

Do the planned Primary Care trajectories for 17/18 and 18/19 clearly articulate CCG's aspirations to meet the requirements against the four key areas set out in General Practice Forward View?

Do the planned Primary Care trajectories for 17/18 and 18/19 provide a clear articulation of the CCG's perform

24 November submission

Comments shared directly with Primary Care leads

- It is encouraging to see that the priorities articulated in the General Practice Forward View have been threaded through the Ops Plan. The four key areas of workforce, workload, practice infrastructure and care redesign are addressed and there seems to be broad timescales attached to delivering different strands of work.

- It would be helpful to gain more detail on a few areas, in particular:

o how the CCG plans to deliver and roll out extended access and how this provision will interface with the integrated urgent care hubs (111/999), the out-of-hours and acute urgent care provision,

o how the CCG proposes to organise the estate in order to support care redesign and the delivery of primary care at scale. The document states that consultation for site-specific options for community hubs is only planned for the last part of 2016/17. It would provide helpful background to the ETTF bids to see a draft proposal of how these community hubs will interface with primary care provision and how the primary care estate may be rationalised to support these hubs better.

o The financial projections relating specifically to the GPFV investments are missing (I expect that these will be part of the GPFV plan, which will provide more granularity).

23 December Submission

The GPFV plan addresses all the aspects of GPFV and more, however, in some sections it lacks tangible details in some sections (e.g. How? When? Where?). Ambitions are generally the right ones, but require firmer delivery and implementation plan underpinning them. This is particularly valid for the 2017/18 deliverables: roll-out of online consultation, training of care navigators and medical assistants. The trajectory for the roll-out of online consultation needs to be more ambitious or the ambition needs to be clarified (i.e. is it 60% of practices using the online consultation option by the end of the period or all practices using on line consultation with some of them delivering 60% of the activity that way?). Clarity over the sources of funding for the transformation money (£3/head) is also needed. Firmer trajectory and integrated plans

	Dorset	Assurance rating and reasons	Brief explanation to cover why and what actions are being taken to resolve	Date CCG plan will be fully assured.
Improving access	GP extended access to 100% of the CCG population	Commitment has been made to deliver 100% improved access by Q4 2018/19. However firmer trajectory and integrated plans supported by clear costs and implementation timeline need to be worked up to deliver the extended access service in order to meet all the core requirements.	April 2017 Board approval made to align commissioning between Primary care extended access and urgent care to ensure 100% access. There is now an Extended Integrated Urgent and Primary Care Board, Procurement working group, Service Specification group and Activity, Finance and Contracting working group. Meetings and TOR have been drawn up with Procurement timelines clearly identified and being work toward. Planning trajectories are currently under development to reflect population need, activity and costing. It is anticipated that coverage will reach 100% of the population with extended access during the last quarter of 2018-19, before maintaining 100% of the population with extended access from March 2019. Oct 17 Tender documents finalised / Nov 17 Governing Body approval / Jan 18 Advert out / May 18 Provider interviews / July 18 Recommendation and Governing Body approval / Mid Sept 18 Mobilisation start/ Jan 19 over 50% achievement / end of March 2019 100% achieved.	April 2017 (subject to NHSE approval)
Care redesign & development	a. Support to Practice receptionists and clerical staff	Commitment has been made as part of the general practice development programme. However added detail is need in terms of when and what and how the funding is going to be used e.g. for the cost of purchasing training, backfill costs for practices to cover staff time spent undertaking training, support in kind for practices for planning this change or undertaking training. Confirmation is needed that funding is in a separate CCG budget and is being tracked by the CCG. (£138k per year).	Funding is identified at CCG level in a separate budget and is being tracked. An initial task and finish group has been helping with representatives from all 95 practices to confirm training priorities, needs and requirements. Dorset wide procurement of Training for Managing Clinical Correspondence to commence May 2017. Plan is to have training delivered and implemented in 70% of practices during 2017/18, 30% during 2018/19. Training in Active Signposting will commence during 2018/19. This aligns with when practices expect to have implemented the alternative clinical roles on a sufficient scale to deliver benefits, in addition this will align with the expected rollout of online consultations.	April 2017 (subject to NHSE approval)
	b. Roll-out of online consultation systems across general practice (between 17/18 – 19/20)	Commitment in the plan to roll out online consultation systems, but further detail will be required. National guidance has not yet been published and therefore CCGs will not yet be able to demonstrate full assurance.	Await national guidance and amend plan as required. Dorset CCG has formed an Online Consultation task & finish group with practices. An initial meeting has identified population size groups of practices interested in proceeding 'at pace' with adopting online consultations. Supplier showcase will be considered when National guidance is issued. Current plan is that 25% of practices will have implemented an Online Consultation system each year for the next 4 years.	CCG will be fully assured when National Guidance has been published.
Investment in Primary Care	a. Overall commitment to increase investment	Increases to CCG funding to general practice must be at least equal to and ideally more than the increases in CCG core allocations which are 2.14% in 17/18 and 2.15% in 18/19. Page 13 of the plan refers to 2%. Please confirm that funding will increase by at least the minimum stated.	Our General Practice funding has been set inline with the increased CCG core allocation. We have checked back on the planning assumptions we were given and our allocation is 2% on all of them, including our final planning submission (11J 1718 Financial Plan_(30Mar17 0939)_Macrofix.xlsm). If our core allocation has now been increased to 2.14% can you please provide the source for this.	April 2017 (subject to NHSE approval)
	b. Practice Transformation Fund - Planned commitment to invest non-recurrently £3 per head of CCG population	Identified in the plan in terms of investment, but the plan is not specific in terms of how this will be used over the next 2 years. Please provide further detail.	The Primary Care Strategy Implementation Group will oversee investment and development plans on behalf of the Dorset Primary Care Commissioning Committee. At the Primary Care Strategy Implementation Group meeting on 15 February 2017 agreement was reached with all Dorset Chairs on the framework to invest in sustainability and transformation support. The key features of this support includes transformation Protected Learning Time, investment in clinical and business leadership, project management and a range of expert resources including estates, workforce planning, training, and community engagement.	April 2017 (subject to NHSE approval)
Workforce	Workforce strategy & expanded primary care workforce	Commitment to increasing workforce and strategy largely identified, in accordance with planning guidance, but no specific staff numbers identified or source identified.	In January 2016, a Dorset Workforce Plan was produced to set out the workforce challenges in Dorset; this included a Primary Care section setting out broadly the numbers, skill mix and age profile of the workforce. The workforce planning for Dorset STP reflects and anticipated shift in workforce from acute sector into primary and community care. This will lead to a net increase in staff outside of hospital, as part of forming skill mixed integrated care teams to support new models of care. This will be built on in 17/18 through dedicated workforce planning resource and support to practices. In April 2016, a Primary Care Workforce Centre was launched to start to address these workforce challenges; from education and training, through to recruitment and retention. An implementation plan is in place to meet a number of aims;	April 2017 (subject to NHSE approval)
Practice infrastructure	Estates and Digital road maps	CCG has a local estates strategy and digital roadmap which lay out the plans to create infrastructure to support new models of care. Further detail regarding the digital roadmap will be needed in order to fully assure this aspect. Please submit a local universal capabilities template to provide assurance in the digital elements by 20 May 2017.	ESTATES Dorset CCG's revised Local Estates Strategy published in June 2016 set the direction of travel for primary care estate. 5 ETTF scheme business cases supports the integrated community services and primary care developments. A newly formed Integrated Community Services and Primary Care Steering Group will oversee the development of a network of primary care facilities and community hubs. ETTF proposals all represent the primary care at scale & new models of care which will support the development of primary care hubs. Full site specific details will be available after the announcement of the outcomes of the Clinical Services Review which is anticipated in early 2018. DIGITAL ROAD MAPS The universal capability template for Dorset is included as Appendix E (attached) of the Local Digital Roadmap. The document and supporting information are being refreshed via the Dorset Informatics Group: IT leads throughout Dorset's Health and Social Care partners.	April 2017 (subject to NHSE approval)
Overall Assurance	DCO assessment			

*For further detail please contact Ann Bond ann.bond@dorsetccg.nhs.uk