

WOLVERHAMPTON CCG

PRIMARY CARE COMMISSIONING COMMITTEE
5th September 2017

TITLE OF REPORT:	Primary Care Monthly Report
AUTHOR(S) OF REPORT:	Liz Corrigan – Primary Care Quality Assurance Coordinator
MANAGEMENT LEAD:	Manjeet Garcha
PURPOSE OF REPORT:	To provide an overview of activity in primary care, and assurances around mitigation and actions taken where issues have arisen.
ACTION REQUIRED:	<input type="checkbox"/> Decision <input checked="" type="checkbox"/> Assurance
PUBLIC OR PRIVATE:	This Report is intended for the public domain OR This report is confidential for the following reasons
KEY POINTS:	<ul style="list-style-type: none"> • Overview of Primary Care Activity
RECOMMENDATION:	Assurance only
LINK TO BOARD ASSURANCE FRAMEWORK AIMS & OBJECTIVES:	
1. Improving the quality and safety of the services we commission	Providing information around activity in primary care and highlighting actions taken around management and mitigation of risks
2. Reducing Health Inequalities in Wolverhampton	N/A
3. System effectiveness delivered within our financial envelope	N/A



1. BACKGROUND AND CURRENT SITUATION

This report provides an overview of primary care activity in Wolverhampton and related narrative. This aims to provide an assurance of monitoring of key areas of activity and mitigation where risks are identified.

2. INFECTION PREVENTION

Infection prevention is provided by Royal Wolverhampton Hospitals with a dedicated link for primary care. Information for the most recent visits and audits are shown below.

IP Audit Ratings: Gold 97-100%; Silver 91-96%; Bronze 85-90%; No rating ≤84%

Site	Date	Overall audit
Tettenhall Medical Practice	8/5/2017	94%
Duncan Street Primary Care Centre	16/5/2017	89%
Cannock Road Medical Practice	6/2017	95%
Probert Road Surgery	26/5/2017	94%
Penn Surgery	20/7/2017	90%
Rosevillas Surgery	27/7/2017	90%
Dr Sharma Practice	31/7/2017	85%
Hill Street Surgery	7/8/2017	76%
Caerleon Surgery	10/8/2017	89%
Showell Park Practice	5/2017	92%

The new IP audit has now been ratified and is in use at all sites. The following areas are now being audited:

- Waste
- Equipment
- IP Management
- Environment
- Sharps
- PPE
- Minor Surgery Room
- Practice Nurse Room

3. MEDICINES ALERTS

Healthcare professionals are informed about the alerts via a monthly newsletter (Tablet Bytes). In addition, ScriptSwitch messages and/or PMR searches are used to inform healthcare professionals where appropriate.

Click to view [Tablet Bytes](#)

Suspected adverse drug reactions should be reported to the Medicines and Healthcare products Regulatory Agency (MHRA) through the Yellow Card Scheme (www.mhra.gov.uk/yellowcard).

4. FRIENDS AND FAMILY TEST



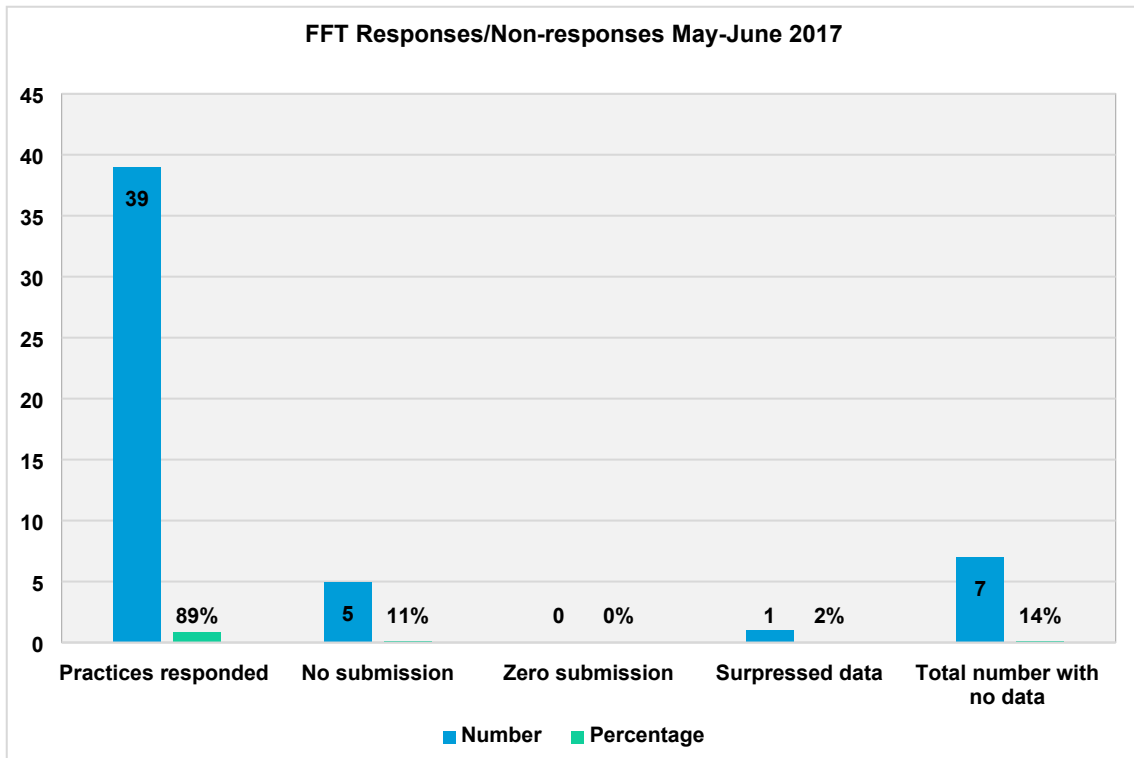
The figures for June FFT submissions (May 2017 figures) are shown below.

GP FFT	Submission for July 2017 (June 2017 data)		
	WCCG	West Mids	England
Percentage Recommended	83%↓ (2409/2892)	91%↑	89%↔
Percentage Not recommended	4%↓ (116/2892)	5%↔	6%↔
Overall response % of total list size	1%↑ (2892/276229)	0.6%↔	0.5%↑
Wolverhampton CCG			
	Number	Percentage	
No of Practices with "no data"	5	11%↔	
No of Practices had data suppressed <i>(returns with less than 5 responses are not included in the final analysis by NHSE)</i>	1	2%↓	
No of practices with zero responses	0	0%↓	
Total number practices with no data	6	14%↓	

Overall practices with no data available is improved on last month (14% compared to 18% and 36% in May), this indicates a steady improvement although overall figures are still low and fluctuate on a monthly basis. NHS England Quality team continue to provide input into FFT and Gill Shelley Primary Care Contract Manager continues to liaise with practices that have failed to submit data. Liz Corrigan also continues to liaise with practices and with the Primary Care Team to encourage promotion of FFT and to look at ways to facilitate this.

The numbers/percentages of submission and non-submission are shown below:



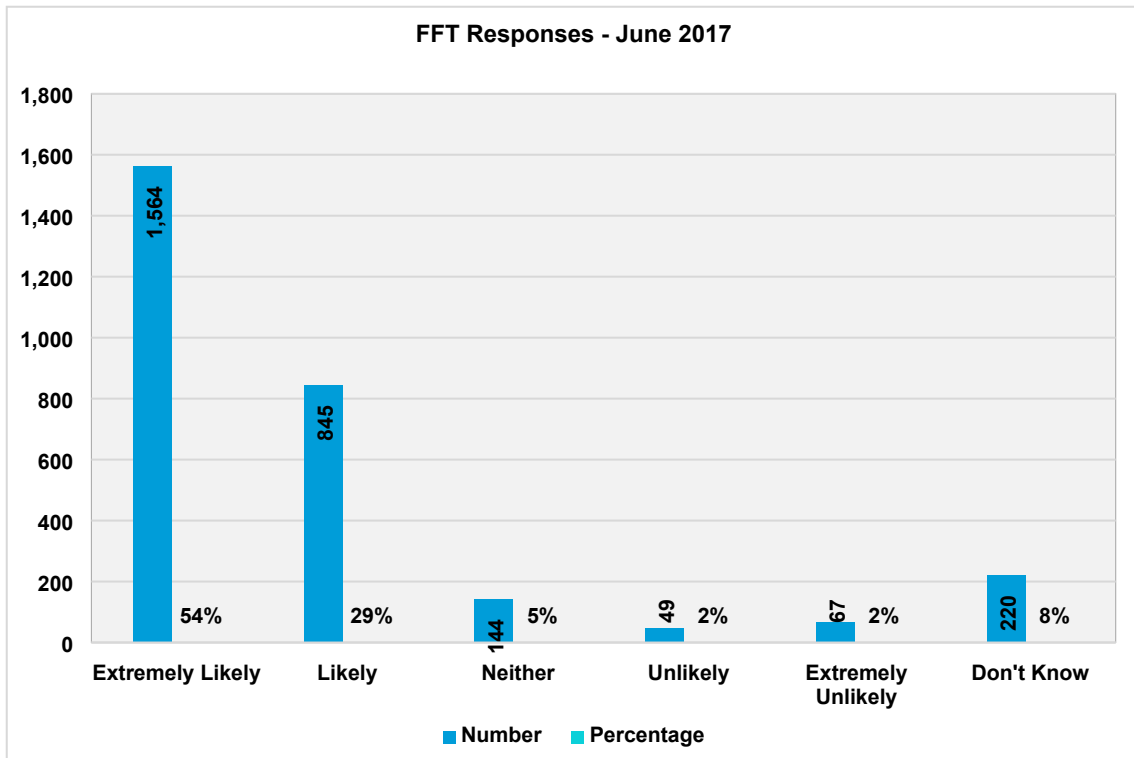


Overall response for WCCG as a proportion of list size was 1% which had increased from 0.7% and was significantly better than both the regional and national average.

FFT Ratings:

83% (2409) of responses were positive (extremely likely or likely with all practices providing a response in this category) a slight improvement on last month. 4% (116 – with responses from 21 practices) were unlikely or extremely unlikely to recommend which is a slight improvement on last month, with fewer practices receiving a negative response. Overall 13% (364) of respondents also gave a neither or don't know answer to this question which is slightly higher than last month, once again figures are low and fluctuate on a monthly basis and it is difficult to draw firm conclusions. There is a slight discrepancy as some respondents do not give a rating despite returning the questionnaire.

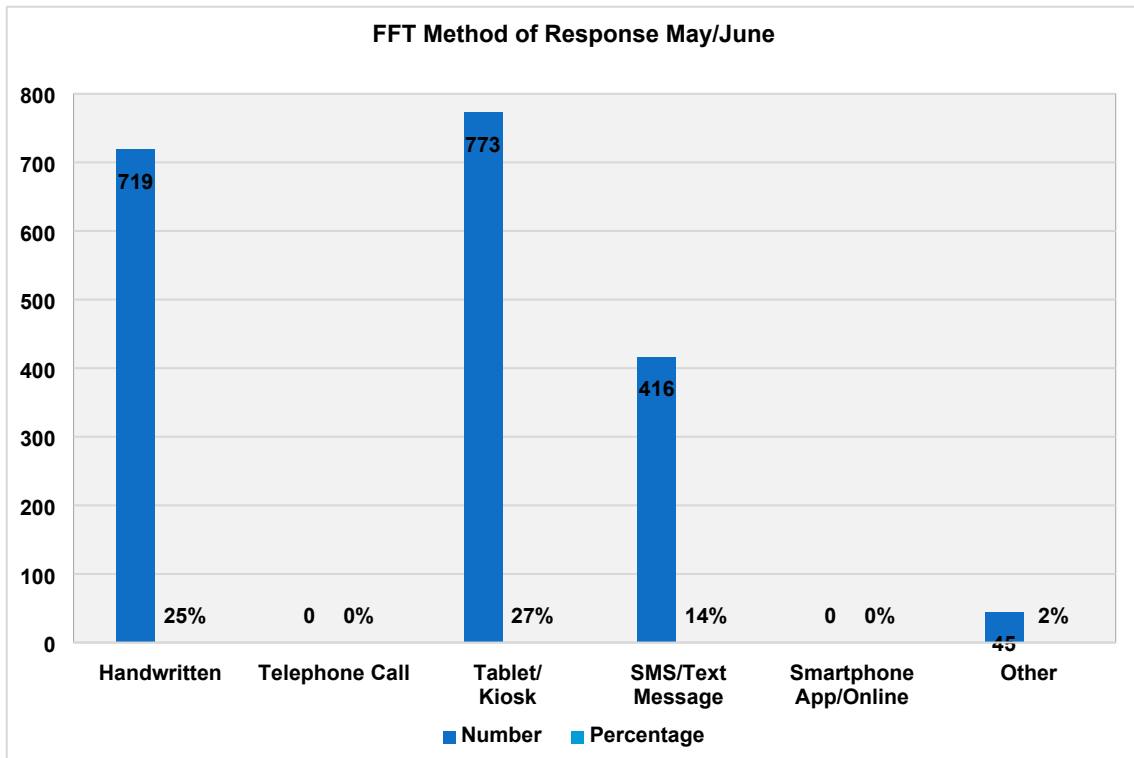




Method of Response:

This month the majority of responses have come via tablet/kiosk (check in screens) with handwritten cards in second place and SMS text in third, reflecting an effort by the CCG to promote this within practices. Responses via tablet/kiosk are significantly higher than the national and regional averages (27% compared to 2% and 3%), but SMS texts remain lower at 14% compared to 68% and 66% and work is planned in this area.





Please note that some practices do not appear to record the method of collection.

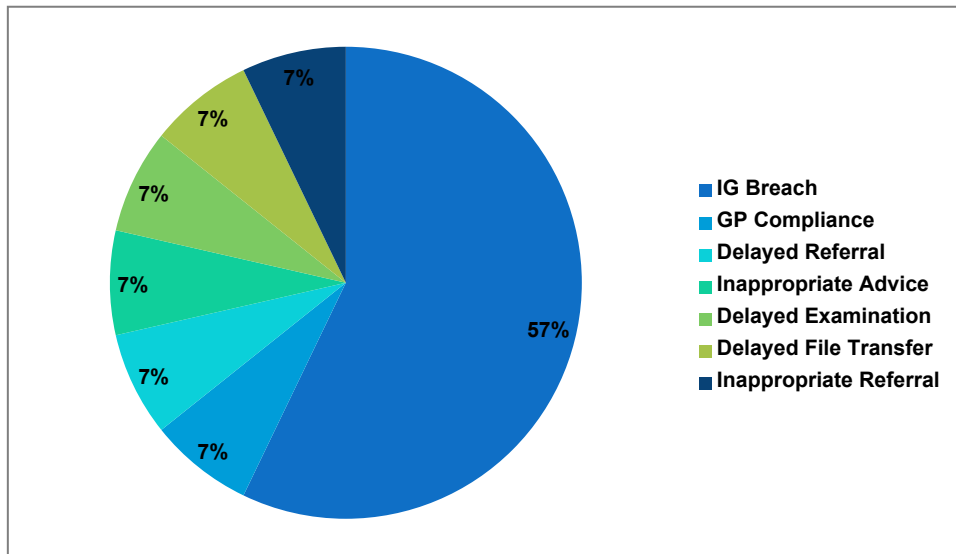
5. QUALITY MATTERS

Activity via the Quality Matters process is shown below, this is reviewed monthly. Quality issues relating to GPs are reported to NHS England Professional and Practice Information Gathering Group (PPIGG) for logging and escalation where appropriate.

New	9
On-going	5
Closed	0

Quality Matters themes are shown in the chart below, the majority of current incidents relate to information governance breaches, this is currently being reviewed in-depth by the Quality Team. All incidents here are due to be reported to PPIGG for logging and escalation once the practice has responded to the request for further information:





6. COMPLAINTS

No complaints or compliments relating to primary care are noted for the CCG. NHS England Primary Care complaints data is next due at the end of Quarter 2. GP complaints are dealt with within the surgery or via NHS England and the CCG does not have oversight of these during this process, however an overview of complaints data is provided by NHSE on a quarterly basis and a brief report will be provided.

7. NHS ENGLAND PRIMARY CARE DASHBOARD

The NHS England primary care dashboard provides feedback for individual practices in the following areas:

- Clinical quality
- Organisational quality
- Patient experience
- Safety

From these elements an overall score is provided and practices allotted a “stage” depending on how high the score is (the higher the score the higher the stage – an indication that the practice may require additional support). Four practices in the city have scored at stage 2 or 3 and may require some additional support to reduce their overall scores, this information has shared with the Patient Safety Manager, Primary Care Team, and the Primary Care Contract and Liaison Managers to discuss further actions.

Each domain is monitored and quality assured within the CCG and by external partners (e.g. NHSE and Public Health) and via CQC:

- Clinical quality is monitored via direct input from the Quality and Primary Care Teams, and via Operational Management Group and Quality and Safety Committee.
- Organisational quality is monitored via Primary Care Operational Management Group, and via Public Health and the local and regional Screening and Immunisation Boards.



- Patient experience is monitored via Friends and Family and the Primary Care Operational Management Group and the Primary Care Commissioning Committees, and with additional input from Health Watch and local PPGs.
- Safety score is monitored via the Quality and Safety Committee and via intelligence gathered by the Quality and Risk Team.

8. NICE/CLINICAL AUDIT

The NICE assurance group met in July 2017 where the latest guidelines were discussed. Guidance relevant to primary care is shown below. For the latest list of published guidance please see [this link](#).

Guideline
DG30 - Quantitative faecal immunochemical tests to guide referral for colorectal cancer in primary care
NG71 - Parkinson's disease in adults
QS155 - Low back pain and sciatica in over 16s
QS150 - Haematological cancers
QS152 - Liver disease
QS153 - Multimorbidity

9. CQC INSEPECTIONS AND RATINGS

Most recent inspections are shown below with rating and link to the full report, CQC continue to liaise with the CCG around inspections and ratings.

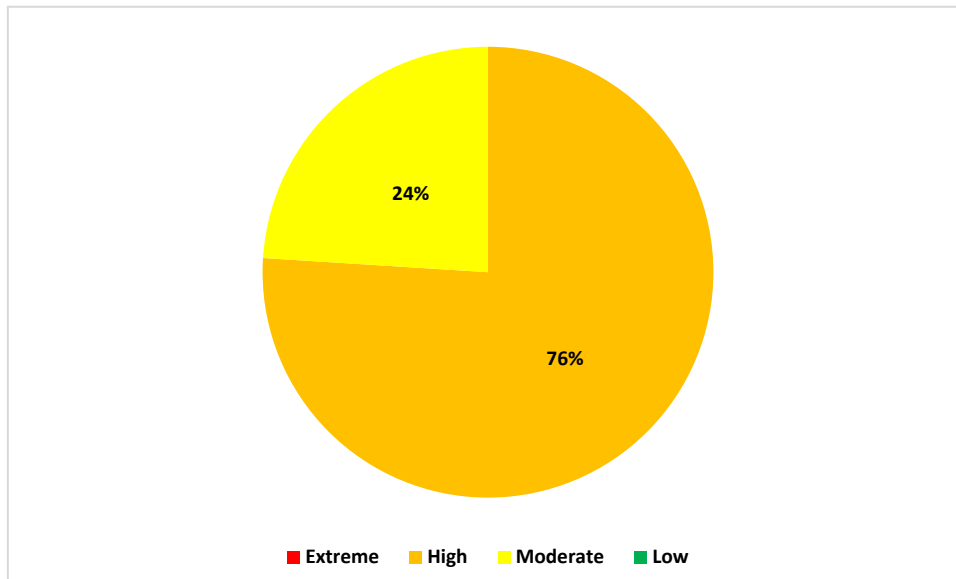
Site	Date	Rating
Keats Grove Surgery	18/8/2017	Good

10. RISK REGISTER

Risks relating to primary care are recorded on Datix and monitored on a monthly basis by the Quality and Risk Team, with mitigation and actions discussed via Primary Care Operational Management Group and Quality and Safety Committee. The current risk status is shown below

Rating	Number (inc. confidential risks)	Percentage
Extreme	0	0%
High	13	76%
Moderate	4	24%
Low		0%
Total (inc. confidential risks)	17	100%
Confidential risks	2	2 high





RAG rating:

1 - 3	Low risk
4 - 6	Moderate risk
8 - 12	High risk
15 - 25	Extreme risk

11. WORKFORCE

A working group has been set up to develop effective communications and engagement, which includes a video promoting primary care in the city and developing the primary care web pages. A primary care vacancies bulletin has been set up. The next meeting is scheduled for September 2017.

A workforce gap analysis report has been provided by PCH and Unity identifying current and future needs. Similar will be provided by VI this will be aligned with the workforce strategy. Work is also being carried out to align this with the Ten Point Action Plan for General Practice Nursing and with local developments in the apprenticeship programme.

The Nursing Associates continue in their course as do the nurses undertaking Fundamentals of Practice Nursing. The NAs alongside those from Dudley CCG are the first in England in Primary Care. This programme will be offered as a Foundation Degree Apprenticeship from 2018.

The 10 point action plan was released on 27th July and funding allocation has been tentatively released with more information to follow later in the month via the HEE Regional Leads Steering Group.



GPFV training programmes continue and include Reception Staff training and Practice Manager training. Funding allocation for practice nurse and ACP has been provisionally agreed and this will be announced as soon as the candidates have been made aware. Further information on NHS England/HEE Leadership programmes is expected in the autumn.

12. CLINICAL VIEW

Not applicable

13. PATIENT AND PUBLIC VIEW

Not applicable

14. KEY RISKS AND MITIGATIONS

See section 9.

15. IMPACT ASSESSMENT

Not applicable.

