

North East Oxfordshire Locality Commissioning Meeting

Date of Meeting:	10 October 2018					Paper No: 4				
Title of Paper:	Oxfordshire Primary Care Commissioning Committee Briefing: 4 September 2018 meeting									
Is this paper for		Discussion		Decision		Informat	ion	✓		

Purpose and summary of paper:

Summary of discussions at this month's Oxfordshire Primary Care Commissioning Committee (OPCCC). This takes decisions about OCCG's primary care commissioning.

Action Required:

Note contents and links to OPCCC papers.

Updates on Cogges Surgery available at:

https://consult.oxfordshireccg.nhs.uk/consult.ti/cogges/consultationHome

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OPCCC Briefing September 2018

NHS Oxfordshire Clinical Commissioning Group

This briefing is intended to give a summary of the key areas of discussion and decisions at the meeting of Oxfordshire Primary Care Commissioning Committee (OPCCC) which is a committee of Oxfordshire Clinical Commissioning Group (OCCG) Board. It is intended for wide circulation. The minutes will provide the official record of the meeting. The agenda, papers and this briefing are available on the OCCG website here.

Banbury Health Centre update:

The committee heard that OCCG has now approved the relevant contracting processes (supported by NHS England) for a new practice to be formed through the integration of Banbury Health Centre, West Bar Surgery and Woodlands Surgery in Banbury under a single GMS contract. The practices and the local GP federation, PML, have been actively engaging with each practice's patient Participation Group (PPG) and have held a joint PPG meeting. Patients will be able to access services from any of the sites. The size of the practice, which will serve a population of 30,000, offers the opportunity for future expansion to improve access and cope with the growing population of Banbury.

Locality Place Based Plans:

The committee discussed the six locality plans published in January 2018 which responded to the Primary Care Framework for Oxfordshire and included a number of priorities and work streams to best meet the needs of the population in the next five -10years.

Following a review of OPCCC's functions it is likely that many of these schemes will, in future, report into different programme boards such as the Accident and Emergency Delivery Board (eg extended access to Primary care) or Health Improvement Board (social prescribing) which are boards that have membership from across the health and social care system in Oxfordshire. It is clearly understood that many organisations and communities have a significant role to play in the health of their local population, and planning for well-being and health care is something that the NHS cannot do on its own.

Finance:

The committee heard that primary care budgets for 2018/19 are on target, with the exception of Out of Hours. Among pressures noted is the higher than expected pay award to GPs.

However, other pressures include the contract with Oxford Health NHS Foundation Trust (OHFT) which has not yet been finalised. The most significant pressures at Oxford University Hospitals NHS Foundation Trust (OUHFT) are within urgent and emergency operations, currently £2.5m over plan, with additional areas of pressure in high cost drugs, diagnostic imaging and outpatient attendances and procedures.

OCCG are forecasting on plan however there is a net risk position of £5.6m as such a Financial Recovery Plan has been put in place. The three elements of the plan are activity management; speeding up savings and budget reviews. The Financial Recovery Plan (FRP) is available here:

http://www.oxfordshireccg.nhs.uk/documents/meetings/board/2018/07/2018-07-26- Paper-18-45-Appendix-1-Month-3-201819-Finance-Performance-Report.pdf

Primary Care Quality:

Current CQC ratings remain unchanged, with the majority of practices having achieved a 'Good' rating with four 'Outstanding'. Horsefair Surgery in Banbury was inspected again in May with a follow-up in July and its rating remains 'Requires Improvement'. The Quality team is working closely with the practice to support an action plan, with a particular focus on the management of patients with long term conditions and/or on high risk drugs and those receiving palliative care.

The results of the national Patient Survey have recently been published and show a slight decline in scores both nationally and in Oxfordshire. Oxfordshire continues to perform above national average. The national average for satisfaction with primary care services has reduced from 85% to 84% and the local score from 89% to 87%. NHS Digital has not provided any trend analysis this year because of changes to some questions in the survey. A more detailed analysis of the survey results will be provided to the next meeting.

The committee discussed the Quality & Outcomes Framework (QOF) 2017/18 data to be published in October. It is expected that 11 of our 70 practices will achieve full points for QOF during the year and a further 35 should achieve over 96%. Only eight practices are expected to achieve below the average of 97.5% and all but one of these over 90%. The Quality Committee will closely scrutinise the effect on patient care at practices which do not achieve 90% and also the varied levels of exception reporting by Practices.

During 2017/18 the Quality Team has developed a formal process to support and manage the reporting of significant events in general practice. The aim is to improve learning from these events and to disseminate information across practices. It was noted that multi-agency investigations into significant events are helpful in the dissemination of information.

Developing Oxfordshire Primary Care Commissioning Committee:

The committee agreed:

- to invite additional members (independent clinician and Health and Wellbeing Board member) as already allowed for by Terms of Reference but preferred to combine this into one position
- the balance of voting and non-voting members
- proposals to bring draft priorities and a quality and performance dashboard to the next meeting
- that its scope is focused on the functions and services covered by the delegated budget
- that other service areas that have been in scope are assigned as summarised in the table included in section 2.2
 http://www.oxfordshireccg.nhs.uk/documents/meetings/opccc/2018/09/2018-09-04-Paper-7-Developing-Oxfordshire-Primary-Care-Commissioning-Committee.pdf
- terms of reference for the Oxfordshire Primary Care Commissioning Operational Group needed to be varied to look at voting rights and resubmitted.

Report from the Deputy Director, Head of Primary Care and Localities May – July 2018:

Highlights include:

 OCCG has approved Alchester Medical Group's (Bicester) application to grow its list size and increase its practice boundary to take on patients from Upper and Lower Heyford, including the new housing development.

By working together we will have a healthier population, with fewer inequalities and health services that are high quality, cost effective and sustainable.

• Of the 70 GP practices in Oxfordshire, 69 participated in the Local Investment Scheme (LIS) during 2017/18. 46 of 70 practices achieved 100% of the elements of the LIS (compared with 49 of 74 practices last year). The average achievement for a practice was 94%. OCCG has provided clear guidance on how to achieve LIS.

Cogges Surgery – update:

OCCG is working with patients, patient representatives and other key stakeholders to find a local solution to the future of services at Cogges Surgery in Witney; this includes looking for another Oxfordshire practice running it as branch surgery. The remaining practice partners handed in their contract in July with six months' notice. A reference group has been brought together and a member of the PPG and a locality forum chair will be part of the selection process when looking at future providers of services. OCCG's website is being updated weekly and there is a frequently asked questions section for further information.

Forward Plan: Next meeting on 6 November 2018.