

REPORT TO: Health & Wellbeing Board

DATE: 17th September 2014

REPORTING OFFICER: Chief Officer, NHS Halton Clinical Commissioning Group

PORTFOLIO: Health & Wellbeing

SUBJECT: Developing a strategy for General Practice services in Halton

WARDS: Borough Wide

1.0 PURPOSE OF THE REPORT

To inform the Health & Wellbeing Board of the programme to develop a strategy for general practice services in Halton.

2.0 RECOMMENDATION: That the Health & Wellbeing Board note the report and accompanying presentation.

3.0 SUPPORTING INFORMATION

General practice is often described as the cornerstone of the NHS, with roughly one million people visiting their general practice every day. NHS England is responsible for commissioning the core primary medical services that general practice provides. Clinical Commissioning Groups (CCGs) have a duty to support NHS England in promoting quality in general practice services.

The basic delivery model of general practice has evolved over time but not radically changed. There have been seismic shifts and environmental pressures in health and social care in recent years that have challenged the sustainability of general practice. General practice faces challenges from:

- An ageing population, growing co-morbidities and increasing patient expectations.
- Increasing pressure on NHS financial resources and increased regulation.
- Persistent inequalities in access and quality of general practice.
- Growing reports of workforce pressures, including recruitment and retention problems.
- Political pressure to change.

NHS Halton CCG and NHS England are discussing the development of formalised co-commissioning arrangements for general practice services in the borough, following an expression of interest process. This means

that NHS England may, over the next few months, be delegating more responsibility for the commissioning of general practice services in the borough to NHS Halton CCG. NHS Halton CCG and NHS England agree that strong sustainable general practice is needed in Halton to support commissioning *and* service provision. This needs a co-ordinated and engaged approach to deliver this, which is why NHS Halton CCG is supporting the development of a co-commissioning strategy for general practice services in Halton.

4.0 POLICY IMPLICATIONS

NHS England has stated their ambition for general practice services to operate at greater scale and be at the heart of a wider system of integrated out-of-hospital care. This will require a shift of resources from acute to out-of-hospital care. These ambitions are congruent with NHS Halton CCG's 2 Year Operational Plan and 5 Year Strategy and also with the Better Care Fund delivery plan developed with Halton Borough Council. NHS Halton CCG, engaging with NHS England, local practices and other partners is developing a co-commissioning strategy to meet these ambitions by focusing transformational activity in six areas:

- Improved access and resilience.
- Integrated care.
- New services in the community.
- Community development.
- Quality improvement.
- Enabling work streams (i.e. governance, finance, estate, contracting, information technology and workforce).

The presentation that accompanies this paper provides more information on the approach and rationale behind the programme to develop this strategy.

5.0 OTHER IMPLICATIONS

The strategy will impact on how general practice services in the borough are commissioned and delivered.

6.0 IMPLICATIONS FOR THE COUNCIL'S PRIORITIES

6.1 Children and Young People in Halton

Children and young people will benefit from transformed general practice services.

6.2 Employment, Learning and Skills in Halton

None as a result of this report.

6.3 A Healthy Halton

A coherent strategy for general practice services in Halton, with an associated implementation and evaluation plan, will contribute to improving the health of the borough and reducing inequalities.

6.4 A Safer Halton

None as a result of this report.

6.5 Halton's Urban Renewal

None as a result of this report.

7.0 RISK ANALYSIS

The programme is collating a risk register as it progresses. A lack of engagement in the programme by practices and other partners is a potential risk, which is being mitigated by dedicated management resource.

8.0 EQUALITY AND DIVERSITY ISSUES

There are no equality and diversity issues arising as a direct result of this work.

9.0 LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE LOCAL GOVERNMENT ACT 1972

Addicott, R. and Ham, C. (2014) *Commissioning and funding general practice: Making the case for family care networks*, London: The King's Fund.

British Medical Association (BMA), (2013) *Developing General Practice today: Providing healthcare solutions for the future*, [Online], Available: <http://bma.org.uk/working-for-change/negotiating-for-the-profession/bma-general-practitioners-committee/gpc-vision>.

Department of Health (2014), *Transforming Primary Care: Safe, proactive, personalised care for those who need it most*, London: Department of Health.

Dyson, B. (2014), *Improving General Practice: A Call To Action Phase 1 Report*, London: NHS England.

Health and Social Care Information Centre (HSCIC) (2013) *NHS Staff 2002-12:General Practice*, [Online], Available: <http://www.hscic.gov.uk/article/2021/Website-Search?productid=10382&q=NHS+Staff+2002->

[12+General+Practice&sort=Relevance&size=10&page=1&area=both#top](#).

NHS England (2013), *Improving General Practice: A Call to Action*, [Online], Available: <http://www.england.nhs.uk/ourwork/qual-clin-lead/calltoaction/igp-cta/>.

NHS Improving Quality (2013), *An introduction to the NHS Change Model*, [Online], Available: <http://www.changemodel.nhs.uk/pg/dashboard> [28 May 2014].

Rosen, R. and Parker, H. (2013), *New models of primary care: practical lessons from early implementers*, London: Nuffield Trust.

Roughton, R. and Hakin, B. (2014), *Co-commissioning of primary care services: Publications Gateway ref. Number 01599*, NHS England, Leeds.