

Oxfordshire Clinical Commissioning Group Board Meeting

Date of Meeting: 24 May 2018

Paper No: 18/29

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)

✓	Operational Delivery
✓	Transforming Health and Care
✓	Devolution and Integration
✓	Empowering Patients
✓	Engaging Communities
✓	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: 14 May 2018

North Oxfordshire Locality Group (NOLG)

Locality Clinical Director Report

Dr Shelley Hayles

1. New partnership working in the locality

The North Oxfordshire Locality has begun to pilot a partnership working approach between North Oxfordshire Locality Group (NOLG) and the NOxMed federation. This was agreed following a vote at NOLG in March 2018 and features shared leadership, meetings and work plan. The aim is to work together to achieve more responsive and rapid change for the local population.

The pilot will be for up to one year, with a full review planned for December 2018. Following this review, the locality will need to consider any further changes, and propose any changes required to the locality constitution and implications for the overall CCG Constitution.

In the light of the pilot arrangement, NOLG agreed not to hold an election to its leadership roles following Dr Paul Park's resignation. The following have been appointed on a temporary basis until 31 March 2019:

- Dr Shelley Hayles is Interim Locality Clinical Director and continues with her clinical lead responsibilities within the Planned Care programme.
- Dr Neil Fisher (Chair of NOxMed) is Interim Deputy Locality Clinical Director.

The locality is drawing up a shared work plan and priorities, plus arrangements to make best use of local meetings to achieve change.

2. NOLG Locality meetings

Topics discussed at the NOLG meetings in March and April 2018 included:

- **Integrated Respiratory Team** – proposed changes and sponsorship model to enable proof of concept noted. Potential to improve End of Life care and readmissions discussed.
- **Transformation / Independent Reconfiguration Panel report**– the new OCCG leadership's approach to these issues noted.
- **Managing transfers between practice lists** – NOLG noted the end of the temporary arrangement to discourage transfers between Banbury practices, two temporary list closures and the practices actively seeking new patients. The locality will review patient flows carefully.
- **Integrated Front Door** – this emerging approach to transforming urgent care in Banbury noted – the locality plans further in-depth discussion with the secondary care trusts. NOLG noted the importance of effective clinical triage.
- **Care and nursing homes** – practices and locality considering any remaining barriers to providing Proactive Medical Support scheme care to all homes in the locality.
- **Child and adolescent mental health** - service changes including Single Point of Access noted. Discussion over measures to improve current long waiting times and work more closely with schools.

- **Locality plan development** – progress on appointing mental health practitioners and clinical pharmacists in practice to boost the clinical workforce
- **Planned care developments and issues:**
 - Funded screens for patient waiting rooms with content to support health education campaigns, including cancer awareness.
 - Cervical polyps – correct pathway approach

3. Public and patient engagement

The vice chair of the North Oxfordshire Locality Public & Patient Forum (NOLF), David Heyes, has now stepped down. The locality is very grateful for his 4 years' service. The Forum hopes to elect a successor by mid-June.

The NOLF steering group met on 10 April 2018 and discussed the following main topics:

- Planning for a public meeting on 14 June to discuss social prescribing
- Progress with the Age/Dementia Friendly Banbury group
- Patients' experience of surgeries' approaches to the General Data Protection Requirement.

4. Federation activities

GP practices in the North continue to work closely together to:

- Improve patient access to Primary Care through schemes such as the GP hubs delivered from multiple sites across the North Locality.
- Improve Primary Care resilience through workforce innovation within Primary Care, such as Mental Health Nurses, and Physiotherapists within Primary care.
- Develop new models of delivering integrated Primary Care to high need patient groups, for example in the soon to commence pilot offering more proactive healthcare to frail housebound patients.

North East Oxfordshire Locality Group (NEOLG)

Locality Clinical Director Report

Dr Stephen Attwood

Main Locality meetings took place on 18 April and 9 May with the next meeting planned for 13 June 2018. Meetings contained the following focus areas:

Sustainability Transformation Programme

Dr Kiren Collison attended to discuss the way Locality meetings ran, and the general practice view was that these were satisfactory with some tweaks. They are already joint meetings with the local Federation ONEMed attending, with a standing Cherwell District Council invitation, and this will be widened to other organisations as appropriate. The Locality Executive will, however, review the way these run further to enable a more integrated approach overall.

Locality Plans

The practices have the Locality Plan in place and progress is being made to deliver the projects identified. A Plan on a Page has been drafted and is with the Communication Team to condense into a single page format prior to wider public circulation.

GP streaming and urgent access appointments were discussed in detail, and plans for the future will continue to be developed.

The infrastructure of practices in both Bicester and Kidlington is under review as population growth plans develop, with various sites being considered for future expansion or development. This work will continue, with the intention being that any significant change will have public engagement.

Dr Amar Latif attended to advise practices on the latest progress around Long Term Conditions, with a focus on diabetes and respiratory care. NE Locality practices are making good progress with the Multidisciplinary Team (MDT) approach to diabetes care, with a 12% increase in the nationally recognised 8 Care Processes being undertaken, and a 1.11% rise in the triple target being met – both across Type 1 and Type 2 patients. These are significant improvements against peer and national targets.

Clinical discussions included:

- An update was provided around the latest social prescribing model. See more on this under Bicester Healthy New Town (HNT) below
- Oxfordshire electronic referral system, to ensure that practices are aware of the dates for stopping paper referrals, to enable the national deadline requirements to be met
- Digitalisation of notes and whether paper records could be destroyed once electronic copies were all in place and safely secured and backed up. It was agreed that LMC and national guidance was required before some practices felt

comfortable making a decision, whilst others with severe space issues were willing to proceed

- 2017/18 Primary Care Locality Investment Scheme update on achievement was advised
- Sharing data for dashboards was aired and agreement was reached with practices that this project was worth looking into further as there were significant benefits to be realised
- The Locality Community Services Group is progressing with mapping of some complex patient pathways to review what action may have helped earlier to avoid admission
- Oxon Training Network is working with practices to enable receptionist access to workflow and signposting training, and this is progressing well.

Papers were presented on the following: OCCG March Board briefing, OPCCC March briefing, Planned Care project update, JSNA 2018 is out, LARCs position, Booking diabetic Skype consultations, digitalisation of notes, GP IT procurement, 2018/19 Prescribing Incentive Scheme.

Federated working – ONEMed

As part of the move towards closer neighbourhood and locality working, ONEMed continues to work closely with the NEOLG to consider the redesign of locality meetings to improve the functionality of the local neighbourhoods to enhance the development of patient-centred care pathways. This includes the county-wide frailty pathway alongside Oxford Health NHS Foundation Trust (OHFT), Oxford University Hospitals NHS Foundation Trust (OUHFT), OCCG, Oxfordshire County Council (OCC) and patient groups.

Urgent access GP appointments continue to be provided through practices in Bicester and Kidlington six days a week, and Banbury on Sundays.

The Primary Care Visiting Service continues to provide vital support to local practices with visiting housebound patients who are acutely unwell.

Bicester Healthy New Town (HNT) Programme

At the two year point in the HNT programmes in Bicester and Barton, both programmes have started to test approaches that can contribute to addressing the complex and multi-dimensional factors associated with reducing obesity and social isolation. Although still at an early stage in delivery, significant learnings have emerged which were shared at a workshop with senior decision makers from other districts, Oxfordshire County Council and Oxfordshire Clinical Commissioning Group on 24 April 2018. Discussions at the workshop identified some key next steps.

- A discussion and agreement at the next Oxfordshire Chief Executives meeting as to how to take this forward and what resource should be allocated to support scaling healthy placemaking across Oxfordshire
- Health as a standing agenda item on the Growth Board so that healthy placemaking can be hardwired into development
- Inclusion of health considerations in the spatial plan
- OCCG locality meetings to consider involving a wider group of stakeholders including representatives from the District Councils

- Integration of healthy placemaking into OCCG's prevention strategy
- Within each District Council executive level agreement on how they wish to take healthy placemaking forward
- Embedding reporting on progress with healthy placemaking in the work of the Health & Wellbeing Board
- Social Enterprise Health and Wellbeing Fund for social prescribing, has gone through to the next round of assessment and an outcome is awaited within the next month. Meantime Pat Wood from Citizens Advice attended to discuss the intended direction for social prescribing, how practices could support this, and how to identify the patients who were most in need of support. The bid is joint across North, NE, and West Localities and Councils, and Cherwell District Council is mapping a directory of services across the NE and North Localities, and this will provide an essential resource for signposting. Receptionist signposting training has been welcomed by practices, and is being held shortly.

Public and Patient Engagement

NE Locality is divided into Bicester, and Kidlington/Islip/Woodstock neighbourhoods. In the Bicester Group the three practice PPGs are active and have decided to meet together to share best practice. The Bicester Health Centre have produced excellent leaflets on 'travel' (to health services), 'Help your GP to help you', and 'be active'. These have undoubtedly been helped by the "Healthy New Town" initiative.

In the Kidlington Group of PPGs there is less activity and practices are being encouraged to send further representation. From the Groups represented most were concerned about the proposed new housing expansion and the population effect on the existing extremely cramped Health Centres.

There is a commitment among those active PPGs to hear and share patient opinions and there have been 'health awareness events' at both ends of the locality. The PPG Forum supported a recent Rotary event in Woodstock Town Hall, where Age UK, Carers Oxfordshire, and Healthwatch attended and provided information to the public.

The next PPG Forum meeting is planned for 1 August 2018 in Bicester.

Oxford City Locality Group (OCLG)**Locality Clinical Director Report**

Dr David Chapman

Locality meetings

Meetings took place on 19 April and 10 May with the next meeting planned for 14 June 2018.

Dr Kiren Collison attended to discuss the way City meetings are configured and run to ensure maximum effectiveness. It was agreed to reduce the number of papers and increase clinical discussion time, whilst encouraging other partner organisation input as appropriate.

Dr Amar Latif presented on Long Term Conditions, specifically on diabetes and respiratory. He emphasised that 20% of the COPD population is undiagnosed. All activity is rising, and emergency admissions are a big outlier. Improved recognition and care for patients at end of life is important. Multi-Disciplinary Team meetings will be introduced under a Locally Commissioned Service, as have been held for diabetes, which are proving effective. The national change in guidance for diabetic patients measuring fasting glucose was recognised.

An approach for the 2018/19 Practice Commissioning Pack meetings was agreed around supporting the respiratory project to improve patient care. This will involve holding a City wide education and training event in September so that learning and impact from changed behaviours can be applied at scale for all practices.

The introduction of a City based primary care visiting service has started and the elements and framework of the frailty pathway being developed were discussed, although we are still waiting for clarity around a project board to be set up in the CCG.

A discussion took place on mental health service improvements, including integration of secondary care and primary care, as well as Attention Deficit Hyperactive Disorder (ADHD) services. This was discussed to try and help the current crisis with the adult Mental Health service in the city. The outcome will be fed in to contract discussions with OHFT.

Children's services were also discussed, to look at how services might be improved from the perspective of primary care. The focus was on:

- Better education for nurseries and how they handle the issues which cause parents to bring their children to see their GP, and
- Looking at recurrent child/infant attenders with respiratory problems which might involve linking with parents with respiratory nurses and showing them how to deal more effectively with their children.

Services to new parents with health anxieties were also discussed. Project money is available to take some of these forward.

The Health Inequalities joint project with Oxford City Council met again to progress the identification of people with housing problems due to complex issues such as mental health, 'making every contact count', and sign-posting. The focus will be on areas with the greatest health inequalities for Long Term Condition patients which appear to be associated with emergency department admissions.

Annual assessment of achievement of the 2017/18 Primary Care Locality Investment Scheme has been undertaken with positive outcomes.

Papers - were presented on the following:

OCCG March Board briefing, and OPCCC Briefing, Planned Care project update, 2018 Joint Strategic Needs Assessment (JSNA), Primary Care Carers Support, Digitalisation of patient records update, 2018/19 Prescribing Incentive Scheme, GP IT procurement, and new veterans service.

Barton Healthy New Town (HNT)

The Delivery Group submitted final proposals for phase 3 to NHS England and the project has been awarded £75k core funding. Plans for spend on this have been sent to the Barton HNT Governance Board for approval. Broadly, funding will be used to deliver the Team Around the Patient (TAP) model which NHS England has endorsed. This will focus on patients who are high users of healthcare resources, not just primary care, but also 999 and A&E services, through a multi-disciplinary team approach facilitated through Hedena Health and Manor surgery. There is also potential for release of a further £20k from NHS England to use towards this project.

The core funding will also be used for further community engagement activities and to provide a support worker for the remainder of the life of the HNT project. The final phase is crucial as the evidence and learning from all three phases will need to be collated and reports and case studies written up, so that learning can be shared with the national HNT team.

Outcomes from the services piloted as 'new models of care' during phase 2 are currently being collated. Funding had originally been requested to extend these for a longer period, but this was not approved by NHS England. However, there have been beneficial outcomes reported for some patients.

A successful joint Bicester/ Barton HNT event was held in April, attended by the NHS England HNT Account Manager and senior members of OCCG and the district and county councils. This was hosted by Bicester HNT and next year, Barton will host a learning event.

OxFed Federation

OxFed's Evening and Weekend Clinics are now being offered from five locations across the City (planned to be six from June). Over 100% of contracted appointments are being offered with strong uptake across the multidisciplinary team of practitioners. OxFed continues to recruit into the service and all practitioners have access to EMIS clinical records, the system is integrated with Integrated clinical Environment (ICE) and the team work with Oxford Health's out of hours team to

ensure the services are complementary. The next planned service development is to explore nurse-led minor illness clinics.

OxFed's pilot Primary Care Visiting Service launched at the beginning of April and is running at fully-contracted capacity. It has proven popular with practices, achieving 84% uptake in its first four weeks, and uptake continues to grow. Lessons learnt are being built into day to day operations and the move to full rollout is on track (with a further planned increase for 2019/20 in line with funding flows).

OxFed's four clinical pharmacists are now in post and working successfully across nine practices, supporting them in different areas of prescribing including conducting medication reviews, reconciling medications following hospital discharge and managing medication related queries from patients

OxFed's Practice Care Navigators are now taking referrals from vulnerable groups including mild to moderate mental health problems e.g. anxiety, depression and low self-esteem; drug and alcohol use; loneliness and isolation; literacy and language difficulties (including IT literacy); housing and/or financial problems; frequent users of health services e.g. GP or A&E as well as the frail, elderly and housebound population. Referrals are via external e-mail, internal practice note or face to face and self-referrals and signposting by Reception staff are encouraged. Social Prescribing Clinics are being offered to all city patients, located in all neighbourhoods (hosted by 10 of the 20 City practices). This means that patients from any practice can be booked into the service, even if their registered practice does not host a clinic.

GPTeamNet has been implemented in all OxFed practices. This month the first of the shared tools, policies and protocols to help support practice sustainability are being rolled out. In addition a pilot HR service is planned for testing in the next two months, General Data Protection Regulation (GDPR) work is underway and a centralised Safeguarding policy has been launched. Further Practice Management support services are in development for rollout later in the year.

OxFed are working with system partners on a new frailty pathway, and continue to work with the other federations and community services to develop integrated working. They continue to host the Oxfordshire Training Network (OTN), which is an Oxfordshire-wide network of organisations involved in workforce development and training. In addition to the OTN work, OxFed is delivering enhanced frontline communication (receptionist) training for City practices who want to opt in.

Public and Patient engagement

The Oxford City Patient Participation Group (PPG) Forum met in both March and April. As well as focusing on their successful 15 May public event (The changing face of general practice) they have been taking both a backward and forward view of their activities. An annual report has been drafted, focusing on both the positives and negatives of undertaking public and patient engagement on a volunteer basis in a city as diverse as Oxford. They are also starting to consider how they can expand their activities to engage with the Community Centres around the city.

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

Dr Ed Capobianco

There have been two meetings since the last Board meeting, 10 April and 1 May 2018.

At the first meeting on the 10 April, the new integrated respiratory project was presented, which included the support of Boehringer Ingelheim, the pharmaceutical company. Concern was expressed by the member GP practices about their involvement and this is being followed up within the OCCG to address the concerns raised. Age UK presented their proposal to the locality about increasing their presence and this was well received.

At the second meeting on 1 May, a member of the Healthshare team came to address concerns raised by practices with the new musculoskeletal assessment triage and treatment (MSK MATT) process. The majority of practices were reassured although communication (to practices and patients) is clearly an area that needs further work.

The OCCG Quality team supported members of the SE locality that use pathology services previously delivered by the RBH and now offered by Berkshire & Surrey Pathology Services (BSPS), have met with the management team to discuss ongoing concerns about the quality of the service; such as samples going missing or delays in processing. This has had a negative impact on patients requiring repeated samples and occasionally urgent trips to A&E, and practices needing to repeat phlebotomy tests. Changes have since been made but this will be monitored closely.

I have been to visit the Rapid Access Care Unit (RACU) in Henley, to find out more about their service. They are seeing 150 patients a month, with a wide variety of conditions. Their exclusions are patients under 18, trauma, chest pain, stroke, and blood transfusions. They are now able to undertake near patient testing, resulting in some immediate blood results being available to help with patient management. It is a great example of frail/semi-acute patients being able to be cared for closer to home.

Locality Community Services Group

This group met on the 10 May. Considering the move for all parties is for integrated working, this group continues to function well with representatives from Oxford Health, community hospitals, district nursing, and Sue Ryder. Social Services, Age UK, and mental health are also invited but were unable to attend this meeting. Ideas are shared and collaborative working is encouraged. There are examples of positive services including some which have not been contracted such as the A PICC line clinic from Wallingford.

PPGs

South East Locality Forum (SELF) met on 22 March 2018, in Chalgrove. Some of the Patient Participation Groups (PPGs) are active in hosting educational events led by GPs and secondary care clinicians and two PPGs (Benson & Chalgrove/Watlington) are even combining to hold a palliative care event. An initiative called SENTAB was presented to the group by two of the members who had met with the SENTAB founder. Essentially it uses a person's television linked to an easy to use set top box to follow programmes or Apps that can be health related such as a pulmonary rehab programme for chronic obstructive pulmonary disease (COPD). It has also been trialled in Croydon and Estonia but on very small cohorts. It was agreed to discuss with wider PPGs if this would be something of interest to pursue.

South West Oxfordshire Locality Group (SWOLG)

Locality Clinical Director Report

Dr Jonathan Crawshaw

Meetings of the South West Oxfordshire Locality were held on 20 March and 17 April, the next meeting will be on 15 May 2018 and reported in the next update.

Items discussed at these meetings included:

- Implementation of a new integrated respiratory service to patients in Oxfordshire, focusing on improving diagnosis rates and targeted specialist support for patients affected by chronic obstructive pulmonary disease (COPD)
- Development of the new service provided by mental health support workers in primary care, being delivered in partnership between South West Oxfordshire Locality practices and Oxfordshire Mind
- Funding for additional clinical pharmacists to help review patients who take multiple medicines
- The continuation of a locality scheme to improve patient access to urgent appointments, which is supported by some additional funding from OCCG. This scheme has greatly increased the number of same-day appointments in primary care for urgent health problems
- The launch of a new single point of access hub for the Child and Adolescent Mental Health Service (CAMHS), which is welcomed by GPs as an attempt to reduce the waiting times for children and young people needing specialist mental health support.

Updates on other new locality-based services

1. Abingdon Early visiting service
Two clinicians have been recruited to the Abingdon Federation's Early Visiting Service, and will start seeing patients from June 2018.
2. South Oxfordshire integrated community palliative care service
Sue Ryder's integrated community palliative service pilot began in the South East locality in April 2018, and will be extended into the South West locality by August 2018.
3. Residential and nursing homes in Abingdon will now benefit from engagement in the Proactive Support to Care Homes enhanced service, whereby practices are commissioned to develop closer working relationships with local care homes, and deliver weekly planned visits. Practices in Abingdon have reached an agreement to ensure that this service is available to all care homes.

Expansion of primary care services

Wantage: a meeting was held at Church Street practice on 27 April, to discuss plans to extend the Mably Way Health Centre. This was attended by representatives of

both Church Street and Newbury Street practices, as well as OCCG, Oxford Health, Ed Vaisey MP, and a patient representative. This will continue to be progressed.

Didcot: OCCG have commissioned Archus, a firm specialising in healthcare estates and strategy, to begin the planning process for the site at Great Western Park allocated for healthcare in Didcot. This is still at an early stage, and procurement for a provider of primary care services on this site has not yet begun.

Patient and Public Involvement

The South West Oxfordshire Locality Forum (SWOLF) met on 20 March 2018. Items discussed included:

- OCCG's decision not to proceed with "phase two" of the STP consultation
- Concern about the slow rate of development for the new health centre in Didcot, and whether this would put existing practices under additional pressure in the next two years
- Updates on new and developing locality services, as above.

The group agreed to request from OCCG some further clarification of the implications for SWOLF of the altered consultation timetable, and to give feedback about OCCG's communications and engagement with the public.

West Oxfordshire Locality Group (WOLG)

Locality Clinical Director Report

Dr Miles Carter

1. WOLG Locality meetings

At its April 2018 meeting WOLG discussed:

- **Review of additional Christmas and Easter primary care services** – suggestion to focus services delivered by federation and practices before and especially just after a bank holiday period, and boost the out of hours (OOH) GP service over the holiday. Also to explore routes for OOH to book suitable patients directly into hub appointments if they needed a face to face appointment the next day rather than immediately
- **Communication with district nursing locally** – proposal for a single approach across all practices. Further work needed on an approach which is efficient for all involved and gives assurance about continuity of patient care.
- **MSK service** – continued concerns about delays at each stage of the process and availability of information to referring GPs
- **Care & nursing home services** – locality desire to be involved in the planned countywide review of services
- **Long Term Conditions Locally Commissioned Service** – discussion of the proposed scheme particularly relating to the time commitments, potential impact and organisation of Multi-disciplinary team meetings
- **Role of locality meetings** – the potential for closer collaborative working with the federation and discussion of topics to focus on in future including: urgent treatment centre plan and housing growth.

2. Public and patient engagement

The Public & Patient Partnership West Oxfordshire (PPPWO) was pleased to meet with Lou Patten in April 2018 and discussed future development in the locality, and progress towards integrated care.

The steering group met additionally in April 2018 and discussions included:

- event in Eynsham linked to Carers' Week in June, and a health promotion fair in the autumn
- several communication activities which Patient Participation Groups are working on with their practices
- Dr Amar Latif explained his work as Deputy Locality Clinical Director for WOLG and as clinical lead for long term conditions.

3. Federation activity

The WestMed federation is implementing the Locality Plan proposal for clinical pharmacists working to support clinical care across the locality. They are integrating this with the existing pharmacist working in two practices funded by the recent NHS England initiative.