

HEALTH AND WELLBEING BOARD		AGENDA ITEM No. 11
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PRIME MINISTER'S GP ACCESS FUND DELIVERY IN THE GREATER PETERBOROUGH LOCALITY

R E C O M M E N D A T I O N S	
FROM : Dr Gary Howsam, Clinical Director, Greater Peterborough Network, and GP Access Fund Clinical Lead	Deadline date : N/A
The Health and Wellbeing Board is asked to note the contents of this update.	

1. ORIGIN OF REPORT

- 1.1 This report is submitted to the Board as a routine update following previous update reports during 2015.

2. PURPOSE AND REASON FOR REPORT

- 2.1 The purpose of this report is to update the Board on progress in the locality on implementing the Prime Minister's GP Access Fund Programme (formerly known as the Prime Minister's Challenge Fund).

3. BACKGROUND AND PROGRESS TO DATE

- 3.1 The original Prime Minister's Challenge Fund (PMCF) for Primary Care was launched by NHS England (NHSE) in October 2013 to help improve access to general practice and stimulate innovative ways of providing primary care services. Twenty Wave 1 sites were announced in April 2014, and invitations to submit bids against Wave2 of the PMCF were publicised by NHSE in October 2014. Clinical and management leads in Borderline and Peterborough worked hard to develop wide engagement from Primary Care providers and other stakeholders and from this to develop a bid to Wave2 of the fund. The system were informed on 27 March that the bid for funding, developed and submitted in January, had been successful.
- 3.2 The Peterborough GP Access Fund Programme represents £2.5m of investment to enhance the Primary Care offer locally, and is intended to "prove" itself over the initial period with a view to developing a Business Cases where applicable for sustainable local funding for new models. The work includes:
- delivery of "extended hours" (8.00am to 8.00pm) routine (bookable) weekday primary care appointments, delivered through shared "hub-working" arrangements;
 - delivery of a primary care weekend service at the Emergency Department of Peterborough Hospital, aimed at supporting and reducing demand on that service;
 - delivery of innovative use of technology both to facilitate the above, and more widely to improve and increase access to primary care;
 - delivery of workforce and collaborative working innovations to support sustainable primary care in the Greater Peterborough locality.

- 3.3 Work on all of the above items have progressed well during 2015/16. Evening appointments (6.30-8.00pm) have been available Monday to Friday to the vast majority of the local population from January 2016 (supported by “hub working” arrangements as planned); slightly more limited availability to the whole population has been available on a rotad basis since October 2015. The primary care service at the “front” of the Emergency Department of Peterborough Hospital was successfully established on 7 November, and has run on every weekend and Bank Holiday (between 9.00am and 9.00pm) since that date; it has now seen well in excess of 1000 patients, and has subsequently been commissioned to provide additional ad hoc support on some weekday evenings. A web-based product “E-consult” is now being offered by 18 practices, and Skype-based products are being trialled at the present time to support virtual consultations. Alongside this a number of workforce and collaborative innovations are being trialled in or between practices across the locality.
- 3.4 All of the above developments have been supported by the creation of four “hubs” of GP practices, and a new overarching primary care provider organisation, Greater Peterborough Network Ltd. This new organisation not only provides management, governance, and oversight for the work, but also offers the opportunity for further collaborative and partnership developments in the future, as well as providing a collective “voice” for (and means to engage with) the primary care sector locally.
- 3.5 Confirmation has now been received that the original funding can be used to ensure that the main elements of the bid can all run for a full year from their original start dates (i.e. to the end of September for the evening extended hours appointments, and to the end of October for the weekend service at Peterborough City Hospital). This will allow a full evaluation to be developed (including feeding into the evaluation process for the GP Access Fund nationally), business cases to be submitted for ongoing / future funding, and for the various service models to be further developed to ensure that that they are robust, sustainable, and meeting the needs of local patients and the wider health and social care economy.
- 3.6 A Programme Board oversees the work, and includes clinical and management leads, patient representatives, NHSE and CCG representatives, and others involved in the work. Monthly reports have been provided throughout 2015/16 to NHSE, the Borderline and Peterborough Executive Partnership Board, and the Cambridgeshire and Peterborough CCG Primary Care Programme Board; quarterly reports have also been provided to the Cambridgeshire Executive Partnership Board, and the Peterborough Health and Wellbeing Board.

4. CONSULTATION

- 4.1 Patient representatives were consulted in the development of the original bid, and have been involved in monthly Programme Board meetings throughout 2015/16. In addition, presentations have been made to both the local Patient Forums, and an update provided to Healthwatch Peterborough. The outcomes associated with the bid (in terms of increased and more flexible access, and increased care and support delivered in the community and via Primary Care) are generally seen as positive in more general planning and service development. Patient satisfaction measures are one of the key metrics associated with the centrally delivered evaluation of the GP Access Fund pilots, and feedback from patients and patient groups will also be gathered locally to inform further developments, and to support Business Cases for future funding arising from the present work.

5. ANTICIPATED OUTCOMES

- 5.1 The Primary Care Transformation Programme represents a major development in primary care delivery in Peterborough, not only in terms of short-term benefits for patients and carers, but also in medium and longer term changes in the structure and practice of primary care. It is anticipated that the Board may wish to monitor and review these changes over time, and in particular as part of medium term oversight and review of local service provision.

6. REASONS FOR RECOMMENDATIONS

- 6.1 Whilst there is no decision required of the Board relating to the delivery of the Primary Care Transformation Programme at this time, it is hoped that the Board will be interested to review this development as it progresses, and the Programme Board will be pleased to receive any views on the programme offered by the Board.

7. ALTERNATIVE OPTIONS CONSIDERED

- 7.1 In deciding whether or not to put in a bid to the GP Access Fund the view was taken that much of the work which might be required in delivering it would most likely become necessary in the near future in any case, and whether funding was available to support it or not (on the basis of rising demand on Primary Care, workforce pressures, and wider system pressures). It was considered therefore a beneficial option to bid for funds to support the commencement of this work, and to help drive it forwards at pace.

8. BACKGROUND DOCUMENTS

Used to prepare this report, in accordance with the Local Government (Access to Information) Act 1985)

- 8.1 None.

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