

Briefing on primary care access for City of London Health and Social Care
Scrutiny Committee 13 Feb 2018

This briefing is made up of a compilation of relevant questions and answers posed by City Healthwatch and a local comms piece on 111/Out of Hours. It is supplemented with a draft outline Neaman Practice Options Appraisal - Scoping Paper with associated supporting information packs.

Questions from City Healthwatch (7 Dec 2017) with C&H CCG responses

Which practices serve City residents?

73% are with a C&H CCG Practice

- The Neaman Practice

16% Tower Hamlets CCG

- *Whitechapel Health (branch): TH
- *City Wellbeing: TH
- Tower Practice: transferring to TH
- *In Jan 2020 Whitechapel Health and City Wellbeing GP Practices will be moving to a new circa 1250m2 healthcare facility in the Goodman's Fields area.

6% Camden CCG

- St Philips: Camden

3% Islington CCG

- Grey's Inn MC: Islington
- Clerkenwell MP: Islington

1% Central London CCG

There is anxiety about pressure on the Neaman practice as a result of the expansion of the local population. Can you bring us up to date on any proposals to increase the size of the premises and the number of doctors?

The CCG is sharing plans with CoL planning dept. re new developments over the next 10 years.

Convening a task and finish group to look at the available options – see appended draft scoping paper.

The practice is looking at alternative ways of working/staffing mix to meet need as well as:

- (1) Looking at internal systems inc. phones – have 4 receptionists on the phones at busiest times
- (2) Receiving support by the local GP Confederation
- (3) Introducing Doctor First (telephone triage and treat)
- (4) Offering active signposting
- (5) Offering online consulting
- (6) Trying to widening out Practice Participation Group to reflect the patient profile
- (7) Hosting a trainee practice manager
- (8) Undertook a resilience self-assessment using a national tool
- (9) Offering Patient On-Line (online booking, repeat prescription ordering, etc)

While the CCG monitors access to hospital services in some detail, for example waiting lists and times, what monitoring is undertaken as far as access to general practice is concerned? Does any system check the waiting time for non-urgent appointments, or indeed the performance in delivering urgent care – a requirement or request for treatment within hours or within 24 hours?

There are no national measures of demand and supply – however practices are contractually obliged to meet reasonable needs.

A proxy measure for supply is the numbers of GPs per patient ratio; we know our GPs are being productive ref our good outcomes on quality dashboard.

A proxy for demand is national patient pt survey (satisfaction measures, etc). Practices will soon be able to analyse their own demand and supply data in-house with new software.

It is understood that the CCG is making attempts to introduce additional out of hours' capacity. How is this proceeding in relationship to City residents? Is information going to be made available to patients, or only to practice reception staff?

The Neaman Practice already offers some extended hours on top of its core opening hours of 8-6.30, Mon-Fri, excluding Bank Holidays.

Three sites have been selected for C&H's South Hub: The Hoxton Surgery N1 5DR, Richmond Road Medical Centre Surgery E8 3HN and Neaman Practice EC1A 7HF. Hoxton and Richmond Road are planned to open early Feb 18 with Neaman planned to open early Apr 18. The final configuration of opening days and times is currently being determined although the initial configuration will be reviewed in light of patterns of use and patient feedback.

NHS England (London) is setting a new minimum standard for 2018/19 of thirty minutes of consultation timer per thousand population.

The CCG's 18/19 central allocation for 8-8 is yet to be confirmed but is likely to be in the region of £1.3m. This is against an 18/19 costed delivery plan of circa £1.4m. The local delivery plan will be scaled back to match the available budget but it is anticipated that the CCG will still be able to meet all minimum standards include the new 30m per 1000 population standard.

Questions about newly contracted NHS 111 system/GP Out-of-Hours

Do you have an exact date for when the new service will start?

The new service will commence by August 2018, detailed planning for this is currently underway.

When a resident is feeling unwell and calls the service out of hours, who will they speak to when they first call up?

The call will be answered initially by a call handler who has been trained to use the NHS's clinical assessment tool. If further clinical advice or assessment is needed the call handler will then transfer the call to the appropriate clinician which will include GP's, Nurses, Paramedics, Pharmacists.

Will the current local GP out-of-hours services end when the new NHS 111 service begins?

The CHUHSE contract has been extended to December 2018 and will continue until the new integrated urgent care 111 and clinical assessment goes live.

The new integrated urgent care 111 and clinical assessment service will include the telephone assessment and advice previously provided by GPOOH. Once the new integrated urgent care 111 and clinical assessment service goes live the full GPOOH service will not continue in its current form. The face to face appointments with GPs in the out of hours period will continue to be provided locally for patients that need it and the CCG is in the process of setting up this service. There is no plan for double running the GP OOH telephone service with the new integrated urgent care 111 and clinical assessment service.

In what circumstances will someone who calls 111 speak to a clinician?

The call will be answered by a call handler who has been trained to use the NHS's clinical assessment tool. If further clinical advice or assessment is needed the call handler will then transfer the call to the appropriate clinician which will include GP's, Nurses, Paramedics, Pharmacists. In addition to this calls relating to under 1's and over 75's will go directly through to a clinician.

How many GPs and healthcare professionals will be covering a single NHS111 out-of-hours shift per patient population across NEL?

Clinicians – which includes GPs, pharmacists, paramedics, nurses will be available 24 hours a day and the number of staff available will be according to predicted demand.

Does the service include home visits of any kind for specific groups of people?

As part of the new integrated 111 and clinical assessment service, if it is indicated that a home visit is required the service will be able to book an appointment for the patient to be seen at home.

Will there be locations in the local area where people can be seen in person by a GP outside of normal GP hours?

As part of the new integrated 111 and clinical assessment service, if it is indicated after a clinical assessment that a face to face appointment is required the person will be booked into the most appropriate setting according to their need

Are there plans to introduce a digital initial triage system as part of the contract?

Yes NHS 111 Online, is a national digital triage services that enables people to enter their symptoms and receive tailored advice, or receive a call back from a healthcare professionals where appropriate. We have introduced this service in part of NEL and are looking to roll this out to the rest of NEL to ensure equity of access to patients.

Richard Bull

Programme Director – Primary Care

City and Hackney CCG

26th Jan 2018

Neaman Options Appraisal - Scoping Paper DRAFT

Supporting information:

- Practice demography and trends including population expansion (attached)
- Current performance (attached)

Options to be considered to improve access (physical access and ability to get an appointment):

- Current location and scope for expansion on-site (new space to become available in 18 months' time)
- when new space becomes available
- Other possible locations
- Branch-practice
- Neighbouring practices/catchment areas
- The Neaman Practice's current plans to improve access/new ways of consulting/practice skill mix
- Cost/affordability - premises costs are currently £471k pa which equates to £51 per patient against a CCG average of £18 per patient

Invitees to initial options appraisal meeting (6th March?):

1. Richard Bull, Primary Care Programme Director, C&G CCG
2. Mark Rickets, Primary Care Clinical lead, C&H CCG
3. Ellie Ward, Integration Programme Manager, City of London Corporation
4. Dr Chuan, GP Partner, The Neaman Practice
5. Sue Neville, Practice Manager, The Neaman Practice
6. The Neaman Practice's Patient Participation Group representative
7. City Healthwatch

Optional:

8. C&H GP Confederation
9. NHS England

Richard Bull

24th Jan 2018