Mansfield and Ashfield Clinical Commissioning Group

### Newark and Sherwood

NHS

**Clinical Commissioning Group** 



NHS Nottingham City

**Clinical Commissioning Group** 

NHS Nottingham North and East

Nottingham West Clinical Commissioning Group Clinical Commissioning Group

Rushcliffe **Clinical Commissioning Group** 

Paper Title	GP Forward View
Status	Briefing Paper
Audience	Councillor Girling, Chair of Health Scrutiny Committee, Nottinghamshire County Council.
Date	26 April 2018
Prepared by	David Ainsworth

#### Context and background

In April 2016, the General Practice Forward View (GPFV) set out NHS England's approach to strengthening general practice. The GPFV included a number of initiatives in general practice including improvements in access, premises, resilience, workforce and workload.

Since its launch six CCGs have been working on implementing, at a local level, the recommendations in the GPFV. Over the last few months and as part of transition to the new commissioning arrangements, Nottingham and Nottinghamshire are now working as two delivery units under the newly formed STP (now referred to as ICS – Integrated Care System) as presented at the March OSC by David Pearson.

This report provides members with an update on the progress made to date and highlights key priority areas going forward.

General practice is central to the NHS as 90% of patient interaction within the NHS occurs in general practice. From cradle to grave, head to toe, free at the point of need, GPs and their growing practice team manage patients through their;

- Primary health needs including on the day urgent care for illness and injury.
- \_ Navigation through multiple services and pathways.
- Health prevention including proactive vaccination and screening programmes. \_
- Early detection of health related matters including Cancer.
- Increasing social and educational support needs.
- Increasing wider determinants including housing applications and carer responsibilities for example.
- Increasing frailty and risk registers. \_
- Long term condition management such as diabetes and high blood pressure.
- Ongoing monitoring of conditions such as prostate levels.
- \_ Physical and mental health needs.
- End of Life care.

As the population grows older and increasingly develops, so does the demand on general practice. Multiple conditions including Mental Health needs and survivorship beyond Cancer requires increased out of hospital care and management resulting in the demand for general

#### Mansfield and Ashfield Clinical Commissioning Group Clinical Commissioning Group

# Newark and Sherwood

NHS Nottingham City **Clinical Commissioning Group** 

NHS Nottingham North and East Clinical Commissioning Group Clinical Commissioning Group

NHS Nottingham West

Rushcliffe **Clinical Commissioning Group** 

practice exponentially growing. Layer on increasing patient expectation and demand for services, which in part is being driven by issues outside health including consumerism and 24/7 online lifestyles, the pressures being placed upon general practice, reported nationally, is evident across the region.

That said we have some excellent/outstanding practices and primary provision across Nottingham and Nottinghamshire which is evidenced through CQC ratings of 'Good' and 'Outstanding'.

With growing numbers of GPs and Practice Nurses approaching retirement age and fewer choosing general practice as a career option and a generational change in mind-set of worklife balance the risks on the sustainability of the workforce are apparent.

#### **Report on Implementing the GPFV**

#### **Extended access**

The intention is to have seven day availability of pre bookable appointments and evening appointments helping those people who work to access their practice outside traditional core hours (Monday to Friday 08:00 to 18:30).

Progress has been successful. In Mid-Nottinghamshire 100% population coverage has been achieved since February 2018 including Sunday and bank holiday provision. In Greater Nottingham 100% coverage has been achieved in Rushcliffe and Nottingham City with Nottingham North and East and Nottingham West due to implement seven day extended access by October 2018.

#### Workforce Strategy

The ICS has developed a workforce strategy which includes plans to increase the number of medical and non-medical staff working in general practice over the next five years.

A key aim within the plan is to significantly increase the number of GP's across Nottinghamshire through international recruitment via an NHS England national campaign. To support this both delivery units have had bids approved that will increase the number of GPs across Nottinghamshire by 78 wte over the next few years.

There are further national projects to support the retention of existing staff expected during 2018/19.

A specific programme of work focusing on Practice Nurse development is underway with a ten point plan to address key priority areas of need. Four training hubs have been established across the area to provide a route by which development will be delivered.

Greater Nottingham and Mid-Nottinghamshire have implemented Clinical Pharmacists as part of the wider practice team with success. Reviewing and recommending medication changes based on the interactivity of polypharmacy; giving consideration to the impact of multiple medications and reducing unnecessary waste.

#### Mansfield and Ashfield Clinical Commissioning Group

## Newark and Sherwood

**Clinical Commissioning Group** 

#### NHS

Nottingham City **Clinical Commissioning Group** 

NHS Nottingham North and East Clinical Commissioning Group Clinical Commissioning Group

NHS

Nottingham West

Rushcliffe **Clinical Commissioning Group** 

#### **Premises and Technology Improvements**

Technology improvements including Wi-Fi access, mobile working for home visits, information and record sharing across the wider system including East Midlands Ambulance Service and the out of hours provider are now in place across Nottingham and Nottinghamshire. This means advanced planning such as end of life wishes can be documented and accessed by health professionals to ensure individual wishes can be adhered to.

Both delivery units have been working through specific projects with individual practices to improve premises. This includes one new build in Nottingham and one new premise into an existing building in Mid-Nottinghamshire. Practices also have access to a fund to improve their premises where concerns are highlighted such as compliance with the Disability **Discrimination Act.** 

#### **Patient Online Access**

Both delivery units are performing well against the national target of 25% people accessing service online, patients can now order repeat prescriptions and book appointments via practice websites. This is live across 100% practices. The more people using online services means the more telephone lines can be freed up for those without Internet access or who find accessing the internet difficult.

#### **Tackling Workload**

The GPFV encompasses ten high impact actions aimed to release time to care including developing the practice team through:

- GP Resilience providing support to the practices judged to be vulnerable; helping practices build clinical and non-clinical skills to make them fit for the future.
- A Practice Manager Development programme.
- Introduced new skills of practice staff including care navigation (active signposting) and document management skills leading to back office productivity gains.

#### **Key Priority Areas to Follow**

#### Locality working

Practices are coming together and focussing on priority areas for larger populations circa 30-50k. By working in this way individual practices are able to offer more services traditionally provided by hospitals; freeing up hospitals to provide emergency and specialist treatment whilst enabling patients to remain within their community.

#### **Diabetes**

As part of the National Diabetes Prevention Programme, practices will continue work to prevent and support earlier identification of pre-diabetes (the condition where blood sugar is raised and can be reversed through lifestyle changes).

#### **Retention of existing workforce**

Further information is expected from NHS England confirming a number of initiatives to support GP retention. The priority across Nottinghamshire is to ensure the existing GP workforce has the capacity and capability required in order to maintain motivation at a time when there is significant pressure across the health and care system.

#### NHS Mansfield and Ashfield

#### NHS Newark and Sherwood

Clinical Commissioning Group Clinical Commissioning Group

## NHS

Nottingham City **Clinical Commissioning Group** 

NHS Nottingham North and East Clinical Commissioning Group Clinical Commissioning Group

NHS Nottingham West

Rushcliffe **Clinical Commissioning Group** 

#### Waiting times for appointments

A national data collection exercise has commenced to better understand differential waits for appointment by practice. Given this is a common area fed back through Healthwatch and local populations the delivery units will focus on local data.

#### **Definition of Core offer**

NHS England is carrying out an engagement exercise to better define what patients can expect from their consultation with a GP or practice member. This rebasing of a contract with the public will help with the message about choosing the right service first time and how to make best use of the services offered locally.

#### Summary

The OSC is asked to recognise the significant positive progress being made across general practice and to request further updates throughout the year.