

Oxfordshire Clinical Commissioning Group Board Meeting

Date of Meeting: 30 January 2020	Paper No: 20/04
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Title of Paper: Locality Clinical Director Reports

Paper is for: <small>(please delete tick as appropriate)</small>	Discussion		Decision		Information	✓
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Conflicts of Interest <small>(please delete tick as appropriate)</small>	
No conflict identified	✓
Conflict noted: conflicted party can participate in discussion and decision	
Conflict noted, conflicted party can participate in discussion but not decision	
Conflict noted, conflicted party can remain but not participate in discussion	
Conflicted party is excluded from discussion	

Purpose and Executive Summary: To update the Board on matters arising in the Localities.
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Engagement: clinical, stakeholder and public/patient: Not Applicable
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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 <small>(please delete tick as appropriate)</small>	
✓	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: 20 January 2020

North Oxfordshire Locality Group (NOLG)**Locality Clinical Director Report**

Dr Shelley Hayles

North Locality meetings

The North locality currently holds brief meetings every other month to provide more space for the Primary Care Networks (PCNs) to concentrate on their planning and development. The PCN groups hold regular meetings and receive support from the Locality Clinical Directors.

The November 2019 locality meeting discussed the following topics:

The population health management project for Banbury which OCCG and Cherwell District Council are developing. Next steps are a community profile in advance of further engagement.

BOB future commissioning arrangements: the locality wished to know more about the case for change and financial impact. Further discussion planned at the January 2020 meeting.

AccuRx pathways system: request for authorisation and funding.

Safeguarding report reimbursement: resourcing for this growing area.

Prescribing Incentive Scheme: impact of change to budget element gateway

Public and patient engagement: No updates on local public and patient engagement in the locality since the last Board report.

North East Oxfordshire Locality Group (NEOLG)**Locality Clinical Director Report**

Dr Will O’Gorman / Dr Toby Quartley

Meetings took place on 11 December and 8 January.

The December meeting was purely a Primary Care Network meeting and focused on reviewing public health data for the area, primary care attender searches, the terms of reference for the Oxfordshire Clinical Directors Committee, and local issues. The two PCN Clinical Directors had also met with the North Oxfordshire PCN to consider a Network of Networks model of working.

The January meeting discussed the local impact of the NHS England (NHSE) draft Outline Service Specifications:

Structured Medication Review and Medicines Optimisation	
Enhanced Care in Care Homes	Anticipatory Care
Personalised Care	Supporting Early Cancer Diagnosis

Consideration will be given to the impact on local practices of delivering these, and the Local Medical Committee advice received. PCNs will feedback in to NHSE by 15 January 2020.

Discussions were had regarding some OCCG contracts that are due to come to an end at the end of this financial year (particularly the Sustainability and Transformation Fund that pays for some of the in-hours GP hub appointments in the North East) and how a transition into other things that this funding might provide could be managed.

A Principal Medical Group (PML) / OxFed Community Gynaecology Pilot is being launched for North, NE and City areas from January to June 2020. Triage and some clinics will bring care closer to home for patients whilst the volume of work this could encompass is being gauged prior to evaluation and wider roll-out.

The Community Diabetes project was discussed re the shift of work from secondary to primary care and the need for more Diabetes Specialist Nurses and suitable training in place. Practices were pleased at the improvements being made locally in diabetic care against the national averages, however funding to continue this work is a consideration.

Practices then broke into their respective PCN areas to continue individual local discussions.

The North East Locality Community Services Group continues to meet monthly, is chaired by the OCCG Locality Clinical Director, and attended by both PCN Clinical

Directors. This is a multi-organisational group which is seen as an excellent delivery / operational group to take forth changes which are planned.
The local federation ONEMED is supporting the North East PCNs.

The healthy place shaping work that has been tested in Bicester is now being scaled to Kidlington and surrounding villages. A delivery plan to promote physical activity and mental wellbeing has been developed and approved by local stakeholders and will result in a range of public health initiatives working with local schools, businesses, community groups and health and social care.

In the Healthy Bicester programme, local GPs have given talks to secondary school children about how to access advice and services on the NHS app. Diabetes education events have continued to be popular and evaluation is now reporting a significant increase in both physical activity and quality of life at three and six months. A new workplace accreditation scheme is being tested to recognise employers who promote wellbeing at work.

Papers were presented on the following: OCCG Board and OPCCC briefings, Planned Care project updates, JSNA Bitesize Dementia,

Public and Patient engagement

The PPG Forum Chair, Helen VanOss, continues to support the PCN meetings and the monthly NE Locality Community Services Group meetings. The date of the next PPG meeting is 12 February 2020.

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

Dr David Chapman

Locality meetings

The 12 December and 9 January meetings took place, with the next meeting planned for 13 February 2020.

The main item for discussion in December was the BOB potential CCG restructure and members were asked to consider their views on the current information available, and to respond when further more detailed information is available centrally. The overall tone of the discussions to date reflected that as yet the case for change had not been made and a lot more detail of benefits would be needed before practices could accept any change.

There was unease in the locality about changes to the way meetings were being arranged and a strong view was expressed that practices still wished to have commissioning aspects discussed with them involved. It was also felt that the meetings were an important focus allowing practices to be engaged as much as possible with changes both in finances and services affecting the delivery of primary care in particular.

Primary Care Networks:

PCN discussion time is available following each Commissioning meeting, and the January meeting extended this time to allow additional working for those PCNs who found it useful.

NHSE has issued the Network Contract Directly Enhanced Service draft outline Service Specifications for the following areas to be forming by 1 April 2020:

1. Structured medication Review and Medicines Optimisation
2. Enhanced Health in Care Homes
3. Anticipatory Care
4. Personalised Care
5. Supporting Early Cancer Diagnosis.

Consideration was given by the PCNs on the impact of the requirements locally and the Local Medical Committee response to NHSE.

There was great consternation and disquiet at the proposed changes by NHSE. It was not seen as a bottom up development and did not seem to take into account population health management. The estimated amount of work was far greater than

most had expected. Due to the lack of ability to employ additional workers (viz pharmacists), the serious underfunding for this workforce by at least 30% in the DES settlement, and the gap in the total workforce on top of that to deliver the 5 service specifications would lead to the biggest push towards destabilising General Practice in Oxfordshire. It was felt NHS England may come back with revised proposals but the long term thrust of the proposals may make practices decide they did not want to sign up to the DES in future years.

It was pointed out that the flat cash approach did not help those PCNs in the city where there is marked deprivation and health inequalities and the workload on those practices through the DES would have a greater detrimental effect than on other practices, which would be exacerbated by the inability to attract GPs to work in such areas. It was also felt that the way the DES is playing out with the inadequate funding for it, and the diversion of money from practices to PCNs, would lead to practices being forced to amalgamate into super practices of the size of the PCN which would be a fundamental change to how primary care is delivered to patients. It is not clear that patients are aware that their relationship to their local GP might well change profoundly.

The LCD asked Practices/PCNs to respond by 15.1.2020 to NHSE on the engagement documentation. In summary the view locally was that without further funding coming into primary care and definite increase in the local workforce many of the delivery requirements would remain aspirations due to lack of capacity and resources within the system and it is likely that practices will not renew the DES.

Clinical Updates:

- Oxford Mind report on the Primary Care Wellbeing Project – one year on showed there had been benefit to this group of vulnerable patients. It is a much appreciated service and has had great benefits to patients – a good example of social prescribing in practice
- Immunisation – the flu data to date was considered and concern was raised at the low number of children able to be immunized due to lack of vaccine availability nationally. It was hoped that with increased stocks becoming available this situation would improve.
- Respiratory update – Dr Karen Kearley updated the group on the current position with this project, which has been extended into 2020.
- The Clinical Update education session dates were noted for February 2020.
- Online Consultations must be available to all patients by 1.4.2020, and video consultations by 2021, therefore practices were reminded this is a national requirement and progress is being sought.
- The Eye Casualty triage pilot extension was noted.
- A community gynaecology project is being rolled out jointly by OxFed and PML federations across North, North East, and City, to see if patient care can be

provided more locally, and the impact of this around volumes. The pilot will run from January to June 2020.

Papers - were presented on the following:

OCCG Board briefing and Finance papers, Planned Care project updates, JSNA bitesize on dementia

OxFed Federation:

OxFed continue to offer Evening and Weekend GP Clinics, an increased Primary Care Visiting Service and social prescribing across all City neighbourhoods. Their Pharmacist service has now ended with all previously-OxFed employed pharmacists successfully transferred to Oxford City PCNs.

OxFed continues to work with member practices to understand what support they would like as they transition to PCNs (where they want help). OxFed also continues to host the Oxfordshire Training Hub (OTH) and to play an active role in the Oxfordshire Care Alliance (OCA) provider collaborative which is focusing, in the first instance, on improving the frailty pathway. At present they are focusing on the system wide frailty pathway and its interaction with primary care networks. In addition OxFed are working on the Ageing Well programme with Oxford Health and other system partners and working on a community gynaecology service pilot in partnership with OUHFT and the PML Federation.

South East Oxfordshire Locality Group (SEOLG)

Locality Clinical Director Report

Dr Ed Capo-Bianco

SEOLG Locality meetings

The locality is holding shorter meetings to allow extra time for its primary care networks (PCNs) to develop their working and services.

The locality has highlighted the need to discuss at its next meeting opportunities and arrangements for members to interact.

At its December 2019 and January 2020 meetings SEOLG also discussed:

Sustainability and Transformation (STF) scheme: PCNs have met the Quarter 1 and 2 target to reduce or maintain A&E activity, but not for emergency admissions. Review of data over the several years of this scheme doesn't give a better position. Expected to end in March 2020 – the locality is seeking update on plans for the wider funding.

Primary Care Visiting Service: a service that is currently not available to the South East, has been proposed as a means of utilising some of the STF

Windows 10 upgrade: costs to practices for upgrading software or devices using the outdated Windows 7 system

Smoking cessation: more information and progress with County Council commissioning of prescribing for smoking cessation in the Henley area.

Single Point of Access: concerns at excessively slow answering experienced by multiple services, and the system impact.

MSK / Healthshare:

- Healthshare attended to give updates on performance data, especially waiting times. Clinicians suggested that patient feedback gave a different picture and that performance should be expressed as a median value.
- Steps to resolve barriers to MSK practitioners referring patients to the X-ray service at Townlands Hospital making progress.
- Potential interaction between the MSK service and First Contact Physiotherapists employed in future by PCNs discussed. Healthshare suggested that this might particularly focus on training and supervision.

Public and patient engagement

The locality patient forum of Patient Participation Group (PPG) representatives plans to meet informally in late January 2020 to consider their way forward.

Wallingford and surrounds PCN PPGs have met as a group, discussing the additional roles and the way forward, the other 2 PCNs are planning to meet.

SE/SW locality community services group

Unfortunately the January meeting was cancelled due to escalation priorities affecting staff availability.

South West Oxfordshire Locality Group (SWOLG) Locality Report

The locality executive group met on 17 December, and the next meeting is planned for 18 February. The 21 January meeting was cancelled due to the high level of apologies received as time is being used for Primary Care Network (PCN) planning locally.

Joint discussions / updates:

Concern was raised that the Community Ultrasound Service delivered by Physiological Measurements Ltd was no longer being offered in Wantage due to the room not meeting requirements. This is being explored further.

The South West Service Transformation Fund report was noted with some practices keen to understand factors leading to increased urgent care activity and address these if possible locally.

Same day care was discussed with a view to future delivery, and acknowledgement that the Abingdon MIU also serves patients from PCNs outside the area. Therefore this impacts on the national requirements for designating urgent care provision, and a speaker has been invited to the February meeting.

Eye casualty telephone triage pilot extension was welcomed. Practices are considering how they will deliver the wider nationally requested on-line consultation requirements by 1 April 2020 via eConsult or other options.

Didcot update: Revised plans for the Great Western Park site have been submitted with a decision awaited from the Council planners. It was noted that costs have risen considerably for a modular building solution, and further options were being reviewed.

Wantage update: Changes to the floor plans and costs are being worked on and shared with the District Valuer for a value for money response to be secured.

PCN update: the PCNs across the Locality provided a verbal update on their progress and advised they are meeting locally. All are making good headway although additional staff recruitment can be problematic. The PCN Network Contract Direct Enhanced Service draft outline Service Specifications were discussed to ascertain the impact locally on the requirements therein.

Papers were presented on the following: OCCG Board briefing, Planned Care project updates, JSNA bitesize Dementia.

West Oxfordshire Locality Group (WOLG)**Locality Clinical Director Report**

Dr Miles Carter

WOLG Locality meetings

The West locality has continued with briefer monthly meetings to discuss issues relevant to members and the CCG, and enable the input of the public representatives. Remaining time is offered to further support the development of primary care networks (PCNs).

At its December 2019 meeting WOLG discussed:

Community Health and wellbeing activity: West Oxfordshire District Council work on its Health and Wellbeing Partnership of statutory and voluntary partners, Go Active Get Healthy diabetes project and Active Oxfordshire Exercise & referral pilot

Same Day Access services in Witney: discussion of the need and options for integration of minor injuries units (MIU) with primary care as alternative community services.

- Providers of the Minor Injuries Unit (Oxford Health FT) and GP primary care hub (Principal Medical Limited) participated, as well as practices and patient representatives and out of hours doctors.
- There was an appetite for increased integration of services
- WOLG suggested maintaining the successful working of existing services enhanced by integration via ICT systems (clinical records and booking).

The January 2020 WOLG meeting is scheduled too late to report to this Board and will discuss Same Day Access services further.

Public and patient engagement

The Public and Patient Partnership West Oxfordshire (PPPWO) continues as an independent group. It is focusing on membership by practice Patient Participation Groups, and complementing this by representation on the district Health and Wellbeing partnership.