

Date:	20 October 2016
Meeting:	Joint Commissioning Committee
Item Number:	8.0
Public/Private:	Public <input checked="" type="checkbox"/> Private <input type="checkbox"/>

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Report Title:	North Lincolnshire CCG Primary Care Strategy Update
Decisions to be made:	JCC are asked to note the contents of the report for information.

Continue to improve the quality of services	<input checked="" type="checkbox"/>	Improve patient experience	<input checked="" type="checkbox"/>
Reduced unwarranted variations in services	<input checked="" type="checkbox"/>	Reduce the inequalities gap in North Lincolnshire	<input checked="" type="checkbox"/>
Deliver the best outcomes for every patient	<input checked="" type="checkbox"/>	Statutory/Regulatory	<input type="checkbox"/>

Executive Summary (Question, Options, Recommendations):
The paper provides on up-date on the development of the North Lincolnshire CCG Primary Care Strategy
JCC is asked to:
<ul style="list-style-type: none"> Note the contents of the report for information

Equality Impact	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
Sustainability	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
Risk	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
Legal	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
Finance	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	

Patient, Public, Clinical and Stakeholder Engagement to date									
	N/A	Y	N	Date		N/A	Y	N	Date
Patient:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Clinical:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Public:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

Report to the Joint Commissioning Committee Progress Report on the North Lincolnshire CCG Primary Care Strategy

The North Lincolnshire CCG Primary Care Strategy is currently being prepared with a draft version ready to share for consultation and comments by mid-October.

Drawing on national strategic documents such as, The Five Year Forward View (FYFV) and the General Practice Forward View (GPFV), the strategy sets out the national and local need for change, detailing the current and future challenges facing general practice. It then highlights priority areas that need to be addressed to develop services that are fit for the future if we are to ensure the future sustainability of primary medical care.

Through adopting both a targeted and holistic approach, the strategy will provide a framework to allow each strand of the GPFV to compliment and enable the wider aims through which to aim to address the 3 principles identified in the FYFV¹

The format of the strategy is as follows:

1 Executive Summary

2 Foreword

3 Introduction

- What are the current challenges facing primary medical care and the case for change

4 The National Context

- Five Year Forward View
- General Practice Forward View
- New Models of Care

5 The Local Context

- GP Federation
- Out-of-Hours Service
- Health Lives Healthy Futures
- Care Networks
- The ACO, the STP Footprint and Devolution

6 The Vision

- North Lincolnshire Clinical Commissioning Group's vision for primary health care services across North Lincolnshire sees quality primary medical care as the foundation on which to build the very best healthcare for our population.

¹ The 3 principles of the FYFV are to close the following gaps health care: The health and wellbeing gap, the care and quality gap and the funding and efficiency gap.

- From this foundation we will aim to deliver high quality, equitable and accessible primary care services that have the patient at the centre of clinical effective care.

There then follows chapters aligned to the priority areas detailed in the GPFV specifically: Investment, Workforce, Workload, Practice infrastructure and Care re-design. These chapters detail the current position, what more needs to be done and how we aim to achieve our vision for primary medical care. The chapters encompass the following:

- **Workforce** (development, recruitment, retention, training, education, new models of workforce)
- Clinical leadership (improving quality/reducing inequalities/variation)
- Estates/Premises (**practice infrastructure**, improvement, development)
- Access (improving access /managing demand, **workload**)
- Delivering primary care at scale (**care re-design**, locality based/closer integration/Care Networks/Federation)
- IMT (cross cutting theme)
- Finance and sustainability (**investment** strategy)
- CCG Pharmacy team (medicines optimisation)

The strategy then moves on to describe

7. Enablers (identify what is required to achieve priorities - Action plans with short, medium and long-term milestones developed to sit under each priority area with identified lead for implementation)
8. Implementation, delivery and review of the strategy
9. Governance arrangements – Monitoring arrangements)
10. Conclusion

A draft version of the final strategy will be shared for consultation and comments before being presented for ratification and approval. It is anticipated that the draft version will be available mid October 2016.

The JCC are asked to:

- Note the contents of the report on the progress of the Primary Care Strategy.