





Assurance Report

Quarter 3 2019/20

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Work Programme(s) Overview

- Primary Care Strategy
- Work Programme Progress
- STP PC Overview
- GP Retention
- Portfolio Career Specialties
- PCN Analysis
- Portfolio Career Numbers



Primary Care Strategy

2019/20

Developing Primary

Primary Care

July: Primary Care Networks Established

August: 75 minutes per 1,000 patients additional appointments at network level

September: Assessments against maturity matrix

September: Population Health Data & Interpretation informing PCN Development Plans

October: Prioritising population health management

November: Range of consultation types readily available & NHS App interface with practice clinical systems

October - March : Network(s) actively participating in development programmes & sourcing specialist support

Clinical Priorities

Summer/Autumn: Portfolio Career Applications & targetted population management within networks

Winter: Integrated Care ie Frailty Co-ordinators appointed and EOL model mobilisation commences

November: Paediatrics?

January: SMI & LD Health Checks

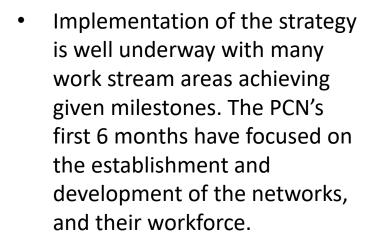
March: Investment and development in local primary care framework based on population health priorities

NHS Long Term Plan

Winter: Collaboration and reconfiguration: Community Services wrapped around PCNs including mental health

January: Primary Care Networks embedded & maturing place/system

Spring: New specifications primary care clinical priority areas including care homes



- Work continues to enable the wrap around and joining up of community services around PCNs, further utilising population health management tools with partners.
- Strong position heading into 20/21, with scoping already underway for the new DES specifications.











Work Programme - Progress

Area	Q3 Highlights	Next steps
Primary Care Strategy	 Care Navigation Phase 3 launch planned & new template implemented on clinical system. Progress made on advertising campaign, timelines almost back on track (due to election purdah), Facebook resolution in sight. QOF+ development continues, details further within pack. Practice Resilience programme fully committed. 5 DES specifications arrived end of December – SMR, EHCH, Supporting Early Cancer diagnosis, Anticipatory care & Personalised Care. 	 Care Navigation Phase 3 roll out & training sessions Use social media to full advantage within campaigns Practice diagnostics to be received as part for the resilience programme. PCN & CCG responses have been co-ordinated and submitted as part of the consultation on the DES specs. A workshop is being arranged to bring together Primary care and Community services to discuss delivery in collaboration with the revised specifications.
Primary Care Networks	 1st CD away day happened in November, these will be quarterly going forward. PCN development & engagement plans continue to be progressed with support from Network managers. New role appointments allocated within networks. Monitoring and support of new roles during 'bedding in' period 	 CD away day scheduled for February. To include an Eclipse Demo, presentations from the Med Ed programme, BCPFT, community services and secondary care consultants. Continued baselining of new role impacts and review of progress at end of Q4. Mapping of services provision to demand.
Contracting	 Business Case for Wound Care presented to BIC detailing Post payment verification for QOF and enhanced services; templates completed following staff training to access and extract data form CQRS. Contract review visit schedule and content developed. QOF+ development group met November. Performance data reviewed. 	 Commissioning Intentions to be finalised. PPV visits to be undertaken and concluded. Report findings PCCC April. Review network requirements for 20/21. Finalise ICA Partnership Agreement.
Workforce & Development	 New roles alignment and provision mapping within PCNs Training needs identified with practices. Mapping to be consolidated for hand over to training hub. PCN development scoping underway as part of development plans. Scoping of available training opportunities including; apprenticeships, diplomas and courses for practice staff development on all levels. 	 Continued review of mobilisation and bedding in of provision. Iron out any teething issues. Promotional work around new roles to be included in the comms & engagement plan. Final version of training offer to be shared with Clinical Directors for local monitoring with Network managers.



Work Programme - Progress

Area	Q3 Highlights	Next steps
Primary Care Digital Transformation	 NHS111 sign up is being completed. Proof of concept achieved for Wolverhampton following successful testing of Pilot sites. National solution to hub integrations anticipated. GP online triage is now in place in 94% of practices. Roll out into remaining practices by end of March Coding review completed for QOF+. Issues identified and investigated. All search queries resolved. Communicated via FAQ document circulated to practices. Video consultation sign up is on-going; 12 practices have equipment installed. Digital First Early implementer spec circulated for virtual approval. 	 Monitoring of compliance for NHS111 and Online Triage. Circulate Digital First spec to practices when approved. Review and monitor codes for QOF+ implementation of 20/21 proposals. Review MJOG expenditure and activity Monitor and review interpreting for extended hours. Support roll out of SNOMED, due for roll out commencement in January 2020.









STP PC Overview

Training hub development

- The STP is working in collaboration with HEE and existing Training Hubs to develop a plan for the future provision in line with HEE common operating guidance. Organisational Development Sessions have been taking place since November 19, funding has been secured from HEE for a project manager to implement the transition plan at operational level, with support from the workforce retention team.
- Additional non-recurring funding has been allocated to STP nominated training hub, to increase and
 maintain the number of non medical prescribers across the STP and to develop the pipeline for reception
 into nursing careers. This approach to the deployment of funding was co-designed with training hubs and
 approved at our STP Primary Care Board.

Workforce numbers

- The STP continues to monitor progress against the workforce trajectories set. For GPs, this means continuous work to promote, improve and extend retention schemes to try and maintain as many GPs in the system as possible and attract into the area. In addition, closer working with GP Trainees continues to gather insight on what their future intentions are, and support them into substantive roles.
- GP vacancies are now promoted centrally via a website and the newly rolled out workforce app to get vacancies out to GPs more efficiently and proactively. A new STP (healthier futures) website is currently in development, this will further improve access to schemes and vacancies.
- The STP has successfully bid for the GPN Specialty Programme with HEE which will see 10 new to practice
 nurses employed across the STP before the end of March 2020. A Lead Professional Nurse is now in place,
 11 PCN GPN Champions, and 15 EOI to be GPN Peer Mentors across the STP. These will all support the
 retention and recruitment of nurses across the STP.



GP Retention

2018/19 Programme	2019/20 Programme		
Schemes for GPs:-	Schemes for GPs:-		
Portfolio Careers	PCN Portfolio Careers		
Peer Mentoring	Peer Mentoring		
First 5 Network	First 5 Network		
Pre-Retirement Coaching Forum	GP Phoenix Programme (Mid-Career Offer)		
	Legacy/Welcome Back		
Incentivising Portfolio careers: Developing flexible GP career opportunities. Helping GPs enhance their skills and knowledge in area(s) of	Schemes for General Practice Nurses:-		
specialist interest to extend their role beyond General Practice. Funding available for training needs and access to secondary care support.	Professional Networks – 'Practice Makes Perfect' Model		
First 5 and GP Trainee Network:	Peer Mentoring		
Supporting newly qualified GPs and GP trainees transition into General Practice. Encourages networking, peer support, exploration of career opportunities and small group learning opportunities over a series of events.	PCN Champions		
Funding available to kick-start a portfolio career. This scheme is designed and delivered in collaboration with the RCGP Midland Faculty.	Pipeline Development including Portfolio Careers		
Peer Mentoring:	Speciality Training (10 new to Practice Nurses)		
Supporting GPs with career planning and development, as well as those experiencing difficulties. The scheme is tailored to the needs of local GPs and delivered in a confidential, flexible and	Schemes for Wider Workforce:-		
supportive environment.	Pharmacy Network		
Pre-retirement Coaching Forum: Practical support and quidance (including pensions,	Physician Associate Support Offer		
estates and indemnity costs) for GPs considering retirement or that have recently retired. Providing solutions for GPs to remain in clinical general practice.	HCA Development		
	Reception, Clerical and Admin Staff Development		





General Practice Nurses Network

First 5 Networks





Mentoring

Portfolio Careers









Clinical Pharmacists

Health Care Assistant





leception/Clerical

Physician Associates





ribers Practice Managers











Portfolio Careers

Summary of Portfolio Specialties 2019/2020 Cohort 2

CCG	PCN	Portfolio Speciality
Wolverhampton	Wolverhampton Total	O&G/Community Gynaecology and
	Health	Menopause
Wolverhampton	Wolverhampton Total	Obstetrics and Gynaecology
	Health	
Wolverhampton	Wolverhampton Total	Medical Education
	Health	
Wolverhampton	Wolverhampton North	Woman's Health
Wolverhampton	Wolverhampton North	Minor Surgery
Wolverhampton	Wolverhampton North	MSK/Chronic Pain Management
Wolverhampton	Wolverhampton North	Diabetes
Wolverhampton	Wolverhampton South	Urology
	East	



Portfolio Careers

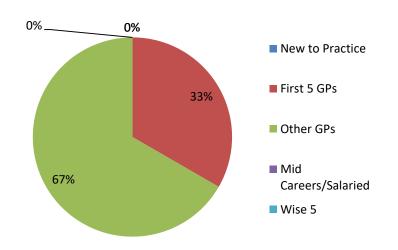


- 1 As of 06/01/20 **28** applications have been received for cohort 2.
- 2 18 applications have been approved.
- 3 The CCG and Phase breakdown is shown below where this has been identified.

Portfolio Careers Numbers

Wolverhampton Walsall Dudley Sandwell and West Birmingham

Phase - GP Careers

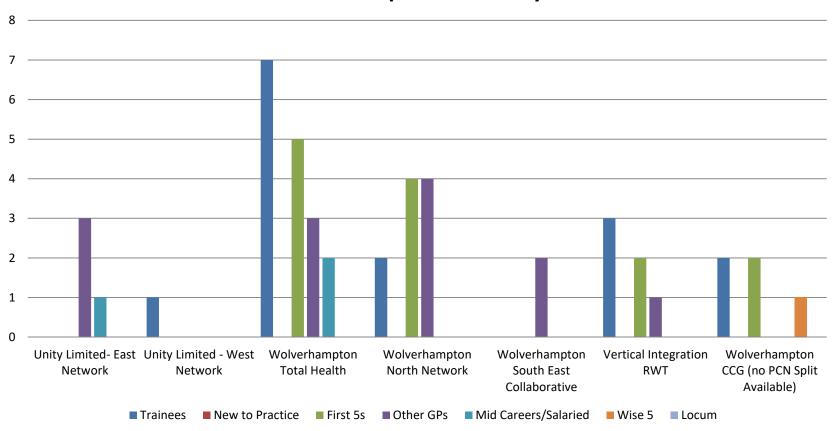






PCN Analysis - Wolverhampton

Wolverhampton PCN Analysis





General Practice Nursing Strategy

The GPN Strategy is now being implemented across the Black Country and West Birmingham STP and there are a number of programmes of work in place/being developed to support this.

GPN Professional Lead:

The GPN Professional Lead, Liz Corrigan is now in post leading on the implementation of the strategy and supporting GPNs across the STP.

GPN Champions:

The GPN Champions are leading nurses within their PCNs and providing support to the GPN Lead around workforce planning, clinical guidance, clinical supervision, training needs and sharing and celebrating good practice. 11 champions have been appointed across the Black Country, 2 of these are from Wolverhampton.

GPN Peer Mentors:

The GPN Peer Mentors are currently in the process of being recruited, this will provide 1:1 support to GPNs around a range of issues, supporting nurses at all stages of their career. There have been 16 EOIs across the Black country to date, 2 of these are from Wolverhampton.

GPN Portfolio Careers:

The opportunity to develop a portfolio career is currently being explored and support will be provided to nurses across the STP in a range of areas linking to practice and PCN priorities. Applications from Wolverhampton are anticipated and are being encouraged to compliment GP portfolio applications that have already been approved, i.e. women's health, diabetes etc.

GPN Specialty Training: Funding has been secured from NHS England and Health Education England in conjunction with the STP to support 10 newly qualified nurses into general practice – the recruitment process in currently underway and practices have been identified to support the nurses.

GPN Retention Programme:

Following the GPN Strategy launch Black Country and West Birmingham STP have been asked to take part in NHS England GPN Retention Programme, this includes support to develop and implement the retention part of the GPN Strategy and is currently underway with a site visit planned for 23rd January and attendance at GPN Forum by Sarah Chamberlain and Paul Vaughan from NHSE.











Primary Care Networks

- Assurance statements
- Network Development
- PCN Development Plan Progress



Assurance statements

WOLVERHAMPTON CCG

NHS England Assurance Statement 2019/20	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Status
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)		Report to PCCC & GB Support from PCT					On Track
Support the introduction of any nationally-agreed contract arrangements for PCNs, ensuring that community services are configured in line with PCN boundaries.	IAPT Workers aligned to PCNs, MHLW proposal also agreed with BCP						On Track
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	Reimbursements for Jul- Sept approved for WVSC & PCN CPs						Liaison with NHSE to ensure sign up on CQRS
Support PCNs in their development and ensure they are practically supported to access the PCN Development Programme by 31 March 2020.	Dartmouth Programme Commenced PCNs confirm TFC Project & negiate start date(s)	PCN Development funds released to PCNs following approval of plans	PCNs commence spend against agreed plan(s)				TFC is in place and ongoing participation from networks. Dartmouth Programme completed by 1 network. STP sessions available in leadership and workforce development planning
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 latest, and then on an ongoing basis at regular intervals as agreed locally.	PCN Task & Finish Group Work Programme progress reported to MRB	Q2 PCN Dashboard (CCG) Issued including Prescribing		PC Task & Finish Group Work Programme		PC Task & Finish Group Work Programme	National Dashboard not expected until March 2020. CCG Referrals/activity dashboard for PCNs refreshed quarterly & discussed at CD Meetings/Awayday(s)
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.	CD Meeting : QoF	CD Meeting : Review of local clinical priorities & impact of remedial actions CDs Awayday	CD Meeting : Digital Progress Review	CD Meeting : Community Services	CD Meeting : New Roles	CD Meeting : End of Year Review	Network Development Plans agreed and are in draft form; finalisation of plans due March 2020 once training and development sessions has taken place Monthly CD meetings and quarterly awat days are taking place.
Ensure that the delegated budgets received are used to support the development of all practices in the context of PCN development, 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 (ensuring delivery of at least two high-impact actions set out in the GPFV including Online consultations; Reception and clerical training; and Time for Care), to be determined through a diagnostic/evidence-based approach that enables deployment of targeted development offers in the most effective way to support, strengthen and transform services for the benefits of staff and patients locally.	Review of PCN Development plans (outline/costed) by CCG and reported to MRB	Update PCCC on progress / issues PCN development plans	Maintain liaison with CDs to ensure timely progression of development plans	Development Plan enacted at network level	Review of progress at CDs Meeting	Update PCCC on progress / issues	As above
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.	to NHS England	STP Assurance Report to NHS England confirms update on each allocation/scheme.	to NHS England confirms update on each	to NHS England confirms update on each	to NHS England .	STP Assurance Report to NHS England confirms update on each allocation/scheme.	



Assurance statements (Cont.)

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 Offices), to improve medicines optimisation for care home residents by 31 March 2020.	Reimbursements for Jul-Sept approved for WVSC & PCN CPs						Process defined and will be implemented in August 2019.
Work with HEE to ensure robust training programmes are in place to adequately support workforce plans.	Delivery Phase - Monitored via Workforce TFG	Delivery Phase - Monitored via Workforce TFG	Delivery Phase - Monitored via Workforce TFG	Review of Workforce Plans & Training Hub Effectiveness	Report on findings to PCCC	Implement remedial actions	Workshops have been taking place to facilitate the development of the training hubs. Workplan in place to ensure delivery by April 2020
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 across the Easter, Christmas and New Year periods.	Q2 Data Collection & Submission ensuring 100% population coverage	Appointment Uitlisation Tool - Review of activity & identification of improvement actions.		Q3 Data Collection & Submission ensuring 100% population coverage	Appointment Uitlisation Tool - Review of activity & identification of improvement actions.	Appointment Utilisation Tool - prepare to report on practice / network shortfalls	Apt utilisation tool is in place in all practices, and will be used to report on Extended Access from April 2020
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.		Review utilisation data & identify mitigations for improved uptake in each network.	Review of network adherance to Core Requirements	Q3 Data Collection & Submission	Review utilisation data & identify mitigations for improved uptake in each network.	Review of network adherance to Core Requirements	On track
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.	accessed to improve	Ensure all Networks have accessed Portfolio Career Funding					Monitoring and promotion at STP level of uptake
Patient engagement as per DES	Review feedback from PCNs at CDs Meeting	Review feedback from PCNs at CDs Meeting		Review feedback from PCNs at CDs Meeting		Review feedback from PCNs at CDs Meeting	PCN Engagement Specification has been signed up to by all networks and development plans approved
Movement within Networks - process to be defined & approved by PCCC ie notice, committee approval, mutual transition timeline etc also includes change of CD	Network change notifications	PCCC consider PCN changes (if any)	Network change notifications	PCCC consider PCN changes (if any)	Inotitications	PCCC consider PCN changes (if any)	changes fully implemented and documentation/payments adjusted accordingly



PCN Development Plan & Network **Progress**

- Development plans submitted and approved by Milestone Review Board in October
- Engagement plans have been submitted and agreed in December.
- Training and support in relation to network priorities have been discussed with CDs.
- Time for care is being delivered in 3 networks.
- The Dartmouth programme has been delivered in the WSE network, this is now complete.
- Planning is underway for delivery of new services with scoping of roles required and in collaboration with workforce planning.
- Early implementation of new workforce roles has been offered to all PCNs
- ODS codes are now in place for PCNs and will enable resolution to interoperability.
- Clinical Director development training has been organised centrally. Further training needs are being scoped.
- Wolverhampton CD representative identified and attending STP board meetings.
- Work continues with PPG Chairs as part of development plans. PPG's will be included in delivery of engagement activity.
- Practice managers continue to meet within networks on a regular basis.





Commissioned Services

- Communications & Engagement
- Contract & QualityReview Arrangements
- Social Prescribing
- Primary Care Counselling
- The Sound Doctor
- Care Navigation
- Advice and Guidance
- Online Services
- Workflow Optimisation



Communications & Engagement

There is a comprehensive engagement plan in place, with dedicated support from CSU in response to commissioning intentions for 2019/20.

Highlights from Q3:

- Printed material delivered to practices, A&E, urgent treatment centre and the council for GP and pharmacy opening hours over the Christmas and New Year period. Information uploaded to CCG's website, Twitter and shared with key partners to distribute.
- Development of GP toolkit as part of Extended Access campaign to: support practice staff in understanding new roles in primary care and provide content for practices to upload to their websites/display in waiting areas to promote extended access appointments and online access for patients.
- Created outlines for materials to be provided as part of the campaign including social media targeting and animation theme.
- Development of 'primary care area' on CCG intranet.
- Production of stakeholder bulletin to keep Citizens' Forum members/stakeholders informed on what's happening within the CCG. Section included on primary care updates.

Plans for Q4:

- Continued development of 'primary care area' on intranet.
- Continued delivery of Extended Access campaign. Upcoming activity includes delivery of printed materials to practices, outreach events, animation and video case studies with GPs and staff in new roles to demonstrate success to other practice staff and final evaluation of the campaign.
- An electronic newsletter will be produced every two weeks to demonstrate progress with Extended Access campaign.
- Care Navigation phase 3 launch. Printed materials for care navigators (pin badges and shopper bags) and social media campaign.
- Engagement with children and young people to 'fill gap' in low responses from this group during 'What Matters to You?' roadshow during summer of 2019.
- Engagement with hard to reach groups on NHS services. Developing leaflet with information on NHS services and PCN extended access to support this engagement.



Contract & Quality Review

Meetings held this quarter:

Contract	Provider	Progress	Plans for next quarter
Special Access Scheme	East Park Medical Practice	CRM held. Work ongoing with practice to identify high referrers to service. Patients due for review to be completed by next panel, due in January.	Patients to be seen in practice for bloods. Ensure practices understand appropriate referral.
Primary Care Counselling	Relate	Waiting list remains high based on	Impact of MH therapists in PCNs to
Service		data received, and is raised as	be reviewed
		concern along with time in service	
		DNA of sessions discussed.	
		Data narration from service	
		received.	
Social Prescribing	Wolverhampton Voluntary	Monitor take up of appointments	Social prescribing MOU progress
	Sector	and referral rates.	review meeting scheduled. This will
		Patients and staff engaged within	identify issues and developmental
		network to promote role.	needs.
Information and	Sound Doctor	Promotion and engagement	Continue to promote and support
education for patients		circulated to practices.	via communications and newsletters.
with long term		Quarterly telephone catch ups	Feedback monitoring data to
conditions		organised, monitoring capabilities	practices to encourage higher usage.
		investigated further.	
		Scoped availability of monitoring	
		through online triage.	

Social Prescribing

Updates:

Total

- A significant increase in referrals has occurred this quarter (+45%) which could be attributed to the commencement of the SP link workers.
- In Q3 there were **338** referrals to the SP service; **213** of these (63%) were from PCNs, demonstrated in the graph to the right.
- Capacity of the service was scoped with a prediction of up to 20 referrals per PCN per month (pm), equating to 60 referrals per PCN per quarter (pq).
- The only network to meet the monthly target is WTH demonstrated in the chart below.
- SP Link workers commenced their roles in PCNs at the beginning of the quarter, and so the figures could reflect a 'bedding in' period, with anticipation that the target will be met for Q4. All Clinical Directors have been reminded of the importance that their PCN target is met, and that all practices within networks are referring.

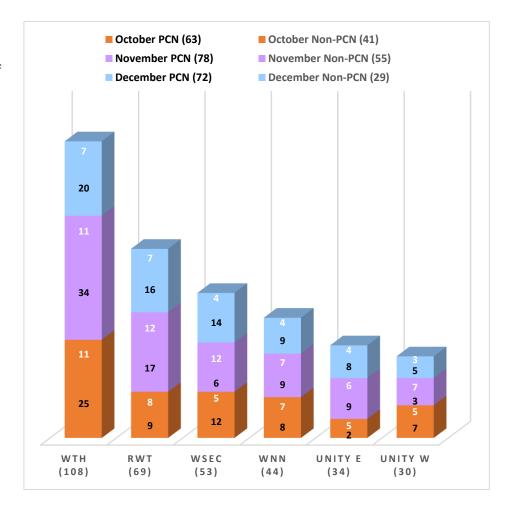
	ОСТ	NOV	DEC	Total
Capacity	120	120	120	360
WTH	25	34	20	79
RWT	9	17	16	42
WSEC	12	6	14	32
WNN	8	9	9	26
Unity East	2	9	8	19
Unity West	7	3	5	15
Shortfall	-57	-42	-48	-147

78

72

213

63

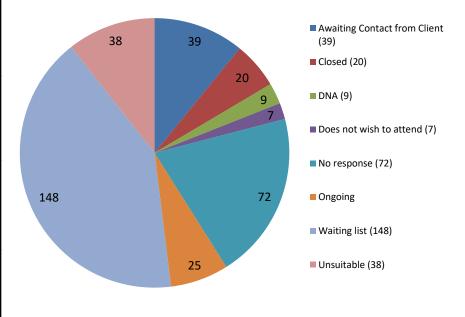




Primary Care Counselling

Q3 Updat	re
Referrals	There have been 358 referrals in Q3.
Waiting list	There are 148 patients that are on the waiting list; 113 Waiting list @Relate 7 Waiting list – not recorded 14 Waiting list @Woodcross 13 waiting list @Alfred Squire 1 Waiting list @Pennfields
Q3 wait in service - Range	The longest waiting time is 88 working days, this was for a patient on the waiting list for Relate. The shortest wait time are those who were referred at the end of the quarter.
Q3 Update	The service supplied a case study undertaken during Q2 but this was made available during Q3. This is a separate document, please see other papers. The provider has been alerted to the increase in provision of IAPT workers at PCN level in order to achieve national targets.
Next Steps	There is an expectation that there will be an increase in IAPT and social prescribing referrals impacting on the expected referrals into this service. Primary Care Counselling contract ends March 2021, although the provider has been alerted to the likelihood of the contract winding down sooner. Discussions continue. The service has been requested to develop a remedial action plan to address wait times, and an exit plan.

Q3 Referral breakdown











The Sound Doctor

	WTH	WSEC	WNN	UNITY E	UNITY W	RWT
Q1	1118	133	125	131	51	1514
Q2	1168	38	89	82	13	878
Q3	1247	0	0	116	0	1186

Q3 Updates

- Integration with the patient online app explored.
- The ability to automatically generate text messages upon diagnosis explored.
- Provision to be promoted with GPs and other clinical staff, to ensure all are aware of the ability.
- Sound Dr update and reminder was included in the Practice Manager E-Bulletin.
- Videos to be played on waiting room screens in practices.
- Further breakdown and tracking was explored with the provider however no further data is available.

Q4 Plans

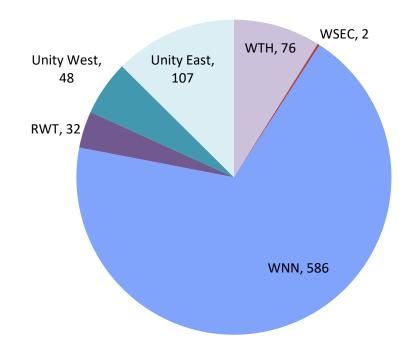
- Investigate the monitoring data, seeking assurance that 0 reports are accurate.
- Continue to work with practices to promote the sound Dr videos.
- Feedback to be sought form those who have high usage to understand how they are using the videos in practice.
- Targeting PCNs with low usage Q3 to understand the reason for this.



Care Navigation

Q3 Updates:

- There have been 851 recorded navigations entered on the clinical template this quarter.
- Further sessions of Care Navigation Updates held.
- New template rolled out on the clinical system.
- Scoping for phase 3 completed, roll out planned for February.
- Review finalised and all recommendations are being addressed.
- Criteria for navigation points collected for Phase 3.
- Logo and promotional materials produced to bolster awareness campaign.
- WNN are performing well, MGS and Prestbury have the highest recorded navigations.



Q4 Plans:

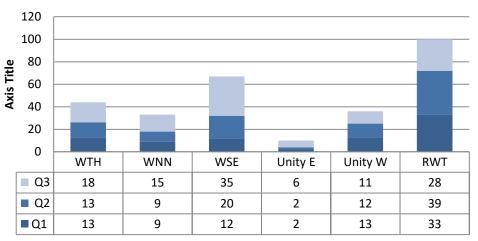
- Implementation of Phase 3 points, sessions booked for February.
- Additional updates to be offered on a network level.
- Ensure data quality is checked to ensure all networks are accurately recording navigation away from GP appointments.
- Monitoring data to be shared with CDs, targeting those practices that are currently not recording navigations.
- Finalisation and delivery of promotional tools for Care navigators within practices.



Choose and Book Advice and Guidance

Clinical Specialty	Oct-19	Nov-19	Dec-19
Dietetics	1	0	0
Elderly Care	0	0	0
Endocrine/ Diabetes	3	8	4
General Surgery	1	0	0
Gynaecology	4	5	5
Haematology	19	14	12
Neurology	2	1	2
Orthopaedics	2	0	2
Paediatrics	2	3	5
Plastic Surgery	0	0	2
Respiratory	1	1	3
Urology	4	7	0
Total	39	39	35





Q3 Updates:

- Q3 Most requested subjects continue to be Haematology (45) and Endocrine/Diabetes (15).
- RWT PCN are the highest users.
- Response times have been raised as an issue through the CQRM process, following feedback from practices
- Consultants attended CD away day to identify issues and are keen to maximise the use of advice and guidance, and if possible reduce turn around time and identify named consultants for each specialism/PCN.

Q4 Plans:

- Capacity alerts will be mandated on Choose and Book shortly, with all considered capacity being RAG rated based on wait times.
- Choose and Book to be included in QOF + and Demand Management specifications





Online Services

Online Triage

- We currently have 36/38 practices signed up. The remaining practice is in communications with the Primary care and IMT team.
- The remaining practices have now submitted their forms, and they are schedule to commence in March.

Patient Access (Patient Online)

- Engagement sessions at practice level (IM&T)
- Each Practice has been emailed with their current figures and asked to build on this by the promotion of patient access.
- Engagement with wider community i.e. Schools, social Clubs, St Johns, Churches, Mosques, Councillors etc. (IM&T)
- Engagement campaign (CCG) has identified an additional 4 high footfall locations to visit to advertise online access.
- POM statistics demonstrate that the utilisation rate is at 17%, this figure has fluctuated slightly due to practice mergers (e.g. Parkfields) and the requirement to re-enrol patients post merge.

Video Consultation

- There are currently 19/38 of practices live and able to offer video consultations.
- Roll out of this system continues to promoted in line with the engagement plan. Practices are contacted on a monthly basis and encouraged to sign up, and are fully supported throughout the process. Video Reporting is a Practice created search developed via EGTON. This search can be run manually on a practice by practice basis or by the CCG or Practice and will provide data at any point in time.

Q4 Next steps

- Approval sought for the digital first early implementer specification and circulation to practices.
- Continuation of engagements sessions and events in and around the City. Promotion to be bolstered by additional CSU campaign resources.
- Increasing the utilisation percentage of Patient Access/Patient online.
- Final 2 practices to go live for Online Triage, enabling full compliance by the end of March.
- All practices to be set up on NHS 111.
- All practices ready for go live (contractual) of online services by 1 April 2020.



NHS 111

Q3 Progress

- Presented at Clinical Directors meeting.
- Corporate governance has reviewed and approved the new DSA and DPIA.
- Practices to sign and submit all paperwork: the DPIA & DSA, during December.
 Full commencement of roll out expected to occur beginning of Jan 2020. 36/39
 Practices have submitted GP Connect data sharing agreements. Every practice bar 2 are able to set up and utilise 111.
- 2 practices were identified as the pilot sites; Penn Manor and Health & Beyond (Grove)
- Testing was successful for main and branch sites.

Next steps

- Full commencement of roll out to occur from January 2020, practices have been instructed to set up by end of February.
- Monitoring of utilisation and availability within practices.
- 111 into hubs is next to be implemented and the specification is currently in development.





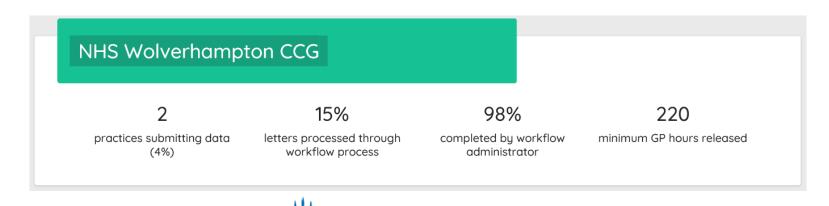
Workflow Optimisation

Q3 Progress

- A review of training completed all of the online modules has taken place for each practice.
- Communications sent to GPs & Practice Managers via E-bulletin regarding engagement at practice and PCN level.
- Survey monkey sent to Practices to gather feedback in relation to performance issues / engagement with Practice Unbound.
- Prestbury Medical Practice remain the top performer using this system regularly and effectively. To date they have saved over 170 hours of GP time. Mayfield medical practice have also started to submit data this quarter.
- See separate detailed report of practice engagement in workflow optimisation.

Q4 Next steps

- There is an opportunity for PCNs to evolve a central team/system for workflow, Network workflow to be explored but only if there is enough interest.
- To be discussed at Milestone Review Board as an Agenda Item.







Enhanced Services

- o QOF+
- Improving Access
- Basket Service
- Health Checks
- Peer Review
- o Mjog



QOF+

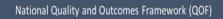
Q3 Progress

- Q1&Q2 data reviewed at November development meeting, with discussions held regarding achievements of SMI and LD health checks and how to further support this work.
- Issues with amendments to searches exposed, and resolved.
- Issues around dementia diagnosis, Bowel screening & alcohol have since been resolved.
- Communications out to practices via updated FAQ document.
- Recommendations made by clinical leadership group (STP) for harmonisation of CCG frameworks.

Q4 Plans

- Provisional data to be validated and shared with practices to confirm if there are any discrepancies.
- Working group developing specification refresh and potential areas of development for 2020/21.
- Proposals
 - CVD
 - Screening (Breast / Cervical) building on detail introduced in QOF
 - Maternity Immunisations/ smoking cessation
 - Respiratory- Claire- no update
 - Diabetes- build on current indicators and provide greater clarity
 - EOL
 - PCN quality premium to incentivise network encouraging all practices to have achieved the CCG thresholds.
 - Social isolation-referrals to SPLW for identified cohorts of patients.
 - Implementation update pack and FAQs document issued to practices.

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





SMI
Dementia
Learning
disabilities
Bowel cancer
screening



Extended Access- Performance

- NHSE/I expected utilisation rate 75%-85% (30 minutes per 1,000 patients)
- Wolverhampton Networks are commissioned to provide a higher more than the NHSE minimum (45 minutes per 1,000 patients)
- Utilisation was lower than expected in November & December
- Promotion of hub appointments for patients and staff training are taking place in January 2020

OCT TOTAL

Day of the month	Available	Booked	DNAs	Utilisation		
1	95	85	6	83%		
2	73	70	6	88%		
3	135	80	26	40%		
4	58	53	14	67%		
5	528	404	48	67%		
6	249	162	38	50%		
7	117	111	14	83%		
8	99	85	9	77%		
9	73	70	14	77%		
10	119	99	9	76%		
11	58	50	11	67%		
12	796	549	74	60%		
13	400	305	44	65%		
14	137	122	9	82%		
15	99	88	2	87%		
16	97	87	11	78%		
17	128	119	10	85%		
18	52	46	13	63%		
19	419	339	54	68%		
20	257	177	45	51%		
21	127	118	8	87%		
22	102	89	4	83%		
23	95	90	2	93%		
24	94	115	19	102%		
25	58	53	11	72%		
26	432	362	43	74%		
27	340	253	53	59%		
28	130	125	17	83%		
29	84	73	3	83%		
30	73	67	5	85%		
31	79	105	17	111%		

NOV TOTAL

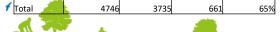
Day of the month	Available	Booked	Utilisation	
1	60	50	13	62%
2	699	325	61	38%
3	277	179	47	48%
4	124	109	29	65%
5	94	96	5	97%
6	85	81	11	82%
7	126	103	23	63%
8	52	47	7	77%
9	410	345	54	71%
10	336	210	47	49%
11	118	111	9	86%
12	104	86	14	69%
13	89	79	13	74%
14	114	90	11	69%
15	61	49	11	62%
16	466	368	52	68%
17	257	153	41	44%
18	99	93	17	77%
19	120	98	6	77%
20	89	85	10	84%
21	108	63	13	46%
22	55	45	6	71%
23	608	410	59	58%
24	267	189	43	55%
25	92	86	15	77%
26	99	86	14	73%
27	88	80	8	82%
28	120	112	14	82%
29	59	110	15	161%
30	438	300	29	62%

DEC TOTAL

Day of the month	Available	Booked	DNAs	Utilisation
1	232	172	49	53%
2	109	95	19	70%
3	96	78	17	64%
4	83	72	9	76%
5	141	135	16	849
6	54	40	6	63%
7	452	382	41	75%
8	229	174	55	52%
9	109	97	20	719
10	96	69	4	68%
11	85	76	7	819
12	113	103	19	749
13	60	41	12	489
14	404	310	42	66%
15	184	160	30	719
16	116	109	10	85%
17	97	86	15	73%
18	58	52	9	749
19	167	152	17	819
20	60	44	11	55%
21	382	290	40	65%
22	236	188	49	59%
23	125	93	8	68%
24	155	92	46	30%
25	101	26	5	219
26	130	88	18	54%
27	60	54	16	63%
28	335	230	29	60%
29	200	155	36	60%
30	77	72	6	86%
31	189	130	46	449



Total 5714 4238 697 71%





Primary Care Basket Services

- Basket services monitoring data Q1 Q3 (as of 20th January 2020).
- Wound Care specification will be subject to review in Q4 following confirmation from RWT confirming transition can commence.
- Revisions to wound care specification will be shared with clinical directors and PCCC with a view to implementing change from April 2020.

	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 patiuent or carer is unable to self-administer	Subcutaneous injection of Heparin - Administgration of Epoetins only where a patiuent or carer is unable to self-administer	Testosterone	Denosumab	Minor Injuries
	No of Procedures	No of Procedures	No of Procedures	No of Procedures	No of Procedures	No of Procedures	No of Procedures	No of Procedures	No of Procedures	No of Procedures	No of Procedures	No of Procedures	No of Procedures	No of Procedures
RWT	294	37	310	982	73	307	72	75	269	2	0	54	26	283
Unity E	226	65	55	795	28	115	13	148	123	0	0	13	15	471
Unity W	247	0	284	924	17	87	19	46	184	10	1	28	24	199
WNN	352	0	539	1026	73	36	31	67	175	5	0	41	16	260
WSEC	386	3	323	1524	18	77	7	164	185	0	0	12	2	105
WTH	230	10	315	848	5	43	24	115	228	0	0	21	17	285
TOTAL	1735	115	1826	6099	214	665	166	615	1164	17	1	169	100	1603



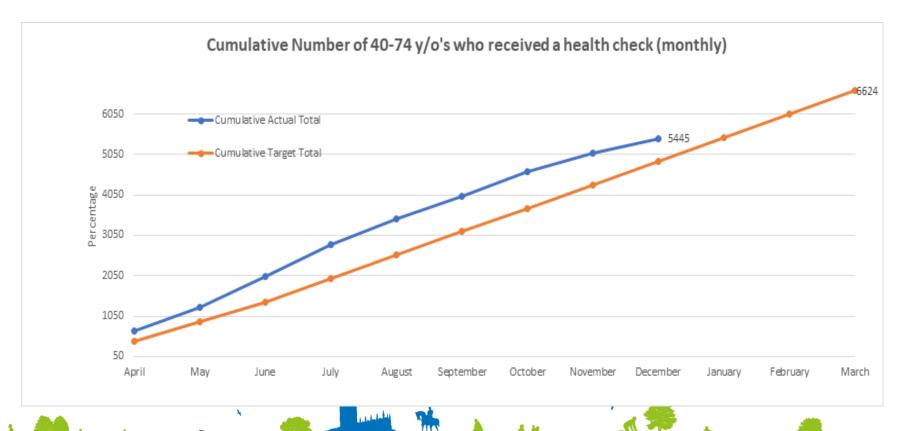






Health Checks

- 5445 Health Checks have been completed since April 2019; 1420 of those were completed in Q3.
- Wolverhampton continues to perform above targets, and is still the highest performing area within the Black country.



Peer Review

UI Ref	Bards	Work Stream + Austr + Mental (wasth) • Community Health • Community Care + Primary care + Primary care + Continuing Care • Continuing Care • Continuing Care • Continuing Care	Name	Data Source	TYPE	Lead	QIPP Annual Plan £	Planned Savings YTD (April to Nov)	Actual Savings YTD (April to Nov)		Variance from Annual Plan and Total Cumulative Savings £	Annual	RAG RATING (YTD)
93		Primary Care	Demand Management	BI	TF	Jo Reynolds	£ 178,000	f 118,000	£ 375,580	£ 257,580	Plan Delivered	211%	LOW RISK

				arter Two			Quarter Three									
	April Mth 1		May Mth 2		June Mth 3		July Mth 4		Aug Mth 5		Sep Mth 6		Oct Mth 7		Nov Mth 8	Dec Mth 9
Ī	f 14,000	£	14,000	£	15,000	£	15,000	£	15,000	£	15,000	£	15,000	£	15,000	
Ī	£ 40,956	£	63,071	£	50,504	£	32,730	£	52,035	£	41,795	£	42,969	£	51,520	
														•		

Q3 Progress

- FOT increased to £360,000
- Meetings held by some networks i.e. :WSEC, WNN, WTH.
- Development of 2020/21 specification has begun, with scoping of areas taking place.

Q4 Plans

- Scoping for the development of a platform of content to support the new roles within the practice team
- Consultants from areas of specialism attending CD away day for pathway discussion
- Development of 2020/21 spec to continue through approval process.

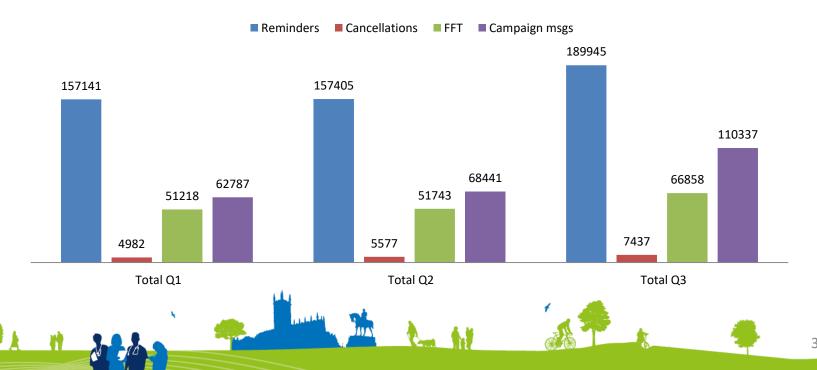
Peer review	Meetings Held
RWT PCN	Meetings planned. Awaiting outcome findings. Specialties TBC
Unity East/ West PCNs	Not Participating
WNN	Urology and ENT - 09/01/20 Dermatology -10/07/19
WSEC	Cardiology - 14/01/20 Urology and Dermatology-8/11/19
WTH	Gynaecology – 17/10/19 Dermatology – 19/06/19





Mjog

- 7437 appointments in Quarter 3 have been able to be reallocated, due to cancellations through text message. This is continued increase from previous quarters.
- Participation in FFT continues to be higher than previously recorded due to text messaging.
- There continues to be an increase in Reminders being sent from practices.
- IM&T are working with RWHT to move to a centralised text messaging solution, to support LTC management.



Conclusions

Conclusions and NextSteps



Conclusions & Next Steps

Conclusions

- Primary Care Networks Development programme continues to progress with plans submitted and agreed for development and engagement.
- Continued support and monitoring of new roles within the Wolverhampton networks.
- Care Homes mapped to PCNs.
- Care Navigation Phase 3 navigation points confirmed and implemented template changes for recording on the clinical system.
- Mental Health therapists alignment to networks, further development with the service to map coverage and demand within PCNS.
- Resilience programme fully committed and commenced for the identified practices.
- NHS 111 switch on commencement.
- Peer review continues to makes savings.
- Wolverhampton continues to perform above targets, and is still the highest performing area within the Black country for Health Checks.
- Wound care business case presented to BIC programme board, circulated to Clinical Directors for confirmation of uptake.

Next Steps

- PCN Workforce Plans are due to be submitted in February 2020
- Working closely with the Training hub to co-ordinate the training offer, PLT events & further opportunity for careers in Primary Care.
- PLT events: 7 updates in a day for Practice managers, Practice Manager Association Practice Manager event, Team W.
- Continue to advertise and review progress of recruitment into primary care – particularly new roles.
- Roll out online triage to final practices achieving 100% coverage in readiness for 1 April contractual requirements.
- 100% Compliance NHS 111 switch on in practices.
- 5 DES specifications: consultation survey submitted early January, revised specifications expected in February.
- Early implementer (digital) specification sign up to commence following approval (January).
- Commissioning intentions 2020/21 to be confirmed following national contract negotiations (March).
- Communications campaigns to be published and disseminated to target audiences.
- PCN Development delivery phase concludes in March
- Commissioning model for primary care at scale services ie portfolio /GPER services
- QOF+ Scheme 2020/21 finalised ready for comment/approval



