

HEALTH SCRUTINY COMMITTEE	AGENDA ITEM No. 7
7 JANUARY 2020	PUBLIC REPORT

Report of:	Cambridgeshire and Peterborough Clinical Commissioning Group	
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UPDATE ON QUALITY IN PRIMARY CARE SERVICES

R E C O M M E N D A T I O N S
It is recommended that the Peterborough health Scrutiny Committee note the contents of this report.

1. ORIGIN OF REPORT

- 1.1 The Chair and Committee members have expressed concern following verbal feedback from patients who have expressed concerns regarding a decline in the quality of services within General Practice. The Committee has asked for assurance that the CCG is undertaking measures to improve this situation and what support the CCG is offering practices who may be struggling to maintain high standards of quality.

2. PURPOSE AND REASON FOR REPORT

- 2.1 This report is to inform the Health Scrutiny Committee of the systems in place to ensure and improve quality in General Practice
- 2.2 This report is for the Health Scrutiny Committee to consider under its Terms of Reference Part 3, Section 4 - Overview and Scrutiny Functions, paragraph No. 2.1 Functions determined by Council - Public Health and Scrutiny of the NHS and NHS providers.

3. BACKGROUND AND KEY ISSUES

- 3.1 Cambridgeshire and Peterborough Clinical Commissioning Group (CCG) were formally authorised to take delegated responsibility for the commissioning, procurement and management of Primary Medical Services Contracts within Cambridgeshire and Peterborough in December 2017. This includes a responsibility for the quality of care. The CCG has a formal governance framework to ensure the quality of care and have recently approved a scheme of support to all practices and a structured approach to the management of concerns raised that supports openness, transparency and learning. Primary Care is overseen by the Primary Care Commissioning Committee, which is made up of Lay Members, NHS England, Executives, the Local Medical Committee and Healthwatch.

Cambridgeshire and Peterborough CCG are committed to improving the quality of care for our patients and therefore assessing, measuring and benchmarking quality is a key focus. The three elements of quality are Patient Safety, Clinical Effectiveness and Patient Experience.

Whilst practices as providers are accountable for the quality of services and are required to have their own quality monitoring in place, NHS England / NHS Improvement and Cambridgeshire and

Peterborough CCG have a shared responsibility for quality assurance and improvement. The principle is to prevent harm to patients, be supportive to providers and enhance the quality of services delivered to patients. It is vital that all parties are transparent, through the duty of candour and the contractual relationship with Commissioners. Practices are required to provide information and assurance to Commissioners and engage system wide approaches to improving quality. This will assist in ensuring strong and sustainable primary medical services for the future.

The Quality Team within the Primary Care directorate have developed a Quality Assurance and Improvement Framework (QAIF) which has been designed to support improvement in general practice and provide a systematic process for managing unwarranted variation. The QAIF outlines the roles and responsibilities of each organisation and the actions to be taken, in response to identification of quality or performance concerns which may be raised by way of but not limited to:

- Care Quality Commission (CQC) inspections
- NHS England and NHS Improvement
- The Cambridgeshire and Peterborough CCG Quality Surveillance Panel and practice visits
- Healthwatch Cambridgeshire and Peterborough
- Freedom to Speak Up and the raising of “whistleblowing” concerns.

The roles and responsibilities of each organisation needs to be understood and clearly defined and it will be expected that all parties will work together to ensure that patient safety is paramount and not at risk.

3.2 General Practice

General Practices are responsible for identifying their own areas for improvement and to work in partnership with Primary Care Networks which are the building block of the NHS long-term-plan (NHS, 2019) to improve population health outcomes. It will be expected that practices will have a Clinical Governance Framework in place and take active steps to address any service performance or quality issues identified within the network.

Each practice will be expected to:

- Comply with the Care Quality Commission Regulations and Health and Social Care Act 2008 (Regulated Activities and Regulations 2014).
- Engage and work with Cambridgeshire and Peterborough CCG and NHS England / NHS Improvement where improvements have been identified and engage with support when offered.
- Take active steps to improve in response to any feedback from (including but not limited to); the CQC; Cambridgeshire and Peterborough CCG; Local Medical Council (LMC); Healthwatch; Patient Experience feedback and clinical audits.

The practice will be encouraged to share any preliminary reports/ feedback from any external bodies including CQC with the Cambridgeshire and Peterborough CCG to enable support to be provided (if required) at an early stage.

3.3 Cambridgeshire and Peterborough CCG

The Cambridgeshire and Peterborough CCG reviews available hard and soft data as part of objective monitoring, and this leads to an annual programme of supportive quality visits. The Cambridgeshire and Peterborough CCG will be responsible for the following:

- Analysing data within the Quality Assurance Framework (primary care dashboard), identifying outliers and working with practices to address these.
- Undertaking practice visits in line with this framework; or when requested by the practice.
- Offering support to practices as required in line with this framework.
- Agreeing an action plan to address any concerns identified to address the areas of concern.
- Monitoring quality and contract performance.
- Reporting to the Primary Care Operational Group on General Practice performance.
- Reporting to the Primary Care Commissioning Committee on General Practice CQC ratings.
- Liaising with General Practices, CQC, NHS England, LMC and other key stakeholders.
- Identifying any contractual breaches and taking the appropriate action.
- Escalating concerns when identified through the appropriate routes, specifically if these concerns relate to 'Freedom to Speak Up'.

3.4 **NHS England and NHE Improvement (NHSE / NHSI)**

Cambridgeshire and Peterborough CCG have fully delegated authority for General Practice contracts. The ultimate statutory accountability for the delegated functions remains with NHS England/NHS Improvement and they have oversight and support Cambridgeshire and Peterborough CCG where appropriate.

Certain functions will be reserved by NHS England/NHS Improvement, these include but not limited to:

- Management of the national performers' list
- Management of the revalidation and appraisal process
- Overall responsibility for dealing with patient complaints
- Management of NHS screening and immunisation incidents and concerns

3.5 **Monitoring and Surveillance via a *Quality Surveillance Panel***

The function of the Quality Surveillance Panel is to review the three domains of quality through the Quality Assurance Framework and soft intelligence.

- 1) ***Patient Safety:*** safeguarding; reporting of patient safety incidents; access, workforce numbers, skills and training.
- 2) ***Clinical Effectiveness:*** Quality Outcome Framework, emergency admissions, referral rates, prescribing data.
- 3) ***Experience of Patients:*** GP Patient Survey; Friends and Family Test (FFT), CQC inspections.

The Quality Surveillance Panel meet monthly comprising of the Clinical Quality Lead Nurse, Head of Primary Care, Head of Medicine Management Optimisation, Head of Information Technology, General Practice Nurse Lead, Primary Care Network Leads and NHS England / CCG contract manager.

The Quality Surveillance Panel function is to:

- Analyse the Quality Assurance Framework (primary care dashboard) data.
- Address variability across the Cambridgeshire and Peterborough.
- Identify practices requiring additional support/resources.
- Develop effective local relationships and facilitate practice improvement through support.
- Ensure there is a structured approach to supporting and monitoring General Practice providers.

- Ensure procedures and governance are in place, to commission services and hold to account for the services delivered.
- Provide performance assurance to Cambridgeshire and Peterborough CCG.
- Support practices to monitor performance against national and local primary care performance indicators.
- Embed the culture of quality improvement across all GP practices and provide assurance of high-quality care to all patients.

3.6 Quality Assurance Framework (QAF) – Primary Care Dashboard

The Quality Assurance Framework is a dashboard consisting of a range of metrics from the following published sources:

- NHS Improvement GP dashboard - High Level Indicators /Outcome Standards / Public Health Screening data.
- Future NHS Collaboration Platform.
- Care Quality Commission – inspection outcomes.
- Patient Experience – Patient Satisfaction Surveys.
- Patient Safety – including Serious Incidents, information governance, prescribing data.
- CCG indicators – including screening, immunisations and vaccinations.

Current domains are:

1. Patient Demographics – Practice linked Indices Multiple Deprivation
2. Quality – CQC rating – overall and for each domain
3. Workforce - % locums used, number of patients per Full Time Equivalent GP/ Advanced Nurse Practitioner / General Practice Nurse, % of staff over 55 years of age
4. Efficiency – Quality Outcome Framework (QOF) score, exception rate, QOF increase/decrease in scores
5. Patient Experience – Indicators taken from Annual Patient Survey
6. Digital – online appointments enabled, online repeat prescriptions
7. Secondary care activity – A&E attendances, Non-Elective spells, referrals – routine and 2 Weed Wait, 111 usage
8. Health Prevention – childhood vaccinations, cervical screening, flu vaccinations +65 years
9. Prescribing - £/Astro PU, Antibiotic prescribing

In addition, the CCG and the LMC have provided further resources to help practices:

- Resilience funding (c. £127,000 for 2019/20 and c. £136,000 for 2020/21).
- Lunch and Learns for Practice Managers to be held by the LMC to help them deliver a ‘good’ or ‘outstanding’ CQC result.
- Royal College of General Practice (RCGP) being commissioned to support vulnerable practices with advice, training, support etc.
- Primary Care Commissioning (PCC) has been commissioned to provide six CQC workshops to practices in the New Year.

Quality Offer to Primary Care

Each Practice will be offered a range of support which will include:

- Self-Assessment Tool
- Bespoke support visits
- Learning workshops – preparing for CQC (Quality in primary care – ‘what does it look like’)
- Conferences – workshops to address areas and themes
- Library of resources
- Staff ‘buddy system’

- Practice Manager – training, updates, support
- Leadership training /workshops
- Primary Care Awards

3.7 Care Quality Commissioning (CQC)

The CQC regulates against the registration requirements set out in regulations to the Health and Social Care Act 2014. These standards represent the minimum ‘quality bar’ which all providers of regulated activities must meet.

Following a CQC inspection, each GP practice will receive an overall rating of Outstanding, Good, Requires Improvement or Inadequate. Cambridgeshire and Peterborough CCG regularly meet with the CQC to discuss any soft intelligence and areas of concern. If a CQC inspection has triggered a concern, CQC will escalate the risk to the CCG.

3.8 CQC inspection update for Peterborough Practices

Thistlemoor Surgery received a CQC inspection and the report published on 28 November 2019 rated the Practice as ‘Outstanding’ overall, in two of the domains and in all 6 population group ratings. This is a consecutive ‘Outstanding’ rating.

Old Fletton Surgery received a CQC inspection following their Requires Improvement in November 2018 and the Practice received a CQC rating of ‘Good’ overall and in 5 of the 6 population group ratings. The report was published on 12 November 2019.

The following CQC inspections have taken place and are awaiting publication of their reports.

- North Brink Practice
- Lakeside Healthcare at Yaxley
- Waterbeach Surgery where the CQC has taken urgent enforcement action to suspend the Provider’s registration. Caretaking arrangements have now been established. The CQC Report is awaited.

During December inspections that have been announced are at Huntingdon Road Surgery, Swavesey Surgery and Orton Medical Centre.

The majority of practices across Cambridgeshire and Peterborough are rated as ‘good’ however those rated an ‘inadequate’ or ‘requires improvement’ are given additional support to improve.

See Appendix 1 - PCCC Quality Report PUBLIC December 2019 for the full list of practices and their ratings.

3.9 Quality update for practices in Peterborough rated as ‘Inadequate’ or ‘Requires Improvement’

Provider	Key Issues	Key Actions	Progress since last report
Octagon Medical Practice GMS contract	CQC rated Requires Improvement Inconsistent systems in place for the safe management of medicines. Governance systems for recruitment and retention Lack of processes to demonstrate role competency.		Quality Visit 14.11.19 Provider has an action plan is addressing all areas noted by CQC.

	Lack of application of Infection Control Policies. Areas of Quality and Outcomes Framework indicators below local and national averages.		
Westwood Clinic GMS contract Family run Practice led by Dr Laliwala and partners. Other practices include Welland MC, Ailsworth MC and branch at Newborough and Parnwell	CQC rated Inadequate Inconsistent process patient and medicine safety alerts. Lack of support and oversight of clinicians Governance systems and processes not embedded No oversight of high-risk medicine prescribing Poor patient experience Quality Outcomes Framework data lower than CCG average and exception reporting very high Ineffective patient recall system.	CQC inspection on 04.07.19 led to a temporary suspension of contract (Section 31) on 16 July 2019. Follow up CQC focused inspection on 12.08.19 lifted suspension.	Quality visit booked for 4.12.19. Assurance visits have not occurred as often as required due to the Practice not forthcoming with dates and capacity in CCG. The Practice do have an action plan in place and are addressing areas noted by CQC.
Welland Medical Practice GMS contract Family run Practice led by Dr Laliwala and partners. Other practices include Westwood MP, Ailsworth MC and branch at Newborough and Parnwell.	CQC rated Requires Improvement Further improvements to clinical governance and oversight. Further improvements to be made to the management of emergency medicines. Further improvements required to recruitment of staff. Further improvements required to providing caring services. Transition of practice to a new build called Nightingale Medical Practice.	Extensive support from CCG quality directorate and Medicine Optimisation Team. Royal College of General Practitioners (RCGP) visited both Westwood and Welland Medical Centre on 21 May 2019. Practice have received a detailed action plan and resources to support. RCGP provided extensive support prior to re-inspection.	Locum Practice Manager left on 4.10.19. A new Practice Manager started in post 25.11.19. during that period no visits have taken place and arranged visits cancelled by Practice. Quality visit arranged for 6.11.19. Medicine management providing support for a 4-week period with medicine reviews and repeat prescriptions.
Hampton Health PMS contract The practice has applied to merge with Octagon – not yet approved	CQC rated Requires Improvement Evidence of sustained improvement to responding to patient experience. Risk assessments – fire safety Patient Group Directives (PGDs) – out of date Systems for prescribing stationary	Practice have an action plan in place and addressing all areas noted by CQC.	

	Follow up CQC inspection took place on 09.05.19 improvements noted for strengthened leadership.		
Dogsthorpe Medical Centre APMS contract managed by McLaren Perry	CQC rated Requires Improvement Third CQC inspection took place on 21 February 2019 and rating improved from 'Inadequate' to 'Requires Improvement'. Governance systems and process now in place rating for 'Safe' has improved to 'Good'.	To improve Effective, Caring and Responsive domains. Practice have an action plan in place and are addressing all areas noted by CQC.	Practice closure end of January 2020
Orton Bushfield Medical Centre APMS contract	CQC rated Inadequate CQC completed a second full inspection on 27.2.19 and practice was rated Inadequate overall. CQC completed an unannounced visit on 04.06.19. Concerns escalated which led to an urgent suspension of contract on 06.06.19 (Section 31). A sub-contract was arranged with Thorpe Road Surgery for 12-week period. CQC registration was cancelled with previous provider. Thorpe Road Surgery have an APMS in place for 1 year.	The patient safety risks identified by CQC are being addressed plus historical issues identified by Thorpe Road Surgery. CCG Nursing and Quality team and Medicine Optimisation Team supporting weekly with workload and oversight of issues. Practice have an action plan to address all areas noted by CQC.	CQC inspection 10.12.19

3.10 **GP workforce shortages**

We are working closely across our health system to improve our GP numbers across our area. We are focusing our efforts on workforce retention, additional recruitment and supporting new systems and processes in our practices that release time for patient care.

We are also helping some practices to become GP Training Practices, creating peer networks for educational and support needs, commissioning coaching and mentoring schemes and developing a free educational programme aimed at local GPs and clinicians.

We are very aware of the demand pressures faced by our GPs and through our Primary Care Networks we are bringing in new roles to support practices such as Social Prescribing Link Workers, Clinical Pharmacists and Nurse Practitioners and in the future Physician Associates and Physiotherapists. This is so local GPs can focus on treating people with more long term or complex conditions.

3.11 Practice updates

3.12 Nightingale Medical Centre

The Scrutiny Committee is advised that the long-awaited development of the new Nightingale Health Centre premises situated in Western Avenue, Peterborough is now nearing completion.

This project, formerly known as the “John Mansfield Medical Centre”, was originally initiated before the inception of NHS England in 2013 and has been the subject of many delays. The new premises will be known as “Nightingale Medical Centre” and the practice currently known as “Welland Medical Practice” (contract D81065, located at 144 Eye Road, Peterborough) plan to move into these new premises following practical completion and handover by the developer. At that point of transition to the new site, Welland Medical Practice will rename the Practice and adopt the same name as the premises and will be known as “Nightingale Medical Centre”.

The new Nightingale Medical Centre premises is situated on Western Avenue and located 1.3 miles away from the current surgery in Eye Road. The new site benefits patients as it is close to a bus stop on Bus Route 5.

Extensive patient consultation was undertaken in 2011 by NHS Peterborough as part of the consultation called ‘The Right care at the Right Time – seeking your views on the Primary care and Urgent Care Commissioning Strategy for Peterborough’. Further public and patient engagement was undertaken as the project developed and more specifically in October 2018 once construction was finally underway. Patients of Welland Medical Practice received a formal written communication to reaffirm the practices’ intention to relocate to the new site. The practice website has subsequently been updated with information about the development and projected timeline for relocation.

The “Nightingale” project board which has representation from the Practice, NHSE/I and the CCG are now meeting fortnightly and planning further communications to keep patients informed of plans for the forthcoming move to the new premises. The Project Board are also carefully monitoring the practices’ plans to ensure the smooth transition of patients and services into the new premises with as little disruption for patients as possible.

As the exact date on which the new building will be ready to move into has yet to be finalised, the project board have ensured that plans are in place to accommodate the move avoiding the Christmas/New Year period, so the move will now not take place any time before 13 January 2020. The builders and developers hope to have a formal building regulation signed off before the 13th January for occupation as soon as possible after this date.

3.13 Dogsthorpe

Dogsthorpe Medical Centre will close on 31 January 2020. All current patients were asked and supported to register with another GP practice by Friday 13 December to ensure continuation of care. All patients received a letter informing them of the closure and how to register with another practice. (Appendix 2 – copy of letter issued to patients of Dogsthorpe Medical Centre.) SMS text messages were also sent, and messages posted on the practice website. In addition, colleagues from NHSE/I and the CCG, along with practice staff held two patient drop-in sessions (14 November at lunchtime and 19 November in the evening) for questions/answers and support.

All patients were advised to register with another GP practice of their choice by 13 December 2019 to ensure continuation of care. All vulnerable patients were helped to register elsewhere by the practice staff. For those that haven’t registered elsewhere by the 13 December, NHSE/I

will systematically register these patients with local practices and letters will be sent informing patients of this.

3.14 Newborough

NHSE/I received a draft application from Dr Laliwala on behalf of the partnership to request permission to close the Newborough branch site. However, before any decision is made on the closure of a GP practice there is a process to follow, including a period of engagement with patients and the public. This process at Newborough Surgery is in the very early stages and no decision has yet been made on whether the practice will close.

NHS England and NHS Improvement will work closely with NHS Cambridgeshire and Peterborough Clinical Commissioning Group and Newborough Surgery to ensure that local people continue to have access to high quality healthcare services, regardless of the decision on the application.

We understand that Dr Laliwala posted a message, indicating that the practice was due to close on the 29 November; this was incorrect, and the message was changed. Dr Laliwala has been advised to alter the message to his patients and is now welcoming patient feedback before any further application is submitted for consideration. The CCG has advised patients that they can contact the practice Patient Participation Group to express their concerns.

4. REASON FOR THE RECOMMENDATION

4.1 *This report is an information report in response to enquiries to the CCG regarding measure to ensure quality of service in General Practice in the Greater Peterborough area.*

5. APPENDICES

5.1 Appendix 1 - PCCC Quality Report PUBLIC December 2019
Appendix 2 – copy of letter issued to patients of Dogsthorpe Medical Centre.

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