

## MUNICIPAL YEAR 2015/2016

**MEETING TITLE AND DATE**  
**Health and Wellbeing Board**  
**14 July 2015**

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NHS Enfield CCG  
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<b>Agenda - Part:1</b>	<b>Item: 8c</b>
<b>Subject: Primary Care Update</b>	
<b>Wards: All</b>	
<b>Cabinet Member consulted: N/A</b>	
<b>Approved by:</b>	

### 1. EXECUTIVE SUMMARY

This paper updates the Health and Wellbeing Board on Primary Care matters across the borough of Enfield.

#### **NORTH CENTRAL LONDON PRIMARY CARE TRANSFORMATION PROGRAMME:**

Since the original Primary Care Strategy was finalised in 2012, there have been changes to NHS Policy, most notably the publication of the 'Five Year Forward View' and release of 'Transforming Primary Care in London: a Strategic Commissioning Framework'. The Framework sets out a new way of delivering General Practice and this is a key facet of the strategy refresh and the proposed projects for 2015/16. CCGs across NCL have signed up to seven high level objectives:

- implementing co-commissioning arrangements
- implementing the PC commissioning strategic framework,
- development of federated care networks,
- IT interoperability,
- development of an estates strategy,
- quality improvement of general practice, and
- development of a programme of workforce development

The sum of £6m investment (£1.134m per CCG) has been made available from the NCL transitional fund. The following three areas have been prioritised for investment in Enfield:

- An additional 15,000 urgent appointments delivered from two primary care hubs between 1<sup>st</sup> October 2015 and 31<sup>st</sup> March 2016 on weekdays and Saturdays.
- Migration of GP practices from Vision to EMIS Web to deliver IT inter-operability between practices across Enfield. This will also facilitate London Borough of Enfield's implementation of a digital care record.
- On-going funding of a Primary Care Team function at the CCG

### **CO-COMMISSIONING OF PRIMARY CARE SERVICES:**

At its meeting on 10<sup>th</sup> June 2015, the Governing Body approved the submission of an updated proposal to NHS England on 24<sup>th</sup> June 2015 to establish joint commissioning arrangements from 1<sup>st</sup> October 2015. Discussions are ongoing with Local Authorities and the LMC to decide how both groups want to be represented on the Committee, however initial conversations have been positive and it is expected that both groups will be represented at the first Joint Committee meeting in October 2015. Islington Health Watch will coordinate input with contributions from the other four Healthwatch, particularly on issues of local significance.

## **2. RECOMMENDATIONS**

The Enfield Health and Wellbeing Board is asked to note the contents of this report.

## **3. CO-COMMISSIONING OF PRIMARY CARE SERVICES**

Following the submission of the North Central London CCGs' Co-Commissioning application in January 2015, the CCGs in NCL have been working to sign off changes to their constitution. The changes allow the CCGs to collaborate within the Joint Committee arrangements set out by NHS England.

Whilst the Joint Committee is not fully operational, all but one of the voting members are in place, as is shown in the list of roles and member names below. At the first development session of the Committee on 27<sup>th</sup> May, it was proposed that an additional practice nurse member be added to the list of members on the Committee.

The current list of Committee members is as follows:

<b>NCL Primary Care Joint Committee Membership</b>		
<b>Position on Committee</b>	<b>Voting/ Non-Voting</b>	<b>Names</b>
Lay Chair	Yes	Cathy Herman (Haringey)
Lay Vice chair		Sorrel Brooks (Islington)
Additional Lay member		Bernadette Conroy (Barnet)
NHS England Representation x3	Yes	David Sturgeon
		Paul Bennett Dr Henrietta Hughes
CCG Executive Member Representation x5	Yes	Alison Blair (Islington)
		Jennie Williams (Haringey)
		Rob Whiteford (Enfield)
		Susan Achmatowicz (Camden)

		Maria O'Dwyer (Barnet)
CCG Clinical Member Representation x5	Yes	Dr Katie Coleman (Islington) Dr Alpesh Patel (Enfield) Dr Beth Macmillan (Haringey) Dr Ammara Hughes (Camden) Dr Michelle Newman (Barnet)
Practice Nurse Member	Yes	TBC
Healthwatch, HWBB and LMC Representation	No	Emma Whitby (Health Watch) Tbc (Local Authority/ HWBB) Tbc (LMC)

Discussions are ongoing with Local Authorities and the LMC to decide how both groups want to be represented on the Committee, however initial conversations have been positive and it is expected that both groups will be represented at the first Committee meeting. Islington Health Watch will coordinate input with contributions from the other four Healthwatch, particularly on issues of local significance

At its meeting on 10<sup>th</sup> June 2015, the Governing Body approved the submission of an updated proposal to NHS England on 24<sup>th</sup> June 2015 to establish joint commissioning arrangements from 1<sup>st</sup> October 2015.

Operationally, for the first year of Co-Commissioning (2015/16) at least, NHS England have made clear that their intention is to maintain a steady state. Maintaining a steady state means that NHS England will continue to manage the contracting of primary care, delivering this as a service to CCGs whichever level of Co-Commissioning they have opted for, much in same way that CSUs provide commissioning support for acute contracts, NHS England will offer a commissioning support service for managing primary care contracting.

Therefore, the majority of the day-to-day delivery of primary care contracting activities will continue to be managed by NHS England, with David Sturgeon leading the NHS England team at Southside. NHS England are recruiting to co-commissioning posts assigned to NCL. The Co-Commissioning posts will provide a link between the work of the contracting team at NHS England and CCG primary care management leads.

#### 4. **NORTH CENTRAL LONDON PRIMARY CARE TRANSFORMATION PROGRAMME 2015/16**

Since the original Primary Care Strategy was finalised in 2012, there have been changes to NHS Policy, most notably the publication of the 'Five Year Forward View' and release of 'Transforming Primary Care in London: a Strategic Commissioning Framework'. The Framework sets out a new way of delivering General Practice and this is a key facet of the strategy refresh and the proposed projects for 2015/16.

Whilst the CCGs in NCL have seen improvements in Primary Care since the original strategy in 2012, it is important looking ahead to the refreshed Primary Care Strategy that the programme of work fully demonstrates benefits on a project by project basis. In identifying projects, CCGs have been clear about the benefits in terms of quality, value for money and patient care and satisfaction with services. This will be further emphasised in the way in which we monitor projects, to ensure we are focused on the outcomes and value to be derived from the investment secured by CCGs.

CCGs across NCL have signed up to seven high level objectives:

- implementing co-commissioning arrangements
- implementing the PC commissioning strategic framework,
- development of federated care networks,
- IT interoperability,
- development of an estates strategy,
- quality improvement of general practice, and
- development of a programme of workforce development

All of the projects put forward by CCG leads must contribute to delivery of one of the seven objectives listed above. Lessons having been learnt from the programme which delivered the Primary Care Strategy (2012-2015), the intention is to initiate the NCL Primary Care Transformation Programme with clear expectations about ongoing monitoring with regards to value for money, benefits and anticipated outcomes so that projects that do not deliver against the objectives and which do not deliver improvements, are closed down or do not get to full roll out.

The sum of £6m investment (£1.134m per CCG) has been made available from the NCL transitional fund. The following three areas have been prioritised for investment in Enfield:

- An additional 15,000 urgent appointments delivered from two primary care hubs between 1<sup>st</sup> October 2015 and 31<sup>st</sup> March 2016 on weekdays and Saturdays. If additional funding can be secured and a need identified, this will be extended to include Sundays.
- Migration of GP practices from Vision to EMIS Web to deliver IT inter-operability between practices across Enfield. This will also facilitate London Borough of Enfield's implementation of a digital care record.
- On-going funding of a Primary Care Team function at the CCG comprising 3.6 WTE (Head of Primary Care, Estates Manager (previously jointly funded by LBE and the CCG), Primary Care Development Manager and Primary Care Development Facilitator).

In addition, three areas have been prioritised for investment at a Strategic Planning Group (NCL) level:

- Implementing NCL co-commissioning arrangements
- High level (CCG) and practice baseline audit of strategic commissioning framework delivery
- Development of a NCL Balanced Scorecard.

## 5. **CONCLUSION**

This report provides an update on Primary Care matters in Enfield.