

Patient Offer	Practice Deliverables	Locality Deliverables	Network Deliverables	CCG Deliverables	Local Authority Deliverables	NHS England Deliverable
Primary Care Development						
(A2: Contacting the practice) IT - improved access to online booking, repeat prescribing and of viewing medical records	<ul style="list-style-type: none"> All practices to provide a minimum of 50% of total practice registered population have online accounts. All practices to provide a minimum of 50% of total practice bookable slots are made available online. All practices to work collaboratively with their PPGs to cultivate and 'polish' online access to best fit the expectations of their patient population 	<ul style="list-style-type: none"> Contribute to delivery at scale Exchange information – work collaboratively to refine, develop and trial new ideas to increase and enhance patient online features 	<ul style="list-style-type: none"> Share knowledge and experiences (bi-directional ebb and flow) to ensure any emerging experiences and good practices are cascaded to a wider audience. 	<ul style="list-style-type: none"> Supporting the uptake and utilisation of patient online access services Raise the profile of online access to patients and key stakeholders to improve awareness and interest Celebrate successes 	<ul style="list-style-type: none"> 	<ul style="list-style-type: none"> Produce a dashboard scoring individual, borough and regional utilisation Develop national metrics for assessing optimum baselines Identify exemplar practices nationally and cascade learning.
(A1: Patient choice of access and A2: Contacting the practice) IT - Patient record (view only) – patient can expect clinicians	<ul style="list-style-type: none"> Champion and actively promote the patient record function so patients can make an informed decision either to 	<ul style="list-style-type: none"> 	<ul style="list-style-type: none"> 	<ul style="list-style-type: none"> Co-develop the system architecture solution to enable sharing of patient records throughout the health economy. 	<ul style="list-style-type: none"> 	<ul style="list-style-type: none">

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across the local health economy to have access to a subsection of their patient records.	<ul style="list-style-type: none"> opt in and out. Signup to the data sharing agreements Ensure all patient correspondence and relevant information is recorded and accepted to the patient record within 48 hours. Comply with all Information Governance policies and duties. 			<ul style="list-style-type: none"> Ensure the safe and effective delivery Work collaboratively with the remaining LC CCGs to develop programmes that meets the 5 year forward view and Personalised Health and Care 2020 agendas. 		
(A2: Contacting the practice) IT - Patients will be required to only make one call, click or contact in order to make an appointment. Primary care teams will maximise the use of technology and actively promote online services to patients including appointment booking, prescription ordering, viewing	<ul style="list-style-type: none"> Practices actively participate in training and learning opportunities Implement and use the IT solutions available to facilitate appointment booking, prescription ordering, viewing medical records and email consultations. Implement and 	<ul style="list-style-type: none"> Identify Information Management and Technology (IM&T) opportunities and communicate these to the relevant commissioning leads. Standardising clinical coding 	<ul style="list-style-type: none"> Promote and champion the use of IT solutions. 	<ul style="list-style-type: none"> Purchase IT solutions that support the exploitation and optimisation agenda of Primary Care IM&T To put on a range of EMIS training aligned to training needs identified from membership feedback Develop EMIS Enterprise to support practices improve quality outcomes. 		<ul style="list-style-type: none"> GPSoc Framework

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medical records and email consultations.	<ul style="list-style-type: none"> utilise the Enfield Global Library. Create or use EDT Docman email accounts as the practice generic email account. Signup to and comply with the new CCG practice-agreement Improve performance of: <ul style="list-style-type: none"> EPS SCR GP2GP 			<ul style="list-style-type: none"> Work collaboratively with practices to ensure optimal exploitation of Docman Co-author with service delivery partners the CCG Practice agreement offer. transfer the of ownership of Iplato to practices Support practices maximise QoF attainment via business intelligence. 		
(Strategic Commissioning Framework Enabler) Primary Care Workforce Development	<ul style="list-style-type: none"> Offering time and commitment to primary care staff to complete mandatory training and continuing professional development to meet CQC and revalidation requirements Offering time and commitment to 	<ul style="list-style-type: none"> Deploying primary care staff with skills that can be utilised across localities, accessible to all patients within the area; 	<ul style="list-style-type: none"> Developing a range of skilled primary care staff to deliver high quality, primary care based services to local patients; 	<ul style="list-style-type: none"> Working with new initiatives, such as CEPN GP nurses, to recruit and retain a better range of primary care staff within the borough; 	<ul style="list-style-type: none"> Supporting new initiatives to develop staffing within, and allied to, primary care within Enfield; 	<ul style="list-style-type: none"> To support the improvement of the primary care workforce within Enfield;

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	<p>develop additional primary care staff to provide improved services to patients;</p> <ul style="list-style-type: none"> Participating in workforce and skill mix initiatives to offer new models of care 					
<p>(Strategic Commissioning Framework Enabler)</p> <p>Primary Care Estate</p>	<ul style="list-style-type: none"> Provide safe and suitable of premises that people receive care in, work in, or visit safe surroundings that promote their wellbeing Support Practices in developing their premises to enable CQC, Infection Control and DDA compliance. All practices to prepare and provide an access statement in support that their premises comply with the Equality & Diversity Act 2010. 	<ul style="list-style-type: none"> Contribute to the development and production of the Strategic Estates Plan.(SEP) Promoting system transformation, new models of care and support commissioning and integration within the SEP. Pledging to working collectively with practices and patient groups to provide services from clean and safe environments that are fit for purpose based on and the current regulatory 	<ul style="list-style-type: none"> Work with practices, other providers and the CCG to ensure that services are provided in a clean and safe environment that is fit for purpose, based on national best practice. Business case proposals should demonstrate they will enable new service models to be delivered All newly approved space should be available for use as a minimum of 84 hours per week and ideally 7 days 	<ul style="list-style-type: none"> CCG will ensure commissioning and delivery of such services will take place in viable, “fit for purpose” premises CCG will wherever possible and where circumstances allow, ensure that the delivery of high quality care will be delivered from available, accessible safe, CQC and H&S compliant environments. Strategic Estate plan to reflect the need and demand for local care hubs, 	<ul style="list-style-type: none"> To support and work with CGG and local GPs and other providers to enable the development of new premises that meet the health and social care needs of local population and accessible to all. 	<ul style="list-style-type: none"> Robust management of GP contract compliance To manage the Primary Care Transformation Fund (PCTF) process efficiently and in a timely manner that supports the implementation of the SEP and new developments and improvements to premises. Priority will be given to business cases where the premises for delivering services are more than 50% over-utilised or where suitability (condition and function) is not

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		<p>requirements to ensure “ service users” are protected against risks associated with unsafe and unsuitable premises</p>	<p>a week to primary and community contractors.</p>	<p>including where appropriate, new developments that enable complete delivery of the Patient Offer.</p> <ul style="list-style-type: none"> ▪ Use the estate as an enabler to improve accessibility and reach of services. ▪ Priority will be given to business cases where the premises for delivering services are more than 50% over-utilised or where suitability (condition and function) is not to an appropriate standard. ▪ SMART objectives will be agreed with practices linking funding approval to the realisation of intended benefits 		<p>to an appropriate standard</p>

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Network Development						
<p>(P1: Co-design)</p> <p>Improving access for patients to a greater range of services and care, closer to home, provided by local primary care staff</p>	<ul style="list-style-type: none"> Referring to local primary care-led services Working together to reduce the workload of individual practices by delivering more effectively together Offering practice personnel a chance to specialise as potential aid to recruitment & retention of excellent clinical staff in Enfield. 	<ul style="list-style-type: none"> Contributing to the development of priority services that meet the needs of local patients Committing to working together locally from accessible and appropriate care hubs for patients Work with the CCG to develop a persuasive case to migrate the remaining 4 practices onto a single clinical system 	<ul style="list-style-type: none"> Designing and delivering better healthcare for Enfield patients Work with the CCG to develop a persuasive case to migrate the remaining practices onto a single vendor solution 	<ul style="list-style-type: none"> Supporting the Network's continuing development as a key component to transforming primary care for patients Co-designing and improving services for Enfield patients Support and develop a persuasive case to migrate all practice onto a single vendor solution. 	<ul style="list-style-type: none"> Working with the GP Networks to improve the health of the local population utilising them to support the delivery of key health promotion and prevention strategies 	

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<p>(A4 Extended opening hours)</p> <p>Patients will be able to access pre-bookable routine appointments with a primary health care professional 8am – 6.30pm Monday to Friday and 8am to 12 noon on Saturdays.</p>	<ul style="list-style-type: none"> ▪ All practices to provide in person (doors open) and telephone access during core hours of 8am to 6.30pm Monday to Friday ▪ All practices to provide a minimum of 72 pre-bookable GP appointments per 1,000 patients ▪ All practices to provide a minimum of 25 Nursing appointments per 1,000 patients 	<ul style="list-style-type: none"> ▪ Commit to collaborating with neighbouring practices and Networks to ensure patients have access to care delivered by Networks beyond core hours. 	<ul style="list-style-type: none"> ▪ Contribute to the development of priority services that meet the needs of local patients ▪ Ensure clinical and managerial expertise established to mobilise and deliver pan-Enfield services 	<ul style="list-style-type: none"> ▪ Support the delivery of 7 day working (8am – 8pm, 7 days a week) by commissioning pan-Enfield urgent primary care as part of the urgent care network 	<ul style="list-style-type: none"> ▪ 	<ul style="list-style-type: none"> ▪ Robust management of GP contract compliance

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Locality Commissioning Development						
<p>(A1: patient choice of access)</p> <p>Patients will have one visit for all consultations/ tests/ procedures etc where appropriate (one stop service)</p>	<ul style="list-style-type: none"> Refer into one stop services where exists via Enfield Referral Service Share feedback and ideas at Practice Visits and Locality Meetings 	<ul style="list-style-type: none"> Identify and assess ideas/opportunities for one stop services Develop models of care for one stop services 	<ul style="list-style-type: none"> Networks will engage with Enfield CCG procurement opportunities and develop suitable working relationships with secondary care in order to provide high quality one stop services 	<ul style="list-style-type: none"> Locality Manager capacity committed to develop one stop services in partnership with the Locality One stop approach will be considered in all Enfield CCG service redesign opportunities 	<ul style="list-style-type: none"> Jointly develop the evidence base for new services 	<ul style="list-style-type: none"> Provide support and approval of primary care delivered services
<p>(C1-C5: Co-ordinated care)</p> <p>Patients will receive clinically robust services avoiding multiple visits to different clinicians i.e. right care, right place, first time</p> <p>Patients will experience an efficient and seamless pathway between primary and secondary care services</p>	<ul style="list-style-type: none"> Escalate issues and examples of poor patient pathways to Locality Manager Share feedback and ideas at Practice Visits and Locality Meetings 	<ul style="list-style-type: none"> Agree focus for 2016/17 and what can realistically be achieved Design and develop new models of care Develop good working relationship with secondary care clinicians in order to agree service redesign and issues resolution 	<ul style="list-style-type: none"> Networks will engage with Enfield CCG procurement opportunities and where successful will deliver services that direct patients to the right setting first time 	<ul style="list-style-type: none"> Locality Manager capacity committed to develop robust services in partnership with the Locality CCG will ensure that providers are held to account on transfer of care arrangements, timely and high quality discharge summaries, and availability of results ahead of consultations 	<ul style="list-style-type: none"> Jointly develop the evidence base for new services Identify greatest areas of need based on Locality health and demographic profiles 	<ul style="list-style-type: none"> Provide support and approval of primary care delivered services

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<p>(P3 Personal conversations)</p> <p>Discussions with patients will be backed by a strong robust evidence base and further information can be provided where requested</p> <p><i>[Examples: POLCE, Antibiotic prescribing, demands for brand names]</i></p>	<ul style="list-style-type: none"> Strong and honest conversations with patients Understand the justification behind policies that restrict referral/treatment i.e. POLCE Share feedback and ideas at Practice Visits and Locality Meetings 	<ul style="list-style-type: none"> Design and develop material to support patient to clinician conversations <p><i>[Example: laminated list explaining CCG has limited the prescribing of the following items]</i></p>	<ul style="list-style-type: none"> Not applicable 	<ul style="list-style-type: none"> Support Locality in development of information/ policy statements Review policies in line with feedback from Practices/ Localities Ensure policies are robust and well justified 	<ul style="list-style-type: none"> Jointly develop the evidence base for policies that limit available treatments and medications 	
<p>(A1 patient choice of access)</p> <p>Patients will receive enhanced care in GP Practices as an alternative to hospital-based services</p> <p><i>[Example for reference is minor surgery, physio, Telederm, patients on long-term follow-up programmes]</i></p>	<ul style="list-style-type: none"> Share feedback and ideas at Practice Visits and Locality Meetings 	<ul style="list-style-type: none"> Identify and assess ideas/opportunities for primary care services Develop models of care for primary care services Develop good working relationship with secondary care clinicians in order to agree service redesign and transfer of care to primary care services 	<ul style="list-style-type: none"> Networks will engage with Enfield CCG procurement opportunities for primary care services 	<ul style="list-style-type: none"> Locality Manager capacity committed to develop robust services in a primary care setting CCG will ensure that providers are engaged with new models of care and hold providers to account on transfer of care agreements 	<ul style="list-style-type: none"> Jointly develop the evidence base for new services Identify greatest are of need based on Locality health and demographic profiles 	<ul style="list-style-type: none"> Provide support and approval of primary care delivered services

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<p>(Strategic Commissioning Framework Enabler)</p> <p>Ensuring local providers are charging for services appropriately to ensure the best possible use of tax payers funds</p>	<ul style="list-style-type: none"> Validation of activity datasets Escalate issues and examples to Locality Manager 	<ul style="list-style-type: none"> Identify opportunities for challenging providers on appropriate pricing Review pricing models to determine alternatives <p><i>[Example: package price or price cap for A&E Frequent Fliers]</i></p>	<ul style="list-style-type: none"> Networks will engage with Enfield CCG procurement opportunities ensuring best possible use of tax payers funds 	<ul style="list-style-type: none"> Challenge local providers where pricing has been inappropriately applied, using examples from practices activity validation 		

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Joint Co-Commissioning							
Strategic Commissioning Framework (Proactive, Accessible & Co-ordinated care)		<ul style="list-style-type: none"> Ensuring that all patients are able to access the same high-quality services that are available, proactive and co-ordinated around their needs; 	<ul style="list-style-type: none"> Practices working together to deliver more accessible, proactive and co-ordinated services for their local patients; 	<ul style="list-style-type: none"> Ensuring that their member practices are delivering the services that patients should expect and supporting those members to achieve this; 	<ul style="list-style-type: none"> Supporting and enabling practices to provide improved services to ensure that patients can 	<ul style="list-style-type: none"> Supporting the delivery of the Framework locally to benefit Enfield citizens; 	<ul style="list-style-type: none"> Reviewing progress on the CCG's delivery of the Framework enabling better local primary care services for patients;
Personal Services Reviews	Medical (PMS)	<ul style="list-style-type: none"> Offering patients access to an agreed ranges of high-quality primary care services; 	<ul style="list-style-type: none"> Working together to deliver the new PMS services to patients and any new primary care services derived from any released 	<ul style="list-style-type: none"> Working with members to offer responsive services, that may arise from PMS savings, to all patients in Enfield; 	<ul style="list-style-type: none"> Ensuring that any resources released from the review are reinvested to improve local primary care services; 	<ul style="list-style-type: none"> Supporting the aims and objectives of the review locally; 	<ul style="list-style-type: none"> Completing the PMS Review as efficiently and equitably as possible;
NHS E Contracts		<ul style="list-style-type: none"> Delivering patient services to the agreed standards of the practice's contract with NHSE; 	<ul style="list-style-type: none"> Where appropriate, co-ordinate care for local patients to enable all patients to have access to high quality primary care services; 	<ul style="list-style-type: none"> Working in partnership to support members in the delivery of their NHS E contracts thus improving services for all patients; 	<ul style="list-style-type: none"> Working with NHS E to ensure that services are delivered to agreed standards and assist with improving the quality of primary care services for all local patients; 	<ul style="list-style-type: none"> Working with the CCG to support the development of local health services for the borough's citizens; 	<ul style="list-style-type: none"> Ensuring that practices are delivering their contractual services to patients;