

## Meeting: Primary Care Commissioning Committee

<b>Meeting Date</b>	22 September 2021	<b>Action</b>	Receive
<b>Item No.</b>	7	<b>Confidential</b>	No
<b>Title</b>	General Practice Resilience Framework Update		
<b>Presented By</b>	Z Alderson, Head of Primary Care		
<b>Author</b>	K Heselwood, Primary Care Project Manager		
<b>Clinical Lead</b>	C Fines, Clinical Lead Primary Care		

### Executive Summary

Prior to the launch of the Primary Care Network (PCN) Contract DES in April 2019, the monitoring and assurance of General Practice performance, both contractual and non-contractual, was gained via the Primary Care Quality Visit Programme.

Since 2019, the growth of the PCN DES has seen the requirement for a more robust assurance process to be defined.

The purpose of this paper is to provide the Primary Care Commissioning Committee with an overview of the new General Practice Resilience framework and to provide an update on its roll out across Bury.

### Recommendations

It is recommended that the Primary Care Commissioning Committee:-

- Receive the report for information
- Note that processes are being looked at across GM and conversations continue between Bury CCG and local CCGs

### Links to CCG Strategic Objectives

<b>SO1 - To support the Borough through a robust emergency response to the Covid-19 pandemic.</b>	<input type="checkbox"/>
<b>SO2 - To deliver our role in the Bury 2030 local industrial strategy priorities and recovery.</b>	<input type="checkbox"/>
<b>SO3 - To deliver improved outcomes through a programme of transformation to establish the capabilities required to deliver the 2030 vision.</b>	<input checked="" type="checkbox"/>
<b>SO4 - To secure financial sustainability through the delivery of the agreed budget strategy.</b>	<input type="checkbox"/>
Does this report seek to address any of the risks included on the Governing Body	

<b>Links to CCG Strategic Objectives</b>						
Assurance Framework? If yes, state which risk below:						
GBAF						

<b>Implications</b>						
Are there any quality, safeguarding or patient experience implications?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
Has any engagement (clinical, stakeholder or public/patient) been undertaken in relation to this report?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
Have any departments/organisations who will be affected been consulted ?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
Are there any conflicts of interest arising from the proposal or decision being requested?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
Are there any financial Implications?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
Has a Equality, Privacy or Quality Impact Assessment been completed?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
Is a Equality, Privacy or Quality Impact Assessment required?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
Are there any associated risks including Conflicts of Interest?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
Are the risks on the CCG's risk register?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>

<b>Governance and Reporting</b>		
<b>Meeting</b>	<b>Date</b>	<b>Outcome</b>

## **GP Resilience Framework Update**

### **1. Introduction**

- 1.1 Prior to the launch of the Primary Care Network (PCN) Contract DES in April 2019, the monitoring and assurance of General Practice performance, both contractual and non-contractual, was gained via the Primary Care Quality Visit Programme.
- 1.2 Since 2019, the growth of the PCN DES has seen the requirement for a more robust assurance process to be defined that supports practices and enables them to maintain resilience and sustainability as we move towards recovery.
- 1.3 The purpose of this paper is to provide the Primary Care Commissioning Committee with an overview of the new General Practice Resilience framework and to provide an update on its roll out across Bury.

### **2. Background**

- 2.1. The Primary Care team has worked closely with practices over a number of years to drive up quality and to manage areas of underperformance via a supportive Primary Care Quality Visit (PCQV) programme. The programme allowed both the Clinical Commissioning Group (CCG) and practices to manage any areas of concern before a practice was adversely affected by putting a manageable action plan in place outlining what needed to take place to bring the practice in line with its peers, detailing the system support on offer to do so.
- 2.2. The PCQVs provided the assurance and monitoring required from General Practice against contractual and non-contractual measures. By benchmarking data against previous years and neighbouring practices, we were able to provide practices with a comparison against all general practice in the Borough. Data was provided by the Business Intelligence Team and Medicines Optimisation Team and was presented to each practice prior to and during a visit. Practices were required to complete and submit an action plan post visit and the Primary Care Team monitored this and provided support where needed.
- 2.3. The programme was put on hold during Covid-19 and has not yet been reinstated. We have used this opportunity to re-shape the programme and revise the assurance and monitoring process to include more relevant data sets from current sources following the pandemic and to build in the relevant assurances required within the PCN DES.

### **3. Assurance Framework**

- 3.1 Whilst the delivery of the new assurance meetings will largely be done online they will continue to be focused around proactive support and engagement with the practice and therefore as a practice they should see little change to what they have previously encountered. What will change is the range of data the team have access to through the creation of a Primary Care Dashboard.

- 3.2 The Primary Care Dashboard is a bespoke dashboard recently created by the Business Intelligence Team at the CCG. Phase 1 of the dashboard is complete and contains various pages for several indicators which are: Summary, Elective, Emergency, QOF registers, QOF other measures, GP Population, Ethnicity.
- 3.3 The assurance meetings will be used to underpin GP Resilience and, alongside the data extracted from the dashboard, we will also include wider indicators where appropriate, based on CCG/National priorities e.g. A&E Attendances, Bardoc referrals, Friends and Family Test, Minor Surgery and Care Navigation. As this is an iterative process, it allows for further information to be added where required.
- 3.4 As stated previously, the PCQV was suspended during Covid-19 giving way to a focused General Practice Resilience programme, working with those practices who requested or needed additional support during this time.
- 3.5 In terms of prioritisation, the practices currently on the resilience programme (4 practices in total) will be the ones who receive an assurance meeting first. Once these meetings have taken place, the remaining practices will be prioritised following the RAG (Red, Amber, Green) rating system as identified on the summary page of the Primary Care Dashboard.
- 3.6 Similarly to previous PCQV, data will be used from the Primary Care Dashboard, along with a standard template and shared with a practice prior to the meeting, summarised notes and actions will be shared with the practice following the meeting (within 1 week) and actions/deadlines will be closely monitored.

## **4 Associated Risks**

- 4.1 Within the assurance framework we may come across the following risks:
  - Covid-19 – as/when/if this escalates then this will be priority
  - We are unable to benchmark against performance data for 2021/21 due to Covid-19
  - Practices may not engage due to existing pressures
  - PCN DES is not locally commissioned and there are no formal submissions, however we are mitigating against this by working closely with other local CCGs to ensure we have a consistent approach

## **5 Next Steps**

- 5.1 Phase 2 of the dashboard will commence and will include as a minimum Extended Working Hours (EWH), Investment and Impact Fund (IIF), Care Quality Commission (CQC), General Practice Patient Survey (GPPS), Inform data, LD Health Checks, Friends and Family Test, Opel/SIT Rep information.
- 5.2 The first cohort of assurance meetings will be arranged and completed, enabling the dashboard to be piloted.

5.3 Once the first cohort of meetings have taken place the second cohort will be arranged, using the process outlined in Appendix 1.

## **6 Recommendations**

6.1 Primary Care Commissioning Committee note the contents of this report

## **7 Actions Required**

7.1 The Primary Care Commissioning Committee is required to:

- Receive the update provided
- Note that processes are being looked at across GM and conversations continue between Bury CCG and local CCGs

### **Katie Heselwood**

Primary Care Project Manager

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September 2021

# Standard Operating Procedure – GP Resilience Framework: Prioritisation / Meetings Process

Identification of practices in order of priority using Primary Care Dash and other intel

RAG rating system currently uses blue (low/good), pink, red (high/concern)  
 In this **example**, Tower Family Healthcare would be high priority, followed by Garden City Medical Centre, Woodbank Surgery and lastly Ramsbottom Medical Practice

Measure	GARDEN CITY MEDICAL CENTRE	RAMSBOTTOM MEDICAL PRACTICE	TOWER FAMILY HEALTHCARE	WOODBANK SURGERY
AE Attendances	299.0	228.1	273.8	325.0
Referrals	346.4	303.3	380.1	321.9
NWAS Incidents	113.6	93.8	109.2	124.6
Emergency Admissions	97.6	72.2	94.5	103.8
BARDOC Contacts	76.8	58.9	67.9	81.6
Elective Daycase	97.3	96.6	101.9	71.9
Same Day Emergency Care	45.9	29.6	42.3	42.6
Elective Inpatients	12.9	8.5	11.5	8.4
Emergency Admissions - CHF	0.9	0.6	1.6	1.8
Emergency Admissions - Cancer	2.3	1.0	1.7	1.4
Emergency Admissions - Diabetes	0.5	1.3	0.6	1.0
Emergency Admissions - Dementia		0.8	0.4	0.6
Emergency Admissions - Asthma	0.5	0.2	0.4	0.2
Emergency Admissions - COPD	0.9	0.8	0.9	0.2

Other intel various sources such as CQC reports, complaints received, practices on the resilience programme, practices not meeting the 7 priorities as part of additional funding

Write to (via email) practice to arrange meeting with GP Partner/s, Practice Manager and anyone else they wish to invite (cc to PCN lead) and give overview of the purpose

Send pre meeting documentation (standard template) including visuals from dashboard 1 week prior to meeting

Notes / actions and deadlines from meeting written up and shared with practice / PCN lead

Action deadlines shared with Primary Care Administrator to prompt practice prior to due date

Continue to monitor as part of resilience framework and re visit if necessary

Feedback to Primary Care Team

Actions reviewed once received and any required follow up to take place

