

ADULTS AND HEALTH SCRUTINY COMMITTEE	AGENDA ITEM No. 6
21 SEPTEMBER 2021	PUBLIC REPORT

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PRIMARY CARE UPDATE – RELATING TO ACCESS TO PRIMARY CARE DURING THE COVID-19 PANDEMIC
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RECOMMENDATIONS

It is recommended that the Adults and Health Scrutiny Committee notes the contents of the Primary Care update.
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1. ORIGIN OF REPORT

1.1 This report is submitted to the Adults and Health Scrutiny Committee following a request made to the CCG at the Group representatives meetings on 20 July 2021.

2. PURPOSE AND REASON FOR REPORT

2.1 The purpose of this report is to update the committee on access to Primary care services during the COVID-19 pandemic.

This report is being presented following a request made to the CCG during the Group representatives meeting on 20 July 2021.

2.2 This report is for the Health Scrutiny Committee to consider under its Terms of Reference Part 3, Section 4 - Overview Scrutiny Functions, paragraph No. 2.1 Functions determined by Council:

3. Scrutiny of the NHS and NHS providers.

3. BACKGROUND AND KEY ISSUES

The CCG have provided answers below to the five questions specifically requested by the Committee. Please see sections 3.1 – 3.5.

In addition, the CCG wants to update the Committee on the Oundle Surgery transition to Northamptonshire ICS and changes for two GP Contracts in the Peterborough area.

Lakeside Oundle

Earlier this year, Ministers asked NHS England to set out options for boundary alignment in integrated care systems in specific geographies where upper-tier local authorities currently have to work across more than one Integrated Care System (ICS) footprint and to assess the impact of changes to deliver alignment in each case. Over the last six months NHS England has worked with stakeholders to develop advice and analysis for each of the affected areas to inform the final decision.

This work has now concluded, and on the 21 July 2021 the Minister of State for Health issued a Parliamentary Statement setting out the final decision that has been taken for the areas in scope of the review. The statement can be viewed at:

<https://questions-statements.parliament.uk/written-statements/detail/2021-07-22/hcws248>

Following this review, the Secretary of State has concluded that the decision has been taken to move the Lakeside Healthcare GP practice at Oundle into Northamptonshire ICS and retain the Wansford and Kings Cliffe GP practice in Cambridgeshire and Peterborough ICS. Royston in Hertfordshire will also remain in the Cambridgeshire and Peterborough ICS.

To support the smooth transition of Oundle Surgery into the Northamptonshire ICS by 1 April 2022, C&P CCG in collaboration with Northampton CCG have set up a joint ICS Transition Assurance Group with membership from C&P and Northampton CCGs, NHSEI and Oundle Surgery with oversight from the CCG Accountable Officers who will meet regularly and work collaboratively to develop and implement the transition plan ensuring that the impact on the Practice, its workforce and its registered population and any associated risks are managed effectively.

The Willow Tree and Botolph Bridge Surgeries

NHS Arden and Greater East Midlands (Arden Gem) Commissioning Support Unit on behalf of NHS England and NHS Improvement (NHSE&I) – East of England and NHS Cambridgeshire and Peterborough Clinical Commissioning Group (C&PCCG) under fully delegated Commissioning arrangements invited suitably qualified and experienced providers to deliver Primary Care Medical Services for:

- Lot 1 St Neots Health Centre including a Local Enhanced Service for the Walk in Centre in Cambridgeshire
- Lot 2 The Willow Tree Surgery (Peterborough Partnerships PCN)
- Lot 3 Botolph Bridge Community Health Centre (Peterborough Partnerships PCN).

The contracts for all three lots are for seven years with the option to extend for a further three years. All contracts are to run under the NHS Alternative Provider Medical Services Contract 2020 which initially was due to start 1 October 2021, a delay to award means this was extended by the Committee by two months to 1 December 2021.

The procurement process has now concluded and, following a 10-day standstill period, the contract awards have been finalised and the bidders notified. The mobilisation period will now commence.

The successful bidders are confirmed as follows:

- Lot 1 St Neots Health Centre including a Local Enhanced Service for the Walk in Centre in Cambridgeshire: One Medicare One Primary Care.
- Lot 2 The Willow Tree Surgery (Peterborough Partnerships PCN): Malling Health.
- Lot 3 Botolph Bridge Community Health Centre (Peterborough Partnerships PCN): Malling Health.

As the standstill period has just completed, the CCG will be ensuring that this is communicated widely and has put in place a mobilisation team to ensure the smooth transition of services to the new contract providers.

3.1 Access to Primary Care throughout the pandemic, supported by data, if possible, on how many appointments have been delivered either by phone, video call or face to face.

There has been a 12.5% increase in all appointment types over a 2 two-year period (from Quarter 1 in 2019 to Quarter 1 in 2021), with an additional 46,344 appointments being undertaken within the five Primary Care Networks across the Peterborough area.

Table 1 shows the total number of appointments delivered to patients during core hours, via face to face, telephone, video or online, for the five Primary Care Networks serving the Peterborough area, over the last two years.

Table 1

	Q1 2019/2020	Q2 2019/2020	Q3 2019/2020	Q4 2019/2020	Q1 2020/2021	Q2 2020/2021	Q3 2020/2021	Q4 2020/2021	Q1 2021/2022
Octagon PCN	114639	134923	141623	137461	102339	124767	131177	127685	128620
BMC Paston PCN	56191	57048	60112	59852	45736	53810	60225	55483	55058
South Peterborough PCN	119002	123076	130083	124330	90425	117521	122804	120741	126648
Peterborough Partnerships PCN	38572	43582	45739	47056	34277	43711	44376	40917	45824
Central and Thistle Moor PCN	41146	42021	46518	46156	39765	49040	55680	56636	59744
Total	369550	400650	424075	414855	312542	388849	414262	401462	415894

In addition to in core hours' appointments, Greater Peterborough Network (GPN) has continued to deliver Extended Access appointments (Appendices: Tables 2, 3 & 4), offering pre-bookable and same day appointments 365 days a year in evenings and weekends. During Covid-19 the primary care model changed in line with National guidance scheduling most GP appointments to telephone and video appointments for clinical triage and converting to face to face appointments at their two Hub sites (Peterborough City and Wisbech) where clinically appropriate, ensuring patient access remains a priority and good patient service is delivered whilst maintaining safe practice. Nurse and Health Care Assistant appointments remained face-to face, following screening.

In addition, GPN continued to offer their Home Visiting Service for housebound patients, which saw an increase in use due to patients requiring to shield if deemed Clinically Extremely Vulnerable.

3.2

Details of Plans to return to more face to face, or 'normal service' as it was termed by the committee representatives or details of how Primary care will cope with upsurge in demand

Workforce remains a key priority with retention and recruitment being central to this. Many practices continue with offering their patients a telephone or online triage appointment in the first instance, which if clinically appropriate or requested by the patient will be converted to a face-to-face appointment as necessary.

Demand for General Practice appointments remains exceptionally high and reflects patients' needs and demand across the health and care system. Operating triage first remote appointments has allowed healthcare practitioners who have been 'pinged' to self-isolate to continue working and serving their patients from the quarantine of their home. In addition, it has helped the patient get to the right clinician for their presenting problem.

Many measures have been mobilised and prioritised to ease the pressures on General Practice, with the following:

1. Investment in additional appointments for patients who require on the day urgent consultation through the CCGs investment in Surge Hub capacity (see Table 5).
2. Increasing the utilisation of Extended Access for evening and weekend appointments by better patient communication and contractually reviewing the Federations KPIs.

3. Greater Peterborough Network (GPN) Federation (in agreement with Cambridge GPN (CGPN) and West Cambs Federation (WCF) holds the contract for the for the provision of primary care development, retention, and training via the Training Hub for the primary care workforce across our STP footprint. Significant investment has been allocated to several initiatives to ease workload and workforce pressures:
 - GP Flexible Staff Pool, a 'Bank' of locum GPs that can be booked for individual practices as and when required.
 - The recruitment of specialist trainers for increasing places for medical/nursing and other allied health professionals to receive training places in General Practice.
 - Retaining newly qualified GPs and GPNs by offering them Fellowships, which includes mentoring, group supervision. This initiative helps attract newly qualified GPs stay within Cambridgeshire & Peterborough.
 - GP retainer scheme.
 - International GP recruitment and Tier 2 visa sponsorship.
4. The CCG recognises the need to consider extending the Surge Hub facility beyond the end of September, creating additional on the day urgent appointments. A business case detailing additional funding is being presented to the Governing Body.
5. Further investment has been made available to procure further Interpreting and Translation Services for both spoken and non-spoken. This reduces the inequalities that our deaf patients experience with accessing General Practice.
6. In order to sustain better quality General Practice, we have procured longer term (7 + 3 year) APMS contracts for both Botolph Bridge and The Willow Tree Surgery, this will enable successful contractors to invest over the longer term, creating better capacity, larger workforce and higher quality services.

3.3 **How primary care supports early diagnosis of Long Term Condition (LTC), or other life-threatening conditions so early diagnosis is not missed, or people, are supported with their LTC?**

Greater Peterborough Network's (GPN) Home Visiting Service meant patients requiring diagnostic tests for vulnerable patients with Long Term Conditions (LTCs), were able to be supported and clinically managed at home.

Investment has been made by NHSEI to support patients who are experiencing Post COVID symptoms that can be managed in General Practice or referred to more specialist support in secondary care.

One significant contributory factor with patients living with Long Term Conditions is obesity. Therefore, additional resources have been made to practices helping target appropriate patients to weight management groups.

All practices in Peterborough and surrounding PCNs have signed up both these enhanced services (except for Hampton for Long COVID).

Increasing the workforce within General Practice has been prioritised by Government, and significant financial support has been given to Primary Care Networks to recruit and employ many additional clinical roles, not traditionally seen in General Practice. The PCNs across Peterborough have recruited or in the planning stage to recruit to the following:

Role	Actual WTE	Planned WTE
Pharmacy Technician	1.6	5.6
Clinical Pharmacists	15	4.5
Advance Practitioner (CP)	0	1
First Contact Physiotherapists	4.3	2.7
Occupational Therapists	0	1
Paramedics	1	3.2

Advanced Practitioners (Paramedic)	0	0.8
Physician Associates	2	1
Care Coordinators	9.2	9.9
Health & Wellbeing Coaches	12.5	0.8
Social Prescribing Link Workers	8.6	5.8
Trainee Nursing Associates	0	4.8
Total:	54.2	41.1

The CCG is investing in Diagnostics Hubs to focus on getting patients the screening and scanning often so crucial in early detection of life limiting illness and LTCs. The plans include both static centres and a mobile diagnostic truck, that can travel between practices/PCNs and hook up to purpose build 'Access Pads'. This service will allow for better population coverage and services closer to patients' homes.

3.4 **How will staffing be managed in relation to self-isolation and sickness, whether due to COVID-19, other illness, stress, and anxiety. With particular emphasis on the latter?**

From 1st July 2021 a new Enhanced Primary Care Occupational Health (OH) Pilot, funded by NHS England, was launched in Cambridgeshire & Peterborough aimed at addressing the significant variance in provision and quality of access to commissioned OH services across Primary Care. The service, provided by Optima Health, has been offered to all General Practices, 3 GP Federations and 65 Independent/ small Community Pharmacies across the system (approximately 3,800 staff). Supporting the workforce throughout their employment journey the OH service provides Pre-employment screening and Immunisations where required, to those entering Primary Care to ensure fitness for the role. Once in post, guidance can be sought by referring managers to support staff, including those with mental health issues, remain or return to the workplace. For those that have suffered the anxiety of a needlestick injury, OH also provides a Sharps telephone line to give guidance and support to staff and managers using their Blood Borne Viruses procedure.

Providing a self-referral element, an Employee Assistance Programme (EAP) and Wellbeing app both accessible 24/7, is available within the pilot. The EAP allows access to a team of trained wellbeing and counselling practitioners offering confidential independent information and guidance on a range of issues. Following an initial telephone assessment, a number of 1:1 counselling sessions can be arranged to support staff on a wide range of issues including stress and anxiety. The Wellbeing app, Optimise, is an intuitive online system with a collection of mental, physical and financial health checks and provides a variety of resources to support staff look after their mental and physical health.

The enhancement to the pilot project includes a Human Resources helpline for Practice Managers and Community Pharmacy leads. The launch of the HR service will commence upon the recruitment of a HR Business Partner and will provide guidance and best practice on employment related matters to reflect the NHS commitment to the workforce within the People Plan.

Embedded in the wider Cambridgeshire & Peterborough system offer to enhance wellbeing of staff, the pilot links with the Health, Safety, Wellbeing Group, and works collaboratively with the Staff Support Hub sharing resources and funding. The Staff Support Hub complements the comprehensive health and wellbeing support already offered by the OH Pilot and links with psychological and mental health services in the system to support fast access.

Staff Mental Health and Wellbeing Hubs

In response to the pandemic, mental health and wellbeing hubs have been set up to provide staff rapid access to evidence-based mental health support where needed. The hub offer is confidential and is free for all health and social care staff in England to access.

The hubs can offer a clinical assessment and referral to local services, such as talking therapy or counselling. You can self-refer or refer a colleague (with their consent).

For further details go to [the NHS.UK Mental Health and Wellbeing Hubs webpage](#). Doctors, dentists and senior leaders can also [self-refer to the Practitioner Health service](#).

3.5 **How primary care can improve capacity to support Urgent and Emergency Care (UEC) services especially around current service levels.**

Since December 2020, GPN has been running Surge Hub Capacity to provide additional support for General Practice where it is struggling to cope with on the day demand. Hubs operating Monday to Friday from 1400 to 1900, giving practices benefit of additional capacity in the afternoons to deal with on the day demand accumulated each morning. This service was designed to alleviate some of the pressures on ED at Peterborough Hospital too, by offering appointments beyond General Practices' core hour, with Friday afternoons being open for bookable appointments of Saturday.

Greater Peterborough Network (GPN) – 2 hubs, one in Peterborough and the other in Wisbech – 134 additional hours per week provided for Peterborough and Wisbech populations.

KPI Description	Greater Peterborough Network	West Cambs Federation	Cambridge GP Network
Clinical hours provided	4,244	2,229	4,220
Same day appointments provided (total)	16,501	7,377	12,268
Face to Face Appointments provided (total/%)	7,989 (48%)	627 (8%)	4,883 (39%)
Virtual Appointments (online/video/telephone) provided (total/%)	8,513 (52%)	6,750 (92%)	7,385 (61%)
GP Clinical Time Utilisation (%)	97.7%	99.2%	98.6%
Average service utilisation rate including DNAs (Jul 21 average)	89.4%	100.0%	87.9%
Average service utilisation rate excluding DNAs (Jul 21 average)	93.2%	99.1%	89.9%
Utilisation of ring-fenced slots (Face to Face slots saved for telephone follow-ups)	35.2%	33.0%	36.3%

4. **REASON FOR THE RECOMMENDATION**

4.1 The Scrutiny Committee is asked to note the contents of this report, specifically answering the questions posed by the Committee.

5. **IMPLICATIONS**

5.1 **Financial Implications**

The financial spend for delivering General Practice is within our delegated and discretionary CCG Budget.

5.2 **Equalities Implications**

Providing a mix of appointments in core hours, evening and weekend appointments allows for patients to access healthcare at a time that suits them, this specifically helps those on zero hour contracts, who cannot afford to take leave from work to attend appointments.