

APPENDIX 3

WIRRAL PLACE PRIMARY CARE GROUP, 24th JANUARY 2023, HIGHLIGHT REPORT

1. Preliminary Business

The Wirral Place Primary Care Group (PPCG) reviewed the notes and action log from the meeting held on 22nd November 2023.

2. Standard Business

2.1 Risk Register

The PPCG reviewed the Risk Register at the start and the end of the meeting.

2.2 Wirral Place Primary Care Group Work Plan 2022-2023

The PPCG reviewed the work plan for 2022/23. It was agreed that a work plan for 2023-24 will be produced that would reflect that the PPCG will move to ten meetings a year.

2.3 Neighbourhood/Communities Work

A verbal update was provided on this workstream from the Wirral Health and Care Delivery Plan 2022/23. Neighbourhoods Care Communities will form the foundation for how we on Wirral and our health and care system will tackle health inequalities. This work will continue through 2023/24. Updates will be provided to future meetings.

3. Current Business

3.1 Primary Care Update

The PPCG received an update on key areas of work with Wirral Place primary care. Most updates were for information but some required the PPCG to consider a decision and/or recommendation to the Cheshire and Merseyside Primary Care Committee. The following areas were considered:

3.1.1 Additional Roles Reimbursement Scheme (ARRS) for Primary Care Networks

A key feature of the current GP contract framework, *Investment and Evolution 2019-24* is the establishment of Primary Care Networks (PCNs) and associated support through ARRS to increase the workforce size within primary care. There are a defined number of additional roles that PCNs can recruit to. All posts are 100% financially reimbursed. From the total allocation of £6,148,000 for Wirral Place ARRS, as December 2022, five out of the seven PCNs/SDUs are currently forecasting an overall underspend of £682,276 at year end. PCNs are aware of their position and are progressing to ensure Wirral primary care maximises the use of this funding this year, bringing forward any planned ARRS recruitment from 2023-24 workforce plans.

The Place Primary Care team has a high degree of confidence that the ARRS allocation for 2022/23 will be fully utilised by end March 2023 by the PCNs.

3.1.2 Change of PCN Service Delivery Unit core practice membership

St George's Medical Centre, currently a practice member of Wallasey PCN (Wallasey Wellbeing Service Delivery Unit) has formally confirmed with Place commissioners that they will be switching their membership to North Coast Alliance Service Delivery Unit with effect from 1st April 2023. As the practice remains within the Wallasey PCN, there is no requirement for formal changes to the PCN national details.

The change in practice membership means that North Coast Alliance SDU will increase its registered population to approximately 29,900 and conversely, Wallasey Wellbeing SDU will reduce its population size to approximately 36,000 – these revised populations are within the recommended range for network populations. The provision of the Network Enhanced Care in Care Homes scheme is subject to review to minimise disruption to patients residing in the affected Care Homes. The PPCG will be updated at the March meeting.

3.1.3 System Development Fund

The aim of the System Development Fund (SDF) is to continue to deliver critical primary care transformation and workforce projects that will strengthen services and deliver improvements. Part of the framework focuses on improving patient access and staff experience over the longer term, with the aim of building an ongoing quality improvement support process within primary care, supported by ongoing SDF or other transformation funding. A breakdown of the SDF funding elements for 2022-23 for Wirral Place was shared with the PPCG. All monies are to be spent by 31st March 2023. Total allocation available at Place level is £491,145.

3.1.4 Marine Lake Medical Centre Care Quality Commission (CQC) rating

The practice had a scheduled CQC inspection completed on 22nd November 2022. The report was published on 28th December 2022. The overall rating was “Requires Improvement”. Two areas which mainly contributed to the rating were safe services and effective services. Summary assessment concluded:

- The provider did not have effective systems in place for the monitoring of high-risk medicines or for documenting and acting on safety alerts.
- Patients with long term conditions did not always receive effective management of their care and treatment.

The Provider is required to:

- Implement a system whereby non-medical prescribers prescribing is monitored, reviewed and assessed.
- Improve the uptake of eligible people for cervical cancer screening. Take steps to train all non-clinical staff to a minimum competency level 2 in safeguarding.
- Implement a system whereby patient test results for those receiving dual care and carried out by secondary care, were obtained and documented on the practice's record.

The Place Primary Care team and Contracting team are following up with the practice on Action Plan(s) and will offer support where appropriate.

3.1.5 Locally commissioned Incentive Schemes - relaxing/reducing burden to end March 2023

On 23rd December 2022, NHS Cheshire Merseyside Integrated Care Board published a letter to all general practices acknowledging the increasing system pressures; mitigations and support available. One aspect referenced was:

Place can also provide flexibility on any local enhanced service schemes, relax all non-urgent reporting, and repurpose any funding not used from local schemes, where able within their local arrangements /funding envelope.

In response, representatives of Wirral PCNs asked if the Place could consider relaxing requirements on locally commissioned services/repurposing any unused funding from these services. The Place Primary Care team has advised a steady state for the provision of clinical services to patients but has promised to minimise the reporting requirements on primary care up to the end of March 2023. The continuing provision of services means that no funding is deemed unused. Similar requests have been made in relation to the Quality Outcome Framework (QOF), however, the QOF is a national scheme and can only be amended by NHS England and to-date no change is proposed.

The PPCG supported the recommendation that clinical service provision to patients is maintained and administrative/reporting burden is reduced on primary care up to the end of March 2023.

3.1.6 St Catherine's Surgery – request for financial assistance

The practice submitted a request for financial assistance under Premises Costs Directions 2013 Section 46 in relation to charges levied upon them by their landlord, Wirral Community Health and Care NHS Foundation Trust. Matters relating to premises involving practices as tenants with their respective landlords, routinely exclude the commissioner other than ensuring lease documentation is legally compliant for rent reimbursement to be paid.

The Place Primary Care team sought advice from NHS England upon receipt of the request for financial assistance as per section 46 of the Premises Costs Direction 2013 and were told it is for local Place discretion as to whether any reimbursement is made. The PPCG considered 4 options and agreed that no reimbursement should be made to the practice.

3.2 Lloyd George Medical Records Destruction

The PPCG received an update on the Lloyd George (LG) digitisation programme. This aims to digitise the historic paper patient records held by practices. The digitisation of LG paper records is a requirement of the GP Contract Reform which was to be completed by 2022/23. This initiative also supports patients having access to their full digital record.

The project also reduces the burden associated with the movement of paper records therefore has environmental benefits too, in addition to freeing up valuable practice space which can be used as administration or clinical room capacity which is limited as the primary care workforce continues to expand. This in turn supports improved patient experience. Further benefits include:

- access to the full patient record at the point of care.
- safer care for patients/stores patient information safely.
- reduces the administrative/financial burden of maintenance of paper records.
- adheres to GP contract commitment.

The contents of the LG record can be destroyed once scanned; the update paper suggested that the same approach should be adopted for the LG envelope. This would not only streamline the process, but also maximise the freed-up space that practices desperately need. Furthermore, having to retain the empty paper envelope would result in additional storage fees. The potential risks associated with this decision are deemed low level and all documents will be destroyed in line with regulatory requirements.

The PPCG noted the update and supported the proposal to destroy the LG envelope in conjunction with the LG record contents. The PPCG concluded that this should be a NHS Cheshire and Merseyside decision not a Place decision.

3.3 Lithium Shared Care Monitoring

The PPCG received a business case for Lithium Shared Care Monitoring. Lithium is a well-established treatment for mood disorders. It can also be prescribed by consultant neurologists for prophylaxis of cluster headache (unlicensed indication). Effective prophylaxis enables people to live a full life in the community; it is therefore more appropriate to have follow-up reviews and monitoring to support lithium treatment, in the community.

The business case highlighted that lithium monitoring in the community is inconsistent across Wirral, with monitoring being undertaken either by the Community Mental Health Teams or within some practices. The proposal set out the intention to vary the existing Shared Care Monitoring Local Incentive Scheme (commissioned from general practice) to incorporate lithium monitoring from 1st April 2023, with the aim of reducing the existing variation in the lithium monitoring approach across Wirral and maximising effective clinical care.

The PPCG approved the recommendation for the Shared Care Monitoring Local Incentive Scheme to be varied to include Lithium monitoring. The PPCG requested an update on the impact of this change to be brought to a future meeting.

3.4 Local Incentive Scheme Review

Local Incentive Schemes (LIS) are used to commission services from primary care providers over and above their core general medical services contract. This business case provided a desktop review of the current Local Incentive Schemes in place with Wirral GP Practices in 2022/23, with a view to extending the provision of these services for a further 12 months. This would allow sufficient time to understand the future contracting approach being taken by Places in NHS Cheshire and Merseyside and explore Primary Care Network contracting, as appropriate.

The following schemes were included within this review:

- Anticoagulation Management.

- Dementia.
- Attention Deficit Hyperactivity Disorder (ADHD) Leading Excellence in Primary Care (LEAP).
- Shared Care Monitoring.
- Minor Surgery/Joint Injections.
- Intrauterine Device (IUD)/ Pessary Service (heavy menstrual bleeding only).
- Homeless.
- Think Pharmacy (Minor Ailments Scheme)
- Cataract Pre-Assessment
- Glaucoma Referral Refinement Scheme
- Low Visual Aids assessment

The PPCG reviewed the schemes set out in the paper. The PPCG agreed to approve the recommendations of extending all schemes for twelve months and that a PCN centred contracting approach should be explored.

4. Updates by Exception

4.1 Finance & Performance

The PPCG received a report on the Delegated Primary Care Commissioning budget and performance at Month 9, 2022/23. This a defined notified allocation that forms part of the overall NHS Cheshire and Merseyside planned budget. For Wirral place this is £44.970m. Within this planned budget Wirral place is reporting a forecast adverse variance of £0.263m to 31st March 2023.

There were three financial risks to note:

- The inherent deficit of £0.310m built into the annual budget to bring the total budget in line with the notified allocation. This is currently being mitigated by operational benefits in year.
- Premises rent reviews outstanding between now and the end of the financial year. Further work is being undertaken to understand the impact on this year's forecast and recurrently.
- Quality and Outcomes Framework (QOF) forecast underspend £0.436m, although standard practice is for the forecast to be based on the previous years' achievement. This will be monitored closely towards to yearend

4.2 Quality and Safety

The PPCG received an update on three issues pertaining to quality and safety in primary care:

- There is a new Patient Safety Incident Response framework that has been implemented to support the reporting of serious incidents. Every organistaion that deliver NHS commissioned services needs to follow this new way of working. This includes general practice and other primary care services. General practices in Wirral were offered funding to identify and support patient safety champions to help implement this new approach. No practice came forward to avail themselves of this funding, so it has been withdrawn.

- Care Quality Commission (CQC) Inspections – The Quality Team offered support to Marine Lake to help them develop an action plan to respond to their CQC inspection. This offer has not been taken up, so the Quality Team will now scrutinise the action plan that the practice produces. A similar offer has been made to Leasowe Medical Centre, who have moved from “good” to “requires improvement” following their recent inspection. All CQC visits are suspended, unless there are serious quality concerns, until April 2023.
- Protected Learning Time has been re-established for practice nurses and other health professionals working in general practice.

5. Next Meetings

28th March 2023

Meetings for 2023/24 are being arranged.

Simon Banks, Place Director (Wirral)
Chair, Wirral Place Primary Care Group
25th January 2023