

**MEETING:** Governing Body

Item Number: 11

**DATE:** March 2019

<b>REPORT TITLE:</b>	<b>Primary Care GP Transformation Programme Update</b>
<b>CORPORATE OBJECTIVE ADDRESSED:</b>	<ol style="list-style-type: none"><li><b>1. Supporting our population to stay healthy and live longer in all areas of the Borough</b></li><li><b>2. Commissioning high quality services, which reflect the population's needs, delivering good clinical outcomes and patient experience within the resources available</b></li><li><b>3. Function as an effective commissioning organisation that puts the patient first.</b></li><li><b>4. Function as an organisation that puts patients first</b></li><li><b>5. Functioning as an organisation that consistently delivers its statutory duties and participates fully in Greater Manchester Devolution</b></li></ol>
<b>REPORT AUTHOR:</b>	<b>Primary Care Business Transformation Managers</b>
<b>PRESENTED BY:</b>	<b>Governing Body SDF Clinical Leads</b>
<b>RECOMMENDATIONS/DECISION REQUIRED:</b>	<b>For Information</b>

## EXECUTIVE SUMMARY

This report has been developed to provide a baseline position of the Primary Care Transformation programme and some initial detail into the work that is forming the basis of the Implementation Plan from April 2019.

Having this baseline understanding and direction of travel will allow for future reports to illustrate the progress made against targets.

As part of Commissioning Intentions, focussing on the non-core contract elements of service that are delivered across Primary Care, we will build on this approach and utilise the foundation that has been created to further transform Primary Care to enable Practices and GP Clusters to deliver High Quality and Safe services to the population of Wigan Borough.

<b>FURTHER ACTION REQUIRED:</b>	None
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<b>EQUALITY AND DIVERSITY:</b> Confirmed that any changes to service or procedure introduced as a result of this report do not impact adversely on any of the protected groups covered by the Equality Act 2010.	
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**Wigan Borough  
Clinical Commissioning Group**

# **Primary Care GP Transformation Programme Update**

**March 2019**

<b>Primary Care Support Programme Highlight Report</b>	
<b>Programme Lead/s</b>	Jennifer Gammack, Senior Assistant Director Primary Care Jonathan Kerry, Senior Assistant Director Primary Care Claire Roberts- Strategic Lead, Healthier Wigan Partnership
<b>Senior Responsible Officer</b>	Caroline
<b>Period</b>	December 2018– March 2019
<b>Milestones</b>	
<b>M1</b>	Create the foundation to support General Practice Transformation, both within practices and the CCG, to allow change to be driven at pace and scale.
<b>M2</b>	Ensure that services delivered to Primary Care are resilient and responsive to the needs of local practices, and flexible to cater for the developing transformation agenda.
<b>M3</b>	Support Service Delivery Footprints and GP Clusters in understanding opportunities for new ways of working and organisational implications through the use of technology and innovation.
<b>Primary Care Transformation</b>	
<p>This report has been developed to provide a baseline position of the Primary Care Transformation programme and some initial detail into the work that is forming the basis of the Implementation Plan from April 2019.</p> <p>Having this baseline understanding and direction of travel will allow for future reports to illustrate the progress made against targets.</p> <p>As part of Commissioning Intentions, focussing on the non-core contract elements of service that are delivered across Primary Care, we will build on this approach and utilise the foundation that has been created to further transform Primary Care to enable Practices and GP Clusters to deliver High Quality and Safe services to the population of Wigan Borough.</p>	
<b>Enhanced Primary Care</b>	<p>The foundation of our place based model of service delivery is that GP services are at the heart of that model and therefore an essential prerequisite of delivering the new model is that GP services are organised and resilient enough to meet the demands of core primary care services, and to respond to the need to provide a new collaborative model of integrated care.</p> <p>Practices have clustered themselves to serve populations of 30 to 50,000, aligned to our 7 place based Service Delivery Footprint's (SDFs). They have successfully developed a leadership and</p>

	<p>engagement framework that allows practices to begin to consider how they can operate differently within a place based system, and are able to engage through their leadership with the Healthier Wigan Partnership (HWP).</p> <p>GP Clusters meet regularly to discuss potential opportunities for collaboration between practices and with wider partners. Peer review and education events are now common practice. The SDF is currently being utilised by those aligned practices to drive forward the current QIPP challenge, and will continue to do so in the future.</p> <p>Practices are beginning to deliver services at a greater scale both borough wide, through the extended access services and at an SDF level through collaborative delivery of some Local Commissioned Services (LCS) through inter-practice referral.</p> <p>Clusters are taking the opportunity to test new models of service delivery, such as same day urgent GP access, the utilisation of community link workers, new relationships with the Start Well services and approaches to frailty. They are testing new collaborative models of care with our Integrated Community Services (ICS) via a number of test beds that are exploring how community services can be wrapped around practices.</p> <p>There is linkage with wider public services through engagement with the complex care teams who support practices to respond to risk stratification information and high intensity users. Practices also have a direct route into place based huddles to tackle some of the wider social and environmental impacts of poor health.</p> <p>There are good examples of practices collaborating to support their core business such as mutual aid around CQC inspections, the implementation of the primary care 10 high impact changes, practice manager and practice nurse forums and shared educational events.</p> <p>It is clear that practices are actively engaged within the process, and have come a long way on the journey, however given that practices are the foundation of our model, support needs to be given to ensure that structures and the delivery of core primary care can provide future resilience.</p>
<p><b>Sustainability and Resilience</b></p>	<p>Practices will need to be confident that transformation will make them more resilient.</p> <p>They will be particularly concerned as to how their core contracts are protected within a system that integrates patient care amongst practices.</p>

	<p>The main concern for practices is to ensure that they are able to continue to deliver services to patients and continue to manage all the demands upon them, thus threatening resilience.</p> <p>Within the transformation plan, consultation and engagement will be undertaken with practices and the implementation of any change will be led by practices and the GP Collaborative with the support of the Healthier Wigan Partnership and the Local Medical Committee.</p>
<p><b>Strategic Priorities</b></p>	<p>The focus of strategic plans for practices, through the GP Clusters, is to identify how they can contribute to the Wigan Borough Locality Plan.</p> <p>Service Delivery Footprint analysis has taken place and data packs have been produced at a Cluster level. The focus for the data packs for the Clusters are:</p> <ul style="list-style-type: none"> <li>• Out of area referrals;</li> <li>• Variation in outpatient referrals across practices;</li> <li>• High Intensity Users (including A&amp;E attendance and unplanned admissions); and</li> <li>• Risk Stratification.</li> </ul> <p>Each SDF has been tasked with how they will identify, realise and deliver improvements using continuous Quality Improvement techniques.</p> <p>Through the use of data packs, practices are able to understand what this means at a practice and SDF level. As SDF's will be working on similar project topics there will be opportunities to share learning and test concepts across multiple areas.</p> <p>Integrated Community Services (ICS) have established pilots within the borough, with the view to take a MDT approach to reviewing and supporting patients. This will be built upon and standardised as an approach across the Borough to ensure that care delivery is timely, effective and wrapped around the individual.</p>
<p><b>Digital</b></p>	<p>It is essential that practices have full access to technology at scale to enable greater organisational integration and give the ability to support patients and residents to be in greater control of their lives and care.</p> <p>A foundation to this is ensuring that practices and GP Clusters have access to technologies which enable the delivery of high quality care close to the patient's home, in a seamless and streamlined fashion.</p>

We are already progressing with the consolidation of GP clinical system suppliers (EMIS and TPP) which will give consistency and stability across practices, allowing for native GP records to be shared.

In addition, to ensure that general practice can manage the holistic care of a patient, investments in Enhanced Shared Records will ensure that GPs have visibility of up to date hospital, community, mental health and social care data as a minimum, with the potential to also share wider public service information.

Greater use of remote and assistive technologies will give the ability to proactively manage and monitor an individual's care, removing the necessity to book routine appointments, whilst maintaining a high degree of quality and safety.

By 2020 general practice across Wigan Borough will deliver a digital patient experience to rival the consumer sector; with capabilities that have become the norm in the vast majority of industries.

Patients will have full access to their care record, be able to share that record with who they want to and be able to take control of appointments, requests and directly message their care support team.

Patients will have the opportunity to gain support, advice and guidance 24x7x365 utilising online consultation and self-service through Apps tailored to both their individual needs and the services within Wigan Borough.

Through these Apps and Text Messaging, Patients will be reminded of appointments, medications being due and when results have been received, ensuring that they stay well and make effective use of services.

Video consultations will be established and become routine, making access to services easier, reducing the disruption of attending an appointment and benefiting the local environment and business economy through less travelling and time off work.

To ensure that practices are able to collaborate effectively, delivering new models of care and back office capabilities, we will ensure that agile working underpinned by mature and well supported infrastructures are in place to allow for flexible call handling, working in any location and improved reliability.

We will continue to champion and expand the adoption of digital solutions like patient apps and text messaging to ensure that we

	<p>have the platforms to support empowered people and care services are effectively utilised.</p>
<p><b>Estates</b></p>	<p>General practice estates need to support and fit into the place based approach to supporting people close to home, balancing the reality of having to meet the increasing demand on services with fixed budgets.</p> <p>As part of this approach we are working with partners, through the Strategic Estates Group, to ensure that we maximise all existing opportunities for estates utilisation, whilst also partnering where new/improved developments are needed to meet the needs of the population.</p> <p>As part of this strategic work we have made strong links with the Councils planning department so that we are able to better forecast population and patient increases, linked to place.</p> <p>It is important in our strategic planning that we take account of this future expansion as well as ensure that investments in estate are made to meet our locality objectives.</p> <p>We have a great opportunity to build upon the previous investments in LIFT estate to maximise utilisation as well as consolidate and improve existing estate, as has been demonstrated in the previous sections.</p> <p>The current LIFT estate is a good starting point, but there are also a number of other strategic buildings that could be better utilised and would allow for greater integration between services.</p> <p>In addition, housing developments and ageing premise have highlighted a number of other locations where reviews need to be completed to understand the opportunity and affordability (subject to strategic partnerships) of co-location into new facilities.</p> <p>Supported by the Neighbourhood Asset Review being undertaken across GM, we will look to expand the review and understanding of this strategic direction, the output being to be able to clearly define the desired end state and opportunities that could be realised which we will look to consult/engage upon.</p>
<p><b>Workforce</b></p>	<p>Workforce planning and development will be central to achieving resilient general practice which is capable of delivering our shared ambition for health and care services locally.</p> <p>There are a number of workforce issues that the transformation</p>

programme is looking to underpin and address:

- Recruitment & retention of general practice staff.
- Education and training of the general practice workforce.
- Developing skill mix in primary care, including the development of new roles.

Workforce pressures within general practice have been well documented nationally. At a local level, we have challenges in respect of an ageing workforce across GPs, practice managers and nursing staff. Wigan, like many other Localities in Greater Manchester, struggles to retain GP trainees, despite having a large number of training practices within the borough.

The CCG has recently been successful in securing £65k from GM to support local GP retention programmes. The funding will enable us to undertake a survey & focus groups with local GPs who are considering leaving practice or nearing the end of their career and to extend the GP Fellowship scheme to support GPs who have recently qualified to remain in Wigan with a focus on general practice within integrated care models and SDF working. Further updates on this programme will be provided over the coming months.

Working alongside the Borough Wide Strategic Workforce Enabling Group will assist in addressing recruitment and retention issues and support succession planning through the established workstreams. Short term funding has been allocated to secure a number of fixed term posts which will support integrated workforce planning through HWP. Two of these posts will have a dedicated focus on general practice workforce developments.

Innovative approaches such as the Nurse Fellowship scheme will also continue to be used to attract practice nurses to work in Wigan and to create roles that support the delivery of the new model of place based care.

A revitalised focus on education and training across the general practice workforce which covers both clinical and non-clinical staff is vital. In recognising the centrality of general practice to our new place based care model, there will be a strong focus on organisational and leadership development. Training and education programmes will ensure that primary care teams are skilled and equipped to deliver the highest quality care for local residents.

<p><b>Communications &amp; Engagement</b></p>	<p>Communications and engagement activity with practices, local people and wider stakeholders will be essential to maintaining progress and gaining support for transformational activity.</p> <p>Delivering transformational programmes with the full support of clinical leaders, and tapping into the knowledge and expertise of clinical champions will be core to successful implementation.</p> <p>In the same way, maximising the use of ‘expert patients’, and using the knowledge and understanding of local people to develop new models of care will be essential. There will need to be thorough engagement, participation and consultation with patients and the public, and they must be involved in the design and implementation of the model.</p> <p>There will be a renewed focus on self-management and self-care within our new integrated models, with local people being supported to take control of their own health and wellbeing.</p>
<p><b>Outcomes</b></p>	
<p><b>O1</b></p>	<p>General Practices engaged in the process of New Models of Care.</p>
<p><b>O2</b></p>	<p>Capacity to both support and deliver aligned to the direction of the Locality Plan and 5 Year Forward View.</p>
<p><b>O3</b></p>	<p>Reduce variation in the Primary Care Medical Services provision and ensure consistency across practices in utilising pathways and services of wider partners.</p>
<p><b>Risk Register – Risk Description</b></p>	
<p><b>R1</b></p>	<p>Lack of engagement from Primary Care Teams to support new models of care</p>
<p><b>R2</b></p>	<p>Competing operational and project pressures threatening overall aims and objectives across IM&amp;T programme.</p>
<p><b>R3</b></p>	<p>Limited capital funding available across Greater Manchester restricts the opportunities available to support estates developments.</p>
<p><b>R4</b></p>	<p>Significant financial penalties could be incurred through information breaches in practices if GDPR and Information Governance process are not properly embedded, maintained and monitored.</p>