


BNSSG CCG – GP FORWARD VIEW  
PRIMARY CARE COMMISSIONING  
COMMITTEE REPORT

*November 2019*

<b>Primary Care Commissioning Committee CCG Report November 2019</b>	<b>Title:</b> Workforce <b>Author:</b> Gillian Cook, Primary Care Workforce Development Lead BNSSG CCG <b>Clinical Lead:</b> Dr Martin Jones <b>CCG/NHSE director/ manager:</b> Dr Martin Jones, Medical Director – Primary Care & Commissioning
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<b>Description:</b> There will be at least 10,000 more staff working in general practice by 2020/21 - 5,000 more doctors and 5,000 other staff like clinical pharmacists, nurses, and physicians associates across England.	<b>Relevance to PCC:</b> <ul style="list-style-type: none"> <li>Implementation of GPFV and national staffing commitments and BNSSG Primary Care Strategy</li> </ul>
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<b>Current Status:</b>  Plan developed, trajectory submitted, key work streams underway	<u>Governance Completed:</u> Monthly meetings of STP Community & Primary Care Workforce Development Group	<u>Governance Planned:</u> PCCC seminar on PCN workforce development planned
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<b>Update:</b> <ul style="list-style-type: none"> <li>Employment model developed to host International GP recruits (IGPRs). Currently 4 IGPRs in post in BNSSG.</li> <li>Training Hub being developed through maturity matrix, to take on new HEE functions, including placement tariffs and workforce planning. Training Hub successful in becoming a place based placement pilot.</li> <li>Local GP Retention Scheme for BNSSG live: 3 GPs, 3 GP Nurses and 3 AHPs recruited as Health Inequalities Fellows. Completed leadership development and now undertaking PG Cert in Public Health at UWE. Meetings taking place to agree projects.</li> <li>Weston &amp; Worle ISS programme completed to quality and within budget to agreed timescales</li> </ul>	<b>Live Issues:</b> Numbers of International GP recruits being identified nationally are lower than predicted	<table border="1" style="width: 100%;"> <tr> <td style="padding: 5px;"> <b>Risks:</b> <ul style="list-style-type: none"> <li>Number of GPs are not developing at rate planned in STP Workforce Plan</li> <li>Risk of availability of additional roles to support PCNs</li> </ul> </td> <td style="padding: 5px;"> <b>Mitigations:</b> <ul style="list-style-type: none"> <li>Continue to work up new models of care, using workforce and additional roles differently (through competencies and skills rather than job titles)</li> <li>Develop workforce plan to support additional roles including system focussed solutions</li> </ul> </td> </tr> </table>	<b>Risks:</b> <ul style="list-style-type: none"> <li>Number of GPs are not developing at rate planned in STP Workforce Plan</li> <li>Risk of availability of additional roles to support PCNs</li> </ul>	<b>Mitigations:</b> <ul style="list-style-type: none"> <li>Continue to work up new models of care, using workforce and additional roles differently (through competencies and skills rather than job titles)</li> <li>Develop workforce plan to support additional roles including system focussed solutions</li> </ul>	<b>Next Steps:</b> <ul style="list-style-type: none"> <li>Contribute to and support delivery plan for the training hub. Start to develop delivery plan for 2020/2021 in the New Year linking to priorities in the Long Term Plan.</li> <li>Recruitment event taking place for IGPRs in February 2020</li> <li>The Health Inequalities Fellows have commenced PG Cert Public Health in September 2019, and will be agreeing programme of work in area of health inequality</li> <li>Implement opportunities for new</li> </ul>
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<p>achieving positive results. Evaluation report presented to PCCC in September and final national evaluation currently underway.</p> <ul style="list-style-type: none"> <li>• Phase 1 of South Bristol Workforce Modelling Project complete-baseline of current roles and competencies and will inform new models of care</li> <li>• General Practice Nursing 10 Point Plan developed in areas of GPN promotion, retention, placements and training. GPN Retention Toolkit bid secured to support career pathways for practice nurses and funding agreed to support motivational interviewing and nurse educator roles.</li> <li>• Access to Learning task and finish group has identified all training available to Primary Care Workforce in BNSSG. Training Hub is now developing a career pathway website which will link to training identified through this work.</li> <li>• Sirona have submitted a bid to develop a health and social care bank. GP Nurse bank to become part of this. Awaiting outcome of bid.</li> <li>• PCN additional roles being approved and strategy to support pipeline and upcoming additional roles in development</li> </ul>	<p><b>Opportunities:</b></p> <ul style="list-style-type: none"> <li>• Opportunity to build portfolio careers in primary care, helping with staff retention and system working</li> <li>• Opportunity to deliver care with skills and competencies</li> <li>• Opportunity with PCNs to develop rotational posts across the system</li> </ul>	<p>roles in primary care with focus on Leadership, MDT working, and Portfolio Career opportunities through GPFV funding</p> <ul style="list-style-type: none"> <li>• Happy App pilot has been rolled out to 4 practices and will be rolled out to remaining practices across BNSSG in December 2019</li> <li>• Develop GPN Nurse bank proposal in conjunction with Sirona</li> <li>• PCN development plan to include workforce planning and support for additional roles</li> <li>• PCN OD plan in development with a particular focus on leadership development to support the maturity of PCNs in working together and across the system</li> </ul>
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<b>Primary Care Commissioning Committee CCG Report</b> <b>November 2019</b>	<b>Title:</b> Care Redesign <b>Author:</b> Beverley Haworth, Models of Care Lead <b>Clinical Lead:</b> Dr Geeta Iyer, Primary Care Development Lead <b>CCG/NHSE director/ manager:</b> Dr Martin Jones, Medical Director – Primary Care & Commissioning
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<b>Description:</b> Supporting practices to strengthen and redesign general practice, including delivering improved access in primary care and to find new ways of working through training and development.	<b>Relevance to PCC:</b> <ul style="list-style-type: none"> <li>Implementation of GPFV and NHS Operational Plan commitment to deliver 30 minutes additional appointments per 1,000 weighted population during non-core hours, rising to 45 minutes</li> </ul>
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<b>Current Status:</b>  National minimum requirement of 30 additional minutes met, all of the 7 core requirements for improved access are fully met.	<u>Governance Completed:</u> Delivery of IA included in PCCC contract reports	<u>Governance Planned:</u> Proposals for the specification and commissioning of IA for 2020/2021 will be presented to the PCCC in early 2020 NHSE GPFV monitoring now moved to quarterly. Internally we are continuing to collect data monthly.
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<b>Update:</b> <ul style="list-style-type: none"> <li>One Care continues to deliver Improved Access (IA) and delivery exceeds 30 minutes per 1,000 weighted population. From October localities will be offering increased provision across the winter period as planned for.</li> <li>See 'Infrastructure' for 111 direct booking update</li> <li>Compliant in all areas of advertising IA to local populations, including practice websites and CCG advertising in community settings including local ED departments. CCG to increase advertising of IA as part of winter communications plan.</li> <li>IA Equalities Impact Assessment completed</li> </ul>	<b>Live Issues:</b> Direct booking between NHS111 and Primary Care currently unavailable due to technical reasons.	<b>Risks:</b> <ul style="list-style-type: none"> <li>IA will not have impact on urgent care</li> </ul>	<b>Mitigations:</b> <ul style="list-style-type: none"> <li>Deep dive to understand local population need for IA and, along with the outputs of the National Review, revise IA offer if necessary.</li> </ul>	<b>Opportunities:</b> <ul style="list-style-type: none"> <li>Opportunity for IA to support urgent care model</li> </ul>	<b>Next Steps:</b> <ul style="list-style-type: none"> <li>Proposals for the specification and commissioning of IA for 2020/2021 will be presented to the PCCC in early 2020</li> <li>Patient survey in development to canvas views of access and patient experience</li> <li>Awaiting outcome of IA National Review. The interim report expected in November has been delayed.</li> </ul>
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**Primary Care  
Commissioning Committee  
CCG Report  
November 2019**

**Title:** Workload  
**Author:** Susie McMullen, Resilience & Quality Improvement Lead  
**Clinical Lead:** Dr Geeta Iyer, Primary Care Development Lead  
**CCG/NHSE director/ manager:** Dr Martin Jones, Medical Director – Primary Care & Commissioning

**Description:** One of the biggest challenges facing general practice is the workload placed on staff and practices. This aspect of the GPFV is about supporting practices to reduce and better manage their workload

**Relevance to PCC:**

- Future proofing of GP services and delivery of GPFV to improve practice resilience

**Current Status:**



Process in place to identify practices requiring support and provision of support to improve general practice resilience.

Governance Completed:

BNSSG CCG General Practice Sustainability & Resilience Support Toolkit and process in place and agreed by PCCC. Quality and Resilience dashboard developed and in place and overseen by Quality, Resilience and Contracting Sub-group of PCOG

Governance Planned:

Governance in place as described.

**Update:**

- 41 practices have completed / are currently undertaking the Productive General Practice Quick Start Programme which provides hands on support for practices to release time for Care. Developing an expression of interest for a further wave to take place in January 2020.
- 8 practices were part of the 2018/19 General Practice Resilience Programme, each supported to deliver a bespoke resilience improvement plan. 2 practices are currently on the 2019/2020 resilience programme and a further 3 interventions are being scoped.
- Intensive Support Site work in Weston & Worle has implemented 'askmyGP' in 6 out of 10 practices with two further anticipated to go live in the New Year.
- Active signposting offer commissioned June 2019 to June

**Live Issues: N/A**

**Risks:**

- Availability of sufficient human and financial resources to deliver support across the number of practices requiring support
- Risk that practice quality and resilience issues may not fully be

**Mitigations:**

- Effective utilisation of GPFV funds.
- Matrix working of Primary Care Development and Area Teams to deliver resilience support activities.
- Escalate risks to PCOG


**Next Steps:**

- 2019/20 General Practice Resilience Programme implementation of improvement plans agreed in an MOU with each participating practice
- Continued delivery of commissioned support for practices to embed active signposting
- Roll out workflow optimisation training to all practices yet to complete
- Securing other aspects of

<p>2020 and is being rolled out to priority practices</p> <ul style="list-style-type: none"> <li>• General Practice Resilience and Transformation work stream has developed a practice resilience self-assessment pack which is being tested with practices prior to incorporation into the existing process</li> <li>• A programme of work is underway in South Bristol to improve resilience by working at scale with an initial focus on front door and care navigation</li> <li>• Quality Improvement session for practices held in September 2019 with 60 attendees</li> </ul>	<p>addressed through developmental approaches</p>	<p>and PCCC where appropriate and consider a range of responses to address issues where required</p>	<p>Time for Care Programme for local practices / PCNs, building on the work undertaken through Productive General Practice Quick Start</p> <ul style="list-style-type: none"> <li>• Development and implementation of a resilience improvement plan for South Bristol</li> </ul>
	<p><b>Opportunities:</b></p> <ul style="list-style-type: none"> <li>• Time for Care programme offers available to support PCNs in developing and delivering plans to release time</li> <li>• To share learning of practices which have undertaken improvement work via existing meetings / communications and the development of a compendium of quality and resilience improvement in partnership with the Clinical Effectiveness team.</li> </ul>		

<b>Primary Care Commissioning Committee CCG Report November 2019</b>	<b>Title:</b> Practice Infrastructure <b>Author:</b> Beverley Haworth, Models of Care Lead <b>Clinical Lead:</b> Dr Andrew Appleton, Clinical Lead for IT <b>CCG/NHSE director/ manager:</b> Dr Martin Jones, Medical Director – Primary Care & Commissioning
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<b>Description:</b> This GPFV domain is about investing in improving GP buildings and technology as well as range of other support. This is designed to improve services for patients and enable a wider range of health services closer to where they live.	<b>Relevance to PCC:</b> <ul style="list-style-type: none"> <li>Key enablers for delivering the primary care strategy</li> <li>Potential implications for practice sustainability</li> <li>Key to supporting integrated system wide working</li> </ul>
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<b>Current Status:</b>  Further progress required to deliver digital and estates strategy for primary care across BNSSG.	<u>Governance Completed:</u> Healthier Together Estates Strategy approved at August Governing Body	<u>Governance Planned:</u> Proposals for procurement of online consultation solutions for BNSSG to be presented to PCCC in January 2020
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<b>Update:</b> <ul style="list-style-type: none"> <li>ETTF IT bids: Careflow Connect Pilot - expansion to other users &amp; GP practices paused awaiting final IG and 'user story' development. Assistive Technology Pilot: 1) GP Practices - go-live now early 2020 to align with STP frailty programme &amp; community service re-modelling; 2) Alexa – live in North Somerset Care Home. Planning to also use to support domiciliary &amp; reablement care.</li> <li>12 practices piloting 3 online consultation products. Marketing and plans for increasing uptake are underway. Evaluation near completion and will inform a local specification development and recommendations for the wider BNSSG procurement process due to be presented to PCCC in January.</li> <li>111 Direct Booking into UTC went live in South Bristol on 11th November. One appointment an hour is currently offered to local postcodes. Current uptake is 50%. The next step is to roll out to a wider geography.</li> <li>Direct booking between NHS111 and primary care – One</li> </ul>	<b>Live Issues:</b> <ul style="list-style-type: none"> <li>Online Consultations: Mobilisation period is tight and work will start with practices in January to support planning ahead of procurement.</li> <li>Direct booking between NHS111 and Primary Care currently unavailable. Technical solution currently being implemented and tested.</li> </ul>	<b>Risks:</b> <ul style="list-style-type: none"> <li>Capacity to take forward significant digital transformation programme</li> <li>Availability of capital funding to support</li> </ul>	<b>Mitigations:</b> <ul style="list-style-type: none"> <li>GPFV funding will need to support change management as well as technical costs to realise benefits</li> </ul>	<b>Next Steps:</b> <ul style="list-style-type: none"> <li>Develop delivery of digital strategy included within the primary care strategy</li> <li>Finalised evaluation of online consultations pilot to be presented to Executive Team and PCCC prior to commencing a full procurement process</li> <li>Individual sharing agreements agreed with each GP practice and IUC provider Severnside (Brisdoc/Care UK) are currently being rolled out through One Care</li> <li>ETTF business cases to be</li> </ul>
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<p>Care commissioned to support pilot and roll out. Monthly project meetings taking place. Pilot to launch before end December with wider roll out planned in Q4 learning from pilot evaluation. GMS and PMS core contracts from 1<sup>st</sup> October 2019 include requirement for practices to accept direct booking once technical solutions are in place.</p> <ul style="list-style-type: none"> <li>• Healthier Together Estates Strategy approved at August Governing Body meeting</li> <li>• Minor Improvement Grants 2019/20 approved in principle by PCCC pending release of any NHSE capital funding to support this</li> <li>• Working on proposals for ETTF supported primary care estates developments across BNSSG. Funding is approved by NHSE subject to satisfactory business cases.</li> </ul>	<p>estates development</p>	<ul style="list-style-type: none"> <li>• Continue to work with NHSE to develop robust business cases</li> </ul>	<p>developed and submitted by March 2020 for PCCC approval</p> <ul style="list-style-type: none"> <li>• Locality and PCN models to inform area estates priorities in support of delivery of the Healthier Together Estates Strategy</li> </ul>
	<p><b>Opportunities:</b></p> <ul style="list-style-type: none"> <li>• Opportunity with local IT platforms to develop integrated ways of working at scale and across providers.</li> </ul>		



## Colour Code:



Green – Plans are in place and are on track to deliver. Significant progress has been made



Amber – Plans are developed and there is still some risk to delivery



Red – Plans are in place and are experiencing significant risks/obstacles to delivery or plans are not yet well developed

## Glossary of Terms

**GPFV:** The General Practice Forward View (GP Forward View), published in April 2016 is a national plan to support general practice services by 2020/21.

**PCN:** Primary Care Networks – groups of general practices working together and with community providers to deliver more integrated care

**STP:** STP stands for sustainability and transformation partnership. These are 44 areas covering all of England, where local NHS organisations and councils have drawn up proposals to improve health and care in the areas they serve. STP can also stand for ‘sustainability and transformation plan’, plans drawn up in each of these areas setting out practical ways to improve NHS services and population health in every part of England.

**LMC:** Local Medical Committees are local representative committees of NHS GPs and represent their interests in their localities to NHS organisations.

**ETTF:** NHS England’s Estates and Technology Transformation Fund (ETTF) is a multi-million pound investment (revenue and capital funding) in general practice facilities and technology across England (between 2015/16 and 2019/20).

**AHP:** Allied Health Professionals are a range of health professionals distinct from nursing, medicine and pharmacy

**HEE:** Health Education England is the national leadership organisation for education, training and workforce development in the health sector