

Report title:	Vision for the future model of Primary Care in Norfolk and Waveney
Date of meeting:	6 March 2018
Sponsor (H&WB member):	Melanie Craig, Chief Officer, NHS Great Yarmouth and Waveney Clinical Commissioning Group
<p>Reason for the Report</p> <p>The purpose of this paper is to update members of the Health and Wellbeing Board (HWB) on the Norfolk and Waveney Sustainability and Transformation Plan (STP), with a focus on the vision for the future model of primary care in Norfolk and Waveney.</p> <p>Report summary</p> <p>The STP Primary and Community Care work stream (previously known as the Prevention, Primary and Community Care work stream) has been relaunched. The intention is to deliver greater involvement and commitment to the planning, development and implementation of the sustainable transformation partnership (STP) across primary and community care from all relevant partner organisations. With such a broad remit, involving lots of partners from across the breadth of health and social care, it is imperative that a strategic view is taken to support the development of plans aligned to priorities in a rapidly changing health and social care landscape.</p> <p>This report provides an update on the development of the Primary and Community Care work stream with a particular focus on the development of the strategic plan for primary care aligned to the GP Forward View and the Five Year Forward View.</p> <p>Recommendations:</p> <ol style="list-style-type: none"> 1. The HWB notes with concern the challenges facing the sustainability of general practice, especially in recruitment of GPs 2. Given these workforce challenges, the HWB approves the strategic direction of primary care development, including proposals to: <ul style="list-style-type: none"> • promote self-care and responsible health seeking behaviours from the public • widen the range of staff working in general practice • introduce new consultation and communication methods • a focus for GPs on people with the most difficult health problems • bring GP practices to work more closely together 	

1. Background

1.1 Primary care is under increasing strain trying to adapt to a very different situation from the one it was originally set up to address. We are all too familiar with the current public health challenges, people are living longer, mainly because of better

living standards but also as a result of modern medical practice. People are smoking less, but they are less active and more overweight which causes a whole host of different health problems such as diabetes and heart disease. People are also living longer than ever before, but often with more complex, multiple long term conditions (LTCs), coupled with complex social issues. These are referred to as the 'wider determinants of health' such as social mobility and economic standing.

- 1.2 To respond effectively, we need to balance natural caution with the urgency of the situation – we can build on the best of our present system, and move towards making the system more sustainable. GPs are well placed to support patients to live well for longer and closer to home. But there are significant challenges facing general practice both nationally and locally. It is the role of the STP Primary and Community Care work stream to bring together primary and community care secondary care and local councils (social care) to address these challenges and improve the health and wellbeing of the population through joined up and closer working, as well as make progress towards financial sustainability across the system.

2. GP Forward View: What future care will look like

Addressing the challenge

- 2.1 To meet this challenge, Primary and community care services are working to organise themselves differently to be able to provide:
- A more holistic approach to health and wellbeing with a specific focus on prevention and self-care, supporting patients to live well at home for longer.
 - Workforce development and skill mix opportunities to deliver a more responsive and accessible NHS (in line with national directive on 7 day a week working).
 - Improved end of life planning for patients wishing to die at home or elsewhere.
 - Much more joined up and integrated primary and community services for sharing expertise and resource across localities to build resilience and sustainability.
 - Pro-active older peoples care by proactively identifying the most vulnerable and high risk patients requiring focused and in-depth interventions.
 - Better care co-ordination so there are fewer people involved in care and reducing the burden of appointments.
 - Released time for GPs to focus on people with the most difficult problems.
 - GPs heading a team which includes different health workers e.g. physician associates and medical assistants.
 - New specialist support services across primary and community care helping the GP team and their patients.
 - GP practices working together to share skills, expertise and resource.
- 2.2 Historically, GPs have worked within their own practices and self-managed patient demand. As pressure on the system grows, practices are increasingly combining efforts and working together at varying levels of scale. By working together GPs can strengthen in resilience and stability to lead and shape the design of care. Care interventions can be delivered at different levels, recognising the benefit of maintaining local delivery and developing relationships across Norfolk and Waveney.

STP Primary and Community Care Development

- 2.3 Following a recent review of the governance arrangements for the STP, the STP Executive agreed a re-focus was necessary for the Prevention, Primary and Community Care Work Stream specifically. As senior responsible officer (SRO) for primary care across the STP, the work stream is now being led by Melanie Craig, Chief Officer, NHS Great Yarmouth and Waveney CCG.
- 2.4 With an opportunity to relaunch the work stream under the new SRO, we have new governance arrangements for the work stream and improved stakeholder engagement, as well as refreshed work programme which is evidence based and clinically led.
- 2.5 The new STP Primary and Community Care Programme Board was successfully relaunched on the 5 December 2017. There were twenty five attendees from across health and social, primary and community care and the voluntary sector. Norfolk County Council were represented by James Bullion, Director of Adult Social Services. There were eight GPs in attendance representing the CCG patches and localities across Norfolk and Waveney.
- 2.6 The next stage in the STP Primary and Community Care work stream is to develop Local Delivery Groups, coterminous with the CCGs. The overall purpose of each Local Delivery Group will be to implement the strategic direction set by the STP Primary and Community Care Programme Board including new models of care; provider development; access and resilience; prevention and self-care. This is in line with the national NHS Five Year Forward View and the General Practice Forward View and is essential to meet patient need.

Local delivery and areas of impact

Active Sign Posting and Self Care

- 2.7 Across the STP, our aim is to have all practices with members of staff trained in sign-posting skills, with the ability to promote self-care and responsible health seeking behaviours from the public. The expected impact of this includes:
- patients being empowered to self-care where appropriate and seek alternative appropriate services
 - Improving patient satisfaction with services and ease of access.
 - Increasing capacity in general practice for health staff to see and treat most vulnerable and at need patients
- 2.8 Across Norwich, active sign-posting is operationalised by the GP Provider Group, 'One Norwich' who have held two workshops and trained 42 reception and clerical staff across 18 GP Practices. Great Yarmouth and Waveney have trained over 70 staff, including GPs, on care navigation processes. This is all about sign posting patients to the right services for them.
- 2.9 Across North and South Norfolk, all practices have undertaken sign post training with a planned rolling programme for updates and West Norfolk CCG commission care navigators to be hosted within practices to sign post patients to alternative appropriate services.

Social Prescribing

- 2.10 A shared objective across the STP is to better use referral and signposting to non-medical services in the community that increase wellbeing and independence, adopting a holistic approach to patient care. Norfolk Public Health and Adult Social Services are leading on a two year programme to establish social prescribing and community navigation at scale across the Norfolk and Waveney STP footprint for commencement January 2018.
- 2.11 At a Local Delivery Group level existing programmes currently in place include: South Norfolk where 19 practices signed up to South Norfolk District Council Social Prescribing project. In North Norfolk integrated care coordinators are based in practices supporting the patient pathway, to link to local services in the community.
- 2.12 There is a social prescribing project implemented in the Waveney area to support patients with socio-health needs delivered by Citizens Advice Bureau. The programme is evaluating the impact of this project and sharing lessons from implementation. There is also a social prescribing pilot in Great Yarmouth with a practice employed support worker linking into the borough council care connector scheme.

Improved Extended Access

- 2.13 NHS North and South Norfolk CCGs are, on behalf of the five CCGs, leading on the development of Improved Access models and plans. As such, all five CCGs have been working together to develop a consistent and robust approach across the STP footprint, which includes submitting a shared STP Improved Access project plan, and sharing learning to develop pilots that meet local population needs as evidenced by stakeholder engagement. At a local level pilots are being developed by each CCG in line with local need determined by the recent patient survey (December 2017), local knowledge and stakeholder feedback. These pilots are being developed with a focus on achieving the 7 core requirements and will inform delivery plan for submission by the end of January 2018.

New Consultation Types

- 2.14 The aim of which is to introduce new communication methods for some consultations, such as phone and email, improving continuity and convenience for the patient, and reducing clinical contact time. From an STP perspective we are developing a single coordinated approach to online consultation specifically to ensure a consistent and coordinated service offer for GP advice. Patients should be able to find out information about a health problem or request GP advice from the convenience and comfort of their own home. Implementing a technical solution to support increasing access to primary care fits with the STP's strategic aims as well as supports increasing capacity and resilience in general practice to focus on delivering face to face appointments for patients with complex health needs. The project is in early days of conception but will ensure robust stakeholder engagement as it develops.

Workforce development and Productivity

- 2.15 One of the key challenges to sustainable and resilient general practice is the recruitment and retention of GPs and the wider primary care team. As a system, we fall in line with national averages of an aging workforce, 23% of GPs are aged over 54 compared with 22% nationally. In addition to challenges recruiting, For various reasons including workload, income, pension changes and demography, we are facing loss from the primary care workforce, including both GP and nurse positions.

If we do nothing by 2020 there will be a shortfall of 85 GPs across Norfolk and Waveney.

- 2.16 In response to the workforce challenge the STP Primary Care Workforce Strategy and delivery plan sets out how Norfolk and Waveney CCGs will support and enable primary care providers to develop a multi-disciplinary workforce, in the right numbers with the appropriate knowledge, skills and values, to provide high quality primary care for the residents of Norfolk and Waveney. Some of the schemes already in place that have started to have impact includes the GP Careers Plus scheme which started off in Great Yarmouth and Waveney and for which we have now received funds to enable roll out across the STP and are aiming to secure 17 fewer retirees.
- 2.17 The team also successfully bid for wave 2 International Recruitment Funds £2.6m to support recruitment of 70 GPs over the next two years and we are waiting to hear if a further bid for wave 3 has been successful.

Officer Contact

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