

## OVERVIEW AND SCRUTINY REVIEW REPORT – GP Services in County Durham

## REVIEW OF RECOMMENDATIONS CONSIDERED BY CABINET ON: 18 November 2020

## UPDATE OF PROGRESS AGAINST RECOMMENDATIONS – 19 November 2021

Review Recommendation 1	Progress report of action taken to implement recommendation	Responsibility	Timescale
The development of Primary Care Networks and the additional workforce investment planned are supported.	<ul style="list-style-type: none"> <li>• Significant progress to enhance primary care teams with Additional Roles Reimbursement Scheme (ARRS)<sup>1</sup> roles and the CCG continues to support the developing relationship between PCNs and local providers. 110 additional WTE ARRS staff have increased the diversity and capacity of the primary care response in the County</li> <li>• The planned transfer of current CCG commissioned extended access services to PCNs will now be postponed until October 2022 to allow more time for PCNs to further explore: <ul style="list-style-type: none"> <li>• how best to unlock synergies with in-hours services at practice level</li> <li>• collaborative working at larger scale than individual PCN footprints</li> </ul> </li> </ul>	NHS County Durham CCG	Ongoing

<sup>1</sup> <https://www.england.nhs.uk/gp/expanding-our-workforce/>

<p>Revised medical indemnity arrangements to promote cross GP practice peer support should be promoted where workforce pressures are impacting upon the availability of GP appointments</p>	<p>A new Crown Indemnity Scheme allows, for the first time, practices to exchange staff to support resilience. This is now a core element of practice business continuity planning.</p>		
<p><b>Review Recommendation 2</b></p>	<p><b>Progress report of action taken to implement recommendation</b></p>	<p><b>Responsibility</b></p>	<p><b>Timescale</b></p>
<p>New practice staff roles being introduced as part of the NHS Long Term Plan are built into the local care navigation to ensure the appropriateness of future patient appointments as part of any Primary Care Strategy</p>	<ul style="list-style-type: none"> <li>• Significant progress to enhance primary care teams with Additional Roles Reimbursement Scheme (ARRS)<sup>2</sup> roles and the CCG continues to support the developing relationship between PCNs and local providers. 110 additional WTE staff has increased diversity and capacity of response</li> <li>• PCNs have completed workforce plans for 2021/22 and are currently recruiting well to a range of additional roles. If the plans are realised in full, c80% utilisation of the total Additional Roles Reimbursement Scheme (ARRS) fund allocation is anticipated, improving upon last year.</li> <li>• Medicine optimisation colleagues will continue work with practices to ensure the Community</li> </ul>	<p>NHS County Durham CCG</p>	<p>Ongoing</p>

<sup>2</sup> <https://www.england.nhs.uk/gp/expanding-our-workforce/>

	Pharmacist Consultation Service is fully optimised in Durham		
<b>Review Recommendation 3</b>	<b>Progress report of action taken to implement recommendation</b>	<b>Responsibility</b>	<b>Timescale</b>
An extensive communications programme identifying the purpose of Care Navigation and its benefits should be implemented by the CCG and promoted across all GP practices within the County	<ul style="list-style-type: none"> <li>• Care Navigation has been implemented in all practices across County Durham and engagement with the programme is linked to Local Incentive Schemes within Primary Care. A suite of Care Navigation templates has been developed and implemented to support faster access to appropriate health care professionals within primary care.</li> <li>• To aid understanding of how people in Durham are responding to the changing primary care offer, wide scale engagement activity is currently being designed.</li> <li>• The intention is to use insight gathered to deploy smarter approaches to communicating with our communities about for example, <ul style="list-style-type: none"> <li>• blended remote and face to face triage and care</li> <li>• enhanced teams inc. Care Navigation</li> <li>• support to self-care</li> </ul> </li> <li>• More generally, to enable primary care better to understand patient expectation and experience, a new real-time measure will be introduced in April 2022, where patients will automatically receive a</li> </ul>	NHS County Durham CCG	Ongoing

	message following their appointment to rate their care. It is envisaged that this will incentivise practices to improve patient experience.		
<b>Review Recommendation 4</b>	<b>Progress report of action taken to implement recommendation</b>	<b>Responsibility</b>	<b>Timescale</b>
The use of digital technology to access primary care services as an alternative to face to face consultations/appointments with GPs should be promoted as a way of facilitating more accessible and timely GP advice and support	<ul style="list-style-type: none"> <li>At the beginning of the pandemic, NHS County Durham CCG invested in technology to enable primary care video consultation with patients.</li> <li>See response to Review Recommendation 3 above which will inform the County Durham response to the Plan to Improve Access for Patients to Primary Care and Supporting General Practice</li> </ul>	NHS County Durham CCG	Ongoing
<b>Review Recommendation 5</b>	<b>Progress report of action taken to implement recommendation</b>	<b>Responsibility</b>	<b>Timescale</b>
As part of its inspection regime, the CQC should utilise information from local Healthwatch reports and reports from local authority health overview and scrutiny committees when gathering evidence to assess the effectiveness of GP services provision	The CQC works closely with NHS County Durham CCG. This includes meeting periodically to discuss information received from sources including Healthwatch. The CQC has moved to a new monitoring regime that primarily uses intelligent data from a range of sources to determine whether reinspection is required.	Care Quality Commission	Ongoing
<b>Review Recommendation 6</b>	<b>Progress report of action taken to implement recommendation</b>	<b>Responsibility</b>	<b>Timescale</b>
Use of section 106 agreements to contribute to the development of	The policy on S106 contributions is in the adopted County Durham Plan (Policy 25). More	Durham County Council	Ongoing

<p>enhanced health care services where development is taking place is supported in line with the emerging County Durham Plan</p>	<p>detail on how this policy will be applied will be included in a Developer Contributions Supplementary Planning Document which is expected to go to Cabinet in December this year with consultation to be undertaken in the new year. This includes how contributions for Health will be calculated and spent.</p>	<p>– Spatial Policy Planning Service</p>	
<p><b>Review Recommendation 7</b></p>	<p><b>Progress report of action taken to implement recommendation</b></p>	<p><b>Responsibility</b></p>	<p><b>Timescale</b></p>
<p>An integrated transport solution is developed to address the challenges faced by patients in accessing appointments to include specific and widely publicised patient information relating to the travel support available</p>	<ul style="list-style-type: none"> <li>• The CCG has re-activated a transport hub to support residents over 70 years of age to access booster vaccinations at their Local Vaccination Site (LVS) where physical or financial barriers prevent access.</li> </ul> <p>There are already a number of strands in place in terms of a transport solution for access to health services:-</p> <ul style="list-style-type: none"> <li>• The CCGs help to health service has been in place for some time, operated by Supportive with their volunteer drivers.</li> <li>• Supportive also operate social car schemes in various AAP areas that could also aid access to appointments that fall outside the eligibility of help to health.</li> <li>• In April 2020, IPT secured a further contract with Supportive to fill in the gaps i.e. those areas/journeys that weren't covered by the existing AAP social car schemes.</li> </ul>	<p>DCC – Integrated Transport Unit NHS County Durham CCG</p> <p>North East Ambulance Service</p>	<p>Ongoing</p>

	<ul style="list-style-type: none"><li>• We also continue to have our Link2 demand responsive service which transports people who don't have a bus service or are mobility-impaired. Conditions do apply to both the Link2 service and our social car scheme contract.</li><li>• In addition to the above, there is of course, the CCG's patient transport service, public transport services and a number of smaller bespoke hospital transport schemes.</li></ul> <p>Following the publication of the Government's National Bus Strategy in March, there is a requirement for Local Transport Authorities (LTA) to enter into an Enhanced Partnership (EP) with bus operators and produce a Bus Service Improvement Plan (BSIP). This plan, while a high-level document, will act as a bidding document for a share of the £3bn of transformation funding for public transport. Government are encouraging us to be ambitious in our plan.</p> <p>DCC are not the LTA, but is part of the North East Joint Transport Committee, which has the power to make an EP. To that end, we are working closely with Transport North East and JTC to ensure the requirements for Durham are delivered within the plan.</p> <p>Our 4 key asks are:-</p> <ul style="list-style-type: none"><li>• Protect the current bus service network.</li></ul>		
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	<ul style="list-style-type: none"><li>• A Young People's fares regime that allows under 19s to travel by bus at a more affordable and inclusive cost</li><li>• A transformational adult fares cap in the order of £4 per day, applicable regionwide and on all operators' services</li><li>• An enhanced public transport network including a series of measures to improve the customer experience, including reliability and punctuality, improved infrastructure, enhanced standard of vehicles and enhanced services including more Sunday and later evening services</li></ul> <p>Improved access to health could fall within the final bullet point. However, on top of these, Government have encouraged Demand Responsive Transport (DRT) solutions and we have, for some time, had the aspiration of reviewing our DRT services with a view to increasing the offer and making more use of volunteer drivers. Indeed, in 2019 we completed the first part of the review (a review of our existing offer and comparison with other authorities and schemes) but this work was interrupted by covid in continuing into actual solutions. Initial thoughts on developing a solution includes looking for a single, countywide social car scheme, rather than piecemeal schemes across the county or incorporate this offer in a revised, improved Link2 model.</p> <p>So were seeking to include an element of DRT within the BSIP so that we can explore this. In view of this,</p>		
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	<p>improved access to health could be a part of the measures within the EP. As you might imagine, all of this will be dependent upon the level of funding the JTC, and consequently Durham, get from the bid.</p> <p>The BSIP is to be submitted to DfT at the end of this month with funding likely to be announced sometime after the spending review, with the implementation of the EP in April 2022. Not all measures within the partnership will begin immediately but hopefully, ultimately, the funding will be there for us to realise our aspirations within the foreseeable future.</p> <p>With regard to publicising the solutions, we already have our website that points people to the existing solutions <a href="#">Hospital transport services - Durham County Council</a> but the BSIP will have an information strand within it and it may be that we can look for innovative solutions here.</p>		
<p><b>Review Recommendation 8</b></p>	<p><b>Progress report of action taken to implement recommendation</b></p>	<p><b>Responsibility</b></p>	<p><b>Timescale</b></p>
<p>The CCG's workforce development initiatives detailed within this report are supported and further development and use of the practice vulnerability toolkit to support vulnerable practices through peer support across and</p>	<ul style="list-style-type: none"> <li>• The Practice Vulnerability Toolkit has now been superseded by an NHSD data set as reported to this Committee entitled Improving Access for Patients to "Primary Care &amp; Supporting General Practice"</li> <li>• As reported above, a new Crown Indemnity Scheme allows, for the first time, practices to exchange staff to support resilience. This is now a</li> </ul>	<p>NHS County Durham CCG</p>	<p>Ongoing</p>



<p>within Primary Care Networks is recommended</p>	<p>core element of practice business continuity planning.</p> <ul style="list-style-type: none"> <li>• Practices are reviewing their business continuity plans in response to winter pressure.</li> <li>• A successful GP Career Start scheme has been running in County Durham since 2015 with almost 50 GPs accessing the programme to date. A proposal to increase capacity in the current GP Career Start scheme is currently in development. It is anticipated that an 'enhanced offer' will attract more GPs to work in the 'place' of Durham, contributing to general practice resilience.</li> <li>• Funding has been awarded for the CCG to engage with practices to develop further, local plans to improve GP Retention.</li> </ul>		
<p><b>Review Recommendation 9</b></p>	<p><b>Progress report of action taken to implement recommendation</b></p>	<p><b>Responsibility</b></p>	<p><b>Timescale</b></p>
<p>The CCG and North East Ambulance Service NHS Foundation Trust develop an effective communications and marketing campaign to raise awareness and promote the availability of GP appointments via the NHS 111 Service</p>	<p>National messaging positions 111 as the alternative for ED to relieve the pressures in hospitals but was never intended as an alternative to GPs. At the moment, like every other 111 provider, we are aligned with following those national guidelines. We would still therefore advise against advertising being able to book GP appointments through 111 at the moment.</p>	<p>NHS County Durham CCG  North East Ambulance Service</p>	<p>Ongoing</p>

