

HEALTH AND ADULT SOCIAL CARE OVERVIEW AND SCRUTINY COMMITTEE

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PRIMARY CARE UPDATE - MEDWAY

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Summary

Strengthening and transforming general practice and local care plays a crucial role in the delivery of future healthcare. Kent and Medway Clinical Commissioning Group (CCG) continues to work with Primary Care, Medway Council, Medway Foundation Trust, other local providers and wider Stakeholders to co-design our local health and care system.

The NHS 10 year plan describes these organisations becoming an Integrated Care System (ICS). At a local level Integrated Care Partnerships (ICPs) will develop that will include all local providers working in partnership including Primary Care Networks to take collective responsibility for managing resources, delivering NHS standards, and improving the health of the population they serve.

This report provides an update to the Committee on Primary Care provision across Medway. It provides an update on the Kent and Medway Primary care Strategy and describes the local primary care response to COVID.

1. Budget and policy framework

- 1.1 Under the Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013 the Council may review and scrutinise any matter relating to the planning, provision and operation of the health service in Medway. In carrying out health scrutiny a local authority must invite interested parties to comment and take account of any relevant information available to it, and in particular, relevant information provided to it by a local Healthwatch. The Council has delegated responsibility for discharging this function to this Committee and to the Children and Young People's Overview and Scrutiny Committee as set out in the Council's Constitution.

2. Background

2.1 Kent and Medway CCG Primary Care Strategy

Primary care is the cornerstone of Kent and Medway's vision to deliver better integrated care closer to people's homes, and is central to improving people's health and wellbeing as well as coordinating the care they need. The health and care organisations in Kent and Medway are all committed to sustaining and transforming primary care so that it continues to provide exemplary services to patients and communities long into the future.

2.2 The Kent and Medway CCG Primary Care Strategy is currently being refreshed by the ICS Kent and Medway Primary Care Board. Updates will be shared with this group. In 2019/20 this Board delivered:

- Additional STP funding to Primary Care Networks (PCNs) to accelerate PCN mobilisation, and to make service improvements for local population health priorities
- Increased sustainability and resilience of primary and community care through meeting the new funding guarantees
- More time for care through continued GPFV (General Practice Forward View) delivery and prioritisation of this funding
- Phase 1 of Kent and Medway quality standard for local enhanced services to be delivered by local GP services (e.g. ECGs, Phlebotomy, Wound Care)
- Improved recruitment, retention and experience through delivery of primary care workforce plan
- Local estates reviews were conducted
- Started work to develop an MDT (Multidisciplinary team) approach for those with learning disabilities and autism
- Started work to develop an MDT approach for Adults with co-occurring conditions (MH/Drug and alcohol/physical health)
- Online booking to at least 25% of practice-based appointments, and increased access through rollout of the NHS App
- Significantly improved internet connectivity following HSCN (Health and Social Care Network) rollout
- Development of single social prescribing platform, reducing duplication and cost
- PCNs have data analytics for population segmentation and risk stratification
- NHS 111 will start direct booking into GP practices across the country, as well as refer on to community pharmacies who support urgent care and promote patient self-care and self-management
- Care homes have access to NHS mail, and every clinical director has a basic minimum IT standard e.g. laptop, Skype for Business
- PCN Clinical Directors, Social Prescribers and Clinical Pharmacists have bespoke support offers
- Provision of training to support Quality Improvement
- All teams working to MDT standards
- PCNs provided with admin / project support

3. Medway Primary Care Overview

3.1 Practices in Medway

Medway currently has 44 practices.

Pratice Name	Total Registered Patients(31/03/2020)
Woodlands Family Practice	19,810
City Way Surgery	11,862
The Elms Medical Centre	10,163
The Thorndike Centre	13,119
Highparks Medical Practice	15,640
Riverside Medical Practice	6,392
King George Road	5,669
Railside Surgery	2,900
Stonecross And West Drive Surgery	8,483
Balmoral Gardens	4,714
The Glebe Family Practice	4,981
St Marys Medical Centre	7,237
Maidstone Road	3,453
Thames Avenue	5,517
Reach Healthcare	23,116
Orchard Family Practice	4,820
Maidstone Road Surgery	4,669
Waltham Road	1,605
Gun Lane	5,435
Court View Surgery	10,373
Wigmore Medical Centre	4,441
St Werburgh Practice	11,125
Eastcourt Lane Surgery	2,136
Railway Street	2,202
Bryant Street	7,702
Pump Lane	2,114
Castle Medical Practice	4,044
Apex Medical Practice	7,072
The Churchill Clinic	5,872
Church View Practice	5,781
Brompton Medical Centre	2,505
Marlowe Park Medical Centre	3,786
Borstal Village	4,375
Matrix Medical Practice	2,553
Parkwood Family Practice	3,634
Long Catlis Road Surgery	11,943
Princes Park Medical Centre	3,300
The Halfway Surgery	4,408

The Kings Family Practice	5,715
Upper Canterbury Street	2,083
Napier Road Surgery	2,475
Malvern Road Surgery	2,993
Wayfield Road	5,400
DMC St Marys Island Surgery	27,477
Total Medway CCG	305,094

Although the number of practices is falling this is due to practice mergers that are intended to make practices larger and more resilient.

3.2 Primary Care Networks

3.2.1 The PCNs continue to develop across Medway. These Networks:

- Build on the core values and strengths of general practice.
- Support groups of practices to come together locally, in partnership with the emerging Integrated Care Partnership (ICP) and Integrated Care System (ICS)
- Develop systems that provide clear benefits for patients and staff and that continue to improve primary care services and agreed local enhanced services
- Enable greater provision of proactive, personalised, coordinated and more integrated health and social care
- Continue to meet patients' and the wider public's changing needs, with the support of the rest of the health and care system
- Ensure that GPs and other professionals have a manageable and appropriate workload and greater job satisfaction; and care can attract and retain the staff it needs.
- Most care will continue to be based around the general practice unit holding primary responsibility for a registered practice
- Networks of practices can also have a greater voice in service redesign that reaches beyond traditional general practice, and ability to share a larger pool of resources
- Greater focus on prevention, patient choice, and self care,
- Greater use of data and technology to assess population health needs and health inequalities
- To monitor performance and variation to inform continuous service improvement
- To allow greater resilience, more sustainable workload and access to a larger range of professionals

3.2.2 There are seven PCNs in the Medway locality

Medway and Swale Integrated Care Partnership



Medway and Swale ICP

<p>Gillingham South</p> <ul style="list-style-type: none"> • Glebe Family Practice • Malvern Road • Napier Road • Pump Lane • Railside Surgery • Railway Street • Upper Canterbury Street <p>Medway Central</p> <ul style="list-style-type: none"> • Balmoral Mallings (Red) • Brompton Medical Practice • Bryant Street • Kings Family Practice • St Mary's Island • The Halfway Surgery • Coverage for patients registered at Hoo Branch DMC <p>Medway Peninsula</p> <ul style="list-style-type: none"> • High Parks Medical Practice • Hoo St Werburgh • The Elms <p>Medway Rainham</p> <ul style="list-style-type: none"> • Church View Practice • Eastcourt Lane • Long Catlis Road Surgery • Maidstone Road • Matrix Medical Practice 	<ul style="list-style-type: none"> • Malling Health, Parkwood Health Centre • Orchard Family Practice • Parkwood Family Practice • Thames Avenue Surgery • Waltham Road • Wigmore Medical Practice <p>Medway South</p> <ul style="list-style-type: none"> • Churchill Clinic • King George Road • Maidstone Road • Princes Park Medical Centre • Reach • Stonecross and West Drive Surgeries • Wayfield Road Surgery <p>Rochester</p> <ul style="list-style-type: none"> • Borstal Village Surgery • Castle Medical Practice • City Way • Thorndike Health Care Centre <p>Sheppey</p> <ul style="list-style-type: none"> • St George's Medical Centre • Minster Medical Centre • Sheerness Health Centre (Dr Chandran) • Sheerness Health Centre (Dr Patel) 	<ul style="list-style-type: none"> • Sheerness Health Centre (Dr Witts) • Sheppey Healthy Living Centre • Sheppey NHS Healthcare Centre (DMC) • The OM Medical Centre <p>Sittingbourne</p> <ul style="list-style-type: none"> • Grovehurst Surgery • Iwade Health Centre • Lakeside Medical Centre • London Road Medical Centre • Meads Medical Practice • Memorial Medical Centre • Milton Regis Surgery • The Chestnuts Surgery • The Surgery, Teynham <p>Strood</p> <ul style="list-style-type: none"> • Apex Medical Centre • Court View Surgery • Gun Lane • Riverside Medical Practice • Interim coverage of registered list for St Mary's Medical Centre • Coverage for patients registered at Marlowe Park Medical Centre
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3.2.3 The Clinical Directors and the PCNs are aware of the Medway Local Plan implications in relation to increased population and demand Each PCN is reviewing its capacity and working with the CCG will begin to design care that meet the health and care needs of their local population in a resource-efficient way, ensuring timely and accessible care supported by improved IT and Estates infrastructure.

3.2.4 Our Key Priorities in supporting the emerging PCNs are:

- To support and develop the Clinical Directors for each Primary Care Network. Together, the Clinical Directors will play a critical role in shaping and supporting our Integrated Care Partnership and System.
- Developing Healthy Living Centres to support the expanding workforce and service reconfiguration required to ensure premises are fit to successfully deliver the new model
- To ensure recruitment of the new workforce, in particular, the social prescribers and clinical pharmacists
- To ensure that that local services develop and secure local investment through Supplementary Network Services. These services will be driven by local population health demand. They will be funded through the network contract, the Direct Enhances Service (DES) contract.

- From 2020 there will be the potential for additional funding for new services in line with the aims set out in the NHS Long Term Plan. These will be phased in gradually over the next 5 years and will cover:

1. Medications Review and Optimisation
2. An Enhanced Health in Care Homes Service
3. Anticipatory Care
4. Personalised Care
5. Supporting Early Cancer Diagnosis
6. Cardiovascular Disease Prevention and Diagnosis
7. Inequalities

3.3 Improved Access

3.3.1 The new integrated urgent care model (NHS 111 and in and out-of-hours face-to-face urgent care services) will establish better working relationships and processes to ensure timely access to the relevant community services. 111 will be able to book directly into our Improved Access Hubs and to all GP surgeries.

3.3.2 We have commissioned Improved Access Primary Care Services based on 45 minutes per 1000 population. This service is available until 8pm week days and weekends and bank holidays. This is available in three localities. For 2019/20 we are expanding to seven localities (aligning to the Primary Care Networks). An additional 47,000 appointments are available through this service currently provided by Medway Practice Alliance.

3.3.3 All Medway Care and Residential Home will have a named GP. Local practices through a Local Enhanced Service (LES) provide proactive and consistent support to their patients within their care homes. This includes proactive rounds, medication and post hospital reviews.

3.4 Workforce information

3.4.1 Primary Care workforce data for 2020 is incomplete at the moment and will be presented as part of the next Primary Care Update.

3.5 COVID Response

3.5.1 COVID has clearly changed the way that Primary Care is delivered. An accelerated IT programme across Kent and Medway provided the ability for:

- GPs to work remotely from home. Through new laptop provision and software to access general practice system
- Deployment of video and online consultation to all GP practices
- Safe development of face to face treatment centres for patients with potential COVID systems in a safe environment for GPs and patients
- Direct booking into these treatment centres from 111
- Increased home visiting capacity through Improved Access
- Oversight and support to all care homes

3.5.2 It is hoped that as Primary Care returns to business as usual, alongside COVID that we continue to embed this technology and ways of working to maintain the increased capacity and provide speedier access.

4. CQC registration at St. Mary's Island and St Werburgh practices

4.1 **St Mary's Island**

4.1.1 Care Quality Commission (CQC) inspectors visited St Mary's Island Surgery in Chatham on Friday 10 July 2020. As a result of this inspection, the CQC took immediate enforcement action at 5pm on Wednesday 15 July to remove the CQC registration at this practice after finding significant and ongoing issues of patients being exposed to the risk of harm. This meant that DMC Healthcare were no longer able to provide healthcare to patients registered with the ST Mary's Island practice.

4.1.2 The action affects St Mary's Island Surgery, and also the branch surgeries of Green Suite at Balmoral Healthy Living Centre, Twydall Branch Surgery, the Pentagon Centre and the Sunlight Centre Surgery. DMC Healthcare has been providing services at the five GP sites since 1 April 2019, providing care to some 27,500 patients. The CQC's action means they can no longer see patients at these sites.

4.2 **St Werburgh**

4.2.1 Care Quality Commission (CQC) inspectors visited St Werburgh Medical Practice on Friday 19 June. As a result of this inspection, the CQC took urgent enforcement action on Wednesday 24 June to suspend the CQC registration at this practice, which provides care to 11,943 patients.

4.3 **Kings Family Practice**

4.3.1 Following the CQC action against DMC, they declared to the CCG their interest in surrendering the Kings Family Practice contract as well, which provides care to 5,715 patients.

4.4 **CCG actions**

4.4.1 The CCG has agreed a mutual termination of these contracts, including Kings Family Practice. The termination was agreed on the 5th August 2020 with 28 days' notice, meaning that the contracts will cease on 2nd September 2020. In both St. Werburgh and St. Mary's Island practices, the CCG has ensured access to services for patients continues. The Medway Practices Alliance (MPA) are currently providing services at the St Mary's Island Surgery and St. Werburgh Bells Lane sites, as well as telephone consultations. The CCG is putting similar arrangements in place for Kings Family Practice.

4.4.2 In addition to providing services, MPA are working with the CCG to complete key actions arising from the CQC inspections, and other issues identified since the CQC action.

4.4.3 The CCG is also working with the local Primary Care Networks to identify long term solutions for delivery of services to the patients registered at St. Werburgh and St. Mary's Island practices. An engagement process with all practices commenced on the 7th August 2020. A plan for public engagement is currently in development.

5. Risk management

5.1 The sustainability of GP practices is a matter of concern nationally and locally. The need to address health inequalities in Medway and challenges in recruiting and retaining Primary Care workforce are particular risks. These matters remain areas of focus for the Health and Wellbeing Board and the CCG.

6. Financial implications

6.1 There are no financial or legal implications to Medway Council arising directly from the recommendation contained in this report.

7. Recommendation

7.1 It is recommended that the Committee notes and comments on the report provided.

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Appendices

None

Background Papers

None