



# NHS High Weald Lewes Havens CCG

## Improved Access in Primary Care

### Summary

This paper sets out the progress towards delivering Improved Access to Primary Care in HWLH CCG area

### Introduction

NHS England set out in the GP Forward View that CCGs would be expected to work at scale to provide improved access collectively, in primary care access hubs. An initial deadline of 1 April 2019 for 100% mobilisation was issued, with 50% mobilisation by 1 October 2018. In February 2018, this timescale was amended to 100% mobilisation by 1 October 2018.

NHS Operational Planning and Contracting Guidance 2017-2019 provides detail of what CCGs need to provide. Specific requirements include the following

- Weekday provision of access to pre-bookable and same day appointments to general practice services in evenings (after 6.30pm) to provide an additional 1.5 hours a day.
- Weekend provision of access to pre-bookable and same day appointments on both Saturdays and Sundays to meet local population needs.
- Provide robust evidence, based on utilisation rates for the proposed disposition of services throughout the week.
- Appointments can be provided on a hub basis with practices working at scale.
- A minimum additional 30 minutes consultation capacity per 1000 population, rising to 45 minutes per 1000 population. The guidance also states that CCGs will be required to secure services following appropriate procurement processes.

### Progress to date

A Patient Survey, with input from two Patient Participation Groups, was sent to all householders in HWLH in October 2017, which informed a project plan and service specification was developed and agreed in January 2018. Following a procurement process, a provider (Care Unbound, a subsidiary of HERE) was appointed and the CCG is currently in contract negotiations with them to deliver the service across the CCG area from 1 October 2018. This will be delivered from a minimum of 4 hubs in line with the national requirements. A full communications plan is being prepared to inform patients of the new service; and how it can be accessed.



## Potential risks

The committee should be aware that delivery of the service has featured on the CCG risk register for some time, due to a number of reasons as follows

- Length of procurement. Given the size of the contract (c.£6m over 5 years), NHSE advised the CCG to go to procurement. This process was pressurised when the initial call for bids resulted in only one bidder passing through the initial procurement stage. Reflecting on the lessons learned from the Patient Transport Service procurement, the decision was taken to go out to tender again. This has resulted in a contracted mobilisation phase that presents challenges to the provider.
- Data Sharing. The national requirements include a need for the Improved Access service to access and add to the patient record. This means the successful bidder needs to agree separate data sharing agreements with each practice in HWLH.
- Workforce. HOSC will be aware of the current workforce problems throughout the NHS, which includes General Practice. Practices across HWLH have reported difficulties for some time in recruiting medical and nursing staff.

## Mitigations

The CCG is taking a number of actions to mitigate against the risks, including the following.

- A day by day mobilisation plan has been agreed and is being reviewed weekly by the CCG and provider
- An agreed Data sharing protocol, based on good practice in Brighton and utilised by the same provider with practices there, has been circulated with all HWLH practices. Additional support has been agreed with the STP digital lead to ensure GPs and patients can feel confident that their data is secure.
- The provider is in negotiations with GP practices; Sussex Community NHS Foundation Trust; and South East Coast Ambulance Service NHS Foundation Trust to ensure enough GPs and support staff are in place to deliver the service.

## Conclusion

The timetable for delivering Improved Access has been ambitious, and risks to delivery remain. Mitigating actions are in place, and the CCG is working with the provider to ensure every effort is made to deliver the service by the 1 October deadline. However clinical safety and data protection remain paramount, and the CCG will not compromise these for this to be achieved.