



# Report of Milestone Review Board : Assurance Report Quarter 1 2019/20

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# Work Programme(s) Overview

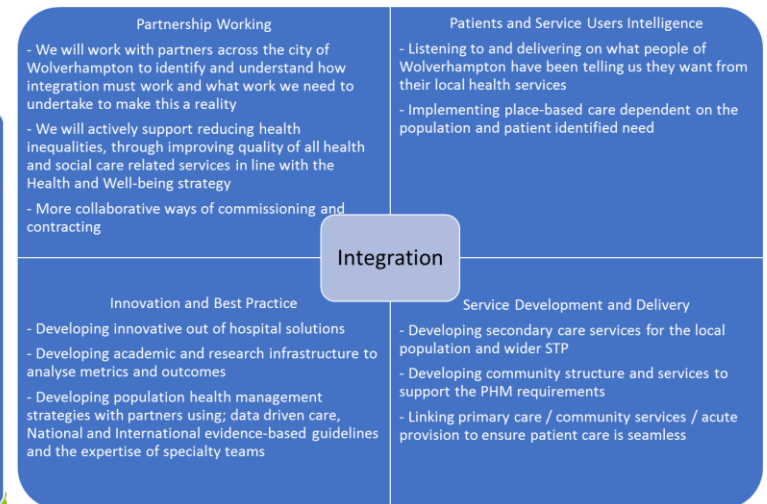
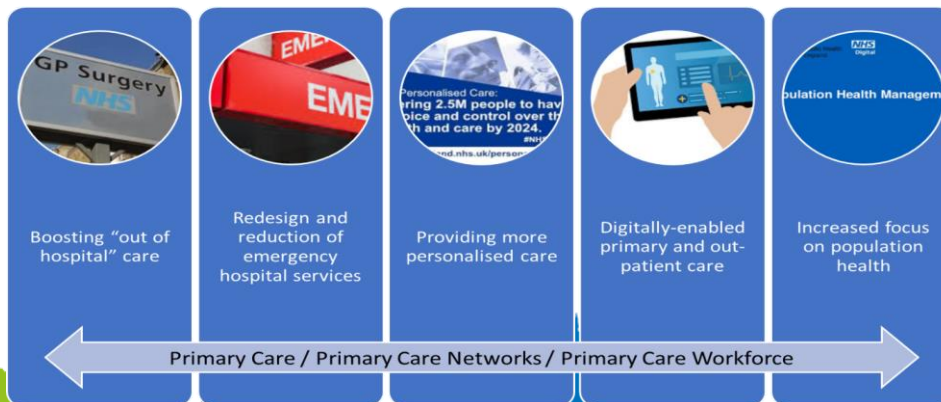
- Primary Care Strategy
- Work Programme Progress
- Primary Care Networks  
Assurance statement
- STP PC Overview
- GP Retention



# Primary Care Strategy



- Strategy is being developed as a response to the Long Term Plan, and the challenges faced by Primary Care.
- Strong focus on development of PCNs and integration
- Feedback has been sought on the first draft
- Amendments have been made based on feedback



# Work Programme - Progress

	Q1 Progress	Q2 Actions
Primary Care Strategy	Care navigation is currently being evaluated, with cohort 3 pathways being sought	Staff training and development in care navigation will take place
	Resilience programme has been circulated; process agreed by STP PC board; 3 bids to be submitted	Submit bids for approval, dissemination and coordination of funds
	Access evaluation of 2018/19 is complete, utilisation is consistently growing.	inception of additional access minutes and DES requirements will be closely monitored. Advertisement campaign to be reinvigorated
	Primary care dashboard is in place; discussions held at STP level for the development of data for PCN use	Refresh data and present to PCNs, with feedback on additional requirements
	Full sign up of QOF+ scheme	development group to continue to meet to discuss issues and review performance
	Commissioning intentions road show planned	Commissioning road show sessions held across the city
	Peer review sign up by networks; sessions commenced	work is on-going with RWT to enable dialogue between consultants from the identified specialisms and the networks
	Review of LD health checks action plan taking place development of enhanced health in care homes model	Implementation of refreshed action plan Share with wider stakeholders and identify changes to services including finance
Primary Care Networks	Networks have formalised and applications have been approved. Network meetings are scheduled and are already taking place, CDs are in place, and the DES sign up is complete	Prepare for Network Investment & Impact Fund and additional requirements for cancer care, inequalities & CVD in Q3
	a series of workshops have been held with CDs and WVSC, to map out a model and agreement for SP link workers. Hosted model has been agreed	PCN sign off of agreement advertisement and recruitment of staff
	Recruitment of clinical pharmacists is taking place, payment process is agreed	roles to commence
	Des sign up (30 min/1000 patients) is complete. 5/6 networks have provision in place from 1st July	VI to commence from August
	discussions held at members meeting regarding enhanced health in care homes and network level delivery of proactive ward rounds	wider system is being reviewed, business case to be based on integration within wider structure and the skill mix within networks
	network development plans are being discussed within network meetings	confirm areas of development and support required to enable this



# Work Programme - Progress

## Primary Care Digital Transformation

Q1 Progress	Q2 Actions
NHS111 sign up is complete, with one outlier. Phased installation is planned	Implementation up until September at practice level National solution to hub integrations anticipated
Appointment utilisation tool is in place across all practices	practice training to take e place monitoring of usage and scoping of interoperability with reporting requirements feedback any issues to NHSE
GP online triage is now in place in 70% of practices; utilisation continues to grow	monitor practices where utilisation is low review hub solutions roll out into remaining practices
Video consultation sign up is on-going; 12 practices have equipment installed	Continuing to engage with practices, and support practices to engage with patients
the national app is now live, potential to add other links locally is being explored	continue to develop local links and content
Proxy access has been released for Patient Online	pilot for Pennfields to get proxy access for care home staff to begin
Docman 10 deployment is on-going	due for completion in this quarter
Mjog 2 way texting usage continues to rise, along with the number of cancellations received via this method.	monitoring to continue
Preparations for pennfields and BUV migration is in place	Migration of Pennfields and BUV scheduled

## Contracting

development of wound care model continues	Business Case presented to BIC Programme Board detailing financial split/ complex and simple definitions
Post payment verification taking place for QOF and enhanced services	practice visits to be undertaken
PCN submission, Des sign up and extended hours sign up all complete	Assurance Framework developed. Contract review visit schedule and content developed





# Work Programme - Progress

## Workforce and Development

STP Workforce strategy has been included in the new STP PC strategy	continue to work through strategy requirements with TFG
Co-design of material to promote Primary Care as a place to work - NHS Careers etc. has taken place	New SLA to be put in place for training hub provision
practice nurse strategy approval process has been happening across the STP	Launch of the strategy set for September
PN retention initiatives are being scoped	launch of retention initiatives
Confirm PN Education Programme for 2019/20 & dependency on Lead Hub	Nursing associate apprentice applications and selection of candidates to take place
PC training and development plan has been developed	continue to identify training needs, especially around PCN development, leadership and support for key staff
5 candidates for HCA apprentice roles are completing the process of application	further work around professional roles to address gaps in staff teams
scoping of non clinical apprentices is complete and included in PC training and development plan	encourage practices to pilot the roles
Discussions around MH therapists in networks have taken place	Workshop to be held to scope agreement between provider and network
Retention programme is in place across the STP	continue to promote and encourage take up
PLT for PMs has been held, in line with the requirements of the PM support offer	further sessions agreed and scheduled



# Primary Care Networks

NHS England Assurance Statement 2019/20	Q1 Progress	Q2 Plans
Actively support the establishment of PCNs : every practice in England is part of a PCN (30-50,000 population) 100% coverage by 30 June 2019 (latest)	Members meeting held with discussions taking place. Guidance circulated to support inception of Networks	Report to PCCC & GB in September on progress
Support the introduction of any nationally-agreed contract arrangements for PCNs, ensuring that community services are configured in line with PCN boundaries.	Social Prescribing Model developed Community Services Workstream confirmed	Social Prescribing Model confirmed in SLA (hosted by WVSC) Community Services Workstream Meeting to be held
Provide a minimum of £1.50 per head of financial support to PCNs for their management and organisational development. This investment should start in 2019/20 and continue each year until 31 March 2024	DES Applications/Panel NHSE Assurance Statement DES Sign Up & Contract Variations via Network Agreements & Contracts Team	Process for payments to be agreed Claims, monitoring and payments to commence
Support PCNs in their development and ensure they are practically supported to access the PCN Development Programme by 31 March 2020.	Draft Prospectus & offers received/shared with Networks.	All PCNs have EOIs for TFC Programme TFC Diagnostic assessments held
Ensure that PCNs are provided with primary care data analytics for population segmentation and risk stratification based on national data, complemented with local flows, to allow them to understand in depth their populations' health and care needs for symptomatic and prevention programmes including screening and immunisation services by 1 July 2019 at the	Meeting with BI leads to review extent of provision including gaps (Wolves SA completed)	National Dashboard Released Q1 PCN Dashboard (CCG) Issued including Community Services & Mental Health Data
Ensure that PCNs work together including at place level to ensure they play a full role in improving services commissioned and provided at that level, including urgent and emergency care services, and ensure every PCN is working to implement the comprehensive model for personalised care.	Group Leads Meeting will change to CDs Meeting from July CD Terms of Reference considered and finalised, prepare for new format meeting from July	Publish Network Development Plans 1 July 2019
Ensure that the delegated budgets received are used to support the development of all practices in the context of PCN development, <b>with a detailed local plan published by 1 July 2019 showing that every practice is actively engaged and all activity is completed by 31 March 2020</b> (ensuring delivery of at least two high-impact actions set out in the GPFV including	All practices have achieved more than 2 high impact actions, and reported back to NHSE. All PCNs have confirmed EOI in the PCN development programme	Network Development Plans in place by 1 July 2019 and enacted throughout quarter
Ensure that the local practice development plans continue to identify those practices who need more intensive and immediate support to stabilise, build their resilience and become sustainable. 75% of 2019/20 sustainability and resilience funding (allocated by NHS England) must be spent by 31 December 2019, with 100% of the allocation spent by 31 March 2020.	Resilience funding has been confirmed, with the process defined and agreed at GPFV board	Identify practices requiring support CCG to submit application STP Assurance Report to NHS England confirms update on each allocation/scheme.
Continue with commissioning and deployment of 180 pharmacists and 60 pharmacy technician posts (funded by the Pharmacy Integration Fund, with support from NHS England Regional Independent Care Sector Programme Management	Coverage confirmed, gaps in provision identified and network agreements in place	Role Reimbursement Scheme Commences
Work with HEE to ensure robust training programmes are in place to adequately support workforce plans.	Training hub review concluded; options for continuation of provision presented to board	TNA to take place prioritisation of delivery and funding to be secured from board monitoring to take place via the Workforce TFG
Continue providing extended access to general practice services, including at evenings and weekends, for 100% of the population. This must include ensuring access is available during peak times of demand, including bank holidays and	Group level access arrangements in place, NHS Contracts agreed.	data collection and monitoring ensuring 100% coverage and minimum utilisation
Integrate extended access with other services at scale to deliver value for money and efficiencies and support compliance with national core requirements to maximise capacity, availability and utilisation of appointments for 100% of the population.	Practices and Networks have addressed the challenge of providing required times (45min and 30 min DES) delivery plans are in place for 1st July commencement	Go live 75 minutes per 1,000 patients delivered by each Network [RWT 1 August 2019] Q1 Data Collection & Submission
Workforce (Primary Care) Strategy - network data refresh and workforce plan - extends to review & appraisal with member practices and employing agency for any new roles within the network.	workforce dashboard review NWRT replaced CCG dashboard	Review March Baseline Data in Dashboard Review of impact Recruitment & Retention Initiatives are having
Patient engagement as per DES	PPG chairs updated on Networ Des and changes to groups Primary Care Strategy engagement events held, questions and feedback reviewed	PCNs engage with PPGs at practice & network level Network priorities agreed with PPGs Engagement priorities / projects commence
timeline etc also includes change of CD	PCN Development report confirms role of PCCC	Network change notifications to be taken to PCCC if any





# STP PC Overview

## STP PC Strategy

Confirmation received from NHSE that the STP Primary Care strategy has been received and signed off.

## Projects

- Four pillars
- First 5 Network
- Welcome Back
- Wise 5
- Annual GP Conference
- Accelerator programme
- GPN Scheme
- Resilience Fund
- Pharmacy Network



# GP Retention

The GPRISS Project was successful in developing and delivering a number of GP retention schemes, providing GPs with personal support, support to practices and wider system support/improvements to achieve the purpose and aims of the project.

33% of GPs STP wide from each CCG (Dudley, Walsall Sandwell & West Birmingham and Wolverhampton) enrolled on one or more of the schemes. Across all schemes 324 expressions of interest were received; 218 actual applications; and 207 approved applications.

The project is being continued during 2019-20 under the Primary Care Workforce Retention Project as part of the organisations GP Forward View work programme and strategy. Post GPRISS project BCWB STP will continue to invest in ways to support not only GPs but the wider general practice workforce, including practice nurses, who might otherwise leave the profession, clinical pharmacists, and is encouraging local systems to act by working with practices, and identify ways to encourage and support general practice workforce to remain in practice.



Portfolio Careers



Pre-Retirement



Mentoring



First 5 Networks



General Practice  
Nurses Network



# Commissioned Services

- **Contract & Quality Review Arrangements**
- **Social Prescribing**
- **Primary Care Counselling**
- **The Sound Doctor**
- **Care Navigation**
- **Advice and Guidance**
- **Online Consultation / Triage**
- **Workflow Optimisation**
- **Home Visiting Service**



# Contract & Quality Review

Below is the schedule for contract and quality review arrangements.

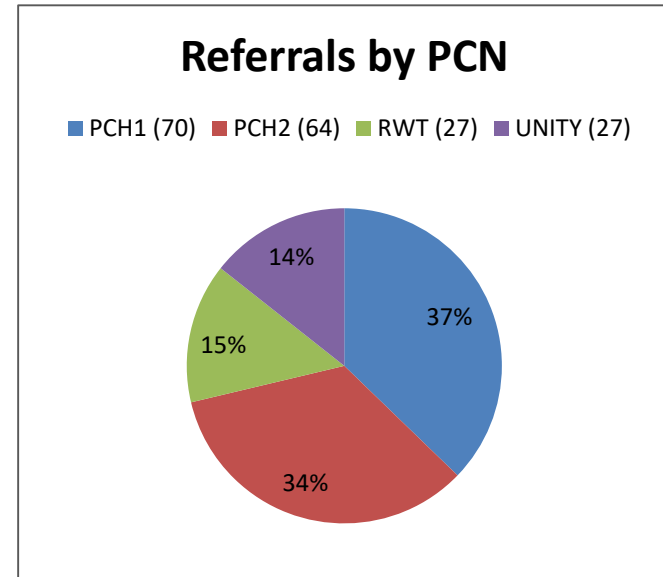
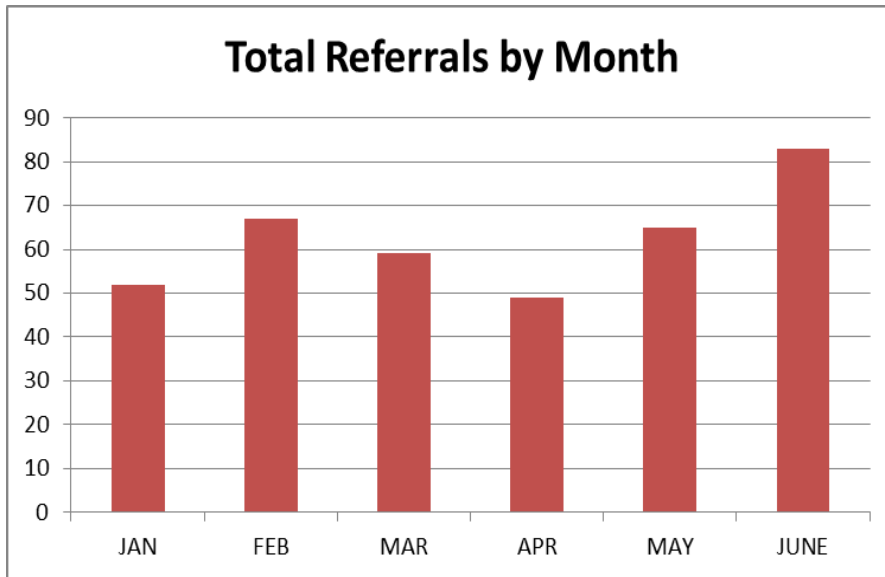
<b>Contract</b>	<b>Provider</b>	<b>Monitoring regime</b>	<b>Responsible person</b>	<b>Dates of meetings</b>
<b>Special Access Scheme</b>	East Park Medical Practice	Quarterly meetings & review	Gill Shelley	October, February April
<b>Out of Area patient registration Scheme</b>	Newbridge Medical Centre	Quarterly telephone review	Gill Shelley	October, February , April
<b>Primary Care Counselling Service</b>	Relate	Quarterly meetings	Mandy Grewal	September, November, January, March
<b>Social Prescribing</b>	Wolverhampton Voluntary Sector	Monthly data submission Bi monthly monitoring meeting	Sharon Nisbett & Helen Tranter	September, November, January, March
<b>Information and education for patients with long term conditions</b>	Sound Doctor	Quarterly review	Jo Reynolds	September, November, January, March



# Social Prescribing

Highlighted points from Q1 data:

- There were **197** referrals in Q1; 101 were from GPs.
- 51% of clients over 60, 49% 18-60 years of age.
- 70% of referrals were for women, 30% for men.
- Top referrers are Wolverhampton Total Health/ PCH1 practices - Newbridge Surgery, Whitmore Reans Health centre & Duncan St Primary care centre.
- Cumulative referral status for the service from May 2017 to date is 1088 referrals.
- More referrals were made in June than any month this year.



# Social Prescribing Link Workers

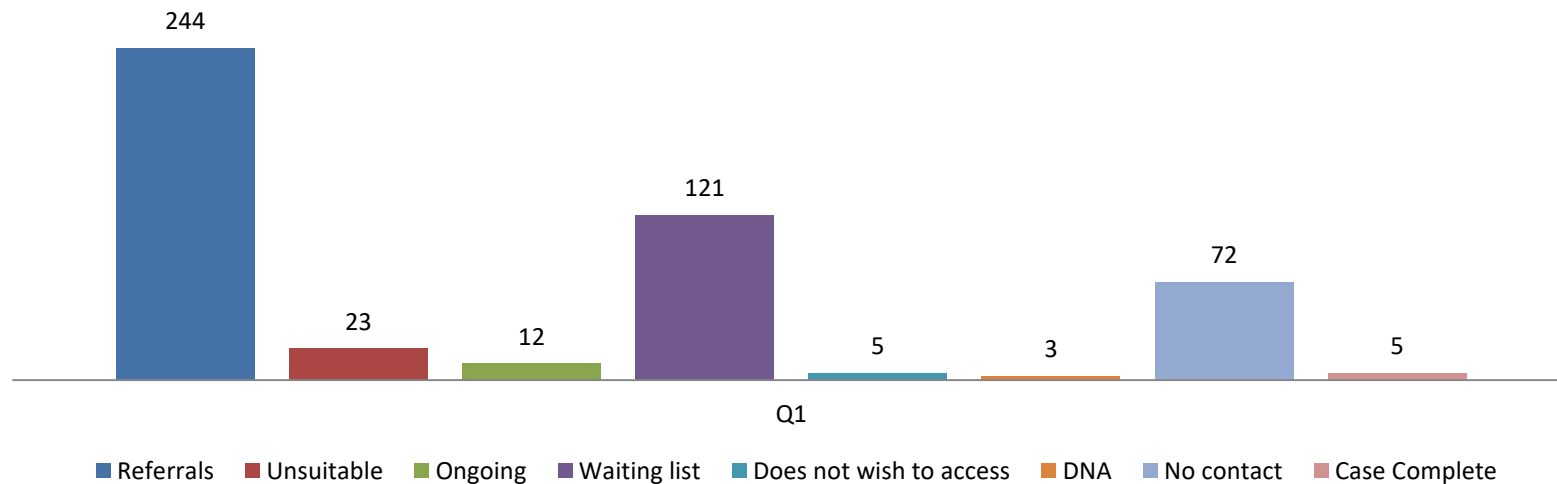
## Social prescribers in PCNs

- Wolverhampton Voluntary Sector Council (WVSC) will employ the Social Prescribing Link Workers (SPLW) with the understanding that they will then be assigned to a PCN. This is described as a hosted model.
- Throughout Q1 there has been monthly workshops and meetings to progress this between WCCG, WVSC and PCNs
- A MOU has been drafted and is currently being signed off by Clinical Directors.
- SPLW recruitment has been completed and the successful candidates are expected to be in post by the end of September onwards.
- Activity will be appropriately coded at practice level via SPLW(s) in the clinical system. Extracts based on this activity will be used for monitoring purposes, alongside PSIAMs data from the provider. Contract monitoring will take place through the steering group, where each PCN CD will be invited.
- PCN referral target i.e. minimum number of referrals will be set in Q2 for all PCNs to ensure services are fully utilised in line with referral criteria.
- Referral rates will be monitored and discussions will occur with practices identified with low referral rates. Outcomes will be shared with their respective Clinical Director.





# Primary Care Counselling



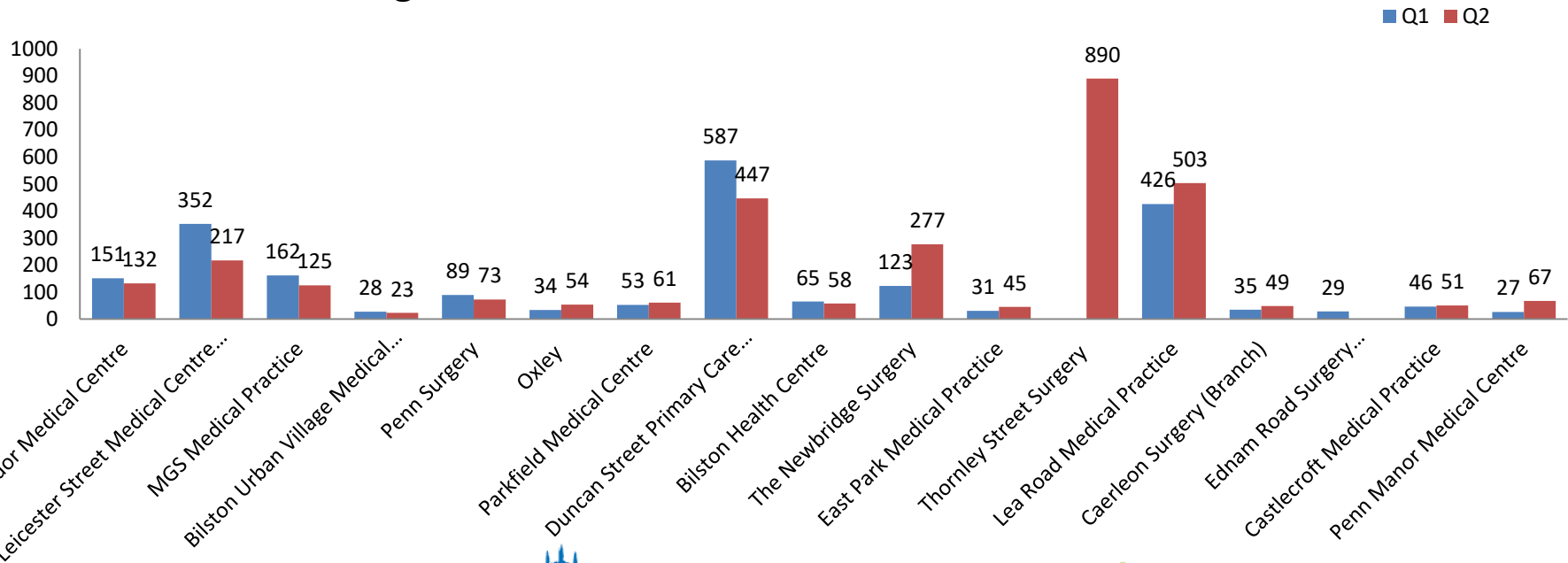
Referrals	There have been 244 referrals in Q1.
Waiting list	There are <b>121</b> patients that were referred during Q1, waiting to be seen which represents 50% of the total referrals. Analysis of the data shows there are still 30 patients from 18/19 Q4 referrals still waiting to be seen. This means the total number of patients on the waiting list at the end of Q1 is actually <b>151</b> .
Q1 wait in service - Range	The longest waiting time is 89 WD / 120 CD which is the maximum time within the quarter with a referral date of 1 <sup>st</sup> of April 2019. The shortest wait time are those who were referred at the end of the quarter.
Access to service time (Time from referral by GP and first attendance)	From 1st April – 1 <sup>st</sup> July the service's average access time is 14 WD (17 CD) from referral to first attendance. The longest response time is 59 WD. The quickest is 1 WD. The data will be analysed further to reveal if there are issues with the recording of data and patient choice, which may be the cause of some of the delays. This will be raised at the next contract review meeting on the 10 <sup>th</sup> September.



# The Sound Doctor

- Videos are to be embedded in the online consultation/ triage system.
- Integration with the patient online app is to be explored, so that patients using the app can access the videos from that point
- The ability to automatically generate text messages upon diagnosis is to be explored
- The Sound Dr to present at Septembers Practice Manager Support Network session to encourage engagement
- Provision to be promoted with GPs and other clinical staff, to ensure all are aware of the ability to text information.
- Training for admin staff on the text messaging system has taken place, to enable confidence in sending the links to relevant patients
- A review of high and low utilising practices is to take place with targeted promotion to those that require it.
- A spotlight on TSD has gone into PCN newsletters
- Dementia content to be promoted as part of Dementia Friendly practices
- Videos to be played on waiting room screens in practices
- Provision to be promoted with carer support groups
- Videos to be included in Care Navigation

## Sound Dr Q1 & Q2 figures

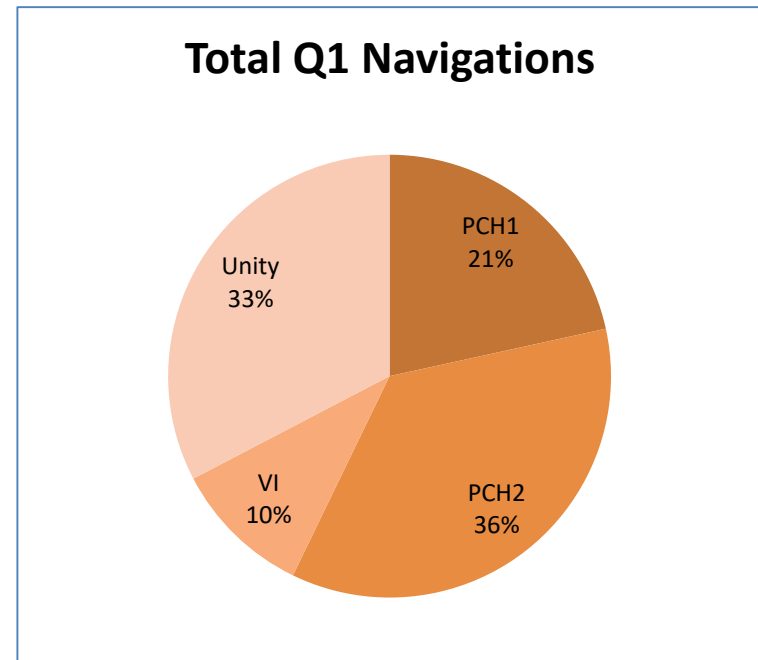
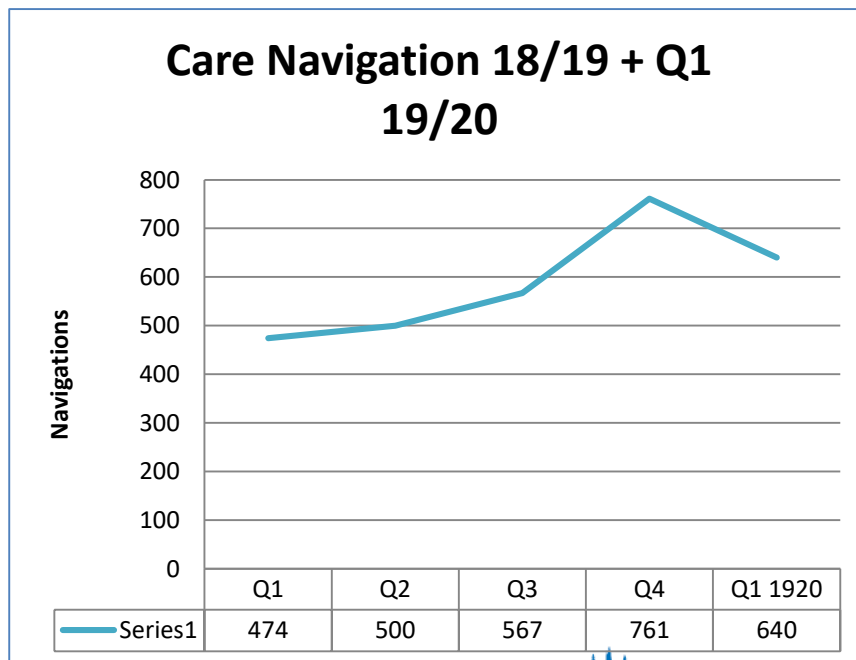


# Care Navigation

Care Navigation was launched in February 2018. All practices have used the template to record navigation of patients. To date there has been **2942 navigations** recorded on the clinical template. In Q1 there have been **640** navigations, which is slightly less than Q4 18/19.

Data revealed a decrease in activity across all practices. As part of an ongoing review, feedback is being gathered via survey monkey to understand experience in practice and how they can be supported further.

There are updates scheduled for September for first contact staff, where they can expect to get a refresh, review feedback and input into Phase 3 scoping. Discussions will be held with practices who have seen a decrease in navigations, and outcomes will be fed back to respective Clinical Director.

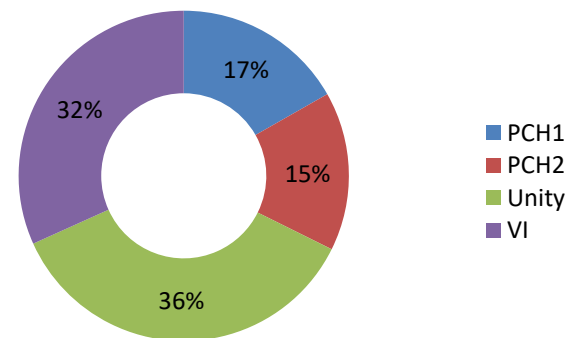


# Choose and Book Advice and Guidance

Clinical Specialty	Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19	Apr-19	May-19	Jun-19
Dietetics	1	0	0	0	0	0	0	0	0	0	1	0	0	0	0
Elderly Care	1	0	0	1	0	0	0	0	0	0	1	3	2	0	0
Endocrine/ Diabetes	2	0	3	0	10	3	0	0	4	7	1	4	4	4	0
General Surgery	1	2	0	1	0	0	0	0	0	0	0	0	0	1	0
Gynaecology	5	2	3	7	2	3	0	0	6	5	3	1	4	3	6
Haematology	9	8	10	6	8	6	0	0	0	9	7	7	8	7	6
Neurology	1	3	0	3	1	1	0	0	1	4	3	1	3	2	3
Orthopaedics	1	0	0	0	2	0	0	0	0	0	0	0	0	1	1
Paediatrics	1	1	5	1	7	1	0	0	4	3	3	2	2	5	1
Plastic Surgery	0	0	0	0	0	0	0	0	1	0	0	0	2	0	0
Respiratory	2	2	0	5	1	1	0	1	3	0	1	0	4	2	0
Urology	4	2	2	3	4	3	0	0	6	2	5	2	5	1	5
<b>Total</b>	<b>28</b>	<b>20</b>	<b>23</b>	<b>27</b>	<b>35</b>	<b>18</b>	<b>0</b>	<b>1</b>	<b>25</b>	<b>30</b>	<b>25</b>	<b>20</b>	<b>34</b>	<b>26</b>	<b>22</b>

- Most requested subjects are Haematology (91) Gynaecology (50) Urology (44) Diabetes (42) and Paediatrics (36).
- Compared to other STP areas, Wolverhampton offers a limited number of specialisms. This is being addressed and the workforce task and finish group continue to scrutinise this data.
- Capacity alerts will be mandated on Choose and Book shortly, with all considered capacity being RAG rated based on wait times.
- Pre-existing relationships between Primary and Secondary Care clinicians will mean that GPs will liaise directly with some consultants.

## Request breakdown by Group (to date)



# Online Consultation

## ***Video Consultations***

There are currently 27.5% of practices live and able to offer video consultations. Roll out of this system continues in line with the engagement plan, and has been included in the engagement roadshow that is currently underway. Practices are contacted on a monthly basis and encouraged to sign up, and supported throughout the process. Currently installed : Poplars, Primrose Lane, Coalway Road, Lead Rd, IH medical, Newbridge, Mayfield, Lower Green, Ashfield Rd, Grove, Fordhouses Medical & Dr Mudigonda's Surgery. All other practices yet to confirm installation. Activity Reporting available from internal clinical system search. All remaining RWT Practices Alfred Squire, Warstones, Thornley Street, West Park Surgery, Dr Bilas (by October).

## ***NHS111***

All Practices but one have submitted completed sign up forms. The Pilot Practices are due to be rolled out shortly, this information will be circulated once available. Interoperability with 111 into the hubs is yet to be resolved nationally- there are updates needed to Adastra system to enable the remote appointment book to be accessed. This is a national problem, which NHSE are aware of and working on. System testing is underway in neighbouring areas. Wolverhampton are ready and awaiting switch over with 111 provider. However due to the number CCGs in the queue, there may be a delay.

## ***Next Steps***

- Digital workstream will ensure roll out of video consultation and online triage to all practices by the end of 2019.
- To Continuation of engagements sessions in and around the City
- PCNs are currently exploring digital first options and will confirm intentions for hub delivery in Q2.
- There is a national consultation underway June-August, and CCG intend on responding.



# Online Triage

## Online Triage

Rollout to practices commenced late 2018 continues . We are currently working with 7 practices to arrange installation for October. Expected uptake trajectory:

- 74% (September)
- 76.1% (November)
- 100% (December)
- Utilisation reports monthly from September
- GPFV Monitoring Tool (Quarterly)

## Patient Access (Patient Online)

- Platform for Online Consultations ie Triage & Video etc
- Engagement sessions at practice level (IM&T)
- Engagement with wider community ie Schools, social Clubs, St Johns, Churches, Mosques, Councillors etc (IM&T)
- Engagement Roadshow (CCG)
- Practice Level Sign Up (MJOG)
- Currently % registered





# Workflow Optimisation

## Progress

- Implementation summary of each practice discussed at contract review meeting
- GP audits and workflow protocol are not registered on the system for any practices. However this may be an IG issue, that the practice have not allowed access, rather than incomplete.
- Each PCN to have a webinar, where the team will give a practical demonstration of what is required.
- There is an opportunity for PCNs to evolve a central team/ system for workflow, this is to be raised with the Practice Managers.
- Webinars are scheduled for each PCN, where the team will give a practical demonstration of what is required.

## Next steps

- A review of who has completed all of the online modules will take place
- Discussions will be held at PCN Practice Manager meetings regarding engagement at practice and PCN level.
- Webinars will be held to support engagement and knowledge of the system.
- Action plans will be put in place to develop practices
- Practices that are not engaging will be exception reported at the next MRB. There are currently 8 practices on the list.

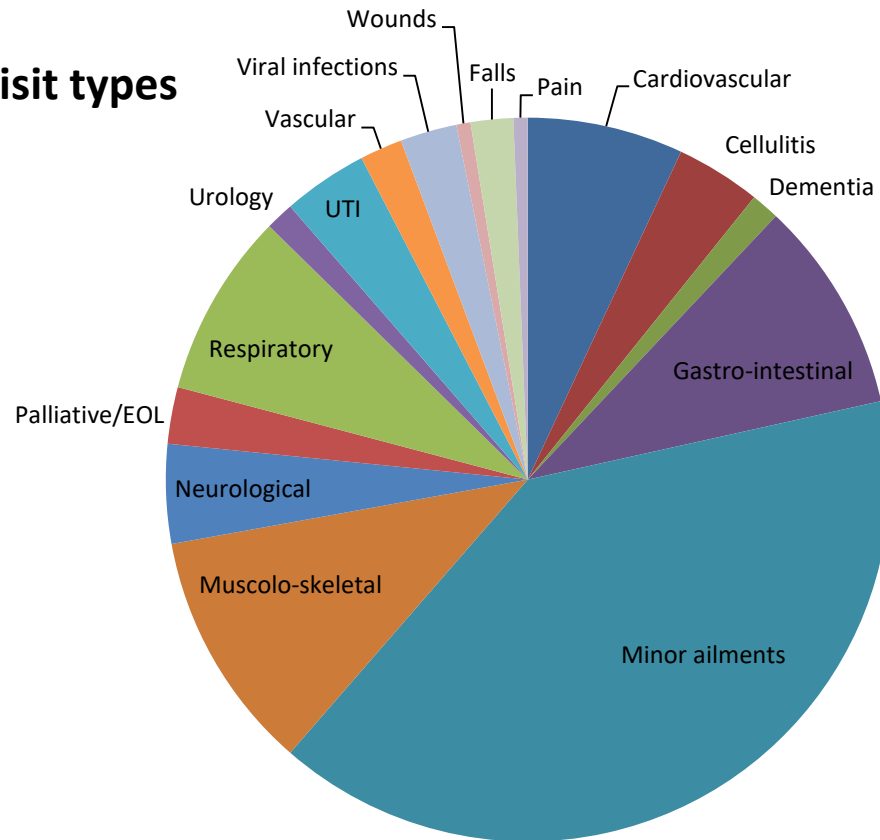


# GP Home Visiting Service Pilot Project

## Face to Face Contacts

TeamName	Initial	Nov	Dec	Jan	Feb	Mar	Apr	May	Grand Total
CCG GP HOME VISITING SERVICE	Initial	33	88	116	102	99	80	75	593
	Follow up	12	32	42	45	59	46	36	272
<b>Grand Total</b>		<b>45</b>	<b>120</b>	<b>158</b>	<b>147</b>	<b>158</b>	<b>126</b>	<b>111</b>	<b>865</b>

## Visit types



## Key Points – Q1

- Every referral that was received by the service was contacted, with minimal referrals being declined.
- 182 referrals were received across April and May 2019. of those 158 were accepted (87%).
- Those that weren't accepted were due to inappropriate referral (8), capacity (11), cancellation by GP (4) and admission to hospital (1).
- As expected, the majority visits were in the patient's own home.
- The pilot has been extended until the end of October 19.
- Patient satisfaction is high.
- Staff changes include additional resource i.e. Healthy Care Assistant & administrative support.



# Enhanced Services

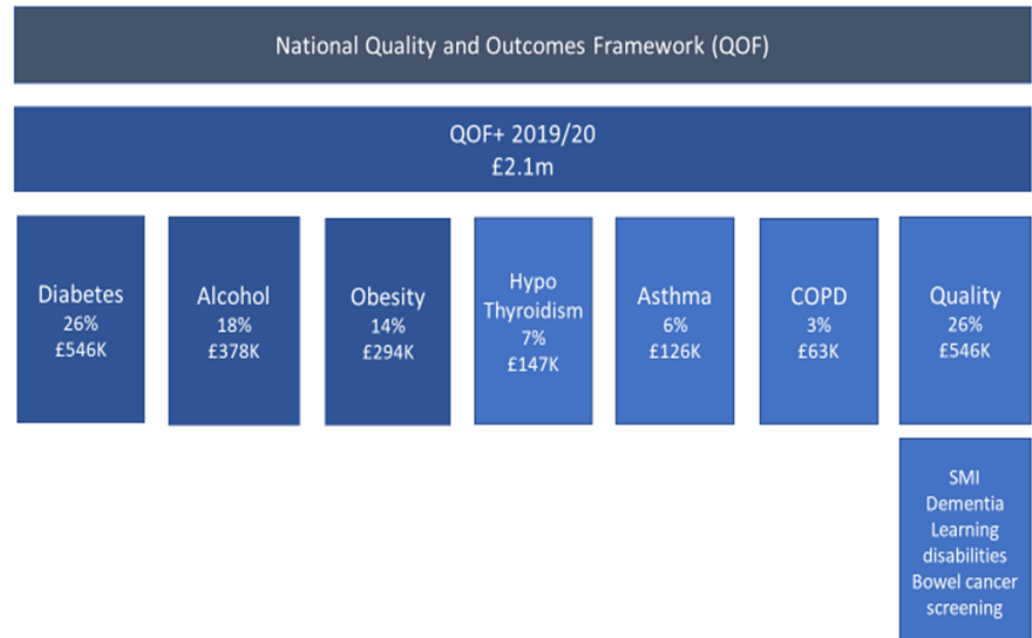
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# QOF+

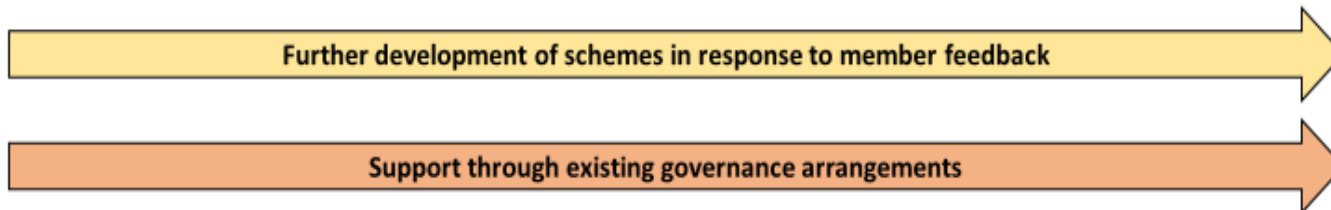
- QOF+ Development Group meetings for monitoring, review and development have been scheduled. Schedule of the meetings can be seen within the table.
- Brief QOF+ update given at Team W.
- End of year spend on 2018 Scheme c£1m (£200k underspent/ under achievement).
- Draft 2019 Scheme shared for comment, approved at PCCC May & issued to practices late May 2019.  
End of year position:
  - 19 Indicators total
  - 100% achievement [Diabetes, Alcohol & Obesity]
  - Remaining indicators were achieved by 23-38 practices

Month	Purpose
May	Status check/queries & issues
July	
September	
November	Development opportunities & preparation of potential new content for 2020 AND
December	
January	
February	Review of existing indicator performance/achievement
March	

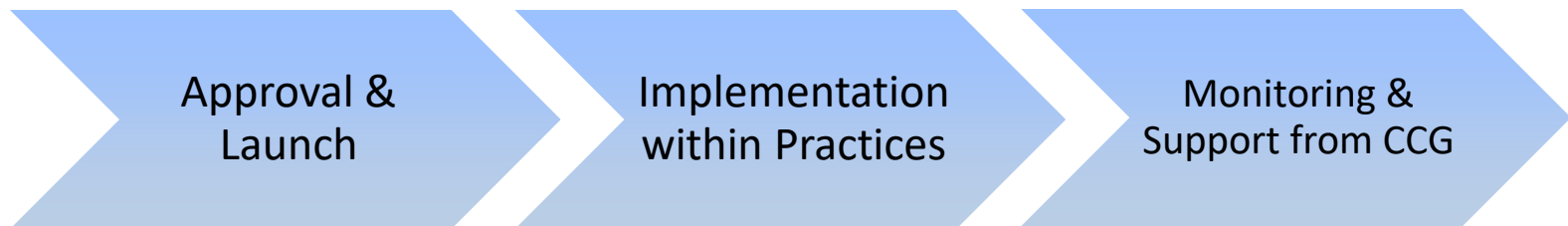


# QOF+ Implementation Timescales

Q1 2019/20	Q2 & 3 2019/20	Q4 2019/20	Q1 2019/20
<ul style="list-style-type: none"> <li>• Approval at PCCC (May 2019)</li> <li>• Practice Sign up (May 2019)</li> <li>• Implementation support from CCG Group Managers &amp; IM&amp;T Facilitator(s) group managers &amp; IM&amp;T Facilitators.</li> </ul>	<ul style="list-style-type: none"> <li>• Review of progress against scheme – IM&amp;T Facilitator(s) &amp; Group Managers</li> <li>• QOF+ Development Group Meeting</li> <li>• FAQ Document update/issued</li> </ul>	<ul style="list-style-type: none"> <li>• Practices ensure clinical systems are up to date in anticipation of final searches being carried out</li> <li>• QOF+ Development Group Meetings held monthly to amend/enhance scheme for 2020/21</li> </ul>	<ul style="list-style-type: none"> <li>• Data extract to determine practice performance</li> <li>• CCG confirms level of award</li> <li>• Practices confirm/accept/raise issue(s)</li> <li>• Payment to practices based on performance</li> <li>• Approval of 2020/21 Scheme</li> </ul>



- Group Manager(s) & Clinical Director(s) via Group Level Meetings
- QOF+ Development Group
- Opportunity for discussion at Members meetings



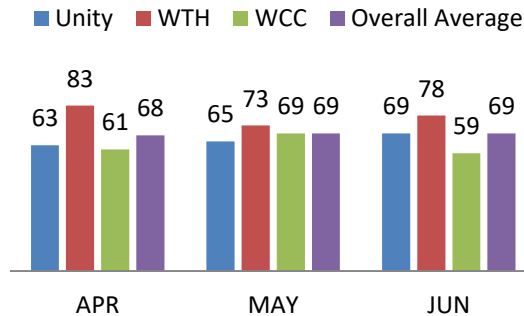
# Extended Access- Performance

## TOTAL FOR Q1

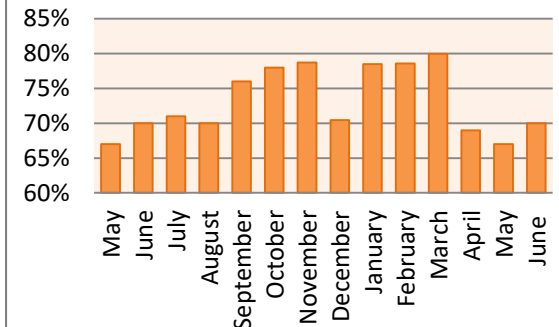
Day of the month	Available	Booked	DNAs	Utilisation
1	396	301	26	69%
2	322	217	37	56%
3	157	132	22	70%
4	470	359	42	67%
5	290	197	21	61%
6	322	239	38	62%
7	353	237	30	59%
8	398	329	38	73%
9	299	214	26	63%
10	168	145	11	80%
11	458	355	49	67%
12	292	191	20	59%
13	366	284	34	68%
14	321	231	33	62%
15	434	351	32	74%
16	331	220	29	58%
17	180	152	17	75%
18	448	375	51	72%
19	328	241	35	63%
20	392	304	38	68%
21	315	220	27	61%
22	419	325	34	69%
23	299	208	19	63%
24	163	147	15	81%
25	420	353	40	75%
26	280	193	23	61%
27	449	346	45	67%
28	362	255	40	59%
29	408	342	32	76%
30	476	338	57	59%
31	41	38	1	90%

- The Q1 utilisation rate is 70%.
- The average for the previous year was 72%.
- Q1 saw an increase in provision to 45 minutes were provided per 1000 patients. (The previous requirement was 30/1000). This has impacted the percentage utilisation overall.
- Unity are now providing access for both RHWT PCN and Unity PCN, increasing to two hubs across the city.

### Average utilisation % per group



### Total utilisation % by month



Total	10357	7839	962	70%
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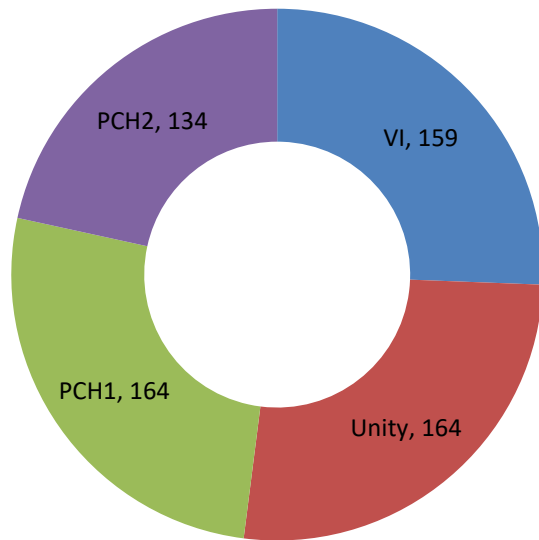




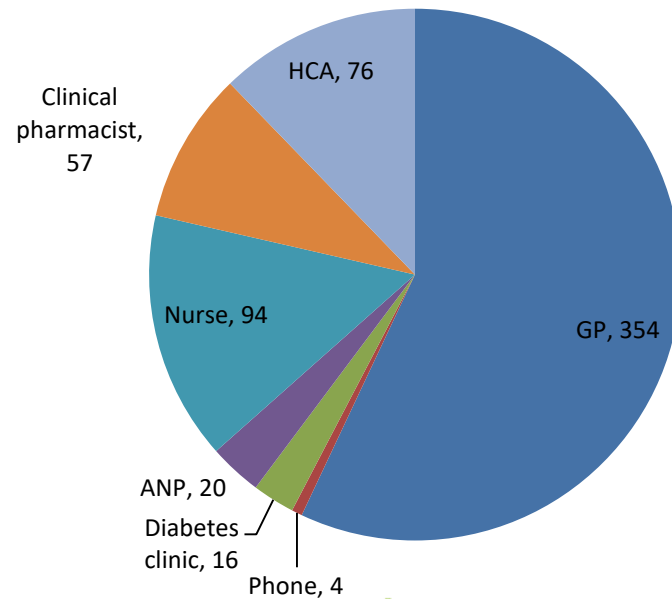
# Extended Access - Appointments by Practitioner

The charts below are an average weekly breakdown of extended appointments available across Wolverhampton.

Extra appointments weekly average by PCN



Average weekly appointment breakdown



# Primary Care Basket Services

- New CCG Costing Template approved at PCCC in May 2019
- Implementation is ongoing currently.
- Review of data for 18/19 below, split by PCNs.

	BASKET														
	Suture/Clip/Staple Removal	Pre-Op Check	Dressing Changes - post secondary care treatment - COMPLEX	Dressing Changes - post secondary care treatment - SIMPLE	12 lead ECG's as part of pre-op or at request of secondary care	Ear Syringes as part of audiology prep	Pessary Changes	Post-Op Checks	Admin of Gonadorelin (Zoladex and Prostrap) Hormone Implants	Subcutaneous injection of Heparin - only where a patient or carer is unable to self-administer	Subcutaneous injection of Heparin - Administration of Epoetins only where a patient or carer is unable to self-administer	Testosterone	Denosumab	Minor Injuries	
18/19															
PCH1 TOTAL	309	9	495	1163	8	110	30	97	310	0	0	13	14	307	
PCH2 Total	809	81	1023	3536	146	154	63	287	301	4	0	63	25	608	
Unity Total	705	101	512	2883	65	301	45	347	404	64	26	44	50	849	
VI Total	555	12	465	1705	86	464	93	116	314	0	0	102	37	543	
<b>Overall Total:</b>	<b>2378</b>	<b>203</b>	<b>2495</b>	<b>9287</b>	<b>305</b>	<b>1029</b>	<b>231</b>	<b>847</b>	<b>1329</b>	<b>68</b>	<b>26</b>	<b>222</b>	<b>126</b>	<b>2307</b>	



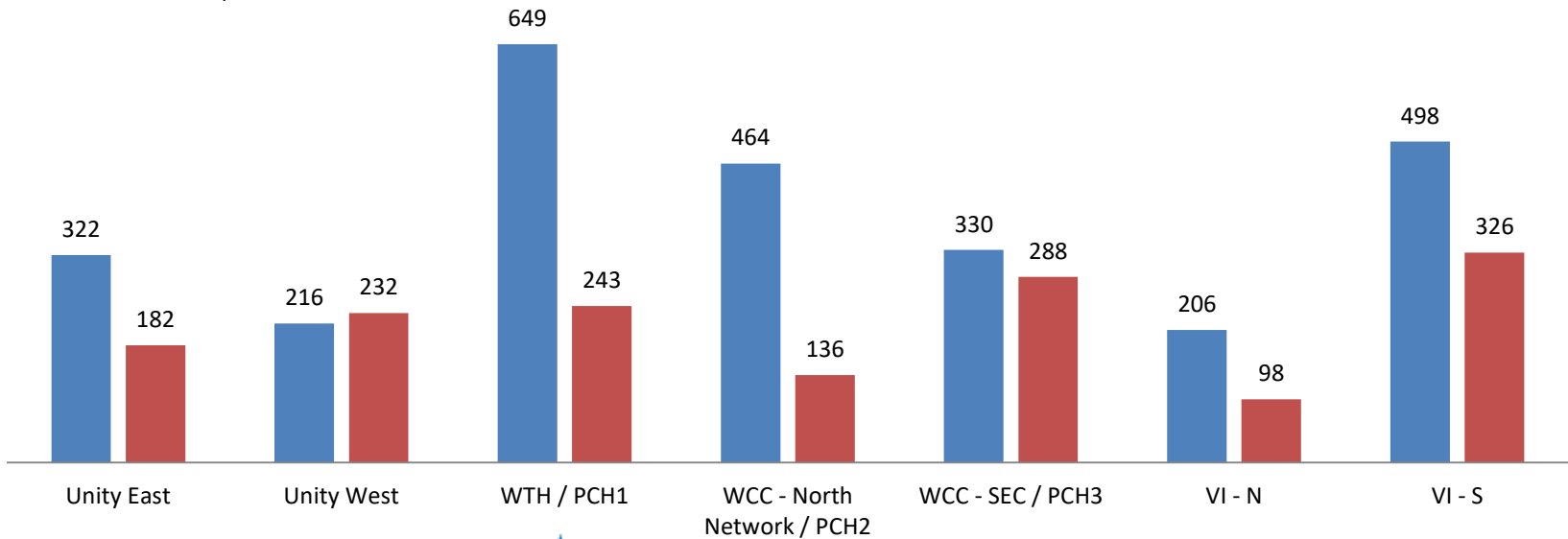
# Health Checks

Wolverhampton is currently performing to top quartile standard, and the uptake conversion rate has reached the same percentage as the East & West Midlands figure (53%). In April and May a total of **1505** Health checks were completed and this meant that **53%** of patients who were invited received a NHS Health check.

Midlands Data	
Percentage of people that received an NHS Health Check that were offered in Q1	53.20%
Percentage of people that received an NHS Health Check that were offered in 18/19	49.20%

## April & May 19

■ Invites ■ Completed Checks



# Health Checks

Total completed health checks for 18/19 = **5994**, of which it is **estimated\*** that;

- 900 patients identified as having a **high risk of CVD** (>20% Qrisk score)
- 200 diagnosed with **hypertension**
- 75 diagnosed with **type 2 diabetes**

Total completed health checks for April & May 19/20 = **1505**, of which it is estimated that;

- 251 identified as **High risk CVD** (>20% Q risk score)
- 50 diagnosed with **hypertension**
- 19 diagnosed with **type 2 diabetes**

\*These are estimations given when applying the Public Health England health matters national statistics on Health checks.



Year	Invites	Health Checks	Uptake
17/18	4126	2459	60%
18/19	11624	5994	52%
Increase	282%	201%	



# Peer Review

Project Details							Savings Position						
UI Ref	Boards	Work Stream • Acute • Mental Health • Community Health • Primary Care • Prescribing • Continuing Care • Other	Name	Data Source	TYPE	Lead	QIPP Annual Plan £	Planned Savings YTD (April to May) £	Actual Savings YTD (April to May) £	Total Savings Variance YTD (April to May) £	Variance from Annual Plan and Total Cumulative Savings £	% of Annual Plan Achieved	RAG RATING (YTD)
93	MMO PC	Primary Care	Demand Management	BI	TF	Jo Reynolds	£ 178,000	£ 28,000	£ 103,870	£ 75,870	£ 74,130	58%	LOW RISK

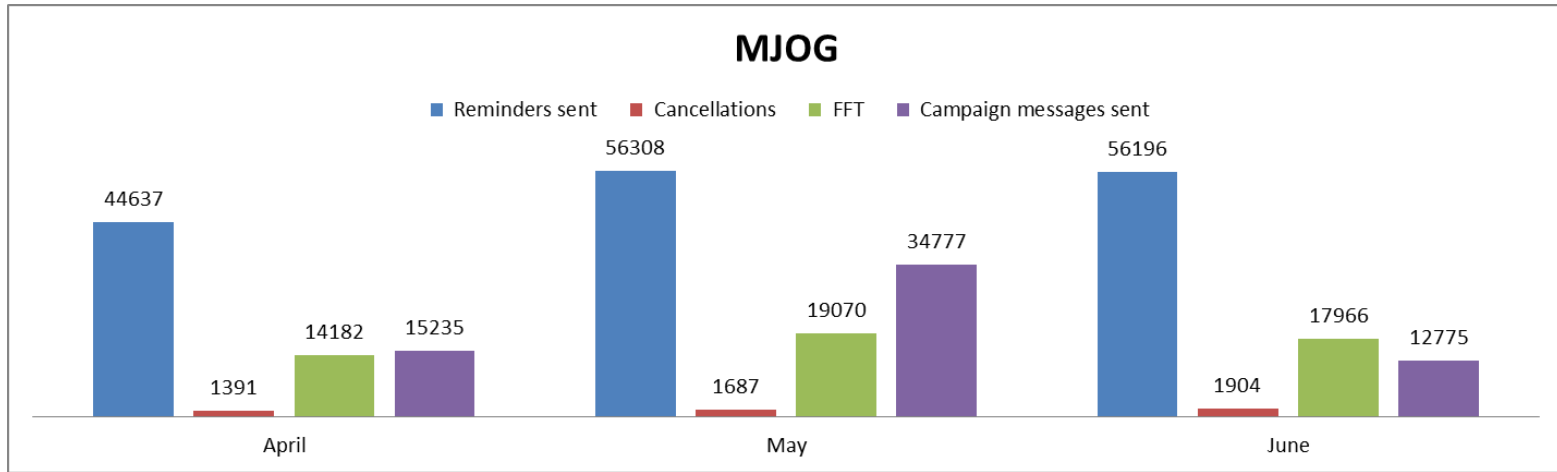
Leads Expected Year End Position (FOT)						
QIPP Annual Plan £	FOT as at June £	FOT as at July £	FOT Change	Plan & Actual	April Mth 1	May Mth 2
£ 178,000	£ 178,000			Plan	£ 14,000	£ 14,000
				Actual	£ 40,956	£ 62,914

## Next Steps

- Discussions with RWHT regarding consultant involvement in meetings.
- Training and webinar events are being discussed as options.
- Coms will be circulated highlighting advice and guidance and reiterating clinical pathways to all staff.
- A programme of work is being discussed at BIC board, focusing on refreshing the pathways and developing a platform of content to support the new roles within the practice team

Peer review	Progress
RWT PCN	first meeting will be held on Thursday 5 <sup>th</sup> September, to allow time to prepare the data and give the Clinicians time to prepare their sessions. Meetings will be held monthly following this.
Unity East/ West PCNs	Unity have declined to sign up to the specification, as they feel that it offers limited clinical value. The group have committed to supporting the development of a platform for pathways
WNN	Dermatology has been discussed in June. Outcomes to be fed back to practices, WCCG and secondary care when available.
WSEC	ENT has been discussed in June. Outcomes to be fed back to practices, WCCG and secondary care when available.
WTH	Dermatology has been discussed in June. Outcomes to be fed back to practices, WCCG and secondary care when available.

# Mjog



- **4982** appointments in Quarter 1 have been able to be reallocated, due to cancellations through text message.
- Participation in FFT continues to be higher than previously recorded due to text messaging.
- Figures remain static, however there continues to be an increase in Reminders being sent from practices.
- Network level provision being explored, unable to currently provide at hub level. This issue is linked to DNA rates, as hubs are unable to confirm appointments through MJOG. IM&T took an action from MRB to identify a solution, and funding has been identified to support this.

Q1	Reminders sent	Cancellations	FFT	Campaign messages sent
April	44637	1391	14182	15235
May	56308	1687	19070	34777
June	56196	1904	17966	12775
<b>Total Q1</b>	<b>157141</b>	<b>4982</b>	<b>51218</b>	<b>62787</b>





# Thrive into Work

Anyone can refer via [www.thriveintowork.org.uk](http://www.thriveintowork.org.uk) and GP teams can also refer via e-RS. GP teams across Wolverhampton, Dudley and Sandwell are working with their CCG and Thrive into Work to set up bespoke new ES clinics to generate large volumes of referrals. There is also an enhanced service that two PCNs (WTH & RWT) have signed up to, with an expectation to deliver 350 *appropriate* referrals.

## Most common health conditions:

- Stress/anxiety
- Fatigue/problems with memory
- Depression
- Pain/discomfort

## Trial highlights June 2018 – May 2019:

- 1944 people on the trial
- 952 in treatment group
- 181 job starts



## Well done to the top GP team referrers so far!

GP Practice	Lot	Referrals
Quarry Bank Surgery	Dudley	23
Cape Hill Medical Practice	SWB	15
Links Medical	Dudley	13
Newbridge Surgery	Wolverhampton	13
Parkfields Medical Practice	Wolverhampton	13
Thorns Road Surgery	Dudley	12
Newtown Health Centre	SWB	11
Ridgeway Surgery	Dudley	11
Rangeways Road Surgery	Dudley	10
Kingswinford Health Centre	Dudley	7



# Conclusions

- Commissioning Intentions 19/20
- Conclusions and Next Steps



# Commissioning Intentions

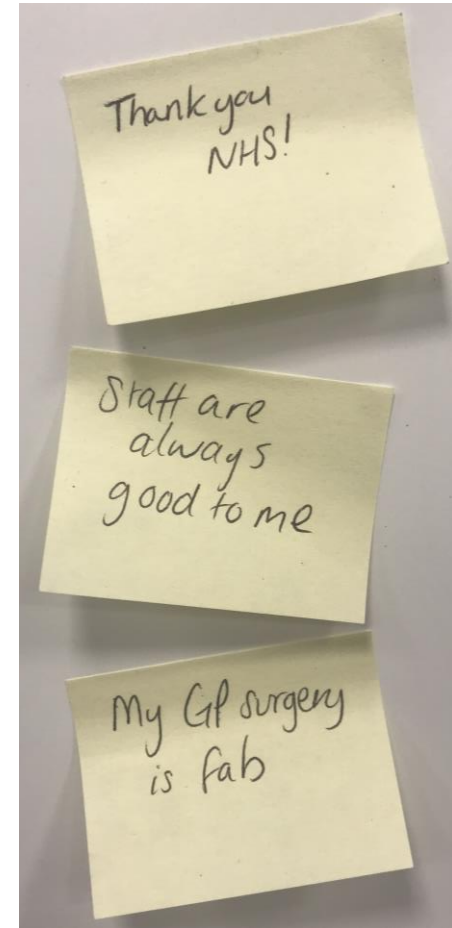
There is a comprehensive engagement plan in place, with agreed support from CSU around the engagement for commissioning intentions for 2019/20.

## Highlights from Q1:

- A Senior Communications Officer joined the Primary care team from CSU.
- An Engagement roadshow across the city has taken place. A variety of locations have been visited, such as GP surgeries, health centres, libraries, New Cross hospital and other events across the city.
- 174 surveys had been completed, with many more conversations being had at stands. This is now being evaluated and the top themes coming from the roadshow include:
  - Access to appointments and booking appointments
  - Waiting times
  - Communication from practices so the public know what is available and who from (i.e GP, Practice Nurse, Clinical Pharmacist etc.)

## Plans for Q2:

- A series of recommendations will be identified from the survey responses given and associated work plans will be developed to help inform the commissioning intentions and priorities for WCCG during 2020/21.
- Continued engagement at a neighbourhood level for practices, networks and WCCG.
- There are a number of projects in development to utilise and strengthen Social media. This will form part of the work programme for the dedicated communications support going forward.



# Conclusions & Next Steps

## Conclusions

- Communication & engagement roadshow continued into Q2 with some valuable insight gained. The evaluation and recommendations will be considered at WCCG boards during Q2.
- Primary Care Networks preparation work continued through Q1 and applications have been submitted.
- 6 PCNs are now active in Wolverhampton from 1<sup>st</sup> July. The PCNs will be labelled differently from Q2 to reflect the Networks more accurately.
- 6 Clinical Directors were appointed.
- Reviewing the Q1 data shows that both commissioned and enhanced services are performing consistently.
- Digital work streams continue to progress, development & engagement within practices continues.
- Workforce Development is continuing to be strengthened and there is now an agreement regarding the Training Hub.
- Primary Care Strategy Review & STP Primary Care Strategy Completed.

## Next Steps

- Reclassification of PCNs to reflect the changes post application – 6 active networks now, not 4.
- Communication & engagement roadshow evaluation and feedback.
- Progression of Primary Care Network development plans.
- Clinical Pharmacists and Social Prescribers in PCNs recruitment. Social prescribing model to be agreed, and MOU signed.
- MH therapists in PCNs workshop to be held.
- Clinical Directors Meetings commence.
- Care Navigation to be reviewed and strengthened by a third Phase. Updates scheduled for September.
- Resilience funding applications to be submitted.
- GPN Strategy to be officially launched.
- Peer review activity to be supported by comms, advice and guidance promotion and additional training.
- Workflow optimisation to be discussed at network level.
- QOF+ development group to review data and identify issues.
- Extended access and DES hours to be monitored and any capacity issues identified.
- Further Dementia Friends development and driving this forward to extend the amount of dementia friendly practices in Wolverhampton .

