Bedfordshire-specific GP Development Scheme
• Supporting the ongoing education and development of practice nurses
• Conducting a comprehensive workforce and education analysis
• Establishing an online education portal for practices.

5.0 IM&T

IM&T is essential to improving and supporting the patient experience and pathway within primary care. The BCCG Governing Body, supported by the Finance and IT Teams, has identified that improved IM&T support to practices is intrinsic to the delivery of the BCCG overall strategy, including the delivery of service reconfiguration within and across the local area.

The Primary Care Strategy will include a programme of work to:
• Improve IT support services
• Support the sustainability and quality of general practice by maximising functionality and making life easier for clinicians
• Ensure the new investment and focus on IT supports transformation and improvements in population health outcomes, e.g. through risk stratification
- Have a stronger focus on supporting integration and interoperability of IM&T with partners, i.e. primary, community, secondary and social care to support Multi-Disciplinary Team (MDT) working.
- Increase clinical efficiency and quality through the better use of IT and clinical support systems.

There is an active IM&T working group already in place, and an investment programme is being developed. The key priority of focus currently is improving operational support to GP practices.

6.0 Estates

The Primary Care Strategy will provide the outline for a CCG Estates Strategy to be developed by the end of June 2016. A key enabler for the new models of enhanced primary care and multi-disciplinary working will be the development of integrated health and social care hubs in main population centres, whilst also sustaining key premises within our rural communities. Work is already underway to explore the feasibility of developing hubs in Dunstable and Bedford,

Strategic planning around general practice premises, community services and social care estate has been very separate historically. It is the aim of the CCG to work towards using all health estate more efficiently, including encouraging collaborative use of premises between practices as appropriate and with community services, and also to work towards developing a joined-up estates plan with our Local Authority partners, including ensuring the appropriate infrastructure is developed to support housing growth. Work to develop the CCG Estates Strategy will also support the redesign of community services underway. An Estates & Premises Committee – with strong representation from both Local Authorities – has recently been established to ensure that opportunities for partnership working are maximised.

Key projects already underway include:
- Developing a comprehensive Estates Strategy
- Preparing outline business cases for the development of integrated hubs in Dunstable and Bedford, and preparing bids to access national transformation funding
- Establishing a project to review the utilisation and future requirement of community buildings across Bedfordshire
- Establishing projects to conduct options appraisals for responding to planned housing developments across Mid Bedfordshire and in the Houghton Regis area.

7.0 Quality & Performance

Practices in Bedfordshire CCG on the whole already provide a high standard of primary care. Quality is achieved by focusing on the three domains of quality: patient safety, clinical effectiveness and patient experience.

Quality will be the golden thread though each work stream of the Primary Care Strategy to ensure that we:

- Embed quality in design
- Ensure quality in delivery
- Provide quality assurance

It will build upon work of NHS England commissioners to provide the formative arm of quality improvement, looking to reduce variation, improve performance and support practices to undertake actions required to achieve high quality primary care.

Discussions have commenced with NHS England around developing a joint programme of practice visits, and a shared dashboard of quality indicators.
8.0 Co-commissioning

From April 2016 Bedfordshire will assume responsibility as a joint commissioner of General Practice with NHS England. This was agreed with NHS England as being the appropriate level of shared responsibility with potential to move to delegated commissioning at a future date. The advantages of Joint Commissioning with NHS England are to use the partnership arrangement to drive transformation across the system and enable the joint commissioning of both primary and secondary care. The CCG retains its formative development role in driving quality, improving outcomes for our communities and supporting sustainability of the sector.

The CCG’s ambition is to work with NHS England to co-commission general practice in a manner that enables alignment of priorities, contractual flexibilities and incentives to support transformation of the sector and allow the scope and quality of service to continually develop to meet the changing needs and expectations of our communities.

The CCG is already managing conflicts of interest as part of our day to day work. However, engaging in co-commissioning will significantly increase both the frequency and scale of potential conflicts of interests for BCCG. We have reviewed our Conflicts of Interest Policy to minimise this and embed NHS England statutory guidance on conflicts of interest for CCGs.

9.0 Conclusion

The Committee is asked to:
1. consider the work underway to develop a Primary (Health) Care Strategy for Bedfordshire
2. consider the draft strategic priorities and intentions
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