

Date:	14 <sup>th</sup> February 2019		Repor							
Meeting:	Governing Body		Joint Primary Care Commissioning Committee							
	Item 11.4			ary Report		· ·				
Public/Private:	Public ⊠ Private □									
			Decis	ions to be ma	de:					
(Name, Title)	Erica Ellerington Primary Care Contrac Manager	t	To not	te						
(Name, Title)	Geoff Day Interim Director of Primary Care									
Director approval	Geoff Day									
Director Signature	Cappeday									
Link to a Strategic Objective?  Link to a Strategic Risk										
Continue to improve the quality of   ☐ Improve patient experience ☐										
services Reduced unwarra		-	ice the inequa		in North					
services			olnshire	antico gap						
Deliver the best of patient		Statutory/Regulatory				$\boxtimes$				
Purpose (tick one	Ар	proval	Information	To note ⊠	Decision	Assurance				
Executive Summary (Question, Options, Recommendations):										
The enclosed paper provides a summary of the Joint Primary Care Commissioning Committee meeting held on 3 <sup>rd</sup> January 2019.										
Recommendation	1. Please no	Please note the contents of the update								
Report history	N/A									
Equality Impact	Yes □ No ⊠									
Sustainability	Yes □ No ⊠									
Risk	Yes □ No ⊠									
Legal	Yes □ No ⊠									
Finance	Yes □ No □									

Patient, Public, Clinical and Stakeholder Engagement to date									
	N/A	Y	N	Date		N/A	Y	N	Date
Patient:	$\boxtimes$				Clinical:	$\boxtimes$			
Public:	$\boxtimes$				Other:	$\boxtimes$			



# JOINT PRIMARY CARE COMMISSIONING (PUBLIC) COMMITTEE MEETING HELD ON 3<sup>rd</sup> JANUARY 2019 CHAIR'S UPDATE REPORT

# **INTRODUCTION**

This is the Chair's report to the Clinical Commissioning Group Board following the January 2019 Joint Primary Care Commissioning Committee.

# AGENDA ITEM 8. EXTENDED ACCESS SERVICE UPDATE

The Committee reviewed appointments data for October and November which showed an excellent utilisation rate for the newly implemented service. The data does highlight an issue with non-attendance rates for appointments on Saturdays. A contract review meeting is arranged for January 2019 when the CCG and provider will discuss and agree plans of how this can be addressed.

The Committee were informed that from 1 April 2019, NHSE intend to monitor utilisation rates, although this has yet to be confirmed. The CCG are assured that the service is reaching sufficient utilisation rates to meet any intended targets.

Core Requirements – From 1 April 2019, the Extended Access service must meet the National 7 Core Requirements. The Committee were assured that the service is on target to achieve this requirement by 1 April deadline.

The excellent utilisation rates of this service demonstrate that patient communication has been successful and effective. It was pointed out to members that the communication of this service in North Lincolnshire has received much interest and attention from NHS England's Regional and National teams and is regarded as an excellent example of meeting the 'Advertising' core requirement.

#### AGENDA 9. PRIMARY CARE WORKFORCE STRATEGY

The Committee received and approved the final workforce strategy. The Strategy provides an outline of how North Lincolnshire CCG will work with staff, partners and local communities to develop the workforce and secure improved health and wellbeing for local people. It focuses on how the CCG will develop the general practice workforce whilst addressing a number of challenges that are increasingly impacting on the ability to transform into new models of health and care provision.

# AGENDA ITEM 10. TRANSFORMATIONAL FUND UPDATE

The CCG made available £3 per head transformational monies which funded the First Contact Physiotherapy service in primary care. The Committee received an update on the current service which went live on 1<sup>st</sup> October 2018.

The service has employed a sessional Physiotherapist who undertakes 8 sessions per week. In addition to this, the service utilises North Lincolnshire and Goole Hospitals (NLAG) resource to provide appointments within general practice.

Unfortunately, the service has not been able to recruit the amount of Physiotherapists required to date. Recruitment is ongoing and the provider plans to rollout full service capacity in January 2019.

The service has received excellent feedback so far. 47 evaluations of feedback had been undertaken, all were extremely positive and highly satisfied with the service. All patients who have used the service would recommend to a friend.

The CCG and service provider have held back from undertaking any meaningful patient engagement to date, mainly because the service had not been at full roll out stage. However, as the service will be available to all patients in January 2019, the provider and CCG are working together to agree a communications plan to be released in January 2019.

# AGENDA ITEM 12. NHS ENGLAND UPDATE

The Committee received an up to date position regarding online consulting. 6 Practices have now gone live with online consult: Riverside Surgery; Bridge Street; Barnetby; Ancora; Cambridge Avenue and South Axholme. An additional 2 surgeries now have agreed deployment dates and a further 2 Practices have shown interest and are currently working through the process with the Programme Project Manager. This has potential patient population coverage of 97,219.

The Committee were advised that a website has been developed to track progress in North Yorkshire and the Humber:

https://sites.google.com/riperian.co.uk/hcy-online-consultation/home

The rollout of the Apex Insight Tool is currently in the planning phase. An initial Steering Group Meeting was held on 24 October 2018, following which expressions of interest were requested from practices. A demonstration to the Practice Managers Forum was provided on 8 January 2019.

# AGENDA ITEM 13. OUT OF HOSPITAL TRANSFOMATION PROGRAMME

The Committee received background information and an update relating to the Care Networks workstream. The work stream has made good progress to date; Network leads have been identified and engaged. Clinical leads are GP Board members. A Primary Care Quality Scheme has been offered to the networks. The networks are currently working with Safecare who will 'sign up' to the scheme once on behalf of all practices. Clinical leads and Safecare are currently finalising a governance model which will allow (but not be limited to) Safecare managing the sign up and co-ordination of all CCG commissioned enhanced services

Janice Keilthy
Joint Primary Care Commissioning Committee Chair
January 2019