

HOSC Report – NHS High Weald Lewes Havens CCG update report on delegated primary care commissioning

NHS High Weald Lewes Havens Clinical Commissioning Group (NHS HWLH CCG) was one of the first wave of CCGs to take on delegated co-commissioning, and one of only two CCGs in Surrey, Sussex and Kent to assume this role in 2015.

As required in the Delegation Agreement, HWLH CCG established a Primary Care Commissioning Committee (PCCC), constituted in accordance with the guidance issued by NHS England to oversee and govern the commissioning duties. The CCG appointed a new additional Governing Body lay member with responsibility for Primary Care, who was established as Chair of the PCCC committee.

The CCG also successfully appointed a Primary Care Contract Manager and Primary Care Support Officer. These two roles were considered fundamental for the CCG to provide an enhanced delegated commissioning service for GP practices, supporting and ensuring the contractual requirements and responsibilities of practices to provide Primary Care services for the patients in the CCG.

The first three months of the handover was a period of 'shadowing', with NHS England providing support to the CCG for the contracting and commissioning functions. This shadowing continued into the second quarter, but with reduced input from NHS England. The handover of co-commissioning responsibility included the transfer of all relevant contractual documentation, policies and procedures, required from NHS England to the CCG. These documents included the GMS and PMS contracts for all contractors (GPs and GP partnerships), together with the Standard Operating Procedures, enabling the smooth transition of delegated functions and thus no disruption to services provided to patients or GP practices

One of the first actions undertaken by the newly appointed Primary Care Contract team was to conduct a round of practice visits, assessing and confirming full compliance to the NHS contract and ensuring awareness and preparedness for implementation of contract changes to be made in 2015/16. In addition the team started to collect key practice level data relating to practice size, location, condition and CQC compliance, as well as mapping workforce information to identify a baseline regarding lead GP partner's, salaried GPs, practice manager and nurse establishment gaps in order to develop a better understanding of the risks around primary care workforce, quality and estates.

The objectives and benefits of delegated commissioning originally set out by the CCG were Improved Strategic fit with overall plans; better alignment between community services and primary care planning and delivery; and as a result more effective investment in primary care.

The CCG has made good progress these objectives, having identified primary care as a key priority workstream for the 2016/17 operational plan; developed plans for Communities of Practice locality based planning involving primary care and the new community services provider; and investing in additional prescribing and roving GP support for General Practices.

Specific pilots and initiatives introduced by HWLH CCG to improve the services provided by General Practices for patients include the following:-

- The Pharmacy Workforce Pilot. This pilot project blends both clinical focus and optimisation of drug choice for patient and financial benefit. The 12 month pilot will have the option to be continued if benefits for patients, GP capacity and finances are demonstrated.
- The Practice Connect Worker Pilot aims to introduce and test a social prescribing model to targeted GP practices in the Newhaven and Peacehaven area. The role primarily aims to improve support for people with long term conditions, those at high risk of developing long term conditions or who are socially isolated through improved signposting to appropriate services.
- PCCC reviewed a new Practice Performance Dashboard to monitor information to assist with primary care commissioning by providing quality and performance information in a single integrated place. The dashboard pulls together a range of data and information and aims to help identify positive trends, best practice and areas for improvement. The dashboard includes NHS England measures, Quality Outcome Framework information, CQC domains and National measures.

A further role for the CCG under delegated co-commissioning involves the commissioning and procurement of Primary Care medical services. In September 2015 a single-handed contractor in Peacehaven submitted his resignation of a GMS contract. Options for the future care of the patients from this practice were considered, and an appraisal of the local situation conducted. As part of the options appraisal, discussions were held with local practices to investigate the possibility and feasibility of a partnership or merger with the resigning GP, together with the options of procurement of new GP contract or dispersal of patients.

Patients and stakeholders were informed of the resignation, and invited to submit comments on the future of the practice, which were considered as part of the options appraisal. Discussions with local practices indicated the potential for patients to be dispersed and thus ensure the continued availability of primary care services for patients in Peacehaven.

The CCG provided on-going patient and stakeholder correspondence to ensure regular updates for all, and deliver a package of support and assistance to practices to facilitate the registration of patients through a number of registration sessions held to provide patients with advice and guidance.

The CCG Medicines Management team also initiated additional support to the practices to help manage the influx of patients by facilitating new patient checks and medicines reviews.

The knowledge the CCG had regarding the demographics of the Peacehaven area and GP membership, provided good insight into the challenges and issues

surrounding the closure and proved invaluable in the management and dispersal of patients to local practices.

Another key area of focus in the forthcoming year is to review and update the CCG Estates Strategy so that it continues to reflect the needs of the population demographics and demand, and to support practices to ensure their estate is fit for purpose. To facilitate this, the CCG commissioned a review of all primary care estate to assess its current compliance with relevant legislation; and ability to respond to anticipated increased in patient numbers in the medium and long term. The results of this audit has enabled the CCG to prioritise those practices which would most benefit from accessing the Primary Care Transformation fund and/or other sources of capital funding using a transparent and equitable process. In addition, this strategy and funding will enable the CCG to incorporate the Communities of Practice initiative into future plans, assisting in bringing the Five Year Forward View into reality.

Finally, to further support the development and redesign of primary care to increase resilience and future sustainability, the CCG has reorganised its senior management team and identified lead members to work with GPs and individual Communities of Practice to progress planning and development of local pathways, new ways of working, and workforce solutions.

HWLH CCG continues to perform the delegated functions in a manner to ensure compliance with NHS England's statutory duties in respect of the Delegated Functions and to enable NHS England to fulfill its Reserved Functions.

NHS High Weald Lewes Havens CCG
March 2016