

Healthier Communities Select Committee Primary Care Update Report

7 September 2022

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- **The purpose of this report is to provide the Healthier Communities Select Committee with an update on Primary Care developments in Lewisham.**
- **Members of the Healthier Communities Select Committee are recommended to note the report.**

There are currently 27 GP practices in Lewisham which provide primary care services from 36 different sites.

Lewisham has two 'super practices' with merged contracts that are also PCNs.

Care Quality Commission Ratings:

- 26 GP practices have a CQC rating of Good overall.
- 1 GP practice has a CQC rating of Requires Improvement overall.
- In 2021/22 two GP practices had a rating of Requires Improvement and one was rated inadequate.

Over the last three years there have been several practice mergers which were all formally considered and approved by the then SEL CCG Primary Care Commissioning Committee (PCCC).

General Practice Workforce summary

Current GP and Nurse headcount

- Total number of GPs – 248 (153 female and 95 male).
- GP Full Time Equivalent – 178.98
- In 2021/22 there were 245 GPs

- Total Nurse headcount – 77
- In 2021/22 there were 82 Nurses.

Patient Experience – GP Patient Survey

- The GP Patient Survey is an England-wide survey, providing practice-level data about patients' experiences of their GP practices.
- *The limitations of the survey should be noted (sample sizes at practice level are relatively small and no qualitative data is included). The survey data is usually triangulated with other sources of feedback, such as Patient Participation Groups (PPG), CQC information and the Friends and Family Test to develop a fuller picture of patients' experience enabling the identification of best practice and areas for potential improvement.*
- Overall, there was a reduction in satisfaction rates across most questions for 2022 results compared to 2021.

Key Headlines from the 2022 GPPS

GP Patient Survey Areas	Lewisham Av 2022	Lewisham Av 2021	ICS Av
Find it easy to get through to someone on the phone	47.9%	61.5%	51%
Find the receptionists at this GP practice helpful	80.3%	87%	80%
Are satisfied with the general practice appointment times available	53.5%	64.3%	53%
Describe their experience of making an appointment as good	49.9%	66.8%	53%
Felt the healthcare professional recognised or understood any mental health needs during their last general practice appointment	79.2%	82.4%	78%
Were involved as much as they wanted to be in decisions about their care and treatment during their last general practice appointment	89.2%	91.2%	89%
Had confidence and trust in the healthcare professional they saw or spoke to during their last general practice appointment	92.1%	95.3%	92%
Describe their overall experience of this GP practice as good	68.9%	80.4%	69%

- 1. Lee Road Surgery**
- 2. Oakview Family Practice**
- 3. Nightingale Surgery**
- 4. Woolstone Medical Centre**
- 5. Groove Medical Centre**
- 6. The Vale Medical Centre**
- 7. ICO Health**
- 8. Modality Lewisham**
- 9. Deptford Medical Centre**
- 10. Clifton Rise Family Practice**

Officers will contact these practices to understand what systems and processes they have in place and how best practice can be shared.

- The NHS Long Term Plan and GP Contract reform published in January 2019 set the direction of travel for primary care over the next five years.
- A key element of this was the establishment of Primary Care Networks (PCNs) which have general practice at their core.
- PCNs have to be small enough to maintain the traditional strength of general practice, but large enough to provide resilience and support the development of integrated teams.
- Each PCN typically serves communities of between 30,000 and 50,000 and needs to be geographically coherent.
- PCNs consists of groups of GP practices working together with a range of local providers, including across primary care, social care and the voluntary sector, to offer more personalised, coordinated health and social care to a local population.
- There is also an expectation that they PCNs will work with their member practices to reduce variation in quality and outcomes.

Primary Care Networks (2)

- To support the establishment of PCNs, a national PCN contract was introduced as a Directed Enhanced Service (DES). It ensures general practice plays a leading role in every PCN and means closer working between networks and their Integrated Care System.
- Lewisham has 6 PCNs across the borough.
- All Lewisham practices belong to a PCN which covers 100% of the registered population.
- Each PCN has a named accountable Clinical Director and a Network Agreement setting out the collaboration arrangement between its members.
- PCNs were key to the successful delivery of the Covid-19 vaccination programme during the pandemic.

- The Additional Roles Reimbursement Scheme (ARRS) is a key part of the government's commitment to improve access to general practice.
- The aim of the scheme is to support the recruitment of 26,000 additional staff into general practice to help alleviate current the workforce issues.
- As part of the PCN additional roles scheme Lewisham has plans to have about 90 additional roles by the end of 2021/22 to provide support within primary care.

PCN Additional Roles

As part of the ARRS PCNs are entitled to funding to support the recruitment of new additional staff to deliver health services. The current funding supports recruitment across 15 roles as below:

Clinical Pharmacists	Pharmacy Technicians	Social Prescribing Link Workers	Health and Wellbeing Coaches	Care Coordinators
Physician Associates	First Contact Physiotherapists	Dietitians	Podiatrists	Occupational Therapists
Nursing Associates	Trainee Nursing Associates	Paramedics	Mental Health Practitioners	Advanced Practitioner

Primary Care Networks in Lewisham September 2021

NHS
Lewisham
Clinical Commissioning Group

● GP Practices

North Lewisham PCN (80k)

Clinical Director: Dr Forgan

- 1 Mornington Surgery (closed) - Merged with Kingfisher MC
- 2 Queens Road Partnership
- 3 Kingfisher Medical Centre
- 4 Clifton Rise Family Practice
- 5 New Cross Health Centre
- 6 Grove Medical Centre
- 7 Vesta Road Surgery
- 8 Amersham Vale Training Practice
- 9 Deptford Surgery
- 11 Deptford Medical Centre

Lewisham Alliance PCN (53k)

Clinical Director: Dr Adams/Raheem

- 14 Lewisham Medical Centre
- 15 Burnt Ash Surgery
- 18 Lee Road Surgery
- 22 Triangle Group Practice
- 24 Woodlands Health Centre
- 25 Nightingale Surgery

Lewisham Care Partnership (58k)

Super-partnership

Clinical Director: Dr Ferdinand

- 13 Belmont Hill Surgery
- 16 Morden Hill Surgery
- 17 St Johns Medical Centre
- 20 Hilly Fields Medical Centre
- 21 Honor Oak Group Practice

Sevenfields PCN (62k)

Clinical Director: Dr Tattersfield

- 27 Torriron Road Medical Practice
- 29 ICO Health Group - Moorside Clinic
- 30 Downham Family Medical Practice
- 31 ICO Health Group - Chinbrook Road Surgery
- 32 Park View Surgery
- 33 ICO Health Group - Marvels Lane Surgery
- 34 ICO Health Group - Boundfield Medical Centre
- 35 Oakview Family Practice
- Novum Health Partnership
- 23 Rushey Green Group Practice
- 28 Baring Road Medical Centre

Aplos Health PCN (50k)

Clinical Director: Dr Senbanjo

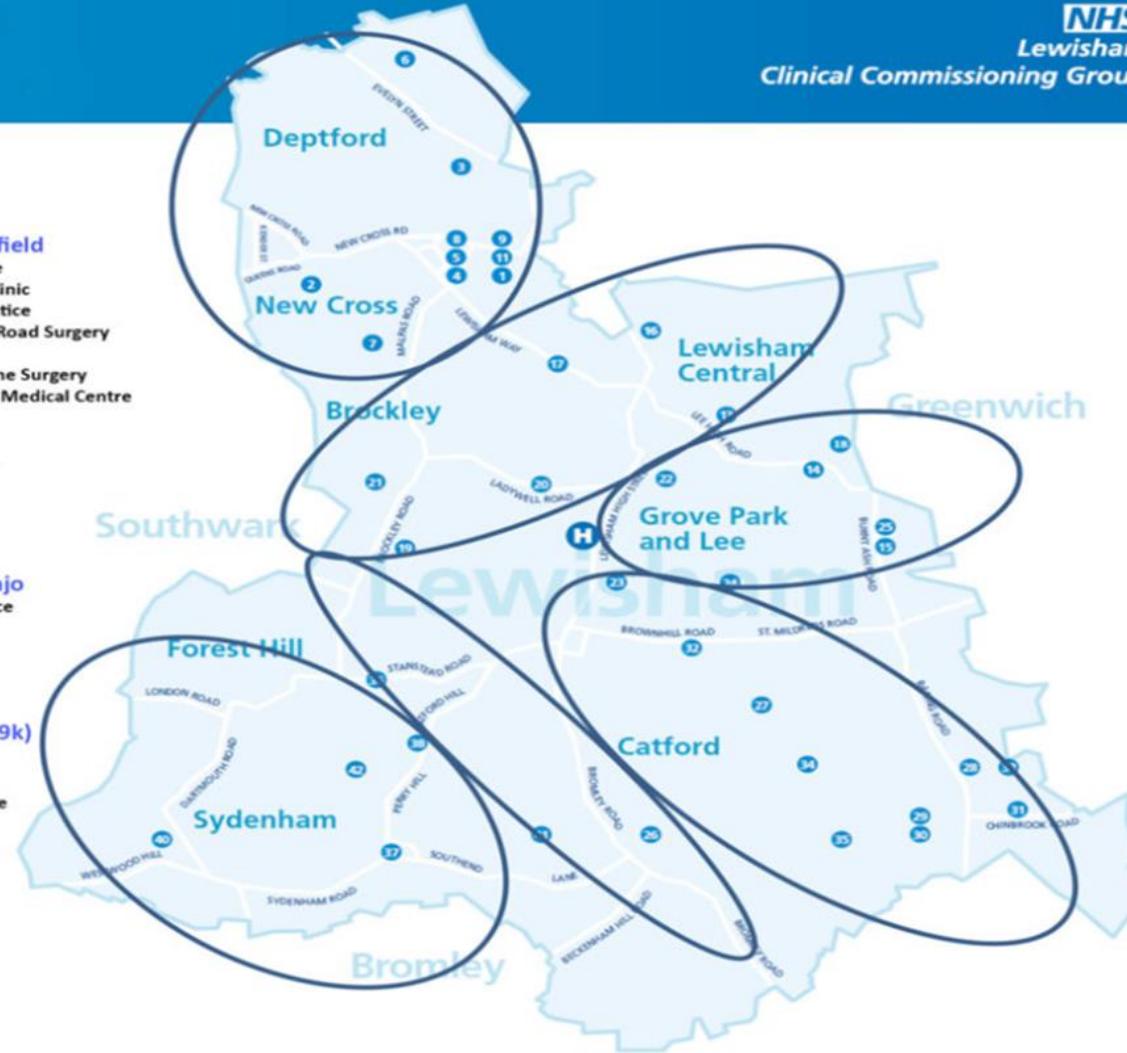
- 37 Sydenham Green Group Practice
- 38 Woolstone Medical Centre
- 40 Wells Park Practice
- 42 The Vale Medical Centre

Modality Lewisham PCN (39k)

Super-partnership

Clinical Director: Dr Knight

- 26 South Lewisham Group Practice
- 36 The Jenner Practice
- 41 Bellingham Green Surgery



GP Federation

- A GP Federation is a collective group of practices that come together with a common desire to work together at scale to deliver services.
- They share responsibility for delivering high quality, patient-focussed services for the local community.
- Federations work collaboratively with GP practices and PCNs

Lewisham GP Federation

- One Health Lewisham (OHL) is the borough wide GP Federation.
- It is member led with all Lewisham GP practices being members.
- OHL works to develop pan Lewisham ways of working.
- The ICB commissions OHL to deliver a variety of services. It also delivers a range of its own specifically developed services which shows its level of maturity.
- It provides a range of primary care and community services to local residents, ‘at scale services’ for practices as well as professional staff training with an aim to reduce variation, improve quality, share good practice and support GP practices.
- OHL uses its local knowledge and expertise, to tailor services to reflect the needs of the communities.
- Services provided include, but are not limited to
 - Home Visiting service
 - Respiratory
 - Care Homes

- From 1 October 2022, PCNs will be required to offer patients a new 'enhanced access' model of care, which will see GP practices providing additional services to their population.
- PCNs need to ensure their Enhanced Access is provided between 6:30 pm and 8:00 pm Mondays to Fridays and between 9:00 am and 5:00 pm on Saturdays. This is referred to in the DES as the Network Standard Hours.
- As part of the Enhanced Access service, PCNs must provide bookable clinical appointments during the Network Standard Hours that satisfy all of the requirements set out in the DES.
- In preparation for the implementation of Enhanced Access PCNs have worked collaboratively with the Local Care Partnership (LCP) primary care team and developed Enhanced Access Plans.

PCN Enhanced Access (2)

- The plans must set out how PCNs plan to deliver the Enhanced Access DES.
- All 6 PCNs have submitted their first draft plans for review and comment.
- Responsibility for considering, reviewing and approving plans sits with the Local Care Partnership.
- A final iteration of the plans will be agreed on or before 31 August 2022 in preparation for the go-live date, 1 October 2022.
- All PCNs carried out patient surveys as part of preparing the EA DES plans to inform how the service will be delivered – time of day etc.
- The new PCN EA DES provides pre-bookable appointments for services that can include for example, long term condition care and screening.
- The new PCN EA DES does not provide the same level of coverage as the existing GP Federation service. This affects Saturday evenings, Sundays and Bank Holidays capacity.
- The LCP is actively exploring approaches to mitigate any potential negative impacts from this change. This will be linked to work on the Fuller Review requirement for an integrated, same day care offer. (see following slide).

Summary of the Fuller report - how the model of primary care needs to change to improve our population's health and wellbeing

The publication of '**next steps for integrating primary care: Fuller Stocktake report**' creates a new vision and case for change for integrating primary care. The report recommends Integrated Care System (ICS) leadership at every level to support and enable local care partnerships (LCPs) to deliver three key changes to the way in which primary and community care services are delivered at neighbourhood / Primary Care Network (PCN) levels of the system.

At the heart of the report is a new vision for integrating primary care and improving access, experience and outcomes for our communities, which centres around three essential offers:

- 1. streamlining access to care and advice** for people who get ill but only use health services infrequently: providing them with much more choice about how they access care and ensuring care is always available in their community when they need it;
- 2. providing more proactive, personalised care with support from a multidisciplinary team of professionals** to people with more complex needs, including, but not limited to, those with multiple long-term conditions;
- 3. helping people to stay well for longer** as part of a more ambitious and joined-up approach to prevention.

To further support the implementation of these ambitions, the report **makes recommendations on the tasks and activities that are best delivered at different levels of scale** across each ICS.

There are **eight themes for ICS/local action** within the Framework, many of which the Lewisham system are already progressing across the primary care portfolio and wider work programme.

Eight actions for the ICS

- 1. Develop a single system-wide approach to managing integrated urgent care to guarantee same-day care for patients and a more sustainable model for practices
- 3. Enable all PCNs to evolve into integrated neighbourhood teams
- 4. Co-design and put in place the appropriate infrastructure and support for all neighbourhood teams
- 5. Develop a primary care forum or network at system level
- 6. Embed primary care workforce as an integral part of system thinking, planning and delivery
- 10. Develop a system-wide estates plan to support fit-for-purpose buildings for neighbourhood and place teams delivering integrated primary care
- 12. Create a clear development plan to support the sustainability of primary care and translate the framework provided by Next steps for integrated primary care into reality, across all neighbourhoods
- 13. Work alongside local people and communities

* Numbering of the actions reflect the recommendation numbering in the Fuller Review

Implementation of the Fuller Review

- Many of the recommendations reflect work already underway.
- Whilst the bulk of this work will be focused in Place, some elements will require support from SEL ICS functions i.e. Digital.
- Where appropriate, LCPs may choose to work together on certain areas.
- A local co-ordination group, that reports into the Place Executive Group will be established during September to ensure timely implementation of the recommendations.