

**REPORT TO:** Health & Wellbeing Board  
**DATE:** 14<sup>th</sup> January 2015  
**REPORTING OFFICER:** Simon Banks, Chief Officer  
**PORTFOLIO:** Health and Wellbeing  
**SUBJECT:** Prime Ministers Challenge Fund  
**WARDS:** Boroughwide

## **1.0 PURPOSE OF THE REPORT**

1.1 To inform the Health & Well Being Board of Wave Two of the Prime Minister's Challenge Fund: Improving Access to General Practice and of the submission being co-ordinated by NHS Halton CCG.

## **2.0 RECOMMENDATION: That the Board**

- (1) note the contents of the report and timescales; and**
- (2) consider any risks not identified and potential mitigations**

## **3.0 SUPPORTING INFORMATION**

A successful application to the Prime Minister's Challenge Fund would enable resources to be utilised to deliver improvements in general practice services, which is congruent with our commissioning strategy and plans.

## **4.0 POLICY IMPLICATIONS**

*Five Year Forward View*, Care Quality Commission, Health Education England, Monitor, NHS England, Public Health England and Trust Development Authority, 23<sup>rd</sup> October 2014, [www.england.nhs.uk/ourwork/futurenhs/](http://www.england.nhs.uk/ourwork/futurenhs/), accessed on 17<sup>th</sup> November 2014.

NHS England, *Prime Minister's Challenge Fund: Improving Access to General Practice*, NHS England, Gateway Reference 02356, [www.england.nhs.uk/ourwork/qual-clin-lead/calltoaction/pm-ext-access/](http://www.england.nhs.uk/ourwork/qual-clin-lead/calltoaction/pm-ext-access/), accessed 17<sup>th</sup> November 2014.

## **5.0 IMPLICATIONS FOR THE COUNCIL'S PRIORITIES**

### **5.1 Children and Young People in Halton**

Children's Services will be an essential element of the future model of services. The Challenge Fund will support more rapid implementation

## **5.2 Employment, Learning and Skills in Halton**

The approach is designed to embrace and involve the broad spectrum of voluntary organisations across Halton. The Challenge Fund will support more rapid implementation

## **5.3 A Healthy Halton**

The approach is designed to improve the health and wellbeing of the population of Halton. The Challenge Fund will support more rapid implementation.

## **6.0 RISK ANALYSIS**

An unsuccessful application will not stop the implementation of the General Practice strategy, however, it has the potential to slow it down.

## **7.0 EQUALITY AND DIVERSITY ISSUES**

An equality Impact Assessment is due to be completed in January as part of the broader engagement and consultation approach.

## **8.0 LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE LOCAL GOVERNMENT ACT 1972**

There are none within the meaning of the Act.

## **PRIME MINISTER'S CHALLENGE FUND: IMPROVING ACCESS TO GENERAL PRACTICE, WAVE TWO**

### **1. Background**

- 1.1 In October 2013, the Prime Minister announced a new £50 million Challenge Fund to help improve access to general practice and stimulate innovative ways of providing primary care services. Twenty pilot schemes have been selected that will benefit over 7 million patients across more than 1,100 practices.
- 1.2 On 30 September 2014, the Prime Minister announced a new second wave of access pilots, with further funding of £100m for 2015/16. The Government has asked NHS England to lead the process of inviting practices to submit innovative bids and overseeing the new pilots.
- 1.3 The pilots will explore a number of ways to improve access including:
  - longer opening hours, such as 8am-8pm weekdays and opening on Saturdays and Sundays;
  - joining-up of urgent care and out-of-hours care;
  - greater flexibility about how people access general practice;
  - greater use of technology to provide alternatives to face-to-face consultations eg via phone, email, webcam and instant messaging;
  - greater use of patient online services; and
  - greater use of telecare and healthy living apps to help people manage their health without having to visit their GP surgery as often.
- 1.4 NHS England is inviting applications from practices or more likely, groups of practices that wish to test new models for providing general practice services, with potential benefits not only for patients accessing general practice, but also with benefits to the wider NHS. NHS Halton CCG is working on an application with the local practices, partners and CCG staff and will be liaising closely with Merseyside Area Team over the coming weeks to get their input and considerations to ensure the application is as robust as possible.

### **2. The selection criteria**

- 2.1 The following are the key requirements that will be used to review local bids. Practices should be able to:
  - demonstrate that patients will be able to access general practice services from 8am-8pm on weekdays (or equivalent) and improved access at weekends. *This will be a minimum condition of funding being provided to wave two pilots;*

- respond to local patient insight, preferences and priorities, with a clear goal of improving patient experience of access, as measured through the GP Patient Survey;
- support the local health and wellbeing strategy;
- be sustainable beyond the life of the pilot scheme;
- cover as a minimum a population of 30,000, and no bigger than a CCG population (unless exceptional circumstances apply);
- demonstrate strong leadership and commitment/buy-in from all practices involved; and
- be able to implement rapidly.

2.2 In addition, every pilot should demonstrate the potential for a wider range of benefits, to include:

- a more integrated approach to providing general practice and wider out-of-hospital services, including 'wrap-around' community services such as community nursing, community pharmacy, diagnostic services and voluntary sector provision;
- a more integrated approach to providing urgent care services across a local health economy; connect with hospital plans for delivering seven day services; and
- more innovative ways for people to access and relate to general practice, including for children and young people and from groups that find it hard to access general practice.

### **3. Funding**

3.1 The Government has provided £100 million of programme funding for 2015/16 to support this pilot programme. This will be used non-recurrently to support sustainable changes beyond the lifetime of the pilots.

3.2 A large proportion of the fund will be spent on new pilots looking at innovative ways of improving access to general practice. Funding will also build on the learning from Wave One so some of the fund will be used for evaluation, development and strategic IT support.

3.3 NHS England are inviting applications from practices that include funding proposals and will make final decisions on the number of sites based on the applications received and dialogue with applicants to help gauge the level of support they require. Possible uses of funding may include, but would not be restricted to:

- external support for change management, programme and project management (including for data management and extraction linked to the evaluation) and organisation development;
- external support, including any legal costs, for work involved in exploring new organisational models to support improved access;

- improvements to information management and technology (IM&T) systems. We may look to undertake some of these improvements at scale across several pilots, in order to secure best value for money; and
  - training and development costs.
- 3.4 Whilst it is essential that funding is used on a non-recurrent basis, applicants may put forward proposals for pump-priming funding to reflect additional service costs, where:
- there is a strong business case to show that the service changes are likely to release funding that would allow this investment to be sustained beyond the period of the Challenge Fund; and
  - where there are clear plans to monitor this financial impact.

#### **4. Application process**

- 4.1 As part of the process, NHS England area teams will review links to local strategy and local leadership capacity and capability. Prospective applicants have been encouraged to discuss their plans with area team(s) and CCGs before submission.
- 4.2 All successful pilots will be expected to participate in the national evaluation.
- 4.3 The key milestones are:
- Launch wave two bidding process w/c 27 October 2014
  - Deadline for wave two applications 5pm, 16 January 2015
  - Announce successful wave two pilots February 2015
  - Pilot mobilisation March onwards
- 4.4 Applicants should submit a completed application form (available at NHS England website) by 5pm Friday 16<sup>th</sup> January to: [england.challengefund@nhs.net](mailto:england.challengefund@nhs.net) copied to your area team.

#### **5 Approach in Halton**

- 5.1 The main emphasis of the application is the development and implementation of the emerging General Practice Strategy. However, where practices have ideas about specific projects or schemes that dovetail with this, we are actively working with them to encapsulate them within the single application.
- 5.2 A number of practice staff, partners and CCG staff have volunteered to support the development of the application form. The aim is to have a first draft of the application completed in November and this will then be amended and developed throughout December with the help of the volunteers. Sign off will then take place in January ahead of the submission on 16<sup>th</sup> January 2015.

- 5.3 As well as focussing on the development and implementation of the General Practice Strategy, we will also be concentrating on the development of IM&T solutions and engagement and insight activities that are seen as critical enablers to the success of the overall work programme.
- 5.4 We will also be setting out an innovative approach to pharmacy services and are actively discussing support with the National Pharmaceutical Association who are keen to support the ideas we have in Halton.
- 5.5 Discussions are also taking place with the North West Coast Academic Health Science Network (AHSN) about potential input and support around the telehealth and telemedicine agendas.
- 5.6 Finally, the inextricable link with the opening of the Urgent Care Centres will feature within the application. We are planning to set out a twin approach to our response to the emerging extended access agenda. At a local/community level, we will work with practices and groups of practices to consider any ideas or solutions they have and have some interesting solutions developing. Running in parallel will be the broader town-based approach where the opening of the Urgent Care Centres will offer a significant boost in community capacity to meet the primary care needs of the local population away from the hospital setting.

## **6 The application**

- 6.1 As well as the standard background information that is needed, there are some particular areas of focus that we must consider within our application. These include:
- Project outputs – describing the benefits to our patients and population
  - Sustainability – how we will sustain improvements once the non-recurrent funding is no longer available
  - Link to local strategy for the health and care system – ensuring the approach aligns within the overall context of reform for the local community.
  - Engagement – how local people and practices have been involved in designing the solutions and programmes
  - Capacity and capability for rapid implementation – demonstrating that we have the capacity and skills to implement the projects we set out within 2015/16
  - Leadership – demonstrating clear leadership and commitment from general practice
  - Improvement methodology – how we will redesign services and undertake testing and refinement of innovative ideas.

## **7 Next steps**

- 7.1 The General Practice Strategy Programme Lead will continue to coordinate the development and completion of the application form, engaging with practices, partners and colleagues throughout.
- 7.2 The aim is to ensure that before Christmas, a final draft is completed, providing sufficient time to finesse the final version before submission. Whilst there were 20 successful CCGs bids in Wave 1, it is felt that there will be increased competition with a greater number of applications in Wave 2, therefore, an application in itself does not guarantee success.
- 7.3 Whilst non recurrent money is not essential for every element of the implementation of the General Practice Strategy, it will undoubtedly help and can be used to pump prime a number of schemes and projects. To this end, conversations are on-going with other agencies and organisations to identify other pots of non-recurrent monies that could potentially be bid for if the application for the Prime Ministers Challenge Fund is unsuccessful.