

Developing Barking and Dagenham's Primary Care Transformation Strategy

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What are the key policy drivers for Primary Care?

Policy at a national and regional level is focusing on ensuring a sustainable high quality primary care landscape.

NHSE Five Year Forward View

- Stabilise core funding for general practice and review how resources are fairly made available.
- Give CCGs more influence over NHS budget – investment: acute to primary and community.
- Expand as fast as possible the number of GPs, community nurses and other staff.
- Design new incentives to tackle health inequalities.
- Help public deal with minor ailments without GP/A&E.
- Potential new care models such as Multispecialty Community Providers and Primary & Acute Care Systems.

London Health Commission

- Calls for an increase in spending in primary care, including the investment of £1bn in GP premises.
- Set ambitious services and quality standards for general practice.
- Promote and support general practices to work in networks.
- Allow existing or new providers to set up services in areas of persistent poor provision.

Strategic Framework for Primary Care in London

- Sets out an ambitious framework for the future of primary care in London focused around pro-active, accessible and coordinated care.
- Focuses on meeting the needs of the unregistered population.
- Requires a baseline position to be established against these standards.

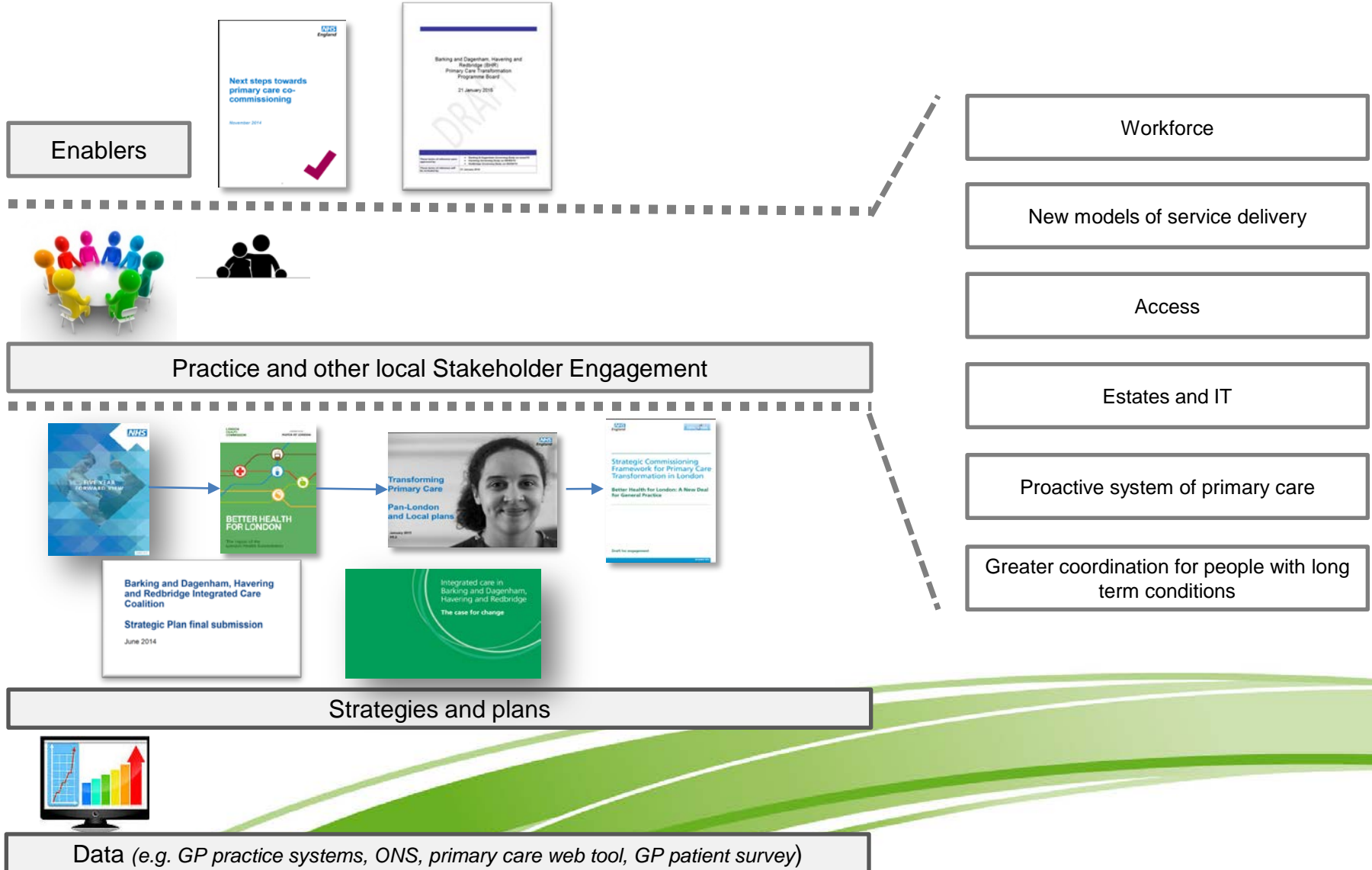
Think tanks (Kings Fund, Nuffield Trust)

Key think tanks are focusing on the role of General Practice in delivering integrated care through extended Networks of General Practice. They are proposing more innovative contracting and funding models to support extended service delivery.

Care Quality Commission

The CQC is undertaking inspection of all GP Practices to assess: Are they safe? Are they effective?, Are they caring?, Are they responsive to people's needs?, Are they well-led? The CQC are currently publishing the results of their inspections.

Areas being explored to develop the strategy



Local Context

In hour primary care services across B&D

Barking and Dagenham

- 40 GP practices
- Average list size of 5180
- 38 Pharmacies
- 19 Mandatory and 29 Additional Optometrists
- 27 Dentists

Access through hubs

Funding through the PM Challenge Fund has led to the creation of 5 primary care extended access hubs across BHR, open 6.30pm – 10pm weekdays..

BHR urgent care facilities are managed by Federations at Queens Hospital.

**Barking and
Dagenham**

- 7am-10pm Weekdays
- 9am-10pm Weekends
- X-ray facility

Barking
Community
Hospital Walk-in
Centre



PELC OOH Service

- Provided between 6:30pm and 8am on weekdays and throughout weekends.
- OOH Service provides telephone triaging, telephone advice, face-to-face consultations at an OOH base, or at patient's place of residence.
- Base for services include Kings George Hospital, Whipps Cross Hospital and Grays Court.
- The SLA is reviewed every six months and there is a formal detailed annual review annually.

What opportunities does this suggest locally for how we deliver primary care in Barking and Dagenham?

The **FORM** of General Practice

The **FUNCTION** of General Practice

Develop a more **integrated healthcare** system.

Improve consistency between outcome measures and incentives used in primary care and work in a more collaborative way to design local solutions for workforce, premises and IM&T challenges.

To use the delegated commissioning functions to **redefine services** around coordinated, accessible and proactive care and align incentives within the system to support this focus.

Opportunities to **improve provision** of routine and unplanned services.

BHR already have **developing federations**, and these opportunities can support their development and growth for the future, as well as bring the wider primary care community into the developing care models.

To focus on specific **disease indicators** so that Primary Care can maximise its role in improving population health and wellbeing.

There are opportunities to more closely work with other local partners and stakeholders to **deliver services** for patients across B&D, particularly the aspects of General Practice services focused on pro-active care.

Comments captured at a visioning workshop for consideration when developing the strategy

On 20 May 2015 a workshop was held with members of the BHR Primary Care Transformation Board to develop a vision for Primary Care services. The following comments were captured as needing to be considered when developing the strategy:

Workforce

- ✓ We must consider how we address workforce development in the strategy. GPs do not have the capacity to lead on everything and will need to be supported by a broader network of primary care teams and specialists.
- ✓ The strategy will need to outline the ways in which other primary care teams (i.e. community pharmacists, optometrists and dentists) will support general practice to deliver high quality care.
- ✓ Consideration will also need to be given to succession planning and how we tackle these issues over the next five years.

Engagement

- ✓ Engagement on the strategy must also include third sector organisations, wider primary care networks and teams as well as carers and their representative groups.



The common themes of an emerging vision for primary care in Barking and Dagenham

A service that is shaped and influenced by patients

Uses technology and communication to create virtual teams

A coherent and coordinated approach together with other local partners

A wide network of clinicians and non-clinicians with patients being seen by the most appropriate professional

A system that is strategically aligned

Empowers patients to take an active role in their own health and wellbeing

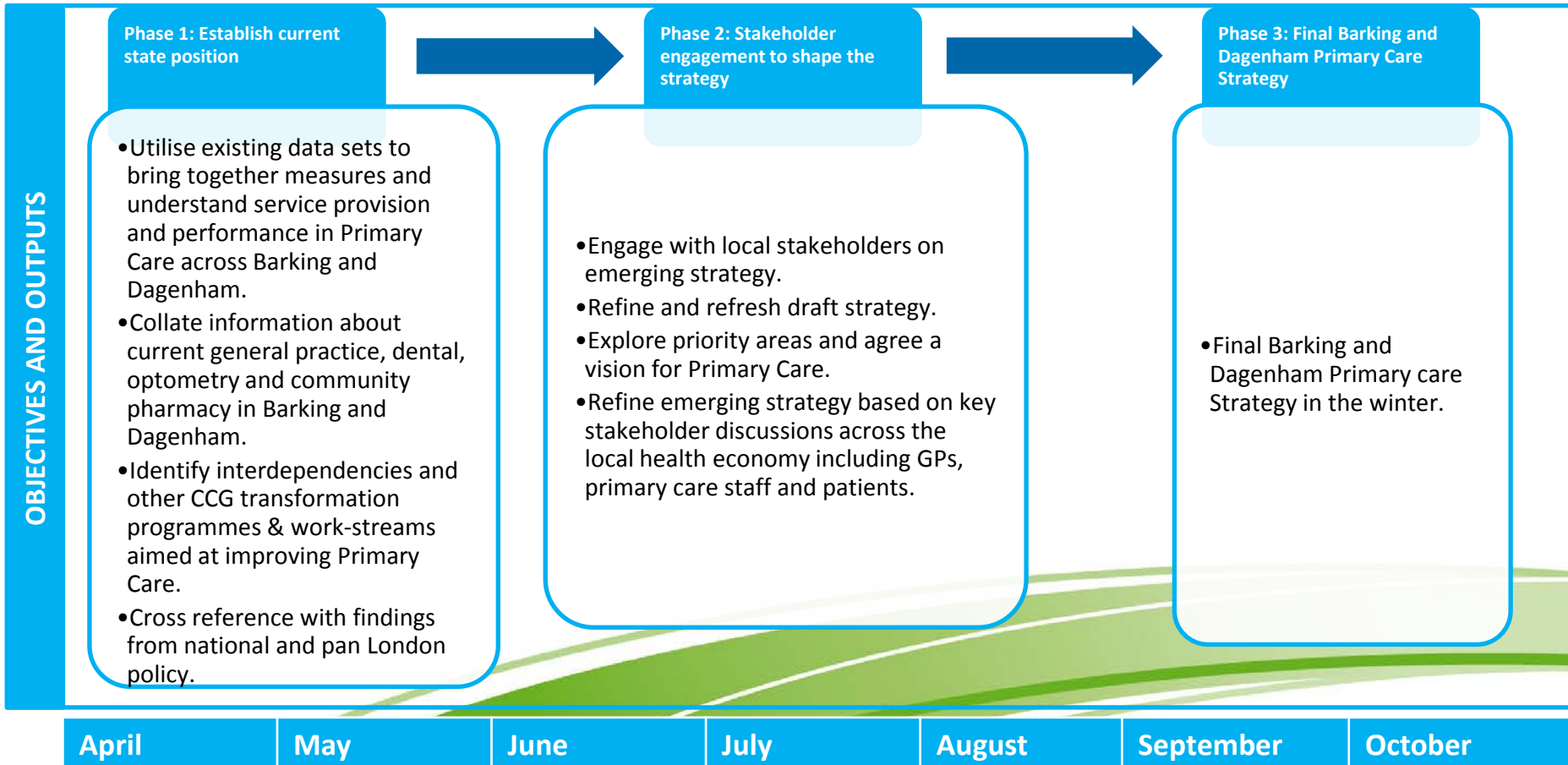
A holistic, accessible and proactive model of care

A single unified consistent model of primary care

A hub of professionals that navigate each patient through their own care pathway

Developing the strategy

- The project commenced in April and the final **Barking and Dagenham Primary Care Strategy** will be published in the winter.
- The development of the strategy will have **three ‘phases’**
- The strategy will be shaped by **members, primary care teams and key stakeholders incl. patients / carers.**
- We are developing an engagement strategy to ensure that all relevant partners have the opportunity to shape and influence the final strategy.



How can you get involved?

- The project team will be attending key meetings, forums and events so that **you can shape** the strategy.
- Additional **workshops and events** will be scheduled over the spring / summer.
- The following practice, stakeholder groups and forums have been identified:

