

Oxfordshire Clinical Commissioning Group Board Meeting

Date of Meeting: 28 September 2017

Paper No: 17/61

Title of Paper: Locality Clinical Director Reports

Paper is for:

(please delete tick as appropriate)

Discussion

Decision

Information

Purpose and Executive Summary:

To update the Board on matters arising in the Localities.

Financial Implications of Paper:

There are no financial implications in the paper but items referred to in reports may have financial implications.

Action Required:

The Board is asked to note the content of the reports.

OCCG Priorities Supported (please delete tick as appropriate)

| | |
|-------------------------------------|------------------------------|
| <input checked="" type="checkbox"/> | Operational Delivery |
| <input checked="" type="checkbox"/> | Transforming Health and Care |
| <input checked="" type="checkbox"/> | Devolution and Integration |
| <input checked="" type="checkbox"/> | Empowering Patients |
| <input checked="" type="checkbox"/> | Engaging Communities |
| <input checked="" type="checkbox"/> | System Leadership |

Equality Analysis Outcome:

Not Applicable

Link to Risk:

The paper does not directly link to risks on the Risk Register but items contained in the Locality Clinical Director Reports may do so.

Author: Locality Clinical Directors

Clinical / Executive Lead:

Date of Paper: 15 September 2017

North Oxfordshire Locality Group (NOLG)

Locality Clinical Director Report

Dr Paul Park

1. NOLG Primary Care Plan

Work is ongoing on the locality primary care plan with the support of PA Consulting, with further substantial locality discussion of potential workstreams planned for 19 September. At the time of writing the main priorities are:

- i. **Wider skill mix in primary care supporting staffing and recruitment:**
NOLG practices have led the way in exploring skill-mix in primary care. Five NOLG practices (Chipping Norton, Hightown, Horsefair, West Bar and Woodlands) have benefited from employing a **clinical pharmacist**, and three practices (Chipping Norton, Hightown, and Horsefair) have employed a **musculoskeletal (MSK) practitioner**. The rural cluster (Bloxham, Chipping Norton, Deddington, and Wychwood) have deployed **mental health workers (MHWs)** for two months. The NOLG locality plan recommends supporting and resourcing further development of essential and appropriate skill-mix in practices to improve quality of care and practice sustainability.
- ii. **Improved care for care home residents:** The Banbury cluster practices have allocated care home cover to practices over the last few months, and expect to have full allocation by the end of the year. The rural cluster practices have already completed this process, and so the NOLG locality plan recommends supporting improved care home patient care by continuing the current locally commissioned service for enhanced care home management.
- iii. **Shared electronic record with community and mental health services:**
The NOLG locality plan recommends using EMIS Clinical Services to give local Oxford Health NHS Foundation Trust (OHFT) community and mental health staff access to the EMIS GP record in order to read and enter patient information, enabling genuine clinical interoperability and joined-up care across the locality, if not the county.
- iv. **Care navigation and social prescribing:** Currently, Cherwell District Council (CDC) funds a social prescribing service for Banbury practices, and active signposting training is planned by OCCG for all practice reception staff as part of the GP Forward View. The NOLG locality plan recommends combining the two functions, working with CDC to signpost patients at the practice and cluster level to appropriate local resources.
- v. **Coordinated campaign to boost recruitment:** Recruitment in all areas of health and social care has been very challenging in the Banbury area as elsewhere in the county. The NOLG locality plan recommends a coordinated campaign with local government and stakeholders, such as the Banbury and District Chamber of Commerce, aimed at boosting recruitment into all health and social care roles and improving population and staff morale locally.

2. Oxfordshire Healthcare Transformation programme

Following discussion in July NOLG practices e-mailed their views to inform the Locality Clinical Director's approach at the OCCG Extraordinary Board meeting on 10 August. In summary those views were:

- **Acute medical beds** - The NOLG practices are concerned about the loss of acute beds at the Horton, which has been proportionately higher than in the rest of the county. Their support for this recommendation is therefore mixed and they cannot reach a consensus.
- **Critical care** - The views of the NOLG practices around this recommendation are mixed and they cannot reach a consensus.
- **Planned care** - The NOLG practices unanimously welcome and support this recommendation.
- **Maternity** - The NOLG practices were extremely unhappy about the temporary change but generally agreed that it was unavoidable. Their support for this recommendation is therefore mixed, but there is a slight majority of practices in support.
- **Stroke services** - The NOLG practices have some concerns about the provision of local early supported discharge services but in majority support this recommendation based on the clinical evidence.

3. NOLG Locality meetings

Topics other than Healthcare Transformation and locality primary care plan discussed at the NOLG meetings in July and August 2017 included:

- Election of Deputy Locality Clinical Director in September, as Shelley Hayles' current term is coming to an end;
- Changes to configuration of Woodlands and West Bar practices in Banbury, plus consultation about the future of the Banbury Health Centre contract;
- Measures to minimise unnecessary patient transfers between Banbury practices: the moratorium on transfer of patients between Banbury practices continues, with renewed commitment from those practices to clearly communicate with patients seeking to transfer and preserve patient choice.

4. Liaison with Oxford University Hospitals NHS Foundation Trust (OUHFT)

OUHFT and NOLG leadership have discussed arrangements for another clinical liaison meeting in September 2017. The NOLG membership will propose relevant topics for discussion.

5. Public and patient engagement

The North Oxfordshire Locality Public & Patient Forum (NOLF) steering group met on 12 July and discussed the following main topics:

- Messages to feedback to NOLG from the positive engagement at the NOLF open public meeting at Banbury Town Hall on 6 July which discussed the emerging priorities for primary care development in the locality;
- Holding a similar public meeting in Chipping Norton in the autumn with a primary care focus;
- NOLF to write to ask OCCG to think again about changes to the maternity services at the Horton hospital in the light of very wide local concern.

6. Federation development

- The rural cluster of north Oxfordshire practices have, as noted above, deployed two mental health workers to see their patients with serious mental illness and medically unexplained symptoms across all four practices for the last two months. The service has been very well received by both patients and practice staff, and the rural cluster practices will be reporting to NOLG on benefits and improvements to patient care and practice sustainability in due course.

The Banbury practice plan for federation-led closer working between Banbury Health Centre, West Bar, and Woodlands continues to progress, and will hopefully serve as a test-bed for a new model of combined care that could be adopted elsewhere in the county.

North East Oxfordshire Locality Group (NEOLG)

Locality Clinical Director Report

Dr Stephen Attwood

There was no August main Locality meeting, so the 13 September meeting focused on the areas below.

Oxfordshire Transformation Programme (OTP) – Catherine Mountford, Director of Governance, attended in her Executive support capacity, and outlined the current status regarding the decision process and outcomes for the Phase 1 consultation. Phase 2 processes to follow when timelines are clearer, although it was emphasised that patient engagement would continue to be an important part of the Localities plans. See Patient Forum section below.

Locality Plans – The Locality Place Based Plan was shared, with caveats around it being very much a draft document at the moment. Discussion focused on the proposed work streams below, with general agreement that these were the correct direction for this Locality:

1. Primary Care urgent access hubs
2. Support for practices to work in larger units
3. Primary Care visiting service
4. Delivering prevention services through the wider primary care / community team
5. Third sector input / Social prescribing
6. Consolidate the local diabetes service / Extend diabetes model to chronic Obstructive pulmonary disease (COPD)
7. Deliver Planned Care clinics and diagnostics locally
8. Development of integrated locality team
9. Bicester Healthy New Town programme

The workforce survey results were in from all practices, and had been summarised into the two Neighbourhood areas to maintain practice confidentiality. Practices were now satisfied this information could be shared more widely, and it will now be reflected in the Plan in more detail.

A Kidlington / Islip / Woodstock meeting followed the main meeting, looking at the planning implications of the 4,400 housing development currently out for consultation by Cherwell District Council, to enable an agreed response to be made by the October deadline.

RAF Heyford Park development is also expanding, with pressure expected on Bicester practices in addition to their own local housing growth. Planning for this has been in collaboration with Cherwell District Council, with the Bicester Healthy New Town Programme Director convening a Bicester Estates meeting to support the development of a local estates plan and business case. The local Federation ONEMed, NHS Property Services, and Oxford Health NHS Foundation Trust (OHFT) are involved in these discussions.

Clinical discussions included: Dr Kiren Collison attended to promote the use of the obstetric referral form and maternal medical risk assessment guide. Comments on improvement were made, and this form was welcomed as a way of supporting a consistent approach for patients.

HealthShare attended to present the new musculoskeletal (MSK) service starting in October, with recognition that there could be some teething problems as the new service switched over.

There was an update on the North East Locality Community Services Group progress, and note taken on the paper about forward planning for flu immunisations. The Prescribing Incentive Scheme was reviewed with Quarter 1 data, with interest expressed around savings, and how best to support achievement.

Practice Commissioning Pack meetings – The first of the neighbourhood workshops was held on 18 July 2017 and the second planned for late September. The three actions required from these meetings will be considered as to what can be achieved at scale for practice to remain sustainable considering the significant housing growth occurring in the area.

NE Locality Community Service Group meetings – Recent meetings have focused on identifying carers and encouraging them to register for support. Plans are well advanced to use the 'flu immunisation period' for all agencies to identify and offer support to carers. In addition an integrated training programme for support workers has been developed by the Group with the first session on 'recognising and supporting the deteriorating patient' due to be held in Bicester on 20 October 2017; it is hoped that the free training will attract support workers from a wide range of sectors creating the opportunity to develop local relationships as well as increasing knowledge and skills. Problems relating to the Trusted Assessment process have been identified and are being addressed by adult social care colleagues.

Papers - were presented on the following: OCCG July Board briefing, Planned Care project update, 2017/18 Q1 Prescribing Incentive Scheme update, MSK service changes, Flu immunisations, Place Based Plans, the STP Transformation update, HealthWatch Information Fair, Year of Care Diabetes update, and the Primary Care Local Incentive Scheme (LIS) Quarter 2 actions required.

Federated working (ONEMed) – ONEMed continues to work with the council and other providers to establish the future estates and care model needs of the Bicester Healthy New Town, with representation at a national event later this month to highlight our progress to date.

As part of the wider Principal Medical Limited (PML) federation we are looking at the possibility of a joint enterprise with Oxford Health to help stabilise and improve primary and community care across the county. Proposals will be discussed at the PML AGM at the end of September with a view to a shareholder vote over the coming months. In the meantime workshops are in place with OHFT to look more specifically at clinical areas and how we can improve service provision under a joint venture.

Bicester Healthy New Town Programme – The programme has created three 5K Health Routes in Bicester which offer safe and accessible walking/running routes which are suitable for a wide range of ages, at any time of the day, and at no cost to residents. Publicity about the routes attracted 44,000 ‘views’ on Facebook and in the first week since installation daily average footfall has increased by 25% to 708.

A detailed survey of Bicester resident’s health and wellbeing has been completed. This provides baseline data which can be used to measure the impact of the programme and offers insight into what would enable residents to adopt healthier behaviour, namely: fitting exercise into daily routines; receiving encouragement from friends and relatives; lower charges for public sports and leisure facilities; and cheaper prices for healthier food.

The programme has been working with (OHFT), holding workshops with local teenagers to inform the development of a mental health website for Oxfordshire offering information, advice and signposting to relevant services.

With support from the national NHS England New Models of Care team, the locality’s plans for sustainability and improvement have been assessed against a matrix of good practice to identify gaps and opportunities for service improvement; these have informed the North East locality plan.

Bicester has been identified as an exemplar within the Healthy New Town Programme and will be presenting in a session chaired by NHS England’s chairman Sir Malcolm Grant at the national NHS Innovation Expo.

Public and Patient engagement – The NE PPG Forum met in Exeter Hall, Kidlington on 11 September 2017 with representation from most practices. Discussion emphasis focused on the NE Locality Place Based Plan, with slides discussed on the priority areas, and what opportunities there are for public engagement now, and in the future as Phase 2 engagement and consultation is rolled out. Generally speaking there was approval for the direction of travel, PPGs were encouraged to participate, and further discussions will take place as plans progress.

The impact of the proposed housing for Kidlington was also raised, and comments will be reflected in the consultation response to Cherwell District Council.

Healthwatch intend to hold an Information Fair on 29 September 2017 in the John Paul Centre in Bicester, called Healthwatch Happening. This will collect views from the public on what they think of current NHS healthcare provision. The next Forum meeting is planned in Bicester, in December.

Oxford City Oxfordshire Locality Group (OCOLG)**Locality Clinical Director Report**

Dr David Chapman

Locality meetings

There was no August meeting, and the September meeting focused on the areas below. The next main Locality meeting will be held on 12 October.

Sustainability and Transformation Programme (STP) and Oxfordshire Transformation plan (OTP)

The Phase 1 Transformation Plan consultation progress was discussed, with updates on referrals to Secretary of State and judicial review. The Phase 2 element will be reported in due course.

Work has progressed on the Oxford City place based transformation plan and an update has been presented to the locality. A great deal of work has been undertaken with PA Consulting to help shape the locality plan and align it with the other localities. More work will be needed to define the priorities and cost the potential investment required. A model frailty pathway has been drawn up and was discussed in the locality. Refinements to the pathway were discussed which will be fed into the locality plan. OxFed presented the plans for a Joint Enterprise between the Federations and Oxford Health NHS Foundation Trust (OHFT) to develop the community services, which mapped closely to the requirements needed to deliver the frailty pathway. Support in principle was given to the Joint Enterprise although the decision around forming it was left to the OxFed's next members meeting.

The first City Practice Commissioning Pack (PCP) 2017/18 meeting has taken place in July covering the western side of the city practices, and a second meeting is planned 21 September for the eastern side practices. This meeting focuses on reviewing the data from the PCP and identifying three Actions which each practice will adopt to improve variation in primary care, or reduce referrals or admissions. The meeting focused on flu, mental health and loneliness which generated some fruitful discussion around further action.

Other clinical discussions:

Updates were given around the 2017/18 Primary Care Local Incentive Scheme (LIS) Quarter 2 requirements Autism search progress, and Quarter 1 progress by city practices against the 2017/18 Prescribing LIS. The musculoskeletal (MSK) contract change was discussed, with Kate Kitto from Healthshare attending to advise practices of the new process, and current difficulties. Dr Kiren Collison spoke about the useful maternity risk assessment form, which has proved to be a useful tool to aid risk stratification in pregnancy and plays to GPs skills. It will be incorporated into any changes in the antenatal pathway as it relates to General practice making use of the best skills of GPs and those of Community Midwives.

Voting for the City Locality Clinical Director post, and one of the Deputy posts has been completed with an over 95% unanimous positive re-election of Dr David

Chapman to LCD, and Dr Andy Valentine to deputy. The voting will now be ratified by OCCG and contracts updated for a further 3 year term.

Papers - were presented on the following:

OCCG July Board briefing, Planned Care project update, 2017/18 Quarter 1 Prescribing Incentive Scheme update, MSK service changes, Flu immunisations, Place Based Plans, Year of Care Diabetes update, IAPT update, and the Primary Care LIS Quarter 2 actions required, and an Activity Therapy paper by Sir Muir Gray.

Federation development – Prime Ministers Challenge Fund Schemes

OxFed continues to provide the 7-Day Access Scheme services with strong uptake of Evening and Weekend GP and Practice Nurse appointments provided from their permanent base in East Oxford where the team have access to shared EMIS clinical records. The team are working closely with the Out of Hours (OOH) service to ensure this does not destabilise their provision. The After-school clinics are not yet operational due to continued delays with access to the health space in the Rose Hill Community Centre (pending additional building works required for Oxford University Hospitals NHS Foundation Trust (OUHFT) services). Alternatives are being sought in other parts of the city to get the service started. Usage rates continue to be high and there is an active recruitment drive underway to increase to planned capacity.

The Federation successfully secured NHS England funding for a three-year scheme to embed Clinical Pharmacists in practices across the city, to improve support for medicines management, chronic disease management, training and education. They are in the process of recruiting to this new scheme. They have progressed plans on the Rose Hill long-term conditions service, and implementation will begin once they receive the sublease for the Rose Hill Community Centre.

OxFed continues to deliver the Practice Care Navigator Service across the city and is piloting social prescribing. They are making good progress with the wider Practice Sustainability package that has been funded through the City Locality, particularly in relation to the volunteering and digital transformation projects. Work continues to develop integrated working with other Federations and community services as well as with the wider system.

Public and Patient engagement

Two members of the city forum have joined Team Oxford steering group and are working with city practice managers to develop four volunteer 'practice champion' roles. Work is also underway to extend the 'appointment buddy' project, led by the voluntary organisation, Getting Heard. An event is being held at Oxford City Town Hall on 2 October on Older People. A further PPG Forum workshop will be planned later in the year.

South East Oxfordshire Locality Group (SEOLG)**Locality Clinical Director Report**

Dr Ed Capo-Bianco

At our September South East locality meeting we had a busy programme with presentations from the new Musculoskeletal (MSK) service Healthshare, who we are pleased to know are going to be running clinics from both Wallingford and Townlands in Henley. We also heard from the prescribing team and learnt that as a locality we were approximately £80.0k below our budget for the first quarter of the year, a great achievement from all practices. We also heard from the Suspected CANcer (SCAN) pathway, a new service that is available to us in the south east for patients whose GP believes their symptoms could be caused by cancer, but they are low risk and do not fit into another 2 week wait pathway.

Further progress is being made with the locality plan alongside PA Consulting, whose input is greatly appreciated. The main priorities for the South East Locality are:

- Ensuring there is a sustainable primary care, exploring issues with Estates, Workforce, Administrative support, IT interoperability and making best use of locality expertise e.g. dermatology clinic in South West
- Support for frail/elderly patients with the Rapid Access Care Unit (RACU) and ambulatory care model currently in Townlands and Thame
- Maintaining our GP Access Fund rotating hub which is reachable and benefits all of our patients.

Our patient group, South East Locality Forum (SELF) had their bi-monthly meeting on Thursday 14 September, where the MP, John Howell, attended and answered questions mainly relating to health services and housing growth.

I also met independently with our deputy chair of SELF to go through our locality plan in detail, to explain where we are up to and make sure that patients have a say, with some additions to the plan.

South West Oxfordshire Locality Group (SWOLG)**Locality Clinical Director Report**

Dr Jonathan Crawshaw

Monthly Locality Meetings

The SWOL Executive Group continues to refine our locality place-based plan for primary care, and this process has allowed practices to plan together at neighbourhood level, for services to meet the demands of population growth. We expect to begin implementation of some new plans before the end of 2017, including development of federation level resources for staff recruitment and training. The position of Deputy Locality Clinical Director remains vacant; the locality is investigating the appointment of a part-time planning officer in lieu of this post, to facilitate the complex work around securing new primary care estates.

Accountable Care System

Both GP federations which involve SWOL practices (PML and Abingdon federations) have signed a commitment to work with the CCG and other partners, towards building an Accountable Care System in Oxfordshire.

New housing and population growth

A meeting of Didcot GPs was held in early September, to discuss updated plans for a new practice in Didcot. This will serve 20,000 patients from the Great Western Park and Valley Park developments. It is expected that a new provider (rather than an existing local practice, none of whom wish to bid for the contract) will provide services at the new health centre; a procurement notice will soon be issued by OCCG. Woodlands Medical Practice are in a good position to expand over the next few years, ensuring medical services are available to all while the new practice comes on-stream.

Patient and Public Participation:

The SWOL Patient Forum continues to meet monthly, and recent meetings have focused on the locality plan for primary care, and discussion of the outcome of the sustainability and transformation programme (STP) Phase One. With regard to the CCG's ongoing STP consultation, SWOL forum request that any information provided to the public should be as specific as possible about the scope and local effects of consultation options.

West Oxfordshire Locality Group (WOLG)

Locality Clinical Director Report

Dr Miles Carter

1. Primary Care Framework – locality plan

At its meeting in July 2017 WOLG held an independently facilitated workshop session which developed more detail on locality wishes for:

- Signposting
- Same-day primary care services
- Greater skill-mix in primary care
- Meeting the needs of a growing and ageing population.

The Locality Clinical Director and Deputy have clarified the draft priorities for locality primary care plans as:

- Meet the healthcare needs of the ageing population in the locality
- Ensuring safe and sustainable primary care that delivers high quality services
- Improving health outcomes and reducing clinical variation for patients with long term conditions
- Improved prevention services.

The locality leadership have worked with PA Consulting to review the plan, and propose 15 potential work streams to achieve these priorities. The locality group will prioritise these at its meeting in September.

The locality practices have also completed a very comprehensive survey of workforce and capacity numbers, issues and plans. This will help inform key parts of the plan.

2. WOLG Locality meetings

At its meeting in July 2017 WOLG also discussed the following issues:

- **Flu immunisation** – The Nuffield Health Centre summarised how it had achieved particularly high take-up last year
- **Deer Park** – the actions which OCCG needed to take following the report of the Independent Reconfiguration Panel.

3. Public and patient engagement

The Public & Patient Partnership West Oxfordshire (PPPWO) forum steering group at its meetings in July and September has discussed:

- A revised objective – “To encourage the people of West Oxfordshire to keep well, to keep out of hospital whenever possible and to help keep the NHS as solvent as possible.”
- Desire for a detailed survey of patient priorities for primary care locally
- Response to the Independent Reconfiguration Panel report on Deer Park
- The support which Al-Anon can give to the families and friends of people with alcoholism
- Proposals for a public meeting about antibiotic use.

4. Federation development

The WestMed federation is increasing the range of services available through the local primary care hub to include diagnostic physiotherapy.