



GP Resilience Programme in the West Midlands

Draft Proposals

Version number: 1.1

First published: 19 August 2016

Updated:

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1 Document Purpose

This document sets out the DRAFT proposals for the GP Resilience Programme in the West Midlands.

The funding can be used to:

- Expand local DCO team capacity and capabilities to provide support directly to practices to ensure ability to respond quickly is in place
- Commissioning support via contracted third party supplier(s) to work with practices where additional expertise is required
- Backfill (or other costs) for individual GPs and other practice team members to work to provide peer support to practices locally, providing 'sender' practices have additional capacity to offer such support
- Section 96 Support and Financial Assistance where there are clear and exceptional opportunities to support practices directly in delivering the menu of support

2 The Proposals

2.1 Background

General practice is the bedrock of the NHS, but it is under pressure from rising demand. Patient satisfaction remains high, with 85.2% of the public reporting a good experience of general practice services in the most recent survey, but this masks variation and difficulties in some parts of the country in accessing convenient appointments.

GPs have to deal with difficult issues of increasing demand and rising expectations, and this is in the face of the increasing complexity of the patient workload that they see.

The General Practice Forward View, published on 21st April, sets out NHS England's investment and commitments to strengthen general practice in the short term and support sustainable transformation of primary care for the future. It includes specific, practical and funded actions in five areas – investment, workforce, workload, infrastructure and care design.

We recognise that the General Practice Forward View Is not just about sustaining general practice. It is about laying the foundations for the future, so that general practice can play a pivotal role in the future as the hub of population-based health care as envisaged in the New Models of Care programme. Working at scale, with high uptake of new technologies and using the breadth of skills and capabilities across the medical and non-medical workforce, general practice will be better geared to support prevention, to enable self-care and self-management as part of creating a healthier population and a more sustainable NHS.

This document outlines the NHS England West Midlands proposal for the implementation of the GP Resilience Programme.

Comments are invited on this document until Friday 2nd September 2016.

2.2 National Policy

The nationally developed Practice Resilience Programme (PRR) allows DCO teams to work with constituent CCGs, LMCs representatives and RCGP Faculties and Regional Ambassadors to ensure that the most appropriate package of support is available promptly in order to support practices.

Funding is in place to support the programme over the next four years. The funding allows DCOs to invest in support arrangements over the medium term and working with partners to ensure that funds are directed to areas of highest need across the footprint. As part of the overall £40m investment, NHSE West Midlands' allocation is overleaf.

Regional teams	Reg. Population (April 2016)	Indicative Allocation FY16/17	Indicative Allocation FY17/18*	Indicative Allocation FY18/19*	Indicative Allocation FY19/20*	Total Programme Allocation
West Midlands	4,433,101	£ 1,230,738	£ 615,369	£ 615,369	£ 615,369	£ 3,076,845

Nationally the anticipated areas of support (referred to as 'menu') include:

- Rapid intervention and management support for practices at risk of closure
- Change management and improvement support to individual practices or group of practices
- Diagnostic services to quickly identify areas for improvement support.
- Specialist advice and guidance e.g. Operational HR, IT, Management, and Finance
- Coaching / Supervision / Mentorship as appropriate to identified needs
- Practice management capacity support
- Coordinated support to help practices struggling with workforce issues

The funding can be used to:

- Expand local DCO team capacity and capabilities to provide support directly to practices to ensure ability to respond quickly is in place
- Commissioning support via contracted third party supplier(s) to work with practices where additional expertise is required
- Backfill (or other costs) for individual GPs and other practice team members to work to provide peer support to practices locally, providing 'sender' practices have additional capacity to offer such support
- Section 96 Support and Financial Assistance where there are clear and exceptional opportunities to support practices directly in delivering the menu of support

2.3 West Midlands Proposals

The West Midlands Primary Care Team has an excellent track record in supporting Practices in difficulties as well as working with CCGs as part of the Primary care Hub arrangements to ensure arising issues are managed and addressed.

Commissioning support via contracted third party supplier(s) to work with practices

- NHS England West Midlands had previously engaged PCC to provide support under the Vulnerable Practices programme - this remains available for the GPRP.
- NHS England is centrally procuring a framework of support packages form a range of providers, which will be in place for October 2016. This will speed up local ability to secure provider support for GP practices (and other primary care providers).
- We will use this framework as it will enable us to access solutions quickly.

- Backfill (or other costs) for individual GPs and other practice team members to work to provide peer support to practices locally, providing 'sender' practices have additional capacity to offer such support
 - NHS England (WM) will procure additional ad-hoc clinical support as needed to provide advice and guidance in addition to managerial support.
 - We recognise the power of peer support and using the funding flexibly to secure practical workforce support via establishment of local 'pools of expert peer support' by funding key elements of GP costs (e.g. General Medical Council fees and appraisal toolkit fees) in return for securing a minimum clinical commitment to work to support practices.
- Section 96 Support and Financial Assistance where there are clear and exceptional opportunities to support practices directly in delivering the menu of support
 - We will work closely with partners to ensure the most appropriate levels of support are offered to those very challenged practices.
- Expand local DCO team capacity and capabilities to provide support directly to practices to ensure ability to respond quickly is in place
 - We propose to strengthen the GP Medical Services team in NHS England to provide greater support to practices and CCGs in times of crisis.
 - The ability of the team to respond rapidly to challenging situations and support CCGs when required has proven crucial to mitigating impact on patient care. Our ability to respond where input is most needed and flex resources accordingly is key to a positive outcome for contractors and patients across the West Midlands.
 - The additional resource enables us to dedicate a Primary Care lead manager for every STP footprint. This will provide greater capacity to manage issues at a local level, and will support Primary Care engagement in the longer term sustainability and transformational agenda in every STP.

2.4 Governance

NHS England West Midlands will establish a *GP Forward View Delivery Group* with a number of sub-groups. The overall group will be chaired by an NHS England (West Midlands) Director. Representations will be sought from other NHS England Directorates, Health Education England, the LMCs and the CCGs. It is expected that at this group, there will be one representative for the CCGs and one representative of the LMCs.

A number of sub groups will be established, including a sub group focusing on the delivery of the GP resilience programme. This will involve all CCGs and local LMCs with conversations about their local needs and issues. This group will meet monthly.

The West Midlands GP Resilience Delivery Group will have the flexibility to quickly identify practices for support under the GPRP by selecting:

- Practices assessed initially but not subsequently prioritised for support
- Practices offered support but who did not take up the offer
- Groups of practices where practice based assessments identify a need in a particular locality or place (e.g. support offered to a group of 5 practices in a locality because 3 practices are struggling and there is a risk of the domino effect impacting other practices unless support targeted at scale).

Decisions about the support will be made on the basis of local intelligence and decisions as to where the greatest impact can be achieved using the available resources – we will manage this through the Transformation Board. We propose to refresh the assessments on a regular basis to ensure support is directed as most appropriate.

More information on the GPFV governance structure in the West Midlands will be available at the start of September.