

South Sefton Southport & Formby Primary Care Commissioning Committees in Common—Part 1 Agenda

Date: Thursday 15th August 2019 10:00-11:00am

Venue: Family Life Centre, Almond Room, Ash Street Southport PR8 6JH

Members		
Gill Brown	S&F CCG Lay Member (Chair)	GB
Graham Bayliss	SS CCG Lay Member (Vice Chair)	GB
Alan Sharples	SS CCG Lay Member	AS
Helen Nichols	S&F CCG Lay Member	HN
Fiona Taylor	S&F SS CCG Chief Officer	FT
Martin McDowell	S&F SS CCG Chief Finance Officer	MMc
Jan Leonard	S&F CCG Director of Place (North)	JL
Brendan Prescott	S&F CCG Chief Nurse and Quality Lead	BP
Angela Price	S&F SS CCG Programme Lead Primary Care	AP
Alan Cummings	NHSE Senior Commissioning Manager	AC

Non Voting Attendees:

LMC Representative

Healthwatch Representative

Health & Well Being Representative

Minutes

Jacqui Wescott Senior Administrator JW

No	Item	Lead	Report	Receive/ Approve	Time
PCCiC19/59.	Apologies for absence	Chair	V		
PCCiC19/60.	Declarations of interest regarding agenda items	All	V		
PCCiC19/61.	Minutes of the previous meeting : 20th June 2019	Chair	R	А	
PCCiC19/62.	Action points from the previous meeting	Chair	R	R	
PCCiC19/63.	Report from Operational Group and Decisions made	AP	V	R	
PCCiC19/64.	Primary Care Quality GP Patient Survey Complaints Log – Quarter one	AP	R	R	
PCCiC19/65.	Update on GPFV Operational Plan/ Primary Care Programme Report	AP	R	R	
PCCiC19/66.	PCN update	CG/KS	V	R	
PCCiC19/67.	Sign up to Direct Enhanced Services	RH	R	R	
PCCiC19/68.	Health Watch Issues	MK	V	R	



No	Item	Lead	Report	Receive/ Approve	Time
PCCiC19/69.	Key Issues log	Chair	R	R	
PCCiC19/70.	Any Other Business Matters previously notified to the Chair no less than 48 hours prior to the meeting.	Chair		A	
PCCiC19/71.	Date of Next Meeting: 19 th September 2019 Room 5A Merton House, Bootle, L20 3DL	-	-	-	



NHS South Sefton CCG and NHS Southport & Formby CCGPrimary Care Commissioning Committees in Common

Draft Minutes - Part I

Date: Thursday 20th June 2019. 10.00am – 11.00am

Venue: Family Life Centre, Almond Room, Ash Street Southport PR8 6JH

Members		
Gill Brown	S&F CCG Lay Member (Chair)	GBr
Graham Bayliss	SS CCG Lay Member (Vice Chair)	GBa
Graham Morris	SS CCG Lay Member	GM
Helen Nichols	S&F CCG Lay Member	HN
Fiona Taylor	S&F SS CCG Chief Officer	FT
Martin McDowell	S&F SS CCG Chief Finance Officer	MMc
Jan Leonard	S&F CCG Director of Place (North)	JL
Debbie Fagan	S&F CCG Chief Nurse and Quality Lead	DF
Angela Price	S&F SS CCG Programme Lead Primary Care	AP
Alan Cummings	NHSE Senior Commissioning Manager & Improvement	AC
Non Voting Attendees:		
LMC Representative		
Healthwatch Representative		
Health & Well Being Representative		
Dr Craig Gillespie	GP Clinical Representative	CG
Dr Kati Scholtz Minutes	GP Clinical Representative	KS
Jane Elliott	Commissioning Manager - Localities	JE

Attendance Tracker ✓ = Present A = Apologies N = Non-attendance C= Cancelled

Name	Membership	April 19	May 19	June 19	July 19	Augu 19
Members:						
Gill Brown	S&F CCG Lay Member (Chair)	✓	Α	✓		
Graham Bayliss	SS CCG Lay Member (Vice Chair)	✓	Α	✓		
Graham Morris	SS CCG Lay Member	Α	✓	-		
Helen Nichols	S&F CCG Lay Member	✓	✓	✓		
Fiona Taylor	S&F SS CCG Chief Officer	Α	Α	✓		
Martin McDowell	S&F SS CCG Chief Finance Officer	✓	✓	✓		
Jan Leonard	S&F CCG Director of Place (North)	✓	✓	✓		
Brendan Prescott	S&F CCG Chief Nurse and Quality Lead	Α	✓	Ν		
Angela Price	S&F SS CCG Programme Lead Primary Care	✓	✓	Α		
Alan Cummings	NHSE Senior Commissioning Manager	✓	✓	Α		
Non Voting Attendees:						
LMC Representative		✓	Ν	Α		
Health Watch Representative		Α	Α	✓		
Health & Well Being Representative		Α	Ν	Ν		
Dr Craig Gillespie	GP Clinical Representative	√	✓	Α		
Dr Kati Scholtz	GP Clinical Representative	✓	√	Α		

No	Item	Action
PCCiC19/46	Apologies for absence Apologies were received from Dr Craig Gillespie, Dr Kati Scholtz, Alan Cummings and Angela Price. Sharon Howard attended as NHSE representative. Debbie Fagan has gone on secondment; therefore, Brendan Prescott will represent Quality team at future meetings. It was noted that the meeting was not quorate. There was also no clinical representation. Welcome and Introductions GBr advised members that this is a meeting to be held in public and the dates, time and venue of this and all future meetings had been published. Two members of the public were present at the meeting.	
PCCiC19/47	Declarations of interest regarding agenda items There were no declarations of interest declared that had a direct impact on the meeting's proceedings.	
PCCiC19/48	Minutes of the previous meeting The minutes of the meeting held on Thursday 16 th May 2019 were approved as an accurate record of proceedings.	
PCCiC19/49	Action points from the previous meeting Members reviewed the action log and the following was agreed: JCCiC19/29 Item closed. Report is prepared and awaiting signature from practice PCCiC 19/05 Item closed. TOR are prepared and will be reviewed at the subcommittee. PCCiC 19/05 Item closed. The committee will discuss this within the development session in July. PCCiC 19/28 Item closed. Initials of delegates have been amended throughout the documents. All other items are to remain open, progress ongoing.	

PCCiC19/50	Report from Operational Group and Decisions made
	LQC 5. There are a small number of practices who have not returned their signup sheets for the local quality contract. The deadline has been extended until 30 th June 2019 to enable practices to submit their paperwork. Failure to sign up will result in payments ceasing, this has been discussed with the LMC.
	Moore Street Surgery has undergone a recent CQC inspection. They achieved an overall 'Good' rating.
	Healthwatch had published 'Enter and View' reports for a number of practices in the Sefton area. The operational group have received these reports.
	Outstanding complaints. There are a small number of outstanding complaints being reviewed as a matter of priority. NHSE will continue to receive and deal with complaints from patients but will pass along complaints that can be dealt with locally with CCG input. Future complaints will be dealt with contemporaneously and a summary report will be submitted to the Commissioning Committee on a six monthly basis.
	The CCG are overseeing ordering of Influenza Vaccinations for the winter period 2019/20.
	The CCG are looking at Interpreting Services to support accessibility to GP practices.
PCCiC19/51	Primary Care Quality
	The committee noted that there is a vacancy for a post to support quality in primary care; this will be recruited once an internal review of quality is completed. A work plan for the forthcoming development session has been drafted which has a section for quality to be discussed.
	The terms of reference for the joint operational committee have reviewed and amended to reflect quality remit. Quality will be a standing item on the agenda.

PCCiC19/52	Update on GPFV Operational Plan/ Primary Care Programme Report	
	Additional 5000 doctors – It is recognised that this is a national issue. Although NHSE are committed to supporting GP's into the area, there clearly is shortage across the country.	
	Following discussions it was decided that AP would review the Primary Care Programme. GPFV aspirational targets are to be removed. Broader headings will be introduced to reflect workflows. The programme of work will be added to the development session to be discussed further.	JL
	e-consult – An explanation was given of how patients utilise e-consults as an alternative way of accessing primary care services. Patients are able to fill in an electronic form, accessed from the practice website, explaining in full the reason for the contact. GP can then respond appropriately to the patients. There is a facility within the process that will signpost patients to alternative providers of care where appropriate or highlight 'red flag' symptoms which would require priority treatment. This has an impact on practices by reducing the number of patients who contact the practice by telephone. GBr requested a demonstration of the software.	АР
	Apex/Insight software had been placed on hold due to some difficulties experienced nationally. Issues have now been resolved and rollout will continue. The software will enable reporting on workforce and workload within GP practices.	
	A request was made for CP to present the 10 point nursing plan to the committee in August.	СР
PCCiC19/53	Primary Care Network update	
	Applications for PCN were received by the deadline of 15 th May 2019. The CCG have authorised 7 PCN across Sefton. 4 in Southport and Formby CCG and 3 in South Sefton CCG. Maghull PCN application was declined due to being under the threshold for patient list size. A revised application was submitted for Maghull and Crosby practices as a joint PCN which was approved. There are 4 practices in South Sefton who have decided not to be part of a Network. PCNs have been approached to provide network services (as described in the DES specification) for registered patients within those practices. All practices in Southport and Formby are members of a network.	
	The operational group had agreed that for PCNs supporting non PCN practices would be able to access the participation payment from the DES to support the network to offer network services to the population.	
	PCN are now looking at providing assurances around governance and providing extended hours access across the community by 1 st July 2019. The CCG will be supporting the PCN's through this process. Sharing agreements have not been released nationally, currently awaiting further information.	
	A discussion took place around how the possible confusion for the public between 7 Day Access services and Extended Hours services.	

PCCiC19/54

7 Day Access utilisation

JL presented data from the service with utilisation rates. Healthwatch reported that they are receiving feedback from members of the public that they are not being offered appointments at the 7 day access service when contacting GP practices. This will be fed back to the Federations.

Primary Care have secured funding from NHSE forward view monies to fund 'Digital Champion Trainers' They work with practice to promote the 7 day access services and train reception staff on how to use the EMIS to make appointments.

Utilisation rates were shared with the group broken down into practice level data. It was noted that the 'unknown' option within the data; this was when the service or NHS111 book the appointments. The committee ask for numbers to be presented as percentages of the practice list size in future.

Explanation was given on some of the issue the 7 day access service face due to technical difficulties; they do not have access to requesting tests electronically via ICE requests are made in paper format. The service does not have access to ERS which is software for referring patients electronically; the CCG and the federation are working with NHS Digital to rectify this problem.

The Southport and Formby service have a physiotherapist as part of their team. South Sefton have experienced some issues in securing a physio' and have decided to subcontract via another route. The committee asked for assurances that allied health professionals are not working outside of their competencies. NHSE was asked to provide data across the Cheshire and Merseyside footprint to enable comparisons to be made.

Overall feedback from service users is positive.

PCCiC19/55

Healthwatch Feedback

Healthwatch confirmed that the 'enter and view' report for St Marks and Trinity has been finalised and is with the practice for their signature. The practice had requested a definition of continuity of care. Healthwatch responded with the following definition:

"Continuity of care is defined by Healthwatch Sefton as repeated contact between an individual patient and a doctor for a period of time required to treat a specific illness/ condition. We understand that it is not always possible to see the same GP, but we believe continuity is important, as being treated by different clinicians can be upsetting, particularly when you have to repeat your story again and again. It is important that the patient is asked how they would like their care to be delivered to ensure their medical needs are met, recognising their personal situation."

In sharing the above definition, we would also like to share that whilst understanding that it is not always possible to see the same GP during an episode of care, the lead GP (the one you saw at the beginning of your episode) should co-ordinate the process. In reducing the need for the patient to repeat their story again and again, it is important that patient notes are available to all concerned to reduce the need for repetition. This should provide better outcomes, increase patient satisfaction and be more cost effective.

Healthwatch are in the process of pulling together a template to enable a summary of reports to be produced. This will detail which practices have been visited and when. Comparisons can be made between practices. DB to submit template broken down into Localities for submission to committee.

Some practices have not known how to respond to reports that have been sent to them, Healthwatch again will produce a template to support practices.

Some observations that have been fed back to Healthwatch include practices not being consulted on new housing developments. It was noted that large development are listed on website for consultation with the public, practices are able to access this data. FT will liaise with the local Authority to see if there is a mechanism for practices to be alerted to future developments.

Healthwatch has been working with a local autism group who has fed back some good work that Blundellsands Surgery have in place called 'visible appointments'. Patients are given a coloured lanyard to alert staff they are on the autistic spectrum. This enables the patient to become independent in accessing services within the practice. First appointments in the afternoons are utilised as this is when the practice is most quiet. This model of working would be good to roll out to other practices in Sefton. Feedback will be given to CG.

DB

FT

JL

PCCiC19/56	Key Issues Log
	Planning for Influenza vaccinations
	Review of 7 day access
	Authorisation of the 7 PCN's
	Medicines Management offer to PCN's
	Extended hours provision by PCN by 1 st July 2019
	Healthwatch reports
PCCiC19/57	Any Other Business
	None raised.
PCCiC19/58	Date of Next Meeting:
	Date of Next Meeting: 18 th July 2019
	Room 5A Merton House, Bootle, L20 3DL

Meeting Concluded.

Motion to Exclude the Public:

Representatives of the Press and other members of the Public to be excluded from the remainder of this meeting, having regard to the confidential nature of the business to be transacted, publicity on which would be prejudicial to the public interest, (Section 1{2} Public Bodies (Admissions to Meetings), Act 1960)





SS SF NHSE Joint Commmissioning Committee in Common – Action Tracker June 2019

Item		CCG	Lead	Time
PCCiC 19/05	Dfair to circulate NHSE guidance relating to the membership of primary care commissioning committees 16.5.19 Update: under review	Both	Dfair	May 19
PCCiC 19/05	Dfair to circulate a briefing note setting out the roles and responsibilities of PCCCs. 16.5.19 Update: to be finalised for July meeting.	Both	Dfair	May 19
PCCiC 19/52	Primary Care Programme is to be updated. This will be done via the development session. Aspirational targets are to be removed	Both	AP	Aug 19
PCCiC 19/52	The group asked for a demonstration of online consultations	Both	AP	Aug 19
PCCiC 19/52	The group requested the 10 point nursing plan to be presented to the August Committee	Both	СР	Aug 19
PCCiC 19/55	Healthwatch are to submit a template to the committee breaking down into localities. This is to allow comparisons to be made between practices	Both	DB	Aug 19
PCCiC 19/55	Healthwatch reported that practices are not consulted on any large residential development within the Sefton area. FT will contact the local authority to see if there is a mechanism for practices to be alerted for future developments	Both	FT	Aug 19
PCCiC 19/55	Healthwatch reported some positive feedback for Blundellsands Surgery around their Autistic patients and how they use coloured lanyards to help staff recognised their needs. This will be reported back to the practice	SS	JL	Aug 19



Primary Care Commissioning Committee August 2019

Agenda Item:	Author of the Paper:	
Report date: 5 th August 2019	Angela Price Primary Care Programme Lead angela.price@southseftonccg.nhs Tel: 01513178379	<u>s.uk</u>
Title: GP Patient Survey 2019		
Summary/Key Issues:		
The GP Patient Survey (GPPS) is an England patients' experiences of their GP practices.	wide survey providing practice leve	el data about
This paper summarises results for NHS South publication (fieldwork January to March 2019).	Sefton CCG based on the July 20°	19 GPPS
Recommendation The Primary Care Commissioning Committee i the report.	s asked to note the content of	Note x Approve Ratify

Link	ss to Corporate Objectives (x those that apply)
х	To focus on the identification of QIPP (Quality, Improvement, Productivity & Prevention) schemes and the implementation and delivery of these to achieve the CCG QIPP target and to support delivery of financial recovery.
x	To progress Shaping Sefton as the strategic plan for the CCG, in line with the NHSE planning requirements set out in the "Five Year Forward View", underpinned by transformation through the agreed strategic blueprints and programmes and as part of the NHS Cheshire and Merseyside Healthcare Partnership.
х	To ensure that the CCG maintains and manages performance & quality across the mandated constitutional measures.
х	To support Primary Care Development through the development of an enhanced model of care and supporting estates strategy, underpinned by a complementary primary care quality contract.
х	To advance integration of in-hospital and community services in support of the CCG locality model of care.
	To advance the integration of Health and Social Care through collaborative working with Sefton Metropolitan Borough Council, supported by the Health and Wellbeing Board.

Process	Yes	No	N/A	Comments/Detail (x those that apply)
Patient and Public	Х			
Engagement				
Clinical Engagement		Х		
Equality Impact		Х		
Assessment				
Legal Advice Sought		Х		
Resource Implications		Х		
Considered				
Locality Engagement		Х		
Presented to other		Х		
Committees				

Link	Links to National Outcomes Framework (x those that apply)							
Χ	Preventing people from dying prematurely							
Χ	Enhancing quality of life for people with long-term conditions							
Х	Helping people to recover from episodes of ill health or following injury							
Χ	Ensuring that people have a positive experience of care							
Х	Treating and caring for people in a safe environment and protecting them from avoidable							
	harm							



Report to the Primary Care Commissioning Committee August 2019

1. Introduction and Background

A GP patient survey is commissioned nationally by NHS England, administered by Ipsos MORI.

In 2018 the questionnaire was redesigned to reflect changes to primary care services following the implementation of the GP Forward View. Due to the changes to the questionnaire in 2018, all questions at CCG and practice level are not comparable prior to this year.

Past results dating back to 20107 are available for every practice in the UK. From 2017 the survey has been annual; previously it ran twice a year (June 2011 – July 2106), on a quarterly basis (April 2009 – March 2011) and annually (January 2007 – march 2009).

The survey measures patients' experiences across a range of topics, including:

- Your local GP services
- Making an appointment
- Your last appointment
- Overall experience
- Your health
- When your GP practice is closed
- NHS Dentistry
- Some questions about you

2. Engagement

In 2019, 10,978 questionnaires were sent out to patients in South Sefton, and 3,214 questionnaires were returned completed. This represents a response rate of 29%.

The national response rate for 2019 was 33.1%, based on 770,512 completed surveys.

Participants are sent a postal questionnaire, also with the option of completing the survey online or via telephone.

It is acknowledged that the survey has limitations as the sample sizes at practice level are relatively small, and qualitative data is not included. The data provides a snapshot of patient experience at a given time which is updated annually.

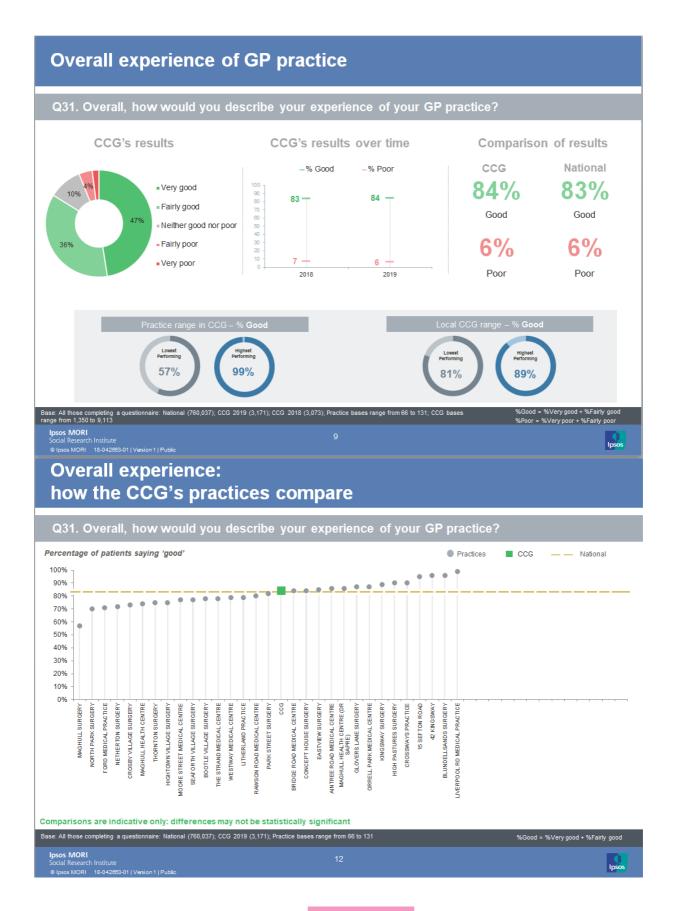
The data allows a comparison of practices' results within a CCG, and CCG results against a local and national average.

3. Survey Results

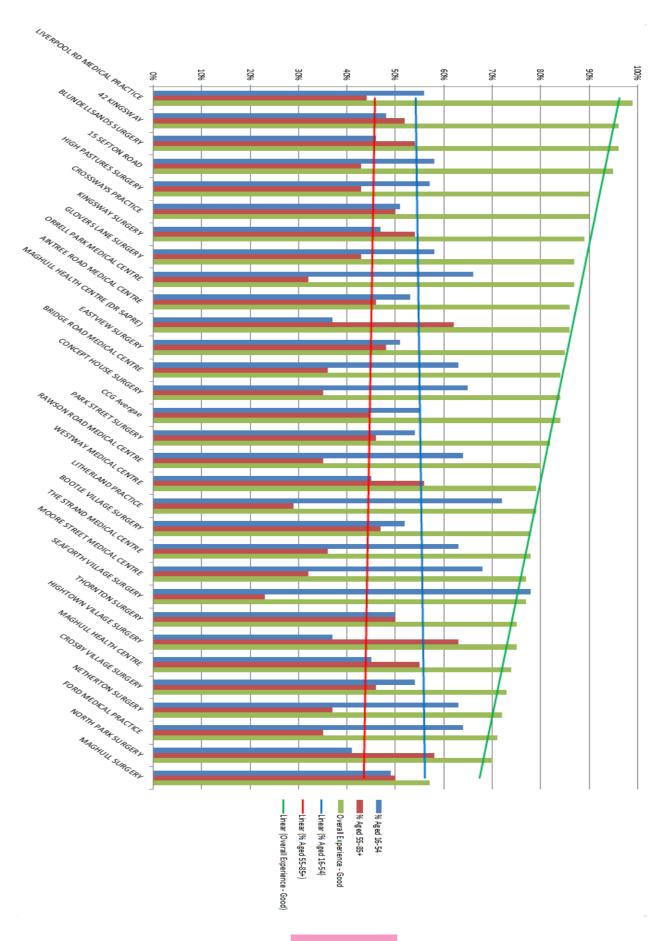
The survey results below focus on overall experience of GP practice. There is a comparison within the 12 Cheshire and Merseyside CCGs, which shows that South Sefton CCG attained

84% in line with another CCG. Achievement within Cheshire and Merseyside ranged from 81% - 89%.

Overall Experience of GP Practice



Age and Overall Experience



The survey results below provide national and local comparisons:

	SSCCG	C&M CCGs	National
Overall experience of GP practice	84%	81% - 89%	83%
Ease of getting through to GP practice by phone	64%	55% - 75%	68%
How helpful do you find the receptionists at your GP	90%	86% - 93%	89%
practice?			
Ease of use of online services	77%	77% - 83%	77%
Choice of appointment	52%	51% - 64%	62%
Satisfaction with appointment offered	74%	68% - 80%	74%
Overall experience of making an appointment	67%	61% - 74%	67%
Mental health needs recognised and understood	85%	85% - 91%	86%
Support with managing health conditions	77%	75% - 83%	78%
Satisfaction with appointment times	64%	61% - 70%	65%
Time taken to receive care or advice when GP	57%	57% - 76%	66%
practice is closed (about right)			
Confidence and trust in staff providing services when	91%	86% - 96%	91%
GP practice is closed			
Overall experience of services when GP practice is	71%	67% - 78%	69%
closed			

4. Recommendations

The Primary Care Commissioning Committee is asked to note the content of this report.

Angela Price Primary Care Programme Lead August 2019

Primary Care Commissioning Committee August 2019							
Agenda Item:	Author of the Paper:						
Report date: 5 th August 2019	Angela Price Primary Care Programme Lead angela.price@southseftonccg.nhs.uk Tel: 01513178379						
Title: GP Patient Survey 2019							
Summary/Key Issues: The GP Patient Survey (GPPS) is an England patients' experiences of their GP practices. This paper summarises results for NHS Souths GPPS publication (fieldwork January to March	•						
Recommendation The Primary Care Commissioning Committee is asked to note the content of the report. Note X Approve Ratify							

Links to Corporate Objectives (x those that apply)							
х	To focus on the identification of QIPP (Quality, Improvement, Productivity & Prevention) schemes and the implementation and delivery of these to achieve the CCG QIPP target and to support delivery of financial recovery.						
х	To progress Shaping Sefton as the strategic plan for the CCG, in line with the NHSE planning requirements set out in the "Five Year Forward View", underpinned by transformation through the agreed strategic blueprints and programmes and as part of the NHS Cheshire and Merseyside Healthcare Partnership.						
х	To ensure that the CCG maintains and manages performance & quality across the mandated constitutional measures.						
х	To support Primary Care Development through the development of an enhanced model of care and supporting estates strategy, underpinned by a complementary primary care quality contract.						
х	To advance integration of in-hospital and community services in support of the CCG locality model of care.						

To advance the integration of Health and Social Care through collaborative working with Sefton Metropolitan Borough Council, supported by the Health and Wellbeing Board.

Process	Yes	No	N/A	Comments/Detail (x those that apply)
Patient and Public Engagement	X			
Clinical Engagement		х		
Equality Impact Assessment		Х		
Legal Advice Sought		х		
Resource Implications Considered		Х		
Locality Engagement		х		
Presented to other Committees		Х		

Lin	Links to National Outcomes Framework (x those that apply)								
Х	Preventing people from dying prematurely								
Х	Enhancing quality of life for people with long-term conditions								
Х	Helping people to recover from episodes of ill health or following injury								
Х	Ensuring that people have a positive experience of care								
х	Treating and caring for people in a safe environment and protecting them from avoidable harm								



Report to the Primary Care Commissioning Committee August 2019

1. Introduction and Background

A GP patient survey is commissioned nationally by NHS England, administered by Ipsos MORI.

In 2018 the questionnaire was redesigned to reflect changes to primary care services following the implementation of the GP Forward View. Due to the changes to the questionnaire in 2018, all questions at CCG and practice level are not comparable prior to this year.

Past results dating back to 2007 are available for every practice in the UK. From 2017 the survey has been annual; previously it ran twice a year (June 2011 – July 2106), on a quarterly basis (April 2009 – March 2011) and annually (January 2007 – march 2009).

The survey measures patients' experiences across a range of topics, including:

- Your local GP services
- Making an appointment
- Your last appointment
- Overall experience
- Your health
- When your GP practice is closed
- NHS Dentistry
- · Some questions about you

2. Engagement

In 2019, 5,266 questionnaires were sent out to patients in Southport and Formby, and 2,058 questionnaires were returned completed. This represents a response rate of 39%.

The national response rate for 2019 was 33.1%, based on 770,512 completed surveys.

Participants are sent a postal questionnaire, also with the option of completing the survey online or via telephone.

It is acknowledged that the survey has limitations as the sample sizes at practice level are relatively small, and qualitative data is not included. The data provides a snapshot of patient experience at a given time which is updated annually.

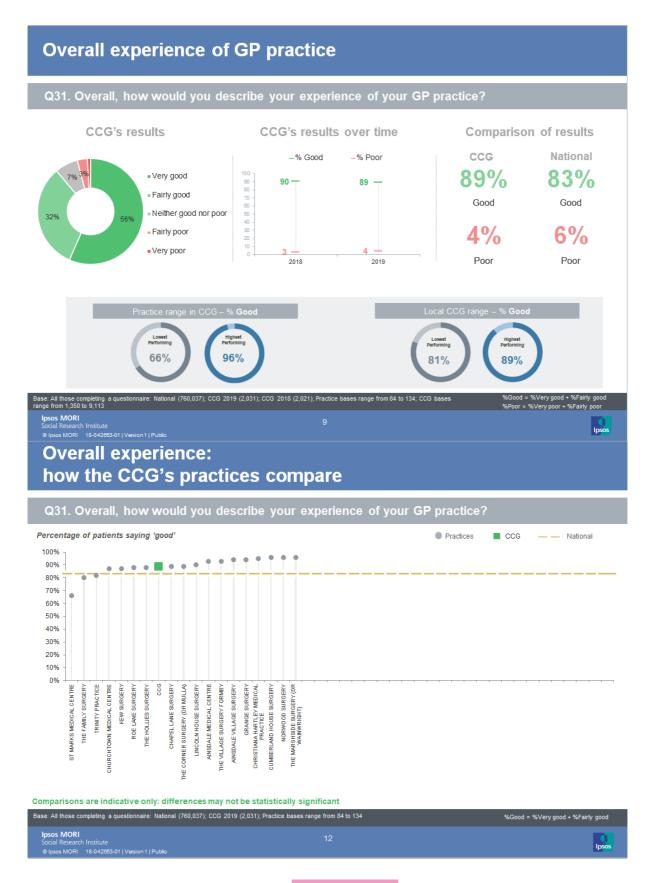
The data allows a comparison of practices' results within a CCG, and CCG results against a local and national average.

3. Survey Results

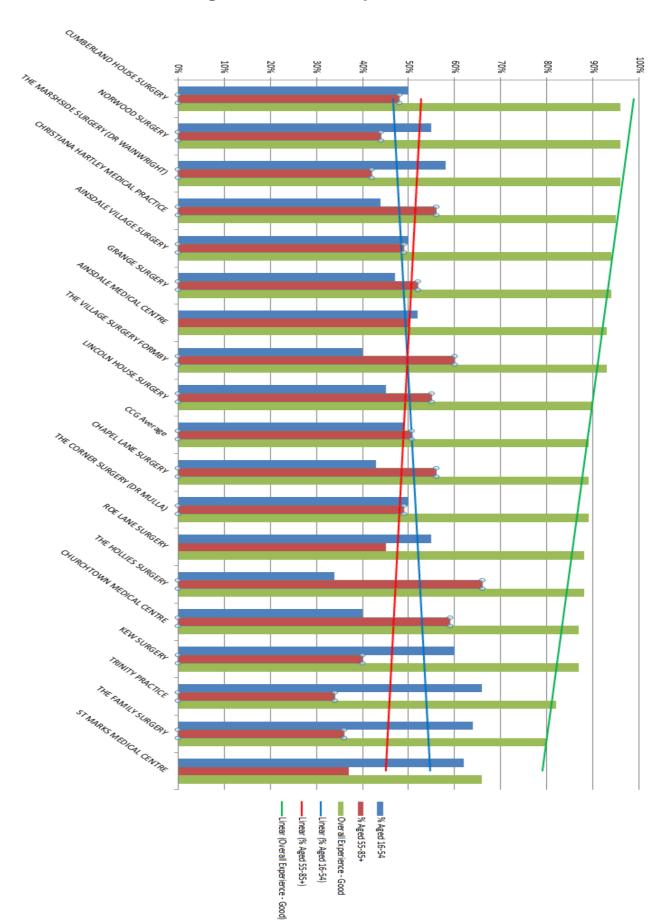
The survey results below focus on overall experience of GP practice. There is a comparison within the 12 Cheshire and Merseyside CCGs, which shows that Southport and Formby

CCG attained the highest rating locally. Achievement within Cheshire and Merseyside ranged from 81% - 89%.

Overall Experience of GP Practice



Age and Overall Experience



The survey results below provide national and local comparisons:

	S&F CCG	C&M CCGs	National
			2001
Overall experience of GP practice	89%	81% - 89%	83%
Ease of getting through to GP practice by phone	69%	55% - 75%	68%
How helpful do you find the receptionists at your GP practice?	92%	86% - 93%	89%
Ease of use of online services	82%	77% - 83%	77%
Choice of appointment	59%	51% - 64%	62%
Satisfaction with appointment offered	79%	68% - 80%	74%
Overall experience of making an appointment	72%	61% - 74%	67%
Mental health needs recognised and understood	89%	85% - 91%	86%
Support with managing health conditions	81%	75% - 83%	78%
Satisfaction with appointment times	70%	61% - 70%	65%
Time taken to receive care or advice when GP	68%	57% - 76%	66%
practice is closed (about right)			
Confidence and trust in staff providing services when	93%	86% - 96%	91%
GP practice is closed			
Overall experience of services when GP practice is closed	75%	67% - 78%	69%

4. Recommendations

The Primary Care Commissioning Committee is asked to note the content of this report.

Angela Price Primary Care Programme Lead August 2019



Primary Care Commissioning Committee August 2019

August 2019							
Agenda Item:	Author of the Paper:						
Report date: 5 th August 2019	Angela Price Primary Care Programme Lead angela.price@southseftonccg.nhs Tel: 01513178379	<u>.uk</u>					
Title: Complaints Log – Quarter 1 2019/20							
Summary/Key Issues: The purpose of this paper is to provide an update to the Primary Care Commissioning Committee regarding complaints activity data and themes across the CCG for the first quarter of delegated authority (April 2019 – June 2019).							
Recommendation The Primary Care Commissioning Committee i the report.	s asked to note the content of	Note x Approve Ratify					

Links to Corporate Objectives (*x those that apply*) To focus on the identification of QIPP (Quality, Improvement, Productivity & Prevention) schemes and the implementation and delivery of these to achieve the CCG QIPP target and to support delivery of financial recovery. To progress Shaping Sefton as the strategic plan for the CCG, in line with the NHSE planning requirements set out in the "Five Year Forward View", underpinned by Х transformation through the agreed strategic blueprints and programmes and as part of the NHS Cheshire and Merseyside Healthcare Partnership. To ensure that the CCG maintains and manages performance & quality across the Χ mandated constitutional measures. To support Primary Care Development through the development of an enhanced model of care and supporting estates strategy, underpinned by a complementary primary care quality contract. To advance integration of in-hospital and community services in support of the CCG locality model of care. To advance the integration of Health and Social Care through collaborative working with Sefton Metropolitan Borough Council, supported by the Health and Wellbeing Board.

Process	Yes	No	N/A	Comments/Detail (x those that apply)
Patient and Public	Х			
Engagement				
Clinical Engagement	Х			
Equality Impact		Х		
Assessment				
Legal Advice Sought	Х			
Resource Implications		Х		
Considered				
Locality Engagement		Х		
Presented to other		Х		
Committees				

Link	Links to National Outcomes Framework (x those that apply)							
Х	Preventing people from dying prematurely							
Х	Enhancing quality of life for people with long-term conditions							
X	Helping people to recover from episodes of ill health or following injury							
Х	Ensuring that people have a positive experience of care							
Х	Treating and caring for people in a safe environment and protecting them from avoidable							
	harm							



Report to the Primary Care Commissioning Committee August 2019

1. Introduction and Background

NHS South Sefton CCG recognises the importance of listening to the views of patients, relatives and carers in helping to improve the quality of services it commissions. The robust management and learning from complaints is an integral part of the patient experience pathway.

The CCG became responsible for the commissioning of primary medical care through delegated authority on 1st April 2019.

The summary below describes the contacts from patients in specific relation to primary medical care commissioning in quarter one.

2. Engagement

For the reporting period 01 April 2019 -30^{th} June 2019 a total of 4 complaints/concerns were received by the primary care team.

	April	May	June
No. of Contacts	1	2	1

The top 4 themes identified

Current Ranking	Subject	Frequency	
1	Wait at reception and at service to access a booked appointment at the 7 day access service	25%	
2	Non completion of life insurance form as not NHS work	25%	
3	Access to a home visit	25%	
4	Access to child health surveillance appointment	25%	

Of the contacts:

- 3 complaints presented through the CCG generic complaints email address
- 1 patients contacted the CCG via telephone for advice and support

Information from PALS for quarter 1 was not available for this report.

3. Outcomes

Subject	Outcomes		
·	The Service Manager from the 7 day access service contacted the patient to talk through concerns raised and booking process at the service.		

Non completion of life insurance form as	Process explained with reference to the BMA		
not NHS work	guidance on non NHS work.		
Access to a home visit	Practice contacted and home visit arranged.		
	Assurance received from practice on process.		
Access to child health surveillance	Clarification re additional service, CHS		
appointment	appointments available.		

4. Recommendations

The Primary Care Commissioning Committee is asked to note the contents of this report.

Angela Price Primary Care Programme Lead August 2019



Primary Care Commissioning Committee August 2019						
Agenda Item:	Author of the Paper:					
Report date: 5th August 2019	Angela Price Primary Care Programme Lead angela.price@southseftonccg.nh Tel: 01513178379	<u>ns.uk</u>				
Title: Complaints Log – Quarter 1 2019/20	Title: Complaints Log – Quarter 1 2019/20					
Summary/Key Issues: The purpose of this paper is to provide an update to the Primary Care Commissioning Committee regarding complaints activity data and themes across the CCG for the first quarter of delegated authority (April 2019 – June 2019).						
Recommendation The Primary Care Commissioning Committee the report.	is asked to note the content of	Note x Approve Ratify				

Link	Links to Corporate Objectives (x those that apply)					
х	To focus on the identification of QIPP (Quality, Improvement, Productivity & Prevention) schemes and the implementation and delivery of these to achieve the CCG QIPP target and to support delivery of financial recovery.					
х	To progress Shaping Sefton as the strategic plan for the CCG, in line with the NHSE planning requirements set out in the "Five Year Forward View", underpinned by transformation through the agreed strategic blueprints and programmes and as part of the NHS Cheshire and Merseyside Healthcare Partnership.					
х	To ensure that the CCG maintains and manages performance & quality across the mandated constitutional measures.					
х	To support Primary Care Development through the development of an enhanced model of care and supporting estates strategy, underpinned by a complementary primary care quality contract.					
х	To advance integration of in-hospital and community services in support of the CCG locality model of care.					
х	To advance the integration of Health and Social Care through collaborative working with Sefton Metropolitan Borough Council, supported by the Health and Wellbeing Board.					

Process	Yes	No	N/A	Comments/Detail (x those that apply)
Patient and Public Engagement	x			
Clinical Engagement	Х			
Equality Impact Assessment		Х		
Legal Advice Sought	Х			
Resource Implications Considered		Х		
Locality Engagement		х		
Presented to other Committees		Х		

l	Links to National Outcomes Framework (x those that apply)					
	Х	Preventing people from dying prematurely				
	Х	Enhancing quality of life for people with long-term conditions				
	Х	Helping people to recover from episodes of ill health or following injury				
	Х	Ensuring that people have a positive experience of care				
	Х	Treating and caring for people in a safe environment and protecting them from avoidable harm				



Report to the Primary Care Commissioning Committee August 2019

1. Introduction and Background

NHS Southport and Formby CCG recognises the importance of listening to the views of patients, relatives and carers in helping to improve the quality of services it commissions. The robust management and learning from complaints is an integral part of the patient experience pathway.

The CCG became responsible for the commissioning of primary medical care through delegated authority on 1st April 2019.

The summary below describes the contacts from patients in specific relation to primary medical care commissioning in quarter one.

2. Total number of Contacts (Complaints & Concerns) received

For the reporting period 01 April $2019 - 30^{th}$ June 2019 a total of 4 complaints/concerns were received by the primary care team.

	April	May	June
No. of Contacts	0	1	3

The top 2 themes identified

Current Ranking	Subject	Frequency
1	Out of boundary patients asked	75%
	to de register (one practice)	
2	Lack of choice of GP practice	25%
	outside of CCG boundary	

Of the contacts:

- 1 complaint presented through the CCG generic complaints email address
- 3 separate patients contacted the CCG via telephone for advice and support

Information from PALS for quarter 1 was not available for this report.

3. Outcomes

Subject	Outcomes		
Out of boundary patients asked to de register (one practice).	The CCG are working with the practice, neighbouring practices and CCG to ensure patients are supported to find an alternative GP.		
Lack of choice of GP practice outside of GP boundary.	S&F practice boundaries have been explored and advice given to raise with relevant CCG.		

4. Recommendations

The Primary Care Commissioning Committee is asked to note the contents of this report.

Angela Price Primary Care Programme Lead August 2019

SF/SSCCG Primary Care Programme Report

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	Business As								
Project	Usual/Transformation/National Mandate etc	Programme	Sub- section of Programme	Start Date	Planned End Date	Status	NHSE Contact	Resource Name	Comments/Updates
Resilience Funding	Transformation	GP Five Year Forward View		01.04.2017	31.03.2021	G	Gemma Murray		All practices and federations have recieved information from NHSE on the 19/20 process to apply for resillience funding. The deadline to submit bids to NHSE is 12pm 1st July 2019. A panel where all CCGs & LMCs will be
Clerical and Admin Training (Active Signposting)	Transformation	GP Five Year Forward View	Releasing Time for Care	01.04.2017	31.03.2021	G	Gemma Murray	Jane Elliott/ Claire Touhey	A training post is now operational via IMerseyside to support signposting. There was a presentation at both wider groups re document management, EOIs are being sort from general practice. Numbers of practices interested in training are currently being collated.
International Recruitment	Transformation	GP Five Year Forward View	GP Five Year Forward View	01.04.2017	31.03.2021	G	Sharon Howard	Craig Gillespie/Kati Scholtz	Meeting held on Tuesday 26th June - 5 interested practices attended. Further weekend event being held for potential recruits currently being planed for early 2019. Potentially there are two recruits identified within C&M. Practice readiness forms will need to be completed by GP practices
GPFV - Additional 5000 Doctors	Transformation	GP Five Year Forward View	GP Five Year Forward View	01.04.17	31.03.2021	R	Sharon Howard	Angela Price	5000 is the number of doctors required nationally, this drilled down to C&M is 194 additional doctors. Information is being collected quarterly via the GPFV monitoring returns on the number of hours provided by GPs in alternative settings.
ETTF- Estates Bids	Transformation	GP Five Year Forward View	ETTF	01.04.2017	ongoing	А	David Scannell	Jan Leonard/Sam McCumiskey	3 bids for co-location originally submitted, this has reduced to two bids, one for Maghull and one for Formby. The bids are at PID stage, further discussion required with practices, to establish next steps.
E-Consultations/Online Consulting	Transformation	GP Five Year Forward View	Online Consulting	01.04.2017	31.03.2020	G	Gemma Cullen	Jane Elliot/Paul Shillcock	A roll out plan has been agreed across both CCGs. Discussions are in place regarding how this could work in the 7 day access service and at PCN level. There is an opportunity to establish an e- hub pliot with one PCN in both CGGs. In order to do this all practices within a PCN would need to be utilising e-consult. Currently there are 26 out of 49 practices across Sefton who are either using e-consult or are in a planned stage of roll out. We will be in a position to trial an e-hub in approximately 6 months time should a PCN be identified to trial. Primary care team and imerseyside to meet to devlop an e-consult strategy.
7 Day Access	Transformation	GP Five Year Forward View	Primary Care HUB	01.08.2017	ongoing	G	Jan Hughes	Angela Price /Clinical Leads	Both services went live on Monday 1st October 2018, positive feedback is being recieved. Monthly reporting data is being received. Merseysdie are working with NHS Digital regarding ERS and ICE, testing took place in March 2019. First contact physiotherpy has started in S&F, and is due to begin in South Setton. Contract meetings with both providers taking place quarterly. Both services were commissioned via an APMS contract of a 2 year period (September 2020) with the option to extend for a year if needed.
Clinical Pharmacy Pilot	Transformation	GP Five Year Forward View	Workforce	01.04.2017	ongoing	G	Gemma Murray (Cathy Leech for C&M – GM can act as SS/SF link)	Susanne Lynch/Clinical Leads	Pilots ongoing in Crosby and North Southport localities based on hub models, initially dealing with medication queries, discharge review/reconciliations. 4WTE pharmacists under NHSE scheme recruited. NHSE have confirmed CCG can be employer of PCN clinical pharmacists if all parties in agreement. SL liaising with networks which will inform proposal to be considered by CCG.

Project	Business As Usual/Transformation/National Mandate etc	Programme	Sub- section of Programme	Start Date	Planned End Date	Status	NHSE Contact	Resource Name	Comments/Updates
Apex/Insight	Transformation	GP Five Year Forward View			ongoing	G	Gemma Murray (Cathy Leech for C&M – GM can act as SS/SF link)	Angela Price	Apex/insight has been demonstrated at both wider group meetings. Practices have been asked to express an interest in using the tool as part of an NHSE pilot. Awaiting an implementation date, roll out of the tool has been delayed.
ETTF- IT	Transformation	GP Five Year Forward View	ETTF	01.04.2017	ongoing	А	David Scannell	Jane Elliot/Paul Shillcock	The amount of money for ETTF IT bids has reduced this year in order to increase ETTF for premises. There is an IM&T group looking at IT requimmements, this includes representation from the primary care team, finance team, GP practice and iMerseyside
Practice Nurse 10 Point Plan	Transformation	GP Five Year Forward View	Practice Nurse 10 point plan	23.07.2017	Ongoing	G	Pippa Rose	Colette Page	ETP has employed a p/t mentor to increase numbers of practices accepting student nurses and number of mentors within practices. 8 PNs to become clinical supervisors allowing them to offer clinical supervision to PNsacross both CGS. Progress being made with a preceptorship programme for new PNs. Promotting "All our Health' learning platform - to embed prevention, health protection and promotion of wellbeing - MECC training delivered previously and training in Anti-Microbial Resistance ongoing. 4 more PNs and 3 pharmacists on the NMP course. 7 PNs on the GPN Leadership for Quality programme. Promotting the 2 year Advanced Caree Practitioner course across CCGs. In discussion with NHSE lead to promote Nursing Associate trainees within practices. Recruitment and retention continues to be challenging for many practices nationally. Promotting GPN as a viable career pathway is ongoing.
Workforce Steering Group	Transformation	GP Five Year Forward View	Workforce	01/05/2018	ongoing	А	Alan Cummings/Sharon Howard	Angela Price	A C&M workforce steering group has been developed. This is an extension of the Task and Finish Group for International Recruitment. This group will feed into the LWAB (Local Workforce Action Board).
2019/2020 GP Contract	GP Contract	Delegation		01.04.2019	31.03.2020	G	Alan Cummings/ Jan Hughes	Angela Price	Practice guide and timetable circulated to practices.
Primary Care Networks	GP Contract	Delegation	DES	01.04.2019	31.03.2020	G	Sharon Howard / Gemma Murray	Angela Price	PCN registration documents for 7 PCNS submitted and approved in May 2019. South Sefton PCN exploring using the federation to deliver extended access. A local incentive scheme between the CCG and PcNs who are willing to cover populations where GP practices have not agreed to become part of a PCN is currently in development. I practice in S&f is not part of a PCN, 4 practices in South Sefton have declined to be part of the PCN. Awaiting further information from NHSE on national data sharing agreement, and funding per weighted patient for the PCN additional staff from April 2020. There will be a variation to the GP contract in October to include a duty of co-operation to data share.
Minor Surgery		Delegation	DES	01.04.2019	31.03.2020	G	Alan Cummings	Angela Price	DES participation is now confirmed. Practices who do not provide this service can refer patients to Joint Health or DMC. A GPSI is in discussion to provide locum session with a small number of practice in southport and formby.
Out of Area Registations		Delegation	DES	01.04.2019	31.03.2020	G	Alan Cummings	Angela Price	A number of practices across Sefton have signed up to provide this DES, awaiting information from NHSE about how home visits were provided for this cohort of patients pre delegation.
Special Allocation Scheme		Delegation	DES	01.04.2019	31.03.2020	G	Alan Cummings	Angela Price	One practice in Sefton operates this scheme, and has signed up to deliver this DES again in 2019/20.
Learning Disabilities	GP Contract	Delegation	DES	01.04.2019	31.03.2020	G	Alan Cummings	Angie Price	All practices in S&F have agreed to do the learning disabilities for their own patients. 2 practices in SS have opted for the federation to deliver scheme to their patients, there are a futher 4 practices who have not stated an option to date, further information from these practices is being sought. The CCG will be meeting with South Sefton Federation to review how the health checks are delivered, there may be an option to broaden the scheme to home visits and health checks provided in a community setting.
GP Contract	Business As Usual	Delegation	NHS Digital Finance Data	01.04.2019	31.03.2020	G	N/A	Angela Price	Practice finance visits are being planned using NHS digital data on NHS funding earned in 2017/18. A meeting has taken place with PC24 management where all 7 PC24 practices were reviewed.

Project	Business As Usual/Transformation/National Mandate etc	Programme	Sub- section of Programme	Start Date	Planned End Date	Status	NHSE Contact	Resource Name	Comments/Updates
Local Quality Contract Phase 4	Business As Usual	Primary Care Operational	Business As Usual	01.04.2018	01.09.2019	G	N/A	Angela Price/ Craig Gillespie/ Kati Scholtz	Phase 4 LQC has been operational 01.04.18 - 31.03.19. Validation panel has met to agree outcomes for both CCGs. Currently working through the validation for medicines management elements of the LQC.
Local Quality Contract Phase 5	Business As Usual	Primary Care Operational	Business As Usual	01.04.2019	01.09.2020	G	N/A	Angela Price/Craig Gillespie/Kati Scholtz	Phase 5 LQC agreed and circulated to GP practices - Practice sign up complete, quarter 1 invoices have been processed.
Localities	Business As Usual	cce	cce	01.04.2019	ongoing	G	N/A	Jane Elliott/ Claire Touhey	Business as usual, PCNs have formed some discussions at localities. Locality mangers - Clare Touhey for Southport and Formby, and Jane Elliot for South Sefton. There is an option to merge locialty and PCN meetings to maximise efficiences, this is currently being discussed locally.
Influenza Coordination 2019/2020	National Mandate	ссе	ссе	01.04.2019	ongoing	G	Jennie Piet	Colette Page	Member of Flu task & Finish group with NHSE and sub group at Sefton Local authority. Begin developing coordination plans for 2019/20 season
Local Authority Health Protection Forum	National Mandate	ссе	ссе	01.04.19	ongoing	G	Charlotte Smith	Colette Page	Attend bi monthly Health Protection Forum (HPF) chaired by the LA. Flu subgroup reports into the HPF, which then feeds into NHSE.
NHSE/ PHE S&I Programme Boards	National Mandate	ссс	ccG	01.04.2019	Ongoing	G	Hayley Mercer	Colette Page	Attend quarterly Screening & Immunisation Programme Boards. Review targets achieved by CCGs and address concerns. Contact practices not attaining national targets to gain assurance or assist/ provide support where necessary. Liaise with PHE S&I coordinator/ managers.
Practice Nurse/ HCA meetings					ongoing	G	N/A	Colette Page	Arrange and coordinate PN/ HCA meetings and training events. Source speakers/ training providers. Utilise flexible cash funding available from Heath Education England to support Non-medical prescribing courses for PNs and clinical pharmacists, Fully fund a clinical supervision course for 8 PNs to offer supervision across the CCG in line with GPFV PN 10 PP. Review priorities across CCG in LTCs/ disease areas and focus training for PNs/ HCAs around these.
Protected Learning Time (PLT)	Business As Usual	ccg	ccg		ongoing	G	N/A		Arrange 4-6 PLT events per year. Source consultants and expert speakers from acute/ community/ voluntary providers. Arrange for pharmacuetical sponsors to support the events. Facilitate the afternoon with 150-200 delegates in attendance. The CCG with the LMC have reviewed the historic PLT scheme which was inequitable across practices, with agreement that the funds will be utilised to support admin and PM training - a training plan to be devised with input from PMs regarding topics to prioritise.

Project	Business As Usual/Transformation/National Mandate etc		Sub- section of Programme	Start Date	Planned End Date	Status	NHSE Contact	Resource Name	Comments/Updates
Project Activity Key					Project RAG Key				
7		Ahead of Schedule			G				
У		Behind Schedule			A				
\rightarrow		On target			R				
Х		No Activity			<u> </u>			·	-



Primary Care Commissioning Committee August 2019

Augu						
Agenda Item:	Author of the Paper:					
Report date: 2 nd August 2019	Angela Price Primary Care Programme Lead angela.price@southseftonccg.nhs.uk Tel: 01513178379					
Title: Direct Enhanced Service Sign Up						
Summary/Key Issues: The purpose of this report is to provide a summ (DES's) in South Sefton CCG. A contract variation for 2019/20 direct enhancements	nary of the provision of direct enhanced services ed services has been produced to enable GP					
practices to participate in individual services.						
Recommendation The Primary Care Commissioning Committee i the report.	s asked to note the content of Ratify					

Link	s to Corporate Objectives (x those that apply)
х	To focus on the identification of QIPP (Quality, Improvement, Productivity & Prevention) schemes and the implementation and delivery of these to achieve the CCG QIPP target and to support delivery of financial recovery.
X	To progress Shaping Sefton as the strategic plan for the CCG, in line with the NHSE planning requirements set out in the "Five Year Forward View", underpinned by transformation through the agreed strategic blueprints and programmes and as part of the NHS Cheshire and Merseyside Healthcare Partnership.
х	To ensure that the CCG maintains and manages performance & quality across the mandated constitutional measures.
х	To support Primary Care Development through the development of an enhanced model of care and supporting estates strategy, underpinned by a complementary primary care quality contract.
х	To advance integration of in-hospital and community services in support of the CCG locality model of care.
	To advance the integration of Health and Social Care through collaborative working with Sefton Metropolitan Borough Council, supported by the Health and Wellbeing Board.

Process	Yes	No	N/A	Comments/Detail (x those that apply)
Patient and Public		Х		
Engagement				
Clinical Engagement	Χ			
Equality Impact		Х		
Assessment				
Legal Advice Sought		Х		
Resource Implications	Х			
Considered				
Locality Engagement	Х			
Presented to other	•	Х		
Committees				

L	ink	s to National Outcomes Framework (x those that apply)
)	Χ	Preventing people from dying prematurely
)	Χ	Enhancing quality of life for people with long-term conditions
)	Χ	Helping people to recover from episodes of ill health or following injury
)	Χ	Ensuring that people have a positive experience of care
)	X	Treating and caring for people in a safe environment and protecting them from avoidable
		harm



Report to the Primary Care Commissioning Committee August 2019

1. Introduction and Background

Direct Enhanced Services (DES) are developed nationally for implementation by GP practices. These services are defined as primary medical services other than essential services, additional services or out of hour's services. They are commissioned by clinical commissioning groups with delegated authority, and cover a 12 month period aligned to the financial year. They are optional for GP practices to provide, and are over and above the GP core contract.

In 2019/20 there are a number of services available with nationally agreed criteria and guidance for implementation. These include:

- Extended Hours (Qtr1) this transferred in full to the new Network Contract DES from quarter 2 to cover 100% of the population.
- Learning Disabilities
- Minor Surgery
- Out of Area Registrations
- Special Allocation Scheme
- Primary Care Networks (1st July 2019)

2. Enhanced Service Provision

Enhanced Services Practice Coverage

	South Sefton 🔻	Extended Hours Q1	LD 🔻	Minor Surger 🔻	00A ~	SAS 🔻	PCN 🔻
	Υ	9	29	26	10	1	26
Ī	N	21	1	4	20	29	4

Figure 2.1 (SS): Breakdown of Enhanced Services sign up by service (number of practices signed up to service)

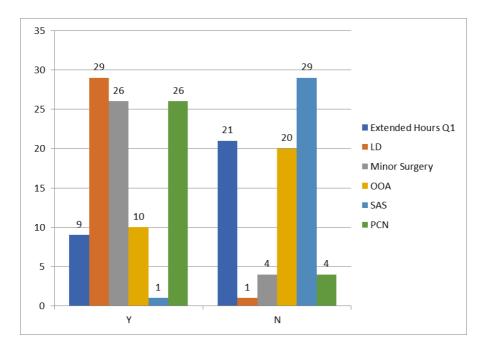


Figure 2.2 (SS): Breakdown of Enhanced Services sign up by service (visual) (number of practices signed up to service)

South Sefton 🔻	Extended Hours Q1	LD 🔻	Minor Surger 🔻	OOA 🕶	SAS 🔻	PCN 🔻
Υ	30%	96%	86%	33%	4%	86%
N	70%	4%	14%	67%	96%	14%

Figure 2.3 (SS): Breakdown of Enhanced Service sign up by service (percentage)

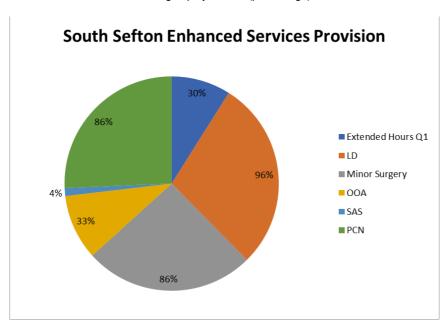


Figure 2.4 (SS): Breakdown of Enhanced Services sign up by service (visual percentage)

Enhanced Services Population Coverage

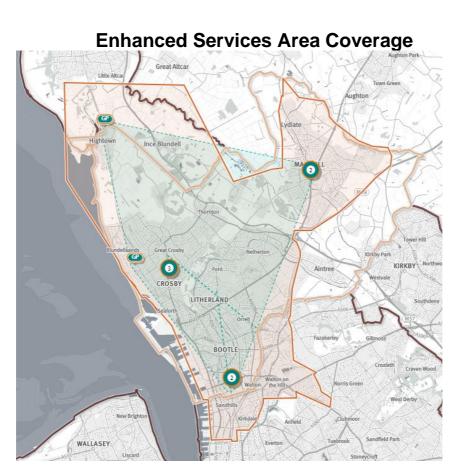


Figure 3.1 (SS): Area Coverage for practices offering Extended Hours Q1 only: Area highlighted inside bold orange catchment

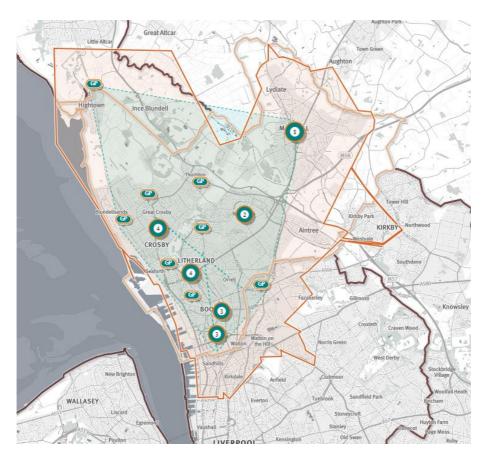


Figure 3.2 (SS): Area Coverage for practices offering LD: Area highlighted inside bold orange catchment



Figure 3.3 (SS): Area Coverage for practices offering Minor Surgery: Area highlighted inside bold orange catchment

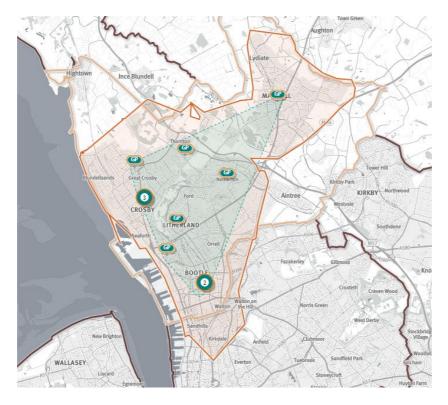


Figure 3.4 (SS): Area Coverage for practices offering Out of Area: Area highlighted inside bold orange catchment

3. Recommendations

The Primary Care Commissioning Committee is asked to note the content of this report, and the progress made to date to commission enhanced services.

Angela Price Primary Care Programme Lead August 2019



Primary Care Commissioning Committee August 2019 Agenda Item: Author of the Paper: Angela Price Report date: 2nd August 2019 Primary Care Programme Lead angela.price@southseftonccg.nhs.uk Tel: 01513178379 Title: Direct Enhanced Service Sign Up Summary/Key Issues: The purpose of this report is to provide a summary of the provision of direct enhanced services (DES's) in Southport and Formby CCG. A contract variation for 2019/20 direct enhanced services has been produced to enable GP practices to participate in individual services. Recommendation Note The Primary Care Commissioning Committee is asked to note the content of Approve the report. Ratify

Link	Links to Corporate Objectives (x those that apply)					
х	To focus on the identification of QIPP (Quality, Improvement, Productivity & Prevention) schemes and the implementation and delivery of these to achieve the CCG QIPP target and to support delivery of financial recovery.					
х	To progress Shaping Sefton as the strategic plan for the CCG, in line with the NHSE planning requirements set out in the "Five Year Forward View", underpinned by transformation through the agreed strategic blueprints and programmes and as part of the NHS Cheshire and Merseyside Healthcare Partnership.					
х	To ensure that the CCG maintains and manages performance & quality across the mandated constitutional measures.					
х	To support Primary Care Development through the development of an enhanced model of care and supporting estates strategy, underpinned by a complementary primary care quality contract.					
х	To advance integration of in-hospital and community services in support of the CCG locality model of care.					
Х	To advance the integration of Health and Social Care through collaborative working with					

Sefton Metropolitan Borough Council, supported by the Health and Wellbeing Board.

Process	Yes	No	N/A	Comments/Detail (x those that apply)
Patient and Public Engagement		Х		
Clinical Engagement	Х			
Equality Impact Assessment		Х		
Legal Advice Sought		х		
Resource Implications Considered	х			
Locality Engagement	Х			
Presented to other Committees		Х		

Link	Links to National Outcomes Framework (x those that apply)					
Х	Preventing people from dying prematurely					
Х	Enhancing quality of life for people with long-term conditions					
Х	Helping people to recover from episodes of ill health or following injury					
Х	Ensuring that people have a positive experience of care					
х	Treating and caring for people in a safe environment and protecting them from avoidable harm					



Report to the Primary Care Commissioning Committee August 2019

1. Introduction and Background

Direct Enhanced Services are developed nationally for implementation by GP practices. These services are defined as primary medical services other than essential services, additional services or out of hour's services. They are commissioned by clinical commissioning groups with delegated authority, and cover a 12 month period, aligned to the financial year. They are optional for GP practices to provide, and are over and above the core contract to provide essential services.

In 2019/20 there are a number of services available with nationally agreed criteria and guidance for implementation. These include:

- Extended Hours (Qtr1) this transferred in full to the new Network Contract DES from quarter 2 to cover 100% of the population.
- Learning Disabilities
- Minor Surgery
- Out of Area Registrations
- Special Allocation Scheme
- Primary Care Networks (1st July 2019)

2. Enhanced Service Provision

Enhanced Services Practice Coverage

Southport & Formby	Extended Hours Q1	LD 💌	Minor Surger 💌	00A ×	SAS 💌	PCN 💌
Υ	16	16	14	15	0	16
N	0	0	2	1	16	0

Figure 2.1 (SF): Breakdown of Enhanced Services sign up by service (number of practices signed up to service)

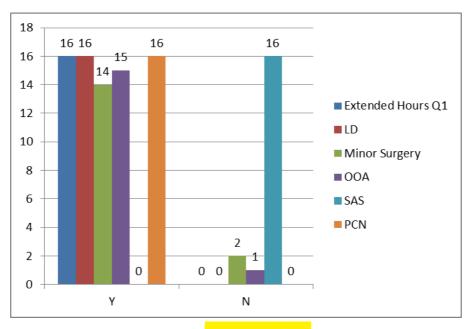


Figure 2.2 (SF): Breakdown of Enhanced Services sign up by service (visual) (number of practices signed up to service)

Southport & Formby	Extended Hours Q1	LD ▼	Minor Surger *	00A	SAS 💌	PCN 🐣
Υ	100%	100%	87%	93%	0%	100%
N	0%	0%	13%	7 %	100%	0%

Figure 2.3 (SF): Breakdown of Enhanced Services sign up by service (percentage)

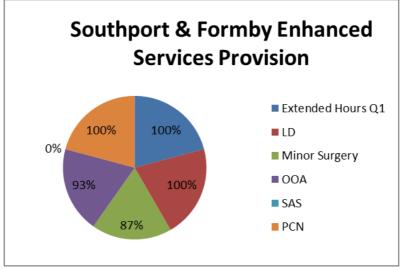


Figure 2.4 (SS): Breakdown of Enhanced Services sign up by service (visual percentage)

Enhanced Services Population Coverage Enhanced Services Area Coverage

3. Recommendations

The Primary Care Commissioning Committee is asked to note the content of this report, and the progress made to date to commission enhanced services.

Angela Price Primary Care Programme Lead August 2019

Key Issues Report to Governing Body



Southport & Formby Primary Care Commissioning Committee Part 1, Thursday 16th June 2019

Chair: Gill Brown

Key Issue	Risk Identified	Mitigating Actions
Planning for influenza vaccination – winter 19/20	From data received from practices there was concern that some practices may have insufficient vaccine to target all patient groups.	Communication with practices to understand reasons for levels of vaccine ordering. Ongoing discussion and monitoring via established flu groups.

Information Points for Southport and Formby CCG Governing Body (for noting)

The Committee received Healthwatch 'Enter & View' reports on GP access for the following practices: Christiana Hartley Medical Practice, Cumberland House Surgery, Kew Surgery.

The committee received an update on the '7 day Extended Access' service and noted that this was also being presented to the Health Overview and Scrutiny Committee this month. The committee noted the component within the PCN DES for Extended Hours and the potential confusion for patients over the two services.

The committee noted that the CCG Leadership Team had received and supported applications from 4 Primary Care Networks (PCN) in Formby, Ainsdale & Birkdale, Central Southport and North Southport.

The CCG is finalising an offer to PCNs for the Medicines Management Hub and Social Prescribing Offer.

Key Issues Report to Governing Body



South Sefton Primary Care Commissioning Committee Part 1, Thursday 16th June 2019

Chair: Gill Brown	Chair:	Gill	Browr
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Key Issue	Risk Identified	Mitigating Actions
Planning for influenza vaccination – winter 19/20	From data received from practices there was concern that some practices may have insufficient vaccine to target all patient groups.	Communication with practices to understand reasons for levels of vaccine ordering. Ongoing discussion and monitoring via established flu groups.
The committee noted that the CCG Leadership Team had received and supported applications from 3 Primary Care Networks (PCN) in Seaforth and Litherland, Bootle and Crosby & Maghull.	4 practices have opted to not join a PCN, the CCG has an obligation to provide network coverage for the practice populations.	PCNs have been approached to provide coverage for the registered populations of practices who are not part of a PCN.

Information Points for South Sefton CCG Governing Body (for noting)

The Committee noted the CQC report for Moore Street Surgery which rated them as 'good'.

The Committee received Healthwatch 'Enter & View' reports on GP access for the following practices:

Bootle Village Surgery, Concept House Surgery, Moore Street Surgery, North Park Health Centre, Park Street Surgery, Strand Medical Centre.

The committee received an update on the '7 day Extended Access' service and noted that this was also being presented to the Health Overview and Scrutiny Committee this month. The committee noted the component within the PCN DES for Extended Hours and the potential confusion for patients over the two services.

The CCG is finalising an offer to PCNs for the Medicines Management Hub and Social Prescribing Offer.