



JOINT COMMISSIONING COMMITTEE					
MEETING DATE:	14 January 2016				
AGENDA ITEM NUMBER:	Item 10.1				
AUTHOR:	Julie Killingbeck				
JOB TITLE:	Senior Manager - Commissioning				
DEPARTMENT:	Commissioning				

DELIVERING THE FORWARD VIEW: NHS PLANNING GUIDANCE 2016/17 – 2020/21 SUMMARY OF IMPLICATIONS FOR PRIMARY CARE

PURPOSE/ACTION REQUIRED:	To Receive for information
CONSULTATION AND/OR INVOLVEMENT PROCESS:	The paper will be shared with the Governing Body and CoM
FREEDOM OF INFORMATION:	<i>Is this document releasable under FOI at this time? If not why not? (decision making guide being developed)</i> Public

1. PURPOSE OF THE REPORT:

The report provides the JCC with a brief summary of the implication of the recently published planning guidance - Delivering the Forward View: NHS planning guidance 2016/17 – 2020/21 on primary care.

2. STRATEGIC OBJECTIVES SUPPORTED BY THIS REPORT:

Continue to improve the quality of services	x
Reduce unwarranted variations in services	х
Deliver the best outcomes for every patient	x
Improve patient experience	x
Reduce the inequalities gap in North Lincolnshire	x

3.	3. ASSURANCES TO THE JOINT COMMISSIONING COMMITTEE						
4.	IMPACT ON RISK ASSURANCE FRAMEWORK:		r				
		Yes		No	X		
5.	IMPACT ON THE ENVIRONMENT – SUSTAINABILITY:						
		Yes		No	x		
Δ+ t	the present time it is not possible to assess the potential impact on susta	inability					
	The present time it is not possible to assess the potential impact on susta	mability.					
6.	LEGAL IMPLICATIONS:						
		Yes		No	х		
7.	RESOURCE IMPLICATIONS:						
		Yes		No	x		
8.	EQUALITY IMPACT ASSESSMENT:						
0.		Yes		No	x		
				_			
•	PROPOSED DUDUC & DATIENT INVOLVENENT AND COMMUNICATION	C .					
9.	PROPOSED PUBLIC & PATIENT INVOLVEMENT AND COMMUNICATION	S: Yes	1	No	x		
		163		NO	~		
It is anticipated that individual practices will consult with the practice PPG on proposals to expend services.							
10.	RECOMMENDATIONS:						
The Joint Commissioning Committee is asked to:							
Receive for information							

Delivering the Forward View: NHS planning guidance 2016/17 – 2020/21: Summary of the Implications for Primary Care

Sustainability and Transformation Plans (STPs) must cover every area of CCG or NHS commissioned activity, including primary care medical services, irrespective of existing delegation arrangements.

Primary care figures strongly in the targets set. "By March 2017, 20 per cent of the population will have enhanced access to primary care", meaning access to out of hours services, including GP out of hours services and weekend access to GP services.

Every area must start 2016/17 with a local plan "to address sustainability and quality of general practice, including workforce and workload issues". This is one of the 9 'must-dos'.

Local plans for GP services are reflected in the government's commitment to increase funding by 4-5 per cent per year to address well documented fact the primary care investment has fallen behind other parts of the NHS.

Funding allocations for CCGs have been set for the next 3 years and there is a further pledge to publish the allocations for primary care allocations to make it easier to hold commissioners spending commitments to account.

STPs must focus on 3 challenges, closing the health and wellbeing gap, closing the care and quality gap and closing the finance and efficiency gap. Local plans are expected to answer a number of questions under each heading, the second ('closing the care and quality gap') focuses on the development of new care models and digital healthcare,

Local plans will be expected to go into detail under this heading on plans for sustainable general practice and wider primary care, enhanced access to GP services and use of technology. The latter includes improved use of on-line GP appointment systems and repeat prescriptions, but planners are expected to say how they will expand their on-line offer to include GP consultations and other unspecified services.

(Summary taken from PCC website 06/01/16)