

**WOLVERHAMPTON CCG
PRIMARY CARE COMMISSIONING COMMITTEE
Tuesday 5th December 2017**

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| TITLE OF REPORT: | Primary Care Operational Management Group Update |
| AUTHOR(s) OF REPORT: | Mike Hastings, Director of Operations |
| MANAGEMENT LEAD: | Mike Hastings, Director of Operations |
| PURPOSE OF REPORT: | To provide the Committee with an update on the Primary Care Operational Management Group. |
| ACTION REQUIRED: | <input type="checkbox"/> Decision <input checked="" type="checkbox"/> Assurance |
| PUBLIC OR PRIVATE: | This report is intended for the public domain. |
| KEY POINTS: | <ol style="list-style-type: none"> 1. There is good news about leases for practices in NHSPS premises with new proposals from Property Services. 2. Local GPFV work continues apace with many new initiatives for GPs in the City. 3. Improvements are being made to Team W events to ensure as wide an audience as possible can be reached. |
| RECOMMENDATION: | To provide the Committee with an update on the Primary Care Operational Management Group. |
| LINK TO BOARD ASSURANCE FRAMEWORK AIMS & OBJECTIVES: | |
| 1. Improving the quality and safety of the services we commission | The Primary Care Operational Management Group monitors the quality and safety of General Practice. |
| 2. Reducing Health Inequalities in Wolverhampton | The Primary Care Operational Management Group work with clinical groups within Primary Care to transform delivery. |
| 3. System effectiveness delivered within our financial envelope | Operational issues are managed to enable Primary Care Strategy delivery. |



1. BACKGROUND AND CURRENT SITUATION

- 1.1. The Primary Care Operational Management Group met on Tuesday 21st November 2017 and this report is a summary of the discussions which took place.

2. MAIN BODY OF THE REPORT

2.1. Clinical Reference Group

The notes from the Clinical Reference Group were reviewed, prompting discussion about a proposed 'QOF+' type scheme and the need for further Aristotle training to support risk stratification.

2.2. Primary Care Matrix

A review of the Primary Care Matrix identified issues around the temporary closure of the Ruskin Road branch practice and the planned closure of Dunkley Street branch practice by the end of November.

2.3 IT Migration

IT Migration has highlighted some issues with the Docman 10 document management system when merging practices. The CCG IM&T team are working with Docman to mitigate any issues and have a plan for planned mergers.

2.4 Estates Update

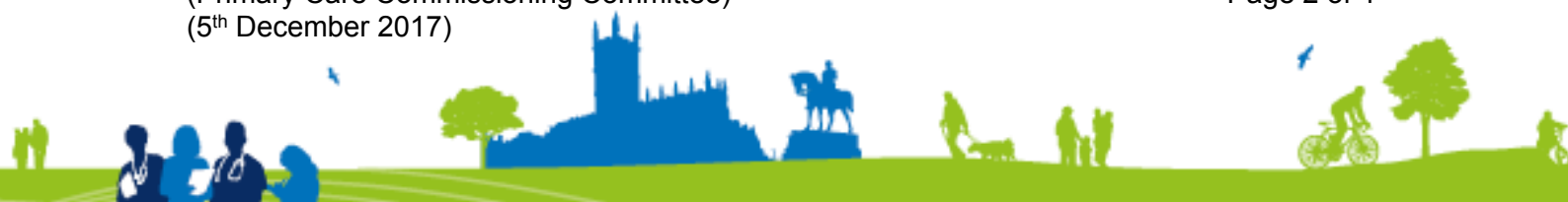
An ongoing issue whereby practices occupying NHSPS premises have been asked to sign new leases that they are not comfortable with looks to be reaching a satisfactory conclusion with the introduction of a new type of lease from NHSPS. Work is continuing to progress ETTF projects before the end of the financial year.

2.5 Quality Update

The Quality team are creating a new working group to work with practices to improve the number of Friends and Family returns. This feedback is very important so that patient's voices can be heard and improvements made based upon the responses. The team are currently dealing with 18 quality matters and keep the Operational Management Group apprised of progress with these.

2.6 General Practice Forward View

The General Practice Forward View programme of work continues to deliver, working on extended Winter opening via practice groupings; workforce development are launching a website to attract staff to Wolverhampton; online consultations are being introduced, primarily in Care Homes; two way texting is being implemented to improve patient feedback to practices.



2.7 CQC Update

CQC gave an update on the practices they have visited and those that are planned – all outcomes are published on the CQC website.

2.8 Team W Training Events

Following a review of the Team W training events for clinical staff a number of changes are due to be introduced including a change to the timing of the meeting and a plan to publish the meetings online for web access following the events.

3. CLINICAL VIEW

- 3.1. A clinical representative from LMC attends the meetings and gives views on all discussions.

4. PATIENT AND PUBLIC VIEW

- 4.1. Patient and public views are sought as required.

5. KEY RISKS AND MITIGATIONS

- 5.1. Project risks are reviewed as escalated from the programme.

6. IMPACT ASSESSMENT

Financial and Resource Implications

- 6.1. The group has no authority to make decisions regarding Finance.

Quality and Safety Implications

- 6.2. A quality representative is a member of the Group.

Equality Implications

- 6.3. Equality and Inclusion views are sought as required.

Legal and Policy Implications

- 6.4. Governance views are sought as required.

Other Implications

- 6.5. Medicines Management, Estates, HR and IM&T views are sought as required.



Name: Mike Hastings
Job Title: Director of Operations
Date: 29th November 2017

REPORT SIGN-OFF CHECKLIST

This section must be completed before the report is submitted to the Admin team. If any of these steps are not applicable please indicate, do not leave blank.

| | Details/ Name | Date |
|---|--------------------------|-----------------|
| Clinical View | N/A | |
| Public/ Patient View | N/A | |
| Finance Implications discussed with Finance Team | N/A | |
| Quality Implications discussed with Quality and Risk Team | N/A | |
| Equality Implications discussed with CSU Equality and Inclusion Service | N/A | |
| Information Governance implications discussed with IG Support Officer | N/A | |
| Legal/ Policy implications discussed with Corporate Operations Manager | N/A | |
| Other Implications (Medicines management, estates, HR, IM&T etc.) | N/A | |
| Any relevant data requirements discussed with CSU Business Intelligence | N/A | |
| Signed off by Report Owner (Must be completed) | Mike Hastings | 29.11.17 |

