

TRANSFORMING PRIMARY CARE IN ENFIELD – TOP FOUR PATIENT OFFER PRIORITIES 2016-2017

Priority	Patient Offer	Principle Lead	Funding Requirements	Practice Deliverables	Locality Deliverables	Network Deliverables	CCG Deliverables	Local Authority Deliverables	NHS England Deliverable
LOCALITY COMMISSIONING DEVELOPMENT									
1	Patients with Atrial Fibrillation, diabetes and CVD (CHD, Stroke, and Heart Failure) will receive a more co-ordinated multidisciplinary approach to their care where the philosophy of right care, right place and right time is emphasised.	Programme Manager – Service Transformation	<ul style="list-style-type: none"> PD39 – PD44: £400K subject to business case approval 	<p>PD39 - Identify new patients with AF by pulse check</p> <p>PD40 - Record more new patients with AF and Heart Failure in general practice via screening tools e.g. APL or GRASP tools</p> <p>PD41 - Refer newly-</p>	LD25 - Locality Leads/locality managers to support practices to deliver high quality care of patients with AF, diabetes and CVD	ND17 - Provider Networks should support their member practices to deliver the necessary outcome based care for patients with AF, diabetes and CVD	<p>CD41 - The AF, diabetes and CVD patient pathways will be streamlined to ensure a more effective and co-ordinated approach between primary, community and the hospital based care</p> <p>CD42 - Ensure IT clinical information system e.g.</p>	<p>LAD15 - Improve wider determinants of Health in Enfield</p> <p>LAD16 - Reduce health inequalities in the five priority wards in Enfield</p> <p>LAD17 - Promote joined up approach to health and social care</p>	<p>NHSE15 - Contribution to deliver the national outcome domains</p> <p>NHSE16 - Contribution to deliver the CCG operational standards</p>

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	Transforming Primary Care in London Patient Offer - C1-C5: Co-ordinated care			<p>recorded AF/HF patients in a timely manner to the appropriate services.</p> <p>PD42 - Patients with AF will be given the choice of appropriate treatment as per NICE/CCG clinical guidelines e.g. anticoagulation</p> <p>PD43 - Patients with HF will</p>			<p>EMIS supports practices to extract patient information for informing better clinical improvement in care and for data reporting purposes</p> <p>CD43 - To deliver an improvement in clinical outcomes: reduction of stroke and reduction of emergency admissions in patients with CVD</p> <p>CD44 - To</p>	<p>agenda for patients with long term conditions.</p> <p>LAD18 - Promote, support and design self-care/self-management/prevention programmes</p>	

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				<p>be reviewed and have their medication optimised as per NICE/CCG clinical guidelines e.g. ACEi/ Beta blockers</p> <p>PD44 - Improvement of QoF in AF, hypertension, Heart Failure, stroke and diabetes across Enfield</p>			<p>deliver an improvement in patient experience e.g. friends and family test, patient experience questionnaire</p> <p>CD45 - To implement full migration to a single integrated GP IT clinical system to support data reporting process (including important QOF indicators, immunisation and NHS Healthcheck)</p>		

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							and data analysis		
PRIMARY CARE DEVELOPMENT									
2	Primary Care Estates Transforming Primary Care in London Enabler	Programme Manager – Primary Care Estates	<ul style="list-style-type: none"> ▪ PD20 - £500,000 in on-going revenue consequences in respect of approved Primary Care Infrastructure ▪ PD21 - CCG Funded Programme Manager – Primary Care Estates ▪ CD26 - £837,000 	PD20 - Provide safe and suitable of premises that people receive care in, work in, or visit safe surroundings that promote their wellbeing this needs re-writing slightly but should include promoting active transport	LD06 - Contribute to the development and production of the Strategic Estates Plan (SEP) LD07 - Promoting system transformation, new models of care and support commissioning and integration	ND04 - 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. ND05 - Business	CD19 - CCG will ensure commissioning and delivery of such services will take place in viable, “fit for purpose” premises CD20 - CCG will wherever possible and where circumstances allow, ensure that the delivery of high	LAD05 - To support and work with CCG 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.	NHSE08 - Robust management of GP contract compliance NHSE09 - To manage the Primary Care Transformation Fund (PCTF) process efficiently and in a timely manner that supports the implementation of the SEP and new

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				<p>(walking / cycling)</p> <p>PD21 - Support Practices in developing their premises to enable CQC, Infection Control and DDA compliance.</p> <p>PD22 - All practices to prepare and provide an access statement in support that their</p>	<p>within the SEP.</p> <p>LD08 - 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 requirements to ensure “service</p>	<p>case proposals should demonstrate they will enable new service models to be delivered</p> <p>ND06 - All newly approved space should be available for use as a minimum of 84 hours per week and ideally 7 days a week to primary and community</p>	<p>quality care will be delivered from available, accessible safe, CQC and H&S compliant environments</p> <p>CD21 - Strategic Estate plan to reflect the need and demand for local care hubs, including where appropriate, new developments that enable</p>	<p>LAD06 - To support and work with CCG and local GPs and other providers to ensure that the PC estate supports and promotes healthy lifestyles</p>	<p>developments and improvements to premises.</p> <p>NHSE10 - 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</p>

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				premises comply with the Equality & Diversity Act 2010.	users” are protected against risks associated with unsafe and unsuitable premises LD09 - Practice staff model health behaviours asked of residents	contractors.	complete delivery of the Patient Offer. CD22 - Use the estate as an enabler to improve accessibility and reach of services. CD23 - 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)		

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							<p>is not to an appropriate standard.</p> <p>CD24 - SMART objectives will be agreed with practices linking funding approval to the realisation of intended benefits</p> <p>CD25 - Wherever possible estates will be used to support active transport (walking and</p>		

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							cycling) CD26 – Digitisation of patient records (support the emerging agenda and outcomes of Enfield's Estates Strategy, SEP, QIPP and community and social health plans, as well as the Personalised health and care 2020, IT Integration and paperless at the point of care (IT		

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							agendas), by repurposing file storage into clinical and non-clinical space).		
3	Primary Care Workforce Development Transforming Primary Care in London Enabler	Head of Primary Care	<ul style="list-style-type: none"> ▪ PD17 and PD18 – cost to practice as a regulated service ▪ PD19 - TBC 	PD17 - Offering time and commitment to primary care staff to complete mandatory training and continuing professional development to meet CQC and revalidation requirements	LD05 - Deploying primary care staff with skills that can be utilised across localities, accessible to all patients within the area;	ND03 - Developing a range of skilled primary care staff to deliver high quality, primary care based services to local patients;	CD17 - Working with new initiatives, such as CEPN GP nurses, to recruit and retain a better range of primary care staff within the borough CD18 - Supporting the	LAD02 - Supporting initiatives to develop staffing within, and allied to, primary care within Enfield; LAD03 - Supporting staff to ensure that residents make use of Borough	NHSE07 - To support the improvement of the primary care workforce within Enfield;

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				<p>PD18 - Offering time and commitment to develop additional primary care staff to provide improved services to patients.</p> <p>PD19 - Participating in workforce and skill mix initiatives to offer new models of care</p>			improvement of primary care outcomes that matters to population health	<p>assets to improve their health.</p> <p>LAD04 - To support the CCG in facilitating primary care outcomes including long-term conditions management in primary care</p>	
4	IT Delivery - Patient Online Programme	Primary Care Development Manager	PD01 & 02 - Implementation of Patient Online	PD01 - All practices to provide a minimum of	LD 01 - Contribute to delivery at scale	ND01 - Share knowledge and	CD01 - Supporting the uptake and	LAD01 - To supply with referral details (e.g.,	NHSE01 - Produce a dashboard scoring

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	<p>IT - improved access to online booking, repeat prescribing and of viewing medical records</p> <p>Transforming Primary Care in London Patient Offer - A2: Contacting the practice</p>		<p>Programme is a contractual requirement. However proposed use of tech may be offered as part of PMS contract review negotiations. (@ £1 per weighted patient – only for PMS practices).</p> <p>PD03 - £100,000 per annum for iPlato – if funding is not secured, costs will need to be met by</p>	<p>50% of total practice registered population have online accounts.</p> <p>PD02 - All practices to provide a minimum of 50% of total practice bookable slots are made available online.</p> <p>PD03 - All practices to register mobile phones and use iPlato (SMS text</p>	<p>LD 02 - Exchange information – work collaboratively to refine, develop and trial new ideas to increase and enhance patient online features</p>	<p>experiences (bi-directional ebb and flow) to ensure any emerging experiences and good practices are cascaded to a wider audience. Is this not happening now through PLTs etc.? If not what needs to change so that it does?</p>	<p>utilisation of patient online access services</p> <p>CD02 - Raise the profile of online access to patients and key stakeholders to improve awareness and interest</p> <p>CD03 - Celebrate successes</p>	<p>forms, pathway and contact details) for GP IT systems to facilitate referrals to lifestyle interventions</p>	<p>individual, borough and regional utilisation</p> <p>NHSE02 - Develop national metrics for assessing optimum baselines</p> <p>NHSE03 - Identify exemplar practices nationally and cascade learning.</p>

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			practices. This is likely to result in a backward step in utilising SMS technology, potentially increasing DNA rates and undermine the functionality embedded in the last three years and funded by NHS England.	messaging) for communicating with patients PD04 - All practices to work collaboratively with their PPGs to cultivate and 'polish' online access to best fit the expectations of their patient population					
			CD 01, 02 & 03 £10,000 for Comms and Engagement						

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	<p>IT Delivery - Patient record (view only) – patient can expect clinicians across the local primary care health economy (GP Practice to GP Practice interoperability) to have access to a subsection of their patient records.</p> <p>Transforming Primary Care in London</p>	Primary Care Development Manager	<p>CD04 - EMIS Web Clinical Service £115,000 initial start-up/setup costs.</p> <p>CD04 - Docman Vault £55,000 initial start-up/setup costs.</p>	<p>PD05 - Champion and actively promote the benefits of sharing patient level information.</p> <p>PD06 - Ensure patients have an option to opt out where this is the patient's individual choice.</p> <p>PD07 - GPs to determine what information</p>			<p>CD04 - Co-develop the system architecture solution to enable sharing of patient records throughout the local primary care health economy.</p> <p>CD05 - Co-develop the data sharing agreement that underpins the information that will be available to access.</p>		

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	Patient Offer – A1 Patient Choice of Access and A2: Contacting the Practice			<p>is stored on line about vulnerable patients (redacted / no access)</p> <p>PD08 - Signup to the data sharing agreements</p> <p>PD09 - Ensure all patient correspondence and relevant information is recorded and accepted to the patient record within 48</p>			<p>CD06 - Ensure the safe and effective delivery</p> <p>CD07 - Work collaboratively with the remaining NCL CCGs to develop programmes that meets the 5 year forward view and Personalised Health and Care 2020 agendas.</p>		

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				hours. PD10 - Comply with all Information Governance policies and duties.					
	IT Development - 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	Primary Care Development Manager	CD14 & PD13 - Enfield Global Library - £15,000 CD11 - Docman 'Health Checks' £30,000 CD09 - EMIS Additional Training £15,000	PD11 - Practices actively participate in training and learning opportunities PD12 - Implement and use the IT solutions available to facilitate	LD03 - Identify Information Management and Technology (IM&T) opportunities and communicate these to the relevant commissioning leads. LD04 -	ND02 - Promote and champion the use of IT solutions.	CD08 - Purchase IT solutions that support the exploitation and optimisation agenda of Primary Care IM&T CD09 - To put on a range of EMIS training aligned to training needs		NHSE04 - GPSoc Framework NHSE05 – training support for national programmes NHSE06 – development of national performance metrics

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	technology and actively promote online services to patients including appointment booking, prescription ordering, putting alerts for important interventions such as (abuse of antibiotics, proactive management of long-term conditions) viewing medical records and email		<p>CD10 & CD13 - EMIS Enterprise £55,000</p> <p>CD15 - E-Consult (email consultations) £0.63p + VAT per registered population (£249,480 per annum)</p> <p>CD16 - £120,000</p>	<p>appointment booking, prescription ordering, viewing medical records and email consultations.</p> <p>PD13 - Implement and utilise the Enfield Global Library.</p> <p>PD14 - Create or use EDT Docman email accounts as the practice generic</p>	Standardising clinical coding		<p>identified from membership feedback</p> <p>CD10 - Develop EMIS Enterprise to support practices improve quality outcomes.</p> <p>CD11 - Work collaboratively with practices to ensure optimal exploitation of Docman</p> <p>CD12 - Co-author with service delivery partners the</p>		

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	<p>consultations.</p> <p>Transforming Primary Care in London Patient Offer – A2: Contacting the practice</p>			<p>email account.</p> <p>PD15 - Signup to and comply with the new CCG practice-agreement</p> <p>PD16 - Improve performance of:</p> <ul style="list-style-type: none"> - EP - S - SC - R - GP - 2G - P 			<p>CCG Practice agreement offer.</p> <p>CD13 - Support practices maximise QoF attainment via business intelligence.</p> <p>CD14 – Continual development of EMIS global library</p> <p>CD15 – purchase of an email consultation product.</p> <p>CD16 – procurement of a free 'Wi-</p>		

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							Fi zone' for practice staff and the public		